Facing AIDS in Costa Rica

Costa Rica is one of the smallest countries in Latin America, with a population of 2·8 million. Over the last decade, its health services have radically reduced mortality from diarrhoeal and other infectious diseases. But now the country faces the threat of AIDS. Professor Leonardo Mata, President of the National AIDS Commission of Costa Rica, reports.

total of 16 cases of AIDS per million of population have been recorded in Costa Rica (as of 31 December, 1987). By 31 Jan, 1988, a total of 47 cases of AIDS had been registered. These cases include homosexuals and haemophiliacs*. At present, the disease is taking its greatest toll among homosexual men: the first case was diagnosed in 1985, six more in 1986, and a further 19 in 1987. About 55 per cent of haemophiliacs are infected with HIV — one of the highest levels recorded worldwide.

Since 1985, only preheated coagulation factors, prepared from blood known to be free from contamination with HIV, have been imported and all donated blood has been screened for HIV, using ELISA and confirmation by immunoblot. No AIDS cases have been recorded among injecting drug users (injecting drugs is not a common practice in much of Latin America).

HIV infection

At present, only one case of heterosexually transmitted full-blown AIDS has been recorded — in the sexual partner of an infected haemophiliac. But the country is expecting AIDS to become a problem in the heterosexual population, as is already the case in Honduras and a number of Caribbean countries. Only ten women are known to be HIV antibody positive (two of whom work as prostitutes). 1,500 prostitutes have been tested (ELISA test) and found to be negative.

Magnitude of the epidemic

Estimates of the number of AIDS cases expected to arise between 1988-1992 are: 40 new cases in 1988; 72 in 1989; 118 in 1990; 178 in 1991 and 254 in 1992. These figures are high for a country where the estimated population in 1992 is only 3.1 million. If these estimates are correct (and assumir

that, at any one time, half the total number of AIDS cases recorded will have died) deaths from AIDS could exceed mortality due to diarrhoeal and other infectious diseases within five years. During 1987, a total of 80 deaths were recorded due to diarrhoeal diseases in the whole country; no deaths due to polio or diphtheria were recorded.

Health education campaign

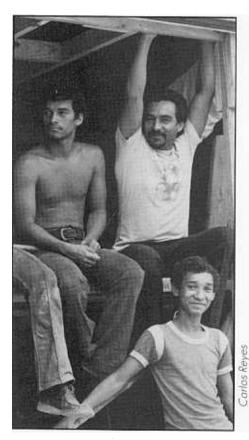
A national health education campaign began in April 1985. A pamphlet containing ten easily understood messages was widely distributed throughout the country, and the messages were printed in five major daily newspapers. Television programmes covered basic issues, and AIDS education is being incorporated into the curriculum of secondary and high schools.

Updates and recommendations from the World Health Organisation and US Centers for Disease Control were translated into Spanish for distribution to medical professionals and other health workers. Talks and workshops are being given in health and biological science institutions.

Education about safer sex and the distribution of condoms in gay discotheques and other public places began in November 1987. Most of the above activities have been coordinated by the National AIDS Commission and its committees, with significant collaboration with the media, NGOs, volunteers and the general public.

Fear and controversy

AIDS has generated more fear, misunderstanding, conflict and controversy than any other health problem in recent years. Neglect of its importance during 1985-6, resulted in timid actions and lack of funds for prevention and



Costa Rica — AIDS could exceed mortality due to diarrhoeal and other infectious diseases within five years

control activities. Lack of understanding by health workers — including doctors and microbiologists — resulted in discrimination against patients in certain hospitals, and a refusal to carry out examination of blood or other body fluids.

AIDS is testing our ability to deal with a social problem of great complexity, which threatens to affect every family. Achieving a balance between the rights of society and those of the individual has been difficult. In the long run, AIDS will test whether or not our society can truly be regarded as humane and civilised.

Professor Leonardo Mata is President of the National AIDS Commission, at the Ministry of Health, Costa Rica, and a member of the editorial advisory board of AIDS Action.

*Haemophiliacs suffer prolonged bleeding after injury because the blood cannot clot; they receive blood products for treatment — coagulation factors — some of which have been infected with HIV from infected blood donors. The following resource list is the second in a regular series, with a particular focus on health education materials on AIDS, produced in both developed and developing countries. Readers are encouraged to send in additional examples of leaflets and other resources, produced in their own countries.

TEACHING MATERIALS

Learning about AIDS

A manual covering participatory health education strategies for health educators with a responsibility for adult education about AIDS. Developed in the U.K. Using group work, case studies and role play, Learning About AIDS includes: guidance on how to use participatory approaches to AIDS education; medical information about transmission and current therapies: exercises to help adults learn about AIDS; auidance on how to evaluate the effectiveness of AIDS education and a resource list. Available from: AIDS Virus Education and Research Trust (AVERT), PO Box 91, Horsham RH13 7YR, U.K. Price: £3:95 plus postage (eg. up to £7.00 for air mail).

 Teaching AIDS: Educational Materials about AIDS for School Teachers

By Dr John Sketchley. Pack of materials including: training component (helps teachers handle AIDS related issues in the classroom); information (for teachers to use as resource on relevant facts); activities (for classroom use in graded age groups). The pack consists of a folder containing seven information and related activity sheets with illustrations for class use. Available from: BLAT Centre for Health and Medical Education, BMA House, Tavistock Square, London WC1H 9JP, U.K. Price: £3.50 plus postage.

INFORMATION SOURCES

Bureau of Hygiene and Tropical Diseases LSHTM,

Keppel Street, Gower Street, London WC1E 7HT, U.K.

Activities: An information clearinghouse, covering tropical and communicable diseases worldwide. The Bureau produces AIDS Newsletter (see AIDS Action issue 1) and AIDS and Retroviruses Update - a monthly bibliography which groups by subject annotations all the papers and articles on AIDS and retroviruses located by the Bureau in the previous month. Contains an author index. All entries form part of the AIDS Database and are searchable electronically (see below). Annual subscription rate: £95-00 (overseas).

From What is AIDS? A Manual for Health Personnel, CMC Switzerland.

The Bureau's monthly abstract journals Abstracts on Hygiene and Communicable Diseases and Tropical Diseases Bulletin, contain around 40 selected abstracts of the most important papers prepared by experts on AIDS and retroviruses. Annual subscriptions rates £88.00 and £65.00 respectively (developing countries and UK).

The Bureau's AIDS Database gives electronic access to the above publications (items dated from 1984). Hosts: Data-star, BRS, CABI.

Misereor

(Episcopal Organisation for Development Cooperation), Postfach 14 50, Mozartstrasse 9, D-5100 Aachen, West Germany.

Activities: Misereor acts for the Catholic Church in Germany, supporting community development. It is a private, non-profit making organisation, under the responsibility of the German Bishop's conference. A special programme on AIDS in developing countries was started in April 1987. Working in close cooperation with the Medical Mission Institute of Würzburg (FRG) the main objectives are:

- AIDS information service for local communities (including supporting AIDS Action)
- financing seminars in Africa on AIDS
- financing equipment for hospitals, clinics,

supporting community-based health care programmes and pastoral services identifying and implementing the most suitable diagnostic test for HIV antibodies for use in developing countries.

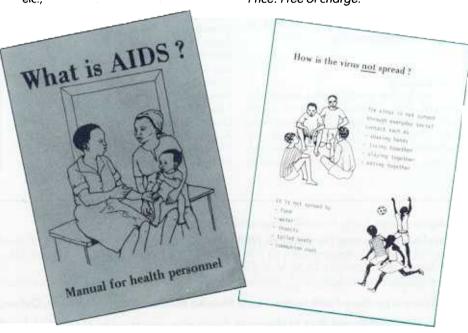
BOOKS/MANUALS

 Puppets for Better Health: a manual for community workers and teachers

By Gill Gordon. Describes, through words and pictures, how puppets can be used for health education in communities: could easily be adapted for education around AIDS prevention. Explains how to create stories that are locally appropriate, how to make puppets and props for shows, preparation of shows and follow-up of health messages used. Available from: MacMillan Distribution Ltd, Houndsmills, Basing-stoke, Hampshire RG21 2XS, U.K. Price £7.50 plus postage.

O What is AIDS? A Manual for Health **Personnel**

A short booklet written to help health workers respond to, and leam about, AIDS. Also available in French and Spanish. Contains information about all the main facts, and clear illustrations. Describes very clearly how the virus is and is not spread, and the need for compassionate and sensitive care of patients. Available from Christian Medical Commission, World Council of Churches, 150 route de Femey, 1211 Geneva 20, Switzerland. Price: Free of charge.



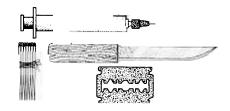
EQUIPMENT

Equipment for Charity Hospitals Overseas (ECHO)

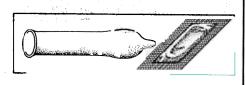
Ullswater Crescent, Coulsdon, Surrey, U.K.

Activities: Provides low-cost blood testing kits, needles, syringes, gloves, vehicles for AIDS outreach programmes, information on proper re-sterilisation and disinfection procedures, and appropriate disinfectants.

with instruments that have not been properly sterilised, as well as risks through sexual intercourse with an infected person. Also states: 'in this country blood for blood transfusions is being tested (for HIV infection) before being given to patients'.



Drawings from 'Love Safely' leaflet (see text). The first illustrates warnings about the risk of spreading AIDS through injecting, cutting, scarring or circumcision with unsterilised needles and knives. The second, promotes the use of condoms.



NEWSLETTERS/LEAFLETS

o AIDS Health Promotion Exchange
Published by WHO/Global Programme
on AIDS, with the editorial and technical
collaboration of the Royal Tropical Institute, The Netherlands. Promotes the exchange of innovative ideas and materials
on AIDS education activities, as well as
programme evaluation. Aimed at health
communicators around the world. Includes a 'Country Watch' section, which
describes a selection of AIDS activities in a
number of different countries. Available
free of charge from: Exchange, Health
Promotion Unit, WHO/GPA, 1211 Geneva,
Switzerland.

○ 'AIDS . . . it's new, IT'S DEADLY'

This is a good example of a clear, factual leaflet. Produced by the Ministry of Health, Commonwealth of Dominica. Suitable for both health care workers and the general public. Describes basic disinfection procedures with local chlorine-based disinfectant, and gives a health centre number to ring for further information.

'Love safely'

Produced by the medical and health department, The Gambia. Contains a very good description of some of the major and minor symptoms of AIDS, and has a very clear section on transmission risks through injecting, cutting, scarring or circumcision

INTERNATIONAL SYMPOSIUM

Ixtapa, Mexico, will be the site of the First International Symposium on Communication and Education on AIDS, from 16-20 October, 1988. The symposium is being organised by the Ministry of Health of Mexico, the World Health Organisation and the Pan-American Health Organisation. Address enquiries to:

Comité Organizador Del I Simposio International de Communicaión
Educación Sobre SIDA a/c
Dirección Gèneral de Epidemiología A.P. 22-762

Deleg. Tlalpan C.P. 14000

Mexico, D.F./Mexico.

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injections, and blood that has been screened for HIV when receiving blood transfusions. To avoid tattooing, scarification, and circumcision where instruments are not properly sterilised.

• Persons infected with HIV: here the role of counselling, as opposed to simply handing over information about 'do's' and 'don'ts', is absolutely crucial. An infected person will need personal and practical support from the health services and the community. Such individuals are then more able to cope with the responsibility of helping to ensure that others do not become infected e.g. by not donating blood and by strictly adopting safer sex practices, or sexual abstinence.

Self-help support groups for HIV infected persons and their families have been enormously successful in a number of countries. They should be encouraged.

Further training

Worldwide, there is a growing need for further training to promote counselling skills, and greater awareness of how behaviours are changed. Continuous discussion on the planning, implementation and evaluation of health education campaigns is particularly valuable. AIDS Action aims to provide a forum for discussing AIDS education activities. All our readers are encouraged to contribute articles and to voice their opinions.

This issue focuses on health education; future issues will include advice about safer sex, low-cost blood testing equipment, sterilisation and disinfection procedures and products, and HIV related mother and child health.

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Designed by Katherine Miles

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