Haïti : Children start getting specialised AIDS services

- Orphelins du sida, orphelins et enfants vulnérables (OEV) - Par pays -

Port-au-Prince, 31 October 2007 (PLUSNEWS)

Erika, 17, (not her real name) is one of an estimated 17,000 children living with HIV in Haiti, the Caribbean island most affected by AIDS. After years of ill-health and many medical consultations, she was tested for HIV at the age of 13 and referred to the paediatric and youth clinic at the Gheskio Centre, the largest HIV treatment centre in Port-au-Prince, the capital.

More than a year passed before the staff told her she was infected. Dr Francine Noël, who heads the youth clinic at the Gheskio Centre, explained that the decision to tell a young person is made on a case-by-case basis, depending on their level of maturity. "At that age, young people are confused about everything, so if you add HIV on top of this, it can be terrible," she said.

"I was really unwell, I was covered in spots, was always feeling faint and each year I suffered from shingles [a viral infection common in people who are HIV positive]," Erika explained.

Erika contracted HIV from her mother at birth. She was orphaned at the age of six and since then has lived in her mother's house with her uncle, aunt and their children. The news that she was HIV-positive did not come as a big surprise.

"My uncle and aunt were whispering a lot and I knew something was going on, so the doctors told me," she added. "I had heard that it [HIV/AIDS] was an untreatable disease, but I thought you could operate. They told me the truth about it."

At the youth clinic in a quiet, green area next to the main clinic where adult patients receive their antiretroviral (ARV) drugs, Erika meets other young people who come to the centre to learn about HIV and sexually transmitted infections (STIs), or to be treated if they have been diagnosed with HIV.

In a country affected by years of political instability, violence and endemic poverty, Aide Médicale Internationale (AMI), a French non-governmental organisation, has counted over 2,120 street children in Port-au-Prince, some as young as 10. A socio-medical programme launched by AMI in 2004 uses mobile clinics to bring healthcare and psychological support to them.

"Many young people have been 'demilitarised' - they were part of armed gangs and were used as mules [who carry drugs] or foot soldiers, and now find themselves on the streets after police operations to break up the gangs," said Dr Sénou Amouzou, the programme's medical advisor.

Forced to fend for themselves, some fall victim to violence, including sexual violence, while some trade sex to survive. As a result, STIs account for around 30 percent of consultations at the mobile clinic, and AMI is monitoring seven HIV-positive street teenagers, five of whom are pregnant.

Initially the organisation also offered HIV testing to young people, but has decided to put this service on hold temporarily. Amouzou explained that providing testing alone was not enough : more importantly, HIV-positive children "also need a roof over their heads and healthy food, but it is not ... easy to find housing and rehabilitation facilities. When you're living on the streets, even keeping your medication clean and dry is an issue."

AMI are looking for funding and resources to provide more comprehensive services to street children, and in the meantime refer them to clinics in the capital for HIV testing and treatment, particularly the youth clinic at the Gheskio Centre.

"We give them medication [for opportunistic infections] - our job is worthless if they don't have that - we relieve the pain for a couple of hours, but that doesn't have any [long-term] impact," Amouzou said. He added that while it was relatively easy to find ARVs, HIV-positive teenagers also needed the right conditions for treatment to be successful.

Young people do not always feel comfortable at centres where they are mixed with adults, which can affect treatment negatively, according to Dr Noël at the Gheskia Centre's youth clinic. A study investigating ARV adherence among young people in Haiti found only 40 percent of those surveyed were following their treatment correctly ; one of the main reasons given was that they did not feel comfortable among the adult patients.

"They needed to be separated and supervised," Noël told IRIN/PlusNews. "Here they have their own centre and their own doctors and nurses." In a large room with chairs and a television, overlooking a courtyard shaded by trees, groups of teenagers chat while they wait for their consultations.

Erika, who has now been on ARV treatment for five years, says she feels happy here and often comes to chat with other young people. "There is a girl, who refuses to take her medicine, that I speak to. I also speak to young people who are infected." She said she would like to study psychology so she can "help people who don't want to take their medication."

Like many other infected children, Erika has had to deal with the stigma linked to the virus, even in her own family. Although she still prefers not to talk about her HIV-positive status with her classmates, she tries to explain to her peers what HIV is.