

Practices and Policies Guide

*to promote inclusive
and tolerant
long-term care
environments for
persons aging
with HIV*



Information made available by Legal Aid Service of Broward County, Inc.'s HIV Age Positively Legal Advocacy Program, 2021

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REVISED November 2021

Introduction/Letter from Program Staff



Greetings!

Legal Aid’s development of this suggested “Practices and Policies Guide” (Guide) was an activity of our HIV Age Positively Legal Advocacy Program, funded through Phase 1 of Gilead Sciences HIV Age Positively initiative in 2019 through 2021.

The purpose of this Guide is to encourage inclusive and tolerant long-term care environments for persons who are aging with HIV. Program staff received initial input from community partners (see page 30) and worked with identified stakeholders to develop the Guide. It is our intent that this Guide be distributed widely to all long-term care communities, shelters, and other community organizations, as well as HIV, senior and legal service providers, throughout Florida.

This Guide is a living document that we hope will expand and evolve over time, and includes suggested practices and policies with real-life examples about how a long-term care community can be welcoming of, and reduce stigma for, residents who are aging with HIV.

While the focus and scope of the Guide is “Aging with HIV,” because of the significant impact of HIV on the LGBTQ+ community, also included within is a compilation of resources created and made available by other organizations, such as guides focusing on policies and procedures for LGBTQ-friendly communities and national resources that extend beyond Florida.

We appreciate your interest and applaud your efforts to create a safe and welcoming long-term care environment or community agency for persons aging with HIV.



By the Numbers

AGING AND HIV

Thanks to effective **HIV treatment**, the number of **older adults** living with HIV is **increasing**.



www.hiv.gov/hiv-basics/living-well-with-hiv/taking-care-of-yourself/aging-with-hiv

According to the [Centers for Disease Control and Prevention](#) (CDC), in 2018, over half (51%) of people in the United States and dependent areas with diagnosed HIV were aged 50 and older.

In addition, people aged 50 and older accounted for [17% of the 37,968 new HIV diagnoses in 2018](#) in the United States and dependent areas. Though new HIV diagnoses are declining among people aged 50 and older, around 1 in 6 HIV diagnoses in 2018 were in this group.



Of the **37,968 NEW HIV DIAGNOSES** in the US and dependent areas in 2018, 17% were among people aged 50 and older.

People Aged 55 and Older with HIV in the 50 States and the District of Columbia



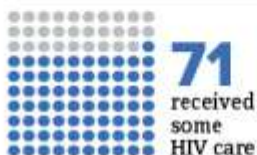
At the end of 2018, an estimated **1.2 MILLION AMERICANS** had HIV. Of those, 379,000 were aged 55 and older.

9 in 10
people aged 55 and older knew they had the virus.



It is important for people aged 50 and older to know their HIV status so they can take medicine to treat HIV if they have the virus. Taking HIV medicine every day can make the viral load undetectable. People who get and keep an undetectable viral load (or stay virally suppressed) can live a long and healthy life. They also have effectively no risk of transmitting HIV to HIV-negative sex partners.

Compared to all people with HIV, people aged 55 and older have higher viral suppression rates. In 2018, for every **100 people aged 55 and older with HIV**:



For comparison, for every **100 people overall with HIV**,
65 received some HIV care, **50 were retained in care**, and **56 were virally suppressed**.

* Had 2 viral load or CD4 tests at least 3 months apart in a year.

† Based on most recent viral load test.

Source: CDC. Estimated HIV incidence and prevalence in the United States 2014–2018. *HIV Surveillance Supplemental Report*. 2018;25(1).
Source: CDC. Selected national HIV prevention and care outcomes (slides).



More Resources/Statistics for HIV and Older Adults

All underlined text are active links; click each to open a new web-page.

- [HIV Among Older Americans \(CDC\)](#)
- [HIV-Age.org](#)
- [National Resource Center on LGBT Aging, HIV and Aging Resources](#)
- [Growing Older with the Epidemic: HIV and Aging, GMHC, 2010 \(PDF\)](#)
- The [AIDS Community Research Initiative of America \(ACRIA\)](#) has a number of resources related to older adults, including curriculum, technical assistance resources, and capacity building materials. Access [educational booklets](#) or [Research on Older Adults and HIV](#).
- [October 2010 White House summit on HIV and Aging \(YouTube video\)](#)
- [HIV, Aids, and Older Adults, Spanish version](#)
- [HIV.Gov](#)
- [Aging with HIV](#)
- [NCOA: The Long Report - HIV](#)
- 2019 Webinar [Ending the HIV Epidemic: A Plan for America New PrEP Donation Program](#)
- [The Well Project](#)
- [Department of Veterans Affairs Information on Diet and Nutrition for People with HIV](#)
- [CDC Information on How to Understand a New Diagnosis of HIV](#)
- [HIV.gov US Statistics on HIV](#)

AGING WITH HIV

FACT SHEET

❖ In the United States (per CDC)

- **By the end of 2018, approximately 1.2 million people had HIV, and an estimated 14% (1 in 7) did not know they had HIV.**
- **More than half of people with diagnosed HIV in 2018 were aged 50 and over.**
- **People aged 50 and over comprised 17% (1 in 6) of new HIV diagnoses in 2018.**
- **Compared to younger people, older adults are more likely to have “late-stage HIV infection” when diagnosed.**
- **Older adults with HIV often experience stigma that may prevent them from accessing care.**

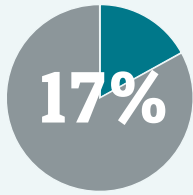
❖ In the State of Florida (per Florida Department of Health)

- **In 2018, there were 119,661 people living with diagnosed HIV.**
- **63,916 older adults were living with diagnosed HIV in 2018; this amounted to 53% of people living with diagnosed HIV in Florida.**
- **Older adults accounted for 21% of people who received an HIV diagnosis, and for 34% of people who received an AIDS diagnosis, in 2018.**

Sources

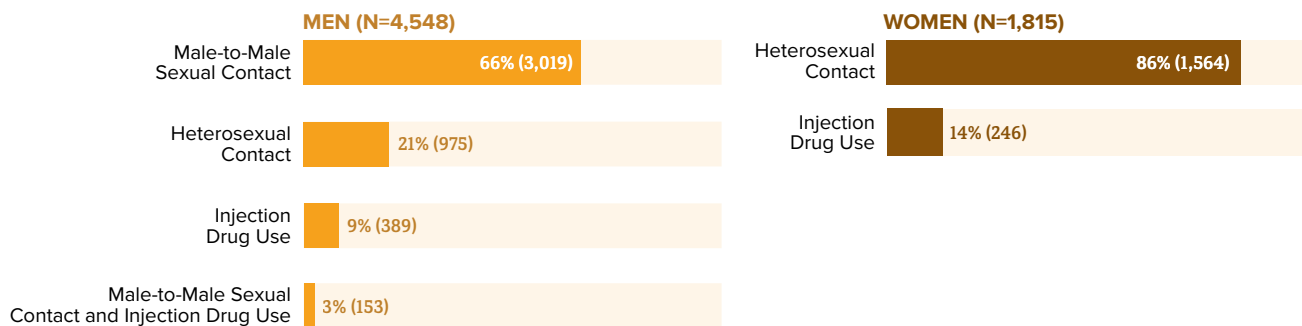
- ❖ “Basic Statistics.” *Centers for Disease Control and Prevention*. (<https://www.cdc.gov/hiv/basics/statistics.html>). Accessed January 27, 2021.
- ❖ “HIV Among People Aged 50 and Over.” *Centers for Disease Control and Prevention*. (<https://www.cdc.gov/hiv/group/age/olderamericans/index.html>). Accessed January 27, 2021.
- ❖ “Older Adults (Aged 50+) Living with an HIV Diagnosis in Florida, 2018.” *Florida Department of Health, Bureau of Communicable Diseases, HIV/AIDS Section*. (http://www.floridahealth.gov/diseases-and-conditions/aids/surveillance/_documents/fact-sheet/OlderAdultsFactSheet.pdf). Accessed January 27, 2021.

HIV and Older Americans



Of the **37,968 NEW HIV DIAGNOSES** in the US and dependent areas* in 2018, 17% were among people aged 50 and older.

Among people aged 50 and older, most new HIV diagnoses were among men.[†]

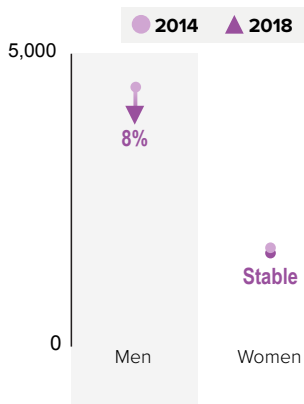


Totals may not equal 100% due to rounding.

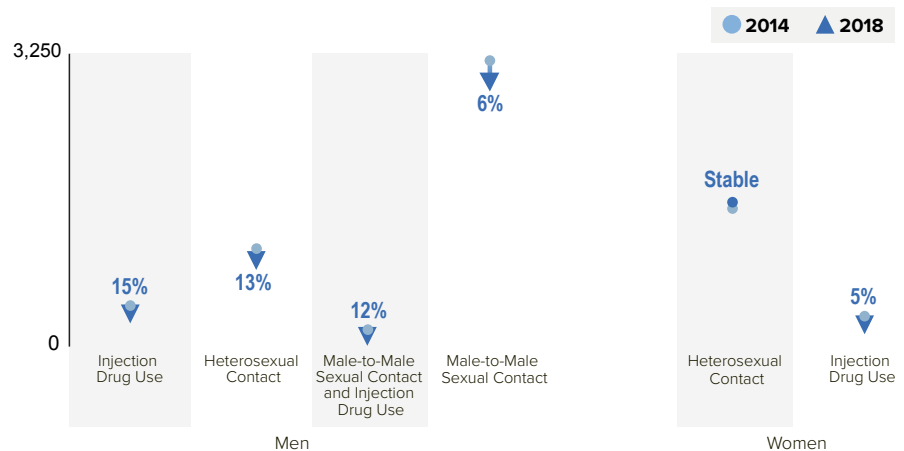
HIV diagnoses decreased 6% overall among people aged 50 and older from 2014 to 2018.



Trends by Sex[†]



Trends by Transmission Category[†]



* American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, the Republic of Palau, and the US Virgin Islands.

[†] Based on sex at birth and includes transgender people.

[‡] In 50 states and the District of Columbia.



People aged 50 and older who don't know they have HIV can't get the care and treatment they need to stay healthy.



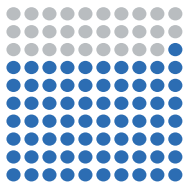
At the end of 2018, an estimated **1.2 MILLION AMERICANS** had HIV.† Of those, 379,000 were aged 55 and older.

9 in 10 people aged 55 and older knew they had the virus.

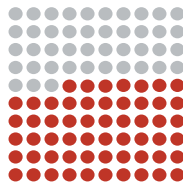


It is important for people aged 50 and older to know their HIV status so they can take medicine to treat HIV if they have the virus. Taking HIV medicine every day can make the viral load undetectable. People who get and keep an undetectable viral load (or stay virally suppressed) can live a long and healthy life. They also have effectively no risk of transmitting HIV to HIV-negative sex partners.

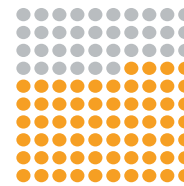
Compared to all people with HIV, people aged 55 and older have higher viral suppression rates. In 2018, for every **100 people aged 55 and older with HIV**: ‡



71 received some HIV care



57 were retained in care



64 were virally suppressed

For comparison, for every **100 people overall** with HIV, **65 received some HIV care**, **50 were retained in care**, and **56 were virally suppressed**.

There are several challenges that place some people aged 50 and older at higher risk for HIV.

Fewer Discussions with Doctors



Although they visit their doctors more frequently, older people and their health care providers are less likely to discuss HIV testing and sexual or drug use behaviors.

Knowledge of HIV Prevention



Older people may not be as knowledgeable about HIV prevention and sexual risk and may be less likely to use a condom or other prevention options.

Delayed Treatment



Older people are more likely to have late-stage HIV at the time of diagnosis, may start treatment late, and suffer more immune system damage.

Stigma



Older people may have additional challenges getting into care due to stigma, isolation, and loss of support from their family, friends, and community.

How is CDC making a difference for people aged 50 and older?



Collecting and analyzing data and monitoring HIV trends.



Supporting community organizations that increase access to HIV testing and care.



Conducting prevention research and providing guidance to those working in HIV prevention.



Promoting testing, prevention, and treatment through the *Let's Stop HIV Together* campaign.



Supporting health departments and community-based organizations by funding HIV prevention work and providing technical assistance.



Strengthening successful HIV prevention programs and supporting new efforts funded through the *Ending the HIV Epidemic* initiative.

For more information about HIV surveillance data and how it is used, read the "Technical Notes" in the HIV surveillance reports at www.cdc.gov/hiv/library/reports/hiv-surveillance.html.

For more information visit www.cdc.gov/hiv



The Need for Inclusive and Tolerant Long-term Care Communities



Long-Term Care and People Living with HIV

As a result of vast improvements in HIV treatment, more and more people with HIV are reaching retirement and enjoying the “golden years” that lie beyond. Sadly, however, some are facing discrimination as they seek living arrangements and long-term care services suitable for seniors. Long-term care providers may have very limited knowledge about HIV and/or be unaware of their legal obligation to provide housing and services to individuals living with HIV. Knowing your rights will help ensure that you receive the same respect and care afforded others.

www.phimc.org/wp-content/uploads/2018/08/Long-Term-Care-and-People-Living-with-HIV.pdf

Prevention Challenges (source: CDC)

There are some behaviors that put everyone at risk for HIV. These include having anal or vaginal sex without protection (like a condom or medicine to prevent or treat HIV) or sharing injection drug equipment with someone who has HIV. Other factors that affect older people particularly include:



Although they visit their doctors more frequently, older people and their providers are less likely to discuss sexual or drug use behaviors. Health care providers may not ask patients aged 50 and older about these issues or test them for HIV. Also, older people may not consider themselves to be at risk for HIV, may be embarrassed to discuss sex, or may mistake HIV symptoms for those of normal aging.



Older people may have many of the **same HIV risk factors as younger people**, including a lack of knowledge about HIV prevention and sexual risk, such as having multiple sex partners, and may be less likely to use a condom or other prevention options.



Older people in the United States are more likely than younger people to have late-stage HIV infection at the time of diagnosis. People aged 50 and older may start treatment late, which may put this population at risk of more immune system damage. Among people aged 55 and older who received an HIV diagnosis in 2015, 50% had HIV for 4.5 years before they were diagnosed—the longest diagnosis delay for any age group.



Stigma is common among adults with HIV and negatively affects people’s quality of life, self-image, and behaviors. People aged 50 and older may avoid getting the care they need or disclosing their HIV status because they may already face isolation due to illness or loss of family, friends, or community support. (www.cdc.gov/hiv/group/age/olderamericans/index.html)

See also “**Debunk Myths to Decrease Stigma**” Fact Sheet (page 20)

There may be increased fear and/or stigma when accessing and/or residing in a long-term care community, especially for the Older LGBT community.

See AARP’s “[Maintaining Dignity: Understanding and Responding to the Challenges Facing Older LGBT Americans](#)” Report from 2018:

Expectations about long-term care facilities

- 60% concerned about verbal or physical harassment
- 61% concerned about limited access to services
- 62% concerned about abuse
- 67% concerned about neglect
- About half of LGB respondents, and 70% of gender expansive respondents, concerned about not able to be out or forced to hide/deny identity

Effect on comfort level

- 88%: Knowing providers/staff specifically trained for LGBT patient needs
- 86%: Advertising LGBT-friendly services
- 85%: Knowing providers/staff are LGBT
- 82%: LGBT signs or symbols displayed (on-site, offices, online, communications)

HIV Care in long-term care communities, suggested practice tips and policies



++ = applies to both HIV and LGBTQ+ inclusion



Policies

SUGGESTED PRACTICE TIP #1

++ update/expand workplace policies & trainings

Create and celebrate your Diversity Statement

Examples of powerful diversity statements:

<https://blog.ongig.com/diversity-and-inclusion/10-examples-of-the-best-diversity-statements/#samples>



Be yourself. We like it that way.

Diversity fuels the Un-carrier spirit. Our commitment to inclusion across race, gender, age, religion, identity, and experience drives us forward every day.



Improve and expand required trainings and policies

The assisted living facility core training requirements established by Florida Administrative Code include a one-time training course on HIV and AIDS. **Suggestion:** Expand this current one time “HIV” training requirement to a once a year policy for staff at your agency.

Schedule regular *Confidentiality and Disclosure* trainings; establish a regular review schedule with updates of current policies.

Create and/or Update and Share your agency’s *Internal “Grievance Procedure” for residents*; include contacts for outside assistance (such as Ombudsman, HUD - see pages 14-18)

SUGGESTED PRACTICE TIP #2

++ *post all of the above staff policies visibly for residents*

You're doing the work, creating and following the policies and attending the trainings so be sure to share that information by displaying/posting the activities and policies.

Have fun with it and get creative; incorporate inclusive art and items such as **red ribbons** and **rainbow** flags when decorating office spaces and common areas.



SUGGESTED PRACTICE TIP #3

++ post Ombudsman program contact information

NATIONAL: <https://ltombudsman.org>



[What is a Long-Term Care Ombudsman?](#)



Long-term care Ombudsmen are advocates for residents of nursing homes, board and care homes and assisted living facilities. Ombudsmen provide information about how to find a facility and what to do to get quality care. They are trained to resolve problems. If you want, the Ombudsman can assist you with complaints. However, unless you give the Ombudsman permission to share your concerns, these matters are kept confidential. Under the federal Older Americans Act, every state is required to have an Ombudsman Program that addresses complaints and advocates for improvements in the long-term care system.

A Long-Term Care Ombudsman:

- Resolves complaints made by or for residents of long-term care facilities
- Educates consumers and long-term care providers about residents' rights and good care practices
- Promotes community involvement through volunteer opportunities
- Provides information to the public on nursing homes and other long-term care facilities and services, [residents' rights](#) and legislative and policy issues
- Advocates for residents' rights and quality care in nursing homes, personal care, residential care and other long-term care facilities
- Promotes the development of citizen organizations, family councils and resident councils
- Long-term care Ombudsmen efforts are summarized in the National Ombudsman Reporting System (Click [here](#) for current NORS data) to include the number of facilities visited, the types of complaints handled and the kinds of complaints filed with Ombudsmen. Data has been collected since 1996 and gives a good picture of the extent of ombudsman activities nationally and in every state.

Flyer to post/distribute:

<https://ltcombudsman.org/uploads/files/library/program-promo.pdf>

Fact Sheet to share with staff and residents:

<https://ltcombudsman.org/uploads/files/library/long-term-care-ombudsman-program-what-you-must-know.pdf>

Nursing Home-specific information:

<https://ltcombudsman.org/nursing-homes>

Assisted Living-specific information:

<https://ltcombudsman.org/assisted-living>

Home and Community-based services information:

<https://ltcombudsman.org/home-and-community-based-services>

STATE (Florida)

<https://ombudsman.elderaffairs.org/>



FLORIDA OMBUDSMAN PROGRAM
ADVOCATING FOR QUALITY LONG-TERM CARE



SUGGESTED PRACTICE TIP #4

++ post contact information for discrimination resources

Include information from local county or city agencies (such as Broward County Human Rights Section) and national resources (such as U.S. Department of Housing Urban and Development/HUD)

Broward County Human Rights Section

www.broward.org/humanrights

<https://www.broward.org/Intergovernmental/Documents/ProtectedClassifications.pdf>

The Broward County Human Rights Act gives the Broward County Professional Standards/Human Rights Section jurisdiction over three areas of unlawful discrimination:

- Employment (for employers who employ 5-14 employees)
- Housing (involving the sale or rental of housing with 4 or more units located in Broward County)
- Public Accommodation (all services provided to the public)

Unlawful discrimination occurs when one's rights are infringed upon based on a protected class identified under federal, state and local law. Protected Classes:

- [Age](#)
- [Color](#)
- [Disability](#)
- [Familial Status](#)
- [Gender Identity or Expression](#)
- [Lawful Source of Income](#)
- [Marital Status](#)
- [National Origin](#)
- [Political Affiliation](#)
- [Pregnancy](#)
- [Race](#)
- [Religion](#)
- [Retaliation](#)
- [Sex](#)
- [Sexual Orientation](#)
- [Veteran or Service Member Status](#)
- [Victim of Dating Violence, Domestic Violence, Stalking or Human Trafficking](#)



U.S. Department of Housing Urban and Development (HUD)

www.hud.gov/program_offices/fair_housing_equal_opp/online-complaint

www.hud.gov/sites/dfiles/FHEO/documents/Fight%20HIV%20Letter%20Poster%20Final.pdf



Housing discrimination because of HIV is illegal.

Denying housing or housing-related services because of HIV status is against the law. The only way to stop housing discrimination is to report it. If you or someone you know has experienced housing discrimination because of real or perceived HIV status, contact HUD or your state or local fair housing agency.

Fair Housing Is Your Right. Use It.

Visit www.hud.gov/fairhousing or call the HUD Hotline 1-800-669-9777 (English/Español) 1-800-877-8339 (Fed Relay)

A public service message from the U.S. Department of Housing and Urban Development. The federal Fair Housing Act prohibits discrimination because of race, color, religion, national origin, sex, familial status or disability. Individuals with disabilities, including HIV/AIDS, are protected from discrimination by the Fair Housing Act and Section 504. For more information, visit www.hud.gov/fairhousing.



SUGGESTED PRACTICE TIP #5

- HIV/other STI prevention trainings for staff and residents



Educational Resources:

www.floridahealth.gov/diseases-and-conditions/sexually-transmitted-diseases/std-professionals/educational-resources.html



Centers for Disease Control and Prevention

CDC 24/7: Saving Lives, Protecting People™

Centers for Disease Control and Prevention Training Resources:

- Includes STD Prevention Courses, Online Continuing Education Online, and Webinars
- General Site: <http://www.cdc.gov/std/training/default.htm>
- <https://www.cdc.gov/std/hiv/stdfact-std-hiv-detailed.htm>



SUGGESTED PRACTICE TIP #6

++ provide HIV-specific information and presentations for residents

Invite staff from local resources/ASOs/non-profits to chat with residents (monthly community meet-ups, for example)

Provide HIV literature to staff and residents

Examples:

“**Debunk Myths to Decrease Stigma**” Fact Sheet (page 20) can be posted in a common area

“**HIV and Aging Fact Sheet**” (page 6) and “**HIV and Older Americans**” Fact Sheet (pages 7-8) provided to staff

See also Awareness Alerts from **Suggested Practice Tip #10** (page 22)

DEBUNK MYTHS TO DECREASE STIGMA

Myths about the modes of HIV transmission persist



Knowing the facts about HIV helps to decrease stigma

HIV is NOT transmitted:

- ❖ **By insects (such as mosquitoes or ticks) or pets**
- ❖ **By shaking hands, hugging or closed-mouth kissing a person with HIV**
- ❖ **By sharing toilets, dishes, silverware or drinking glasses**
- ❖ **From public bathrooms, swimming pools or water fountains**
- ❖ **From doorknobs or telephones**
- ❖ **Through the air or water**
- ❖ **Through saliva, tears or sweat that is not mixed with the blood of a person with HIV**
- ❖ **By consuming food handled by a person with HIV**

Other helpful information about the transmission of HIV:

- ❖ **A person with HIV who takes HIV medication as prescribed, and who obtains and maintains an undetectable viral load, has effectively no risk of sexually transmitting HIV to someone who is HIV-negative**
- ❖ **Use of protective practices and personal protective equipment to prevent HIV/other blood-borne infections (“universal precautions”) helps to protect patients and health care providers**
- ❖ **The only way to know that you are HIV-positive is to get tested**

Sources:

“HIV Transmission.” *Centers for Disease Control and Prevention*. (<https://www.cdc.gov/hiv/basics/transmission.html>). Accessed November 25, 2019.

“How is HIV Transmitted?” *U.S. Department of Health & Human Services* supported by the *Minority HIV/AIDS Fund*. (<https://www.hiv.gov/hiv-basics/overview/about-hiv-and-aids/how-is-hiv-transmitted>). Accessed November 25, 2019.

“3 Common Myths About HIV, AIDS: Do You Have the Facts?” *Cleveland Clinic*. (<https://health.clevelandclinic.org/3-common-myths-hiv-aids-facts/>). Accessed November 25, 2019.

SUGGESTED PRACTICE TIP #7

++ treat status and/or orientation/identity as you would any other protected characteristic

Follow universal precautions for all residents.

Whenever staff members of a long-term care provider might come in contact with any of these particular body fluids while providing care to any resident of a long-term care facility (whether or not the person's HIV status is known), the staff members should follow universal precautions to prevent infection (e.g., wearing gloves) recommended by the Centers for Disease Control and Prevention." CDC guidelines for bodily fluids... Other body fluids (such as saliva, nasal secretions, sweat, tears, and urine), feces and vomit do not pose a risk of transmission—and therefore gloves and other precautions are not needed, unless the fluid or material contains visible blood.)



SUGGESTED PRACTICE TIP #8

Linkage to care for newly diagnosed residents

Make a listing of local AIDS Service Organizations available for every resident

Provide information on and/or referrals to available resources for addressing medical, psychological, social, and societal issues to prevent isolation, stigma, etc.



SUGGESTED PRACTICE TIP #9

Partner with local HIV care providers

Local legal service agencies: <https://www.flcourts.org/Resources-Services/Court-Improvement/Self-Help-Information/Legal-Aid>

HIV-specific benefits assistance: insurance navigator/case manager for plans appropriate for seniors with chronic illness, such as HIV

Administration for Community Living:

<https://acl.gov/programs/health-wellness/hiv/aids>

“We’re pleased to offer these three useful resources for aging professionals and others interested in designing programs for older adults about the prevention, treatment, and care of HIV/AIDS. If transportation is a barrier to receiving HIV testing or health care, the [Eldercare Locator](#) can direct you to your local Area Agency on Aging (AAA). Many AAAs provide some form of transportation assistance or referral, as well as other services for older adults and their families.”

Activities

SUGGESTED PRACTICE TIP #10

Awareness Day Fact Sheets and Activities



A World AIDS Day Reading List:

www.hachettebookgroup.com/book-list/a-world-aids-day-reading-list/

Books for World AIDS Day and After:

chipublib.bibliocommons.com/list/share/199702383/1094855437



Examples of Awareness Alerts (pages 23-24)

A W A R E N E S S
A L E R T

**June 5th is
HIV Long-Term
Survivors Awareness
Day**

**Generally, long-term
survivors are individuals
who received an HIV/AIDS
diagnosis before 1996**

**Approximately a quarter
of people living with HIV
in the U.S. are long-term
survivors**

**Long-term survivors often
face unique issues as a
consequence of living and
aging with HIV over the
course of many years**

**40 years ago, the CDC
reported the first cases
of what later became
identified as AIDS, and
efforts to end the HIV
epidemic continue today**

**The information in this Awareness Alert is from the following
sources (accessed June 1, 2021):**

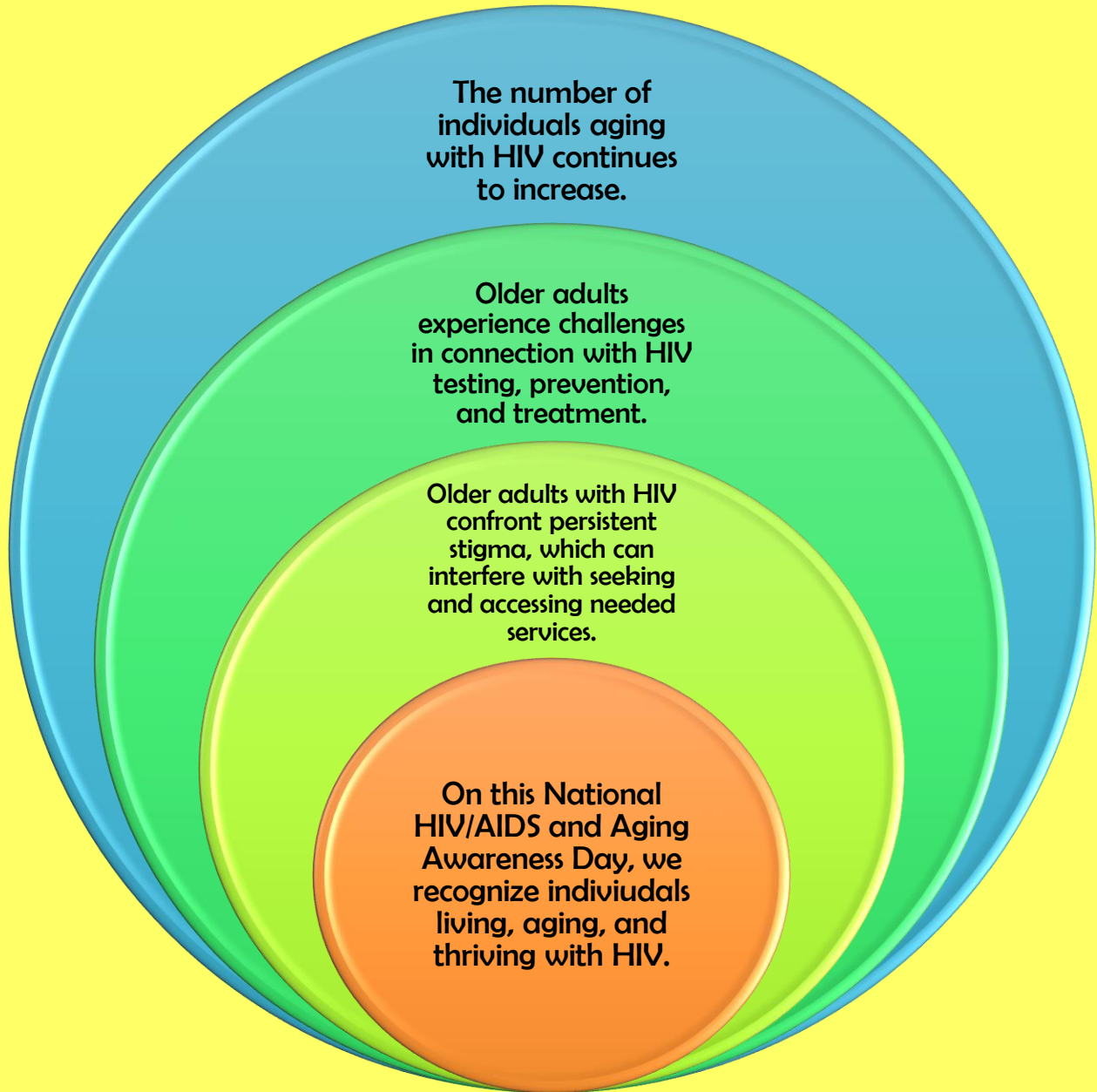
HIV.gov at: <https://www.hiv.gov/events/awareness-days/hiv-long-term-survivors-day> and <https://www.hiv.gov/events/40-years-of-hiv>

**National Resource Center on HIV & Aging at:
<https://aginghiv.org/communities/long-term-survivors/>**



AWARENESS ALERT

National HIV/AIDS and Aging Awareness Day September 18, 2021



The information in this Awareness Alert is from the following sources (accessed September 3, 2021):

- * HIV.gov at <https://www.hiv.gov/events/awareness-days/aging>
- * Centers for Disease Control and Prevention at <https://www.cdc.gov/hiv/library/awareness/nhaad.html>
- * National Institutes of Health at <https://hivinfo.nih.gov/understanding-hiv/hiv-aids-awareness-days/national-hiv-aids-and-aging-awareness-day>

SUGGESTED PRACTICE TIP #11

++ offer diverse entertainment options for residents (TV/movies/magazine/books) so that residents can experience different cultures and lifestyles



10 Best Films about HIV: www.verywellhealth.com/the-10-best-films-about-hiv-aids-48737

12 Songs About HIV That Were Part of a Movement:

www.advocate.com/music/2018/12/01/12-songs-about-hivaids-were-part-movement

Books Illuminating the Impact of HIV: www.out.com/art-books/2017/10/12/top-25-books-illuminating-impact-hivaids

30 of the Best LGBTQ Films Ever Made: www.harpersbazaar.com/culture/film-tv/g9621178/best-gay-lgbt-films/



SUGGESTED PRACTICE TIP #12

Offer HIV testing events; invite HIV providers to chat with residents and staff

Invite staff from local resources/ASOs/non-profits to chat with residents (monthly community meet-ups)

Administration for Community Living: <https://acl.gov/programs/health-wellness/hivaids>:

“We’re pleased to offer these three useful resources for aging professionals and others interested in designing programs for older adults about the prevention, treatment, and care of HIV/AIDS. The HIV Testing Sites and Care Services Locator, a location-based search tool, allows you to search for testing services, housing providers, health centers and other service providers near your current location: [The HIV Testing Sites and Care Services Locator](#).”

SUGGESTED PRACTICE TIP #13 ***HIV/other STI prevention activities***

Presentations, free condom distribution, PrEP (Pre-Exposure Prophylaxis), etc.

[“Sexuality Later in Life: Am I Too Old to Worry About Safe Sex?”](#)



Florida Department of Health:

Do you know your HIV status? To learn about testing and even get a free at-home test kit, visit KnowYourHIVStatus.com.

Are you living with HIV and need help with [housing](#), [medication](#) or [medical care](#)? Our patient care programs are here for you. You can even [apply for assistance online!](#)



Florida’s Plan to Eliminate HIV Transmission and Reduce HIV-Related Deaths

Four Key Components

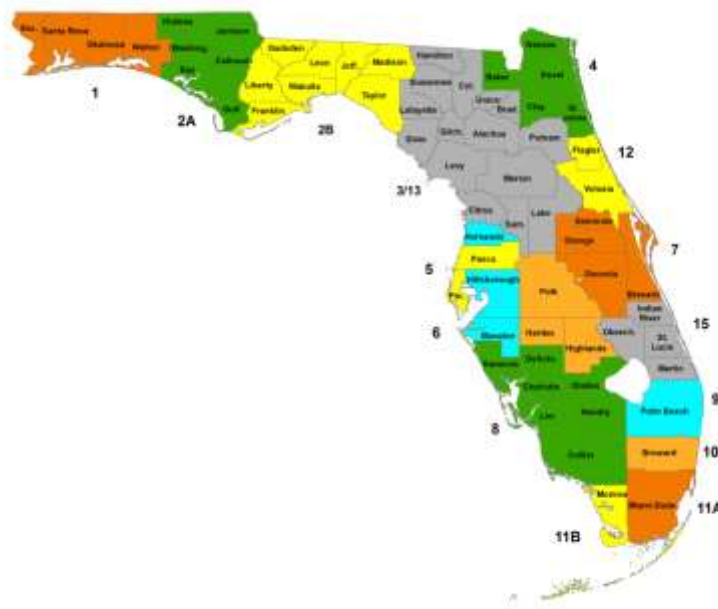
1. [Implement routine HIV and Sexually Transmitted Infections \(STIs\) screening in health care settings and priority testing in non-health care settings](#)
2. [Provide rapid access to treatment and ensure retention in care \(Test and Treat\)](#)
3. [Improve and promote access to antiretroviral pre-exposure prophylaxis \(PrEP\) and non-occupational post-exposure prophylaxis \(nPEP\)](#)
4. [Increase HIV awareness and community response through outreach, engagement, and messaging](#)

(Florida Department of Health resources, continued)

Do you want to prevent HIV? [Get PrEP'd!](#)

PrEP (Pre-Exposure Prophylaxis)

PrEP is a comprehensive HIV prevention strategy that involves the daily use of antiretroviral medications to reduce the risk of HIV infection in HIV-negative individuals. PrEP should be used in conjunction with other prevention methods to reduce the risk of sexually transmitted infection.



Visit our [PrEP Locator](#) to find a PrEP or nPEP provider in Florida.

Ready, Set, PrEP

General Info and Enrollment

Ready, Set, PrEP is a new nationwide program led by the [U.S. Department of Health and Human Services \(HHS\)](#). The Ready, Set, PrEP program provides PrEP medications at no cost to individuals who qualify. Check eligibility requirements and enroll in the program at [getyourprep.com](#). Health care providers can also use this site to enroll a patient.



[Resources for Download/Print](#)

LGBTQ+ Inclusion, suggested practice tips and policies; available resources

In addition to those suggested policies, practices, activities and resources discussed in the previous section (*see especially those marked “++” that apply to LGBTQ+ inclusion*), the following resources are available to insure LGBTQ inclusivity.

Names/Pronouns

www.mypronouns.org

<https://www.mypronouns.org/resources>

Restrooms

<https://transequality.org/issues/resources/transgender-people-and-bathroom-access>

<https://transequality.org/sites/default/files/docs/resources/Trans-People-Bathroom-Access-July-2016.pdf>

Visitation guidelines (“spouse” or “partner”); expanding definition of “family”

https://hospicenews.com/2021/09/23/hospices-work-to-engage-lgbtq-communities/?fbclid=IwAR2hvVCGakozRJQ-qlEObqSZr2kt6NpcahvHyHIDOhVi_onCLf6Ku9jSqQg

Long-Term Care Equality Index

Promoting Equitable and Inclusive Care for Lesbian, Gay, Bisexual, Transgender, and Queer Older Adults in Residential Long-Term Care.

<https://thelei.org/>

<https://thelei.org/lei-2021>

https://www.aarp.org/content/dam/aarp/research/surveys_statistics/life-leisure/2020/maintaining-dignity-lgbt-reformatted.doi.10.26419-2Fres.00217.006.pdf

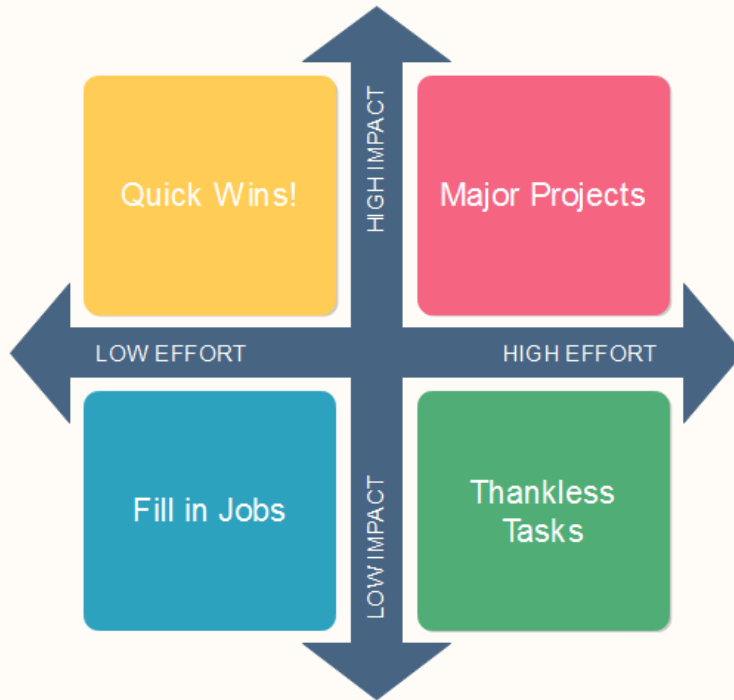
National Center for Transgender Equality Self-Help Guides:

<https://transequality.org/self-help-guides>

Things to Consider

Impact versus Effort Matrix

cost of implementation of any of the above suggested practices; if it is too costly or time-consuming, the activity is not likely to be followed or maintained



www.edrawsoft.com/template-impact-and-effort-matrix.html

Getting Your Agency to “Buy In”

acknowledging the value of the above-mentioned practices: emphasize all of the available incidence and prevalence data for HIV+ seniors so your long-term care community or senior-service organization understands that these practices are worth any such implementation cost as they will affect more residents than you are even aware

Understanding the Community You Serve

appreciating the intersectionality of your residents and community you serve, especially ensuring we acknowledge the difference between the HIV+ community and LGBTQ+ seniors and not assuming everyone falls into both communities

Continuing education

not a one-and-done training; inclusion is a work in progress; allow yourself to make mistakes and learn from each of them



Collaborative Partners

A special thank you to our partners in creating this guide.

Pride Center

www.pridecenterflorida.org

Broward House

www.browardhouse.org/

Care Resource

<https://careresource.org/>

TransSOCIAL

www.transsocial.org/

South Florida Institute on Aging

www.thesofia.org/

Alzheimer's Association (SE FL Chapter)

www.alz.org/seflorida

Legal Aid Service of Collier County

<http://collierlegalaid.org/>

Legal Aid Society of Palm Beach County

<https://legalaidpbc.org/>

Legal Aid Service of Broward County

www.browardlegalaid.org/

Coast to Coast Legal Aid of South Florida

www.coasttocoastlegalaid.org/

Gilead (funder)

www.gilead.com/purpose/partnerships-and-community/hiv-age-positively