



**TESTIMONY OF MARK BRENNAN-ING
OF THE BROOKDALE CENTER FOR HEALTHY AGING, HUNTER COLLEGE
FOR THE
CONGRESSIONAL HIV/AIDS CAUCUS AND CONGRESSIONAL LGBTQ+ EQUALITY CAUCUS.**

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My name is Dr. Mark Brennan-Ing, and I am the director of research and evaluation at the Brookdale Center for Healthy Aging at Hunter College, the City University of New York. We are CUNY's aging research and policy center and focus a large part of our work on HIV and aging. Thank you for the opportunity to provide testimony on this important issue in commemoration of World AIDS Day.

Effective antiretroviral therapy, or ART, has resulted in the aging of the population with HIV with a majority in the U.S. age 50 and older. Our research on older people with HIV finds that over 60% suffer from clinically significant depressive symptoms, and use of tobacco, alcohol and other substances is quite high. Why is this of concern? Depression is one of the strongest predictors of non-adherence to ART and other medical treatments. Alcohol and substance use not only interfere with ART adherence, but also reduce the effectiveness of ART in controlling HIV.

Goal 2.5.2 of the National HIV/AIDS Strategy is to identify and implement best practices related to addressing psychosocial and behavioral health needs of older people with HIV and long-term survivors

including substance use treatment, mental health treatment, and programs designed to decrease social isolation. It will be impossible to achieve National Ending the HIV Epidemic (EHE) targets of care engagement, treatment adherence, and viral suppression unless we are able to realize this NHAS goal.

Two of the largest drivers of behavioral health problems are social isolation and HIV stigma, and it is vital that we tackle these challenges by supporting community-led spaces that are open and welcoming to people of all ages who are living with HIV. In needs assessments of older adults with HIV, opportunities for socialization inevitably top the list. My research has found that community connections help in coping with the challenges of aging and promote healthy behaviors like physical activity. Older people with HIV want a safe space in their communities to hang out and relax. Addressing these needs are in line with **Goal 2.5.2** as well as **Goal 2.5.3 of the NHAS** (namely, increasing HIV awareness, capability, and collaboration of service providers to support older people with HIV, including in settings such as aging services and housing for older adults). These goals could be advanced by modifying the Older Americans Act to include older people with HIV as a population of greatest social need, which would help to direct needed services by competent providers to these vulnerable older adults.

Thank you again for the opportunity to testify. We remain, as always, available to you as you think about how to best support the growing population of older people with HIV.