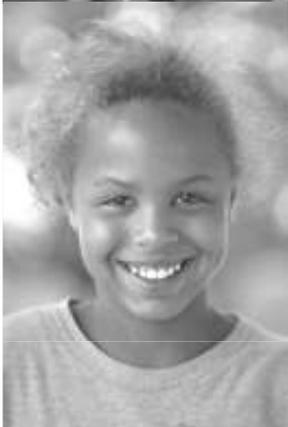


History of a Comprehensive Care Model for HIV/AIDS orphaned children and youth living in a permanent shelter in Mexico

Children and HIV/AIDS: Action Now, Action How
International Symposium

August 2nd 2008

Mexico City





Who are We

La Casa de la Sal, A.C., is a nonprofit organization serving Adults and Children living with HIV AIDS in Mexico City



Our mission is to assist in the prevention and reduction of the impact of living with HIV/AIDS. This is done through the implementation of comprehensive services for children and adults living with scarce economic resources: by providing warm, home-like shelters as well as comprehensive medical, psychological and spiritual services. Our members work from the standpoint of a culture that believes in *life*, and within a framework of absolute respect and acceptance of all human beings.





Social Impact

In our 21 years of development, La Casa de la Sal has serviced more than 110,000 people infected or affected by HIV/AIDS through its various programs:

At the Children's Permanent Shelter, 50 children have been assisted. Eight have been adopted.

267 adolescents and adults have received short-term shelter.

More than 3,000 medical consultations were procured.

324 families received monthly provisions.

5,510 persons were granted free medical treatment.

1,921 persons suffering from HIV/AIDS and their relatives, have been part of support groups.

More than 1,100 HIV-carriers and their relatives have been notified of their diagnoses and counseled on resources available to them.

We have provided psychotherapy to more than 5,000 peoples who live with or are affected by HIV/AIDS.

The volunteers of La Casa de la Sal visited more than 8,000 patients and relatives, at 5 public hospitals in Mexico City.





social impact

End-of-life counselling was given to more than 4,000 patients, in their own homes.

Crisis intervention has been provided to more than 10,000 clients, by phone, in person and through our website.

74 relatives of children suffering from HIV/AIDS have come to the School for Parents.

More than 8,000 medical professionals including doctors, social workers and nurses in different public hospitals of the Mexico City Area were trained in human rights issues, diagnoses notification counselling, thanatology, sexual education and HIV/AIDS prevention and mental health treatments.

59,500 HIV prevention workshops were given to primary and secondary school students and staff.

The institution has given information and orientation sessions about HIV/AIDS to more than 4,000 HIV carriers and the general public.





programs for children and teens

Casa de la Sal Specialized Programs for Children and Teens infected and affected by HIV/AIDS

Long-Term Intervention

Permanent Shelter

Family Centered Interventions

Psychological and Community Programs for Children and Teens living in a family environment

Specialized workshops and counseling for children in public hospitals



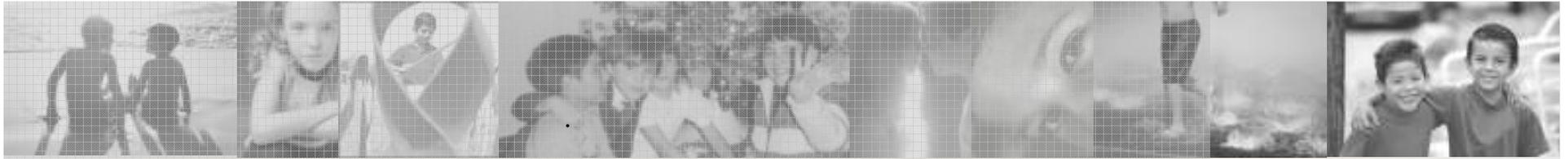


model of attention

Multidisciplinary Model of Care:

Medical, Psychological, Nutritional, Social and Educational Services





Permanent Shelter

medical Care

❑ Before the year 2000, our children's life expectancy was limited to early adolescence.

❑ Thanks to the use of anti-retroviral and other treatment protocols (*around 110,000 doses annually*), most of our children are currently asymptomatic.

❑ The excellent medical service provided by the CLINDI clinic of the 'Hospital Infantil de México Federico Gómez', combined with the anti-retroviral medications supplied for free by FONSIDA, has allowed the life expectancy of our children to increase significantly.

❑ One full-time specialized physician and two full-time nurses are responsible for the medical care the children require, and the hospital handles the daily medical visits as well as critical cases as needed.





permanent shelter

psychological care

Our children present with a variety of psychological issues, including depression, anxiety and learning disabilities. As they grow and reach adolescence, their problems become more pronounced and difficult to manage.

How did I get infected?

When am I going to die?

How was my mother infected?

Are my parents dying?

If my parents die, what will happen to me?

Can I infect someone else?

Can I have children?

Who do I tell that I am HIV positive?

What am I going to do when I grow up?

Who am I? Where do I belong?





permanent shelter

psychological care

Due to their history of repeated losses, malnutrition, abandonment and lack of medical treatment, most of our children require specialized psychological care. For this reason all the children undergo psychological evaluations and specific treatments to help them reduce anxiety and depression symptoms that affect their health, as well as their chances of developing stable and healthy personal relations.

- ❑ One full time in-house psychologist, several consulting therapist and a team of volunteers are in charge of providing mental health treatments for our children and teens.





permanent shelter

nutritional care

Our full time nutritionist has specialized in developing and implementing specific diets to overcome the medical conditions of AIDS but also to fight against the secondary effects of the antiviral medication.

The diets are very specific for each child and in the last three years we have observed a significant gain in weight and high as we train them in managing their specific diets, that in many cases are sugar free and low lipids.

One full-time nutritionist is in charge of this area at the shelter.





permanent shelter

educational care

Casa de La Sal, A.C. has had to design specific educational programs to fulfill the children's physical, psychological and social needs. Two teachers work full-time to enhance the educational process and make it possible for the children to attend certified public elementary and secondary schools.

We are still facing challenges related to the children's scholastic deficiencies, together with their physiological and psychological health problems. Some of the most significant difficulties are related to the neurological repercussions of AIDS, malnutrition, as well as the side effects of their many medications.

At least 70% of our children require special education services due to learning disabilities such as dyslexia, attention deficit disorders, memory impairment, delayed speech development and others.





permanent shelter

social care

Children living at the shelter come from broken homes, social service interventions, hospitals or the streets. The basic requisite of admission is that the children survival is extremely low if they continue to be at their community or family environment.

For the first 18 years of our existence, Casa de La Sal has functioned as the permanent legal guardian of these children.

Thanks to recent advancements in the treatment of AIDS, our children are reaching adulthood . Along with our joy comes the responsibility of how to reestablish these young adults as functioning members of society.

- ❑ The primary difficulty consists in establishing long-term relationships between these new adults and their communities or with family members, thereby providing them with the supportive social network necessary for their continued progress.





Psychological & Community Services

Psychological and Community Programs for Affected Children, living in a family environment

We provide multiple services for children living in family environment.

These services include:

- Individual and Family Psychotherapy/Counseling for individual, couples and families.
 - Crisis intervention
 - Parent School Children and Adolescent School
 - Specialized Workshops: on self-esteem, self-care, notification counseling for children and their families, primary and secondary prevention training
- Recreational Events
Referral Services





Children Public Hospital Services

Specialized workshops and counseling services for children in public hospitals

Specialized workshops on maintaining ART protocols are provided to children and their families as part of their clinical care. Treatment modalities include puppet and role-playing, art therapy and visualization techniques. Major emphasis is given to the importance of strict adherence to the medication protocols.

What is working: Improvement of ART adherence
Relationship between public health systems and NGO

Challenge: Further development of effective research protocols

Counseling sessions are also provided during hospital confinements





What is Working

Networking with other non-profit organizations

Key alliances with Public Health System

Strong alliances with Public School Systems

Access to the best available medical treatment and care

Significant improvements in patient's quality of life and life expectancy

”Adoption as an Option”

Psycho-education strategies to prevent stigma and discrimination

Parents’ psychoeducational and support groups

Specialized family and child psychotherapies

Adapting to the changing needs of children's various developmental stages





Our Challenges

Mental Health Issues: Depression, Anxiety, varying Psychoses

Social Issues: Effective assimilation into community

Educational Issues: Strong special education needs

Reproductive/Sexual Issues: educating and managing their sexuality in a responsible way.

Stigma and Discrimination Issues: within family, community and school systems

Organizational Issues: Occupational "Burn-out" by caretakers





into the future

New Shelter to receive up to 45 children

Enhancing our family-based interventions

Developing Adoption temporary-home programs

Complete focus on families and helping children return to their communities

Vocational and work programs

