

# NURSING STRATEGIES FOR PROMOTING THE QUALITY OF LIFE OF ELDERLY PEOPLE WITH HIV/AIDS

## ESTRATÉGIAS DE ENFERMAGEM PARA PROMOÇÃO DA QUALIDADE DE VIDA DO IDOSO COM HIV/AIDS

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**Abstract: Introduction:** People with HIV prolong their lives and improve their quality of life, but with all the scientific, health and technological advances, there is concern about this aging population with HIV, as well as about new infections among the elderly, which have become recurrent and require a differential diagnosis, due to possible health problems related to aging. **Objective:** to identify the nursing strategies adopted to promote the quality of life of the elderly with HIV/AIDS. **Methods:** This is an integrative literature review carried out in the Virtual Health Library, Nursing VHL, Scielo, Scopus and PUBMED databases using the descriptors HIV, elderly, aging and Nursing. **Results:** Nursing care was highlighted as being of great importance for building bonds and establishing trust with the patient, with the support of the multidisciplinary team being important in promoting actions and strategies for nursing care for the elderly and building, together with the patients, important strategies to encourage maintenance of adherence and continuity of treatment and improve the feeling of hope for life. **Conclusion:** the strategies adopted by nursing to promote the quality of life of elderly people with HIV/AIDS contribute significantly to improving self-care and coping with the disease. Therefore, it is necessary to focus on this public with an emphasis on innovative research on the aging process.

**Keywords:** HIV Infections; Elderly; Aging; Nursing.

## INTRODUCTION

The population in the world is achieving greater longevity and although aging is a natural process in the life of every human being, this reach of longevity is one of the greatest triumphs of humanity. This profile occurs in view of the fact that each year people are managing to prolong their lives for longer and this phenomenon has been happening due to scientific advances in health and the adoption of a healthier lifestyle by the population, which favors an improvement in the rates related to life expectancy and with a consequent decrease in the mortality rate <sup>(1-3)</sup>.

In the world report on healthy aging of the World Health Organization (WHO)<sup>(4)</sup>, it is highlighted that healthy aging should not be defined by something specific to the functioning of your body or your health, because aging is a natural process. Thus, your experience of aging can be positive or negative, depending on the environment in which people are inserted and whether they have adequate accessible and comprehensive health care.

According to the Brazilian Institute of Geography and Statistics <sup>(5)</sup>, released until July 2022, Brazil had more than 214 million inhabitants, of which 14.7% of people aged 60 years or older. The projections of the WHO <sup>(4)</sup>, for the world, are that by the year 2050 the elderly population will make up 30% of the general population and the expectation is that there will be more elderly than children aged 15 years or younger, a phenomenon that has never existed before. Therefore, in 1990 the UN established that October 1st, would be considered the International Day of the Elderly, in order to raise awareness about issues related to aging, and with this, raising a new discussion, very important and relevant also about people living with the Human Immunodeficiency Virus (HIV) and or with the Acquired Immunodeficiency Syndrome (AIDS), about aging with HIV and AIDS <sup>(3,6)</sup>.

With the new advances in antiretroviral therapy (ART) people with HIV (PVHIV), in continuous treatment, can expect a positive life expectancy comparable to that of the general population, and can then mean that individuals with HIV and AIDS, following the treatment correctly, will have the opportunity to enjoy greater longevity and may have a healthy aging. With this, the first step to start treatment is to diagnose the infection as soon as possible, but for the detection of HIV in elderly people the differential diagnosis is necessary, and this is a complex and very important process for planning Of treatment and favorable conditions to promote a better quality of life, and should be careful and thorough, because the delay in diagnosis can also be caused by the similarity of the clinical manifestations of HIV infection with the manifestations of common age-related diseases <sup>(6-8)</sup>.

There are obstacles related to the early detection and diagnosis of HIV in the elderly, because there are perceptions in this age group regarding the association of this infection and occurrence only in younger people. Thus, the incidence of cases with late diagnosis of HIV and AIDS in individuals over 60 years of age may be related to stigma, marginalization, lack of information aimed at the elderly, sub-diagnosis, stereotypes and prejudices <sup>(6-8)</sup>.

With the scientific evolution in health and new pharmaceutical discoveries that boost people's longevity and technological evolution causing greater access to information, behavioral changes also arise among the elderly population, among these changes is the demystification of sexuality and new ways of living<sup>(3)</sup>. With this, the concern arises both that the elderly also have the possibility of HIV infection, as well as the concern about strategies for a better aging of the adult population with HIV and AIDS<sup>(3)</sup>. In view of this, the present study seeks to identify the role of the nurse, as well as the main strategies adopted, to promote the quality of life for the elderly with HIV/AIDS.

## METHODOLOGY

### Type of study

This is an integrative review of the literature that aims to provide the synthesis of knowledge and applicability of the results of scientifically based research on the attention of nurses in the care of elderly people with HIV, as well as healthy aging. In this research, four stages were used for the elaboration of this study, being: elaboration of the guiding question, literature search, data collection and analysis of the results included.

### PICo Strategy

The study was started from the elaboration of the following research question: "What nursing strategies and interventions that promote the quality of life of the elderly with HIV/AIDS, as well as in the aging process?" Inspired by the PICo structure, where P (population) Elderly with HIV/AIDS, I (interest) interventions and nursing guidelines, Co (context), promotion of the quality of life of PVHIV in the aging process.

### Search in the literature

The search in the literature occurred after the formulation of the guiding question. At this stage, the inclusion and exclusion criteria of the articles researched, search strategies and the databases used in the search for scientific articles were defined. From the guiding question, the descriptors were defined through the DeCs (Descriptors in Health Sciences) platform being, "HIV", "Elderly", "aging", "Nursing", "Elderly", "Aging" and "Nursing". And used with the following combinations considering the Boolean connector AND: HIV AND Elderly AND Nursing, HIV AND Aging AND Nursing, HIV AND Elderly AND Nursing, HIV AND Aging AND Nursing, as organized and described in table 1.

The searches were carried out in reliable and secure databases, namely: VHL (Virtual Health Library), VHL Nursing (Virtual Health Library Nursing), SCIELO (Scientific Electronic

Library Online), SCOPUS Elsevier and PUBMED. The steps and strategies that guided the search and selection of articles, in the databases, for this study were: the indexing of the descriptors in the chosen databases, followed by the selection of articles found from the descriptors with publications in Portuguese, English and Spanish.

**Table 1** - Combinations used in the research.

COMBINATIONS	DATABASE	NUMBER OF ARTICLES
HIV AND Idoso AND nursing	SCIELO	28
HIV AND Elderly AND Nursing	SCIELO	17
HIV AND Aging AND Nursing	SCIELO	11
HIV AND Idoso AND nursing	SCOPUS	01
HIV AND Elderly AND Nursing	SCOPUS	43
HIV AND Aging AND Nursing	SCOPUS	41
HIV AND Idoso AND nursing	BVS Nursing	19
HIV AND Elderly AND Nursing	BVS Nursing	71
HIV AND Aging AND Nursing	BVS Nursing	46
HIV AND Idoso AND nursing	BVS	96
HIV AND Envelhecimento AND Nursing	BVS	09
HIV AND Elderly AND Nursing	BVS	121
HIV AND Aging AND Nursing	BVS	39
HIV AND Idoso AND nursing	PUBMED	03
HIV AND Elderly AND Nursing	PUBMED	1715
HIV AND Aging AND Nursing	PUBMED	211
<b>TOTAL ARTICLES SELECTED</b>		<b>2471</b>

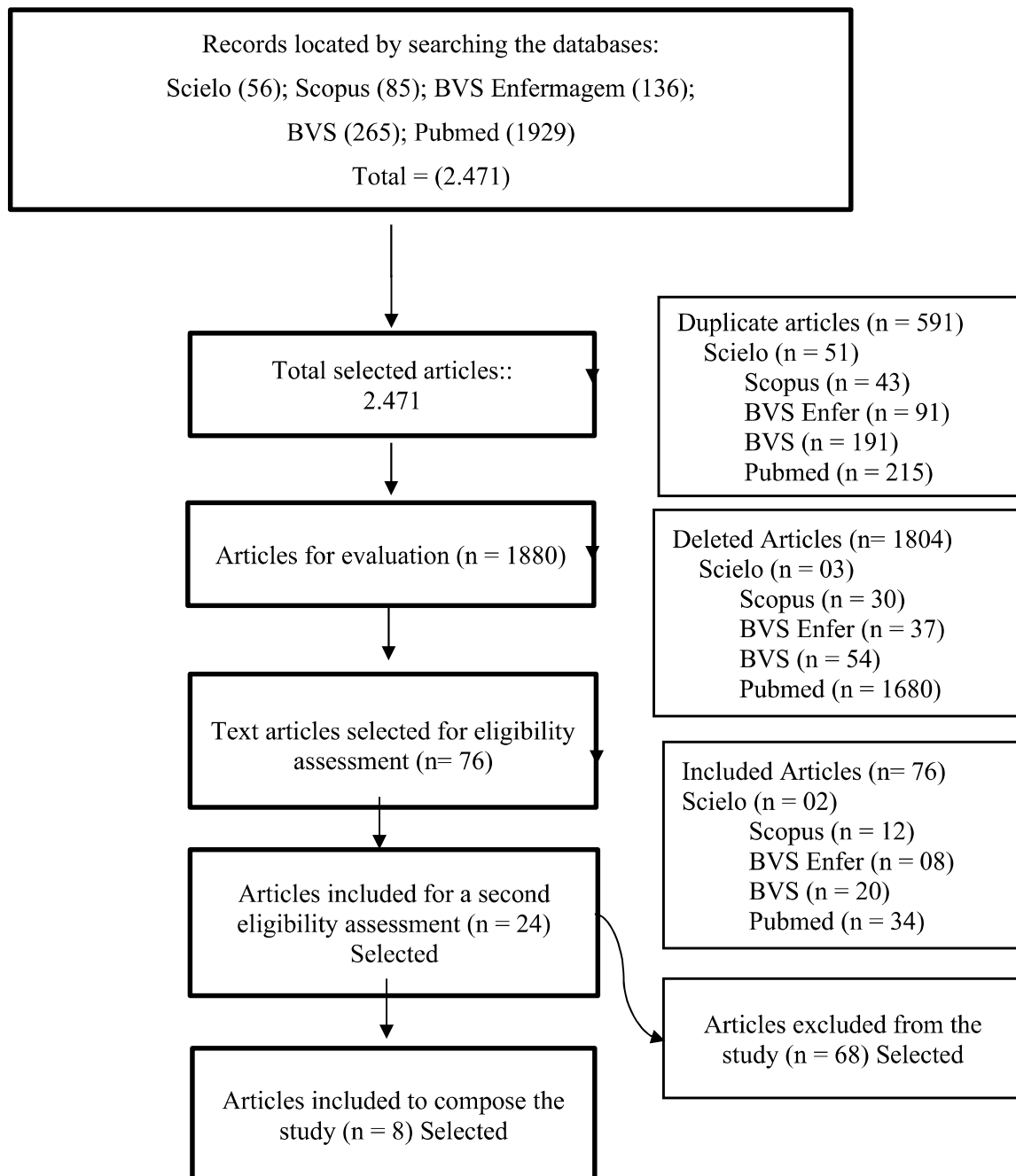
**Source:** Prepared by the author based on the data collected, 2024.

### Data collection

The survey of the material in the databases, in order to organize them to make it

systematic, was carried out on the Parsifal platform. A total of 2,471 articles were collected, being, 56 results in the SCIELO database, 85 results in the SCOPUS Elsevier base, 136 results in the VHL Nursing base, 265 results in the VHL base and 1929 documents in the PUBMED base. Of these articles, 591 duplicate articles were selected, totaling 1880 articles to be evaluated, of these, 76 were pre-selected for eligibility evaluation, thus excluding a total of 1804 articles. Of the pre-selected articles, eight publications met the inclusion criteria (Figure 1).

**Figure 1** - Flowchart organizing the selection of articles representing the third and fourth stages.



Source: Prepared by the author based on the data collected, 2024.

### Analysis of the included results

The data extracted from the articles were analyzed critically and thoroughly, seeking to

understand the entire subject addressed and comparing it with the theoretical knowledge related to the proposed theme, seeking to identify patterns and relationships between the findings of each article. As standards, the strategies and contributions of nursing in the care of the elderly with HIV/AIDS, the problems related to infection and the aging process and the aspects of quality of life were considered. In the selection and evaluation of the articles, the Parsifal platform was used to organize the data. On the platform, the articles were systematized according to their respective databases, separating them, according to the established inclusion and exclusion criteria, in order to select the duplicated, accepted and rejected articles

## RESULTS

After the search in the databases and the collection of all the results, initially, 2471 articles were found and, after applying the eligibility criteria, eight articles were selected to compose the sample, according to the inclusion criteria cited in the methodology. The main findings of these publications are in table 2 where the data related to the authors and year of publication, research objective, research methods and results are presented.

It is important to emphasize, the difficulty still in the research and search for studies on the proposed theme, noting that the selected articles, which were part of the study, are all from authors with origin of publication in Brazil, because no article was found by authors from other countries, that met the theme, and few articles published in recent years on the subject.

**Table 2** - Distribution of results from articles related to the role of nurses in caring for elderly people with

Authors/year	Objectives	Methods	Results
Cabral <i>et al.</i> (2022) <sup>(9)</sup>	Analyze adherence and organization of nursing care for patients on antiretroviral therapy.	Evaluative, quantitative, observational and cross-sectional study, carried out in five establishments of Specialized HIV Care Services (SAE), belonging to the 1st Regional Health Management of Pernambuco, using an excerpt from the QualiAids questionnaire to evaluate the quality of nursing care of each service.	Nursing care promotes opportunities for expanded dialogues that facilitate the patient's interaction with the professional, and playing a fundamental role in the care of people living with HIV, understanding that nursing practice must be systematized to promote universal, equitable and comprehensive assistance to patients, based on the humanization of care in a holistic and welcoming way.
Brandão, <i>et al.</i> (2020) <sup>(10)</sup>	Identify strategies for coping with HIV among HIV-positive elderly people.	Descriptive exploratory study with a qualitative approach, with the participation of 48 elderly people in the interviews, carried out in two Specialized Assistance Services (SAE), located in public hospitals in Recife, Pernambuco.	After the interviews, some common issues among the elderly were identified and which can become strategic points for coping with HIV: religiosity and spirituality, adherence to treatment, institutional support, social support network and confidentiality of the diagnosis.
Silva <i>et al.</i> (2019) <sup>(11)</sup>	Identify the measures and actions adopted by nurses in the care and monitoring of elderly people living with HIV/AIDS, and analyzing their role in the care provided.	Exploratory research with a qualitative approach, developed at the Policlínica Regional Dr. Carlos Antônio da Silva, in the city of Niterói, Rio de Janeiro. Structured interview, with data collection, and participation of 05 nurses who work directly in assisting elderly people with HIV.	Seek knowledge, skills and attitudes for the care of elderly people with HIV during the nursing consultation, as they are more vulnerable and fragile in terms of physical and emotional issues, and it is important that the nurse makes a situational diagnosis of the elderly person's life to identify aspects that can influence the treatment and acceptance of the disease and should promote conversations on topics such as the meaning of HIV/AIDS for the elderly or knowledge and perception of the elderly about HIV/AIDS.
Caliari <i>et al.</i> (2018) <sup>(12)</sup>	Analyze sociodemographic and clinical factors related to the quality of life of people aged 50 or over living with HIV/AIDS.	Cross-sectional, analytical study, using descriptive statistics and comparison tests, with data collection carried out through interviews with people aged 50 or over in an outpatient clinic specializing in PLHIV in the state health network of Minas Gerais.	Quality of life is directly related to sociodemographic and clinical issues of PLHIV, in relation to physical and emotional changes, such as anguish and stigma related to HIV/AIDS. The quality of life score related to the care provided by the healthcare team was positive when promoting trust, the bond with the service and adherence to medication therapy. Quality of life is directly related to the sociodemographic and clinical profile of PLHIV, related not only to physical changes, but to the anguish and stigma related to HIV/AIDS.
Barros <i>et al.</i> (2018) <sup>(13)</sup>	Understand the ideological basis present in the experiences of elderly people diagnosed with HIV/AIDS.	The qualitative approach, using the creative and sensitive method, composed of the triad: group discussion, participant observation and creativity dynamics, carried out at the Testing and Counseling Center in Fortaleza, Ceará.	Despite the aspects of suffering in the reports, four existential situations stood out: controversial conceptions about physical violence in childhood, a thing called AIDS, lack of response and blame related to HIV infection; and support in faith. Nurses must seek in their practices to value listening more, that listening is not directed only to HIV/AIDS and related problems, developing care that stands out from the use of mechanical techniques or attitudes, considering individuality, feelings, the history and social context of the elderly.
Alencar <i>et al.</i>	Identify the	Qualitative approach conducted in a	In the face of the analysis process and after the

(2015) <sup>(14)</sup>	vulnerabilities of elderly people with HIV/AIDS and the difficulties in diagnosing the disease.	Specialized Outpatient Infectious Diseases Service (SAEI), where semi-structured interviews were carried out with 11 elderly people, aged 60 years or over, infected with the HIV virus.	interviews, four key points relevant to promoting care emerged: discovering HIV late against the health service, perceiving oneself as asexual by health professionals, using condoms after the disease is confirmed through the diagnosis, diagnosis revealed first to third parties.
Oliveira <i>et al.</i> (2015) <sup>(15)</sup>	Identify the strategies adopted by nurses to manage care for elderly women with HIV/AIDS in an Infectious Parasitic Diseases (IPD) service.	Exploratory and descriptive approach with qualitative research assumptions, using Grounded Theory in association with Symbolic Interactionism, carried out with 10 nurses who work in the infectious parasitic diseases (DIP) sector of the federal hospital in Rio de Janeiro.	The nursing consultation represents the possibility of identifying, prioritizing and adequately analyzing problems considered relevant and critical and that interfere with the quality of care provided, providing the opportunity to facilitate new proposals and solutions for the problems identified in these moments in which the nurse and client closely interact. propose the moment alone.
Bezerra <i>et al.</i> (2015) <sup>(16)</sup>	To understand the vulnerability of elderly people to HIV infection in the context of preventive practices.	Exploratory study with a qualitative approach, carried out with 37 participants from Elderly Community Groups, in João Pessoa/PB. The Focus Group was chosen as the investigation technique, and the empirical material obtained was submitted to the Content Analysis Technique, thematic modality.	It showed progress in knowledge about preventive practices for HIV, but there is a need to improve preventive actions against STIs and HIV/AIDS, promote health education aimed at experiencing a pleasurable and healthy sexuality, establish the creation of reflection groups aimed at the elderly population, focusing mainly on sexuality.

Source: own authorship, 2024.

## DISCUSSION

When analyzing the articles accepted for the study, on the role of nurses in the care of the elderly with HIV/AIDS, it was possible to identify the following problems: the sexuality of the elderly, use of condoms and the difficulty of open dialogue on the subject, the vulnerabilities of women, support in religiosity and spirituality, stigma, fear and secrecy, difficulty in differential diagnosis and adherence to treatment, the recognition of the role of the health professional by the elderly, but also the lack of guidance and information about HIV/AIDS with the elderly and the systematization of care.

Given the results, it was possible to observe a main issue in common and the most recurrent among the authors, being very important to understand a key point of the infection of the elderly by HIV: sexuality. In the studies <sup>(11,14,16)</sup> the elderly interviewed report that they feel that health professionals see them as asexual and with this, it generates the difficulty of dialogue between the professional and the elderly, and as a consequence end up discovering HIV late and still in the opposite of the health service. Dialogue is essential for the entire care process, from HIV prevention to the treatment strategy.

It is worrying the lack of preventive actions and conversations on the subject and the unpreparedness of health professionals to work on the sexuality of the elderly, not giving 243



openness for them to present their doubts or complaints. With this, issues such as infections by STIs and HIV/AIDS, care for the prevention of these, the importance of condoms and even how condoms are used, since they started their sexual life at a time when there was no talk of the practice of using condoms, end up not being approached with the elderly due to the perception that the elderly do not have an active sex life <sup>(11,14,16)</sup> .

The perception that the health professional has about sexuality reflects directly in the way he works on this subject with his patients and it would be ideal, still in graduation, to acquire knowledge on the theme of sexuality in the elderly<sup>(14)</sup> . Dialogue is a key point for the understanding and promotion of care, themes such as sexuality, when approached in a productive way, generate other subjects of great importance, such as condoms. Although in the studies the elderly have a good knowledge about the importance of condoms, all revealed that they have acquired HIV infection through sexual intercourse. It is also noticeable that even knowing the importance of use, they are unaware of the existence of the types of male and female condoms <sup>(14,16)</sup> .

Therefore, the knowledge about condoms reported by the elderly is opposed to reality, because it is evidenced in the literature the decrease in the use of this preventive method, making it an inconsistency between recognizing the importance of using a condom and its little use <sup>(15)</sup> . The studies <sup>(11,15,16)</sup> identified that the elderly use six times less condoms than the younger population, which makes the vulnerability to HIV infection even more visible. Still, in the discourse of the elderly, in the studies, they do not recognize themselves as vulnerable groups, thus identifying other population groups as vulnerable. According to the author regarding the use of condoms, the difficulty of negotiating the use of condoms with the partner is visible, for the adoption of safe practices, and making the woman the most vulnerable in the relationship.

Religiosity and spirituality are also very noticeable among the studies, since the elderly report the support in the faith to continue facing HIV/AIDS and continue with the treatment. It was observed that religiosity and spirituality strengthen the elderly by helping them to have their hopes renewed and contributing to a subjective well-being, since it was identified in his speeches, that after discovering the infection their first feeling is that of the hopelessness of life and the association of HIV and AIDS with death. Therefore, considering faith in treatment is important, because in the reports of the elderly it is visible their confidence in the "action of God in the face of HIV" <sup>(10,13,15)</sup> .

On the other hand, while faith can be a support, it can also be something difficult or bad, because for some HIV infection can be seen as a sin and consequently the feeling of guilt and fear can arise, causing the withdrawal of religious participations and may compromise their treatment <sup>(12)</sup> . Thus, the nurse's advice on HIV and demystification is essential for the understanding of the infection, since it is still a marginalized theme and it is essential that the nurse, in the nursing

consultation, adopt attitudes and approaches according to the context of the patient's life <sup>(15)</sup>.

Another point identified, and that there is agreement between the studies <sup>(9-13,15)</sup>, is that health professionals should consider in the care of the seropositive elderly, issues regarding stigma and consequently the fear of prejudice, the feeling of anguish and despair, because they are some reactions experienced by the elderly when discovering the diagnosis, with this it is very important the construction of the bond of trust of the nurse with the elderly, ensuring secrecy, so that there is adherence to the treatment <sup>(9-13,15)</sup>. Trust in the health professional is a necessary point, because it promotes a more comprehensive dialogue with the patient in order to identify and analyze important issues in the context of the patient's life, to systematize the planning of care actions, also promoting a quality in care <sup>(9)</sup>.

It is important to understand that nursing care promotes spaces that expand clinical care by promoting opportunities for broader conversations, facilitating the interaction between professionals and the patient, allowing the approach of important issues, hitherto unknown, favoring the creation of bonds of trust, and collaborating with the physical and mental well-being and the process of acceptance of their health condition and therefore adherence to antiretroviral therapy, in addition to favoring the spontaneous search for health units <sup>(9,10)</sup>.

Regarding the treatment, the studies <sup>(11,12,15)</sup>, point out that the importance of antiretroviral therapy (ART) is noticeable, because it allows a distant and quality life. Even though the differential diagnosis ends up being made in a late phase of the natural history of HIV infection, it is necessary to understand the nurse, still in nursing consultations, requesting rapid tests and/or anti-HIV serology in order to diagnose the infection early and even prevent the evolution to AIDS and counseling about HIV/AIDS and treatment.

However, the success of the treatment is not only due to medication, but to identify it as a set that promotes adherence, because it also involves other factors, such as changes in diet, new healthy lifestyle habits and hygiene, regularity in consultations, periodic examinations and care with the prevention of other infections <sup>(10)</sup>. And, therefore, adherence to ART should be understood as a collaborative process that facilitates the acceptance and integration of the therapeutic regimen in the daily life of PVHIV and should also be planned and evaluated from educational interventions, to promote the quality of life of the patient <sup>(9,11)</sup>.

Therefore, the results of the studies are, however, diverse, but they have a correlation with each other with themes that complement each other when the studies are viewed holistically to be considered in the promotion of care for the seropositive elderly. In this way, relevant connections were identified between the articles, in which everyone found the notoriety and importance of the nursing consultation, because it promotes, from the dialogue, a bond of trust with the patient, and making nursing interventions fundamental for the quality of life of the seropositive elderly, thus

generating, for the elderly, more confidence and autonomy in the treatment.

However, it is also important to emphasize that it is still necessary to develop more studies on the theme given the difficulty even during the search for articles, studies on and that meet the proposed theme, and it is also notorious that it is still a theme little publicized and analyzed in the field of nursing, and, therefore, new studies should be carried out to support and strengthen the nursing strategies aimed at the care of the elderly with HIV and AIDS, as well as in the aging process with infection and or the disease.

## CONCLUSION

At the end of the analysis of the articles, it was possible to observe that the treatment of the patient with HIV/AIDS is a whole process in which the nurse is directly linked as a facilitator and guide of care. However, there are still issues that need greater development and approach by the professional. Sexuality still presents itself as a taboo, when treated by the elderly, because it is common to be related only to the younger population, it is at this point where the first risk for HIV infection lives. The dialogue of the nurse with the elderly should promote the discussion in order to solve doubts about the subject and promote knowledge about the infection of STIs and HIV and AIDS itself, and also about the use of condoms.

In the care process it is also essential to promote support for the elderly and support for the promotion of quality of life, identifying along with them important points for encouraging treatment and life expectancy, such as having a healthier life, practicing physical activities, following the routine normally and regarding their religiosity, promoting support when the elderly highlight their faith for coping, provided that it contributes positively to adherence to treatment. The limitations identified in this study are mainly related to the non-finding of a larger number of publications, in more recent years, on the role of nurses in the care of the elderly with HIV and AIDS.

It is then recommended a greater emphasis on the care of the elderly with HIV and AIDS and the inclusion of more programs, public policies and campaigns on the subject, so that it contributes to the prevention of new infections and the importance of adherence to treatment and care, not only directed to the young population, but also the older population, because they also have an active sexual life, promote support for the development of inclusive and adapted environments for elderly people with HIV, align health services so that they meet the specific needs of older people and develop an improvement as To research on aging with HIV and AIDS.

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