Promoting Condom Use to Combat Rates of STIs and HIV among Older Adults in Florida.

Assignment #3

Health Problem: STI incidence among older adults.

Behavioral Risk Factor: Lack of condom use.

Target Audience: Sexually active older adults aged 50 and older.

Geographic Area: Florida, United States

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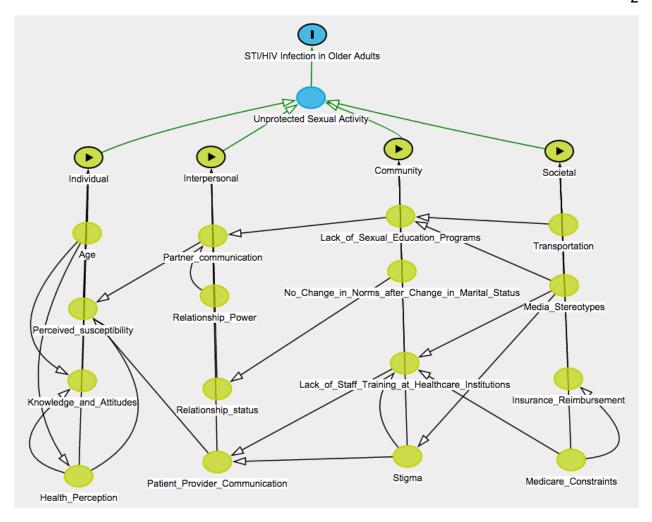
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Life expectancy in America has increased considerably over the last 50 years, bringing new societal problems for public health professionals. Older adults (>50 years) continue to engage in sexual

activity; however, this population's low rates of condom usage is associated with an observed increase in sexually transmitted infections (STIs) and the human immunodeficiency virus (HIV). According to the 2010 National Survey of Sexual Behavior only about 6% of adults, 61 and older, report using condoms during sexual activity (Schick et al., 2010). Additionally, about 69% of older adults (>50 years) reported not using a condom with partners that are new acquaintances and 91.5% of men did not use condoms with casual dating partners (Schick et al., 2010). Furthermore, this population faces social stigma and lacks public health programs to address this growing trend. This project will create a comprehensive intervention program targeting Florida's at-risk older adult population by addressing condom use within the population.

Florida has one of the highest proportions of older adults (>50 years) in the nation, comprising 36.9% of the state's population (U.S. Census Bureau, 2010), compared with 32.1% of the nation's population, based on the 2010 U.S. Census (Howden & Meyer, 2011). In 2013, HIV incidence in older adults (>55 years) in Florida increased to 12.4 per 100,000 from 9.8 in 2012, compared to the national rate in older adults (>55 years) of 5.7 per 100,000 (Centers for Disease Control and Prevention, 2013). HIV diagnoses amongst Black/African American older adults (>50 years) in Florida was 49.8 per 100,00, which was higher than the overall population rate of 20.2 per 100,000 (Centers for Disease Control and Prevention, 2013). Black/African American males, 55-64, are also at highest risk of contracting both chlamydia and gonorrhea, 49.4 and 63.7 per 100,000, respectively. Comparatively, rates for men of all races in Florida, ages 55-64, are 19.7 and 23.2 per 100,000, and overall rates for all adults in Florida, ages 55-64, are 14.7 and 12.6 per 100,000 (Centers for Disease Control and Prevention, 2013).

1. A comprehensive social ecological (SE) diagram



Narrative:

At the individual level, age modifies all other factors. Older Adults ages 60 to 75 years have the lowest intention to use condoms which leads to a greater likelihood of unsafe sexual practices. Age influences individual health perceptions by either inhibiting or enabling sexual activity. Specifically, older adults that utilize erectile dysfunction treatment perceive themselves as being healthy enough to participate in sexual activity. In contrast, individuals with existing health conditions or those that perceive themselves to be in poor health are less likely to participate in sexual activity (Health Belief Model). Age also impacts Older Adult knowledge and attitudes (Health Belief Model and Theory of Planned Behavior). Older Adults epitomize a generation in which discussing sexual practices was taboo. Since

discomfort accompanies this topic, this population is often excluded from pertinent conversations on sexual risks and methods of protection thus contributing to their overall awareness. This lack of knowledge directly affects perceived susceptibility, as older adults do not perceive themselves to be at risk for acquiring STIs and HIV (Health Belief Model). Thus, their low perception of susceptibility causes older adults to ultimately choose not to use condoms.

Interpersonal factors are linked to individual knowledge and perceived susceptibility (Social Cognitive Theory). Partner communication regarding sexual health status and risk behavior informs an individual's perceived outcomes, impacting the likelihood of condom use. Relationship status and relationship power influence partner dialogue and expectations. Provider-patient communication plays a role in fostering behavioral capability, health knowledge, preventions skills, facilitation, and providing appropriate support (Social Cognitive Theory). Stigmatized beliefs and lack of training impact the willingness and ability of health care providers to address the unique sexual health needs of older adults.

Community level factors stem from established norms and the stigma of both sexual activity and sexually transmitted diseases (Structural Model). Community norms against discussing sexual activity among older adults, especially outside of a marriage, leads to a lack of staff training at healthcare institutions on safe sexual practices for older adults. Norms relating to condom use, established in marriages, persist after marriages have ended due to divorce or death (Social Cognitive Theory), and are mirrored throughout communities of older adults. Additionally, there is a lack of sexual education programs for older adults, further preventing changes in norms and beliefs.

Societal factors affecting this demographic include access problems, such as transportation, Medicare constraints and insurance reimbursements (Social Ecological Model). These access issues are interconnected, and influence community factors such as lack of sexual education programs and lack of staff training at healthcare institutions. Another important societal factor is negatively stereotyped media affecting stigma at the community level. Transportation problems impede older adult's ability to access sexual education programs. Furthermore, Medicare constraints and insurance reimbursements lead to a lack of training at healthcare institutions and a lack of communication between patients and providers.

TITLE: STIs/HIV among Older Adults in Florida: Multilevel Intervention to Increase Condom Use BRF: Condom Use				
Individual	Older Adults (>50 years) in Florida	Knowledge and Attitudes	TPB/ HBM	Devise and implement a STI/ HIV awareness campaign to enhance education and promote safe sex practices through the utilization of condoms.
		Health Perception	НВМ	
		Perceived Susceptibility	НВМ	
Interpersonal	Health care Providers who work with Older Adults	Provider-Patient Communication	SCT	In conjunction with devising an STI/ HIV awareness campaign, this intervention will target health care professionals who work with older adults: nurses, doctors, community health workers; to talk to older adult patients about sexual activity, encourage methods of prevention, and attend trainings. Training objectives may include sexual health risks, methods of prevention, and avenues to enhance cultural competency and gender inclusivity in screening patients for STIs/ HIV.

Intervention:

The proposed intervention will target the individual and interpersonal levels through implementation of an STI/ HIV awareness campaign. The individual level of this intervention, will focus specifically on Florida's older adult population while the interpersonal level will target Florida's health

care professionals who work with older adults. To enhance older adult knowledge, magazine advertisements, posters, and billboards will be formulated and intentionally staged within older adult outlets (i.e. AARP magazine, Readers Digest, senior living communication, geriatric wellness facilities, etc). To counteract this population's perceived lack of susceptibility, this campaign will incorporate older adults representing different ethnicities, sexual orientations, and genders. These images will reflect the vast diversity of this population, incorporate cultural sensitivity, and counteract the perception that the older adult population is minimally susceptible. The intervention promotion materials will also incorporate generation-specific song lyrics that will combat existing stigma regarding older adult sexual activity while engaging this population in sexual prevention education.

In conjunction with devising an STI/ HIV awareness campaign specifically for Florida's older adults, this intervention will target health care professionals who work with older adults: nurses, doctors, community health workers; to talk with their older adult patients about sexual activity, encourage methods of prevention, and request trainings in their workplaces. Due to the heightened prevalence and fiscal burden of STIs/ HIV among this population, this intervention has the potential to promote greater awareness within state and federal legislatures to modify current medicare treatment policy and protocol in order to implement improved prevention practices.