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The public health implications of these decreases in retention and VS point to the existence of systematic deficiencies. Young adults have a shift in their lifestyle with new-found emotional, behavioral, cognitive, and financial autonomy and are held responsible for their decisions, actions, and consequences. They may be more likely to neglect healthcare, for they lack the guidance and structure that adolescents receive when living with family. Health care systems should respond with additional supportive services (e.g., appointment reminders, case managers, peer navigators), address competing priorities (e.g., housing, and food insecurity), be sensitive to psychosocial needs (e.g., same-day appointments and flexible evening and weekend hours), create an environment of trust (e.g., youth-friendly clinic setting, age- and culturally appropriate waiting area posters, magazines and health education literature), deliver comprehensive mental health and substance abuse services to this high risk population, use technology (e.g., appropriate use of text messaging, and apps), and solicit patient feedback on their barriers to retention in care and VS.

The public health implications of increasing numbers of older PLWH include the need to coordinate with medical fellowship programs and health care systems to ensure training for health care providers; to provide systems for specialty consultation via telemedicine; and to support integrated care that combines social services, mental health, geriatrics, HIV, and primary care. As older PLWH become increasingly frail, assisted living and skilled nursing facilities must be prepared to serve their special medical and biosocial needs. Discrimination by HIV status is illegal, but older PLWH may nevertheless experience difficulty finding appropriate long-term care facilities that will accept them. The involvement of public health personnel in reducing stigma and increasing awareness of HIV as a chronic disease with negligible transmission risk outside of blood and sexual contact is essential because, as noted by Lambda Legal in 2010, "Federal disability discrimination statutes include an exception that allows a long-term care facility to exclude someone *if* the facility can show that the person would present a direct threat to the health or safety of others." (Lambda Legal, 2010).

Systems barriers to continuous, comprehensive HIV care such as a complex multi-payer system, pharmacy services unfamiliar with the AIDS Drug Assistance Program, complicated enrollment procedures for Ryan White services, and fragmentation of medical care for HIV and non-HIV needs affect all PLWH but may have an especially great impact for the elderly.

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