

# Baylor Black Sea Foundation

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2021 Annual Report



# OUR HISTORY

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The Center for HIV Clinical Excellence or the Romanian American Children's Center was founded on April 6, 2001, and the Baylor Black Sea Foundation was legally established in 2004.

The Clinical Center of Excellence was created by Dr. Mark Kline and dr. Rodica Mătușa to help the HIV-infected children Romania in the late '90s. At the time of its establishment, the center was the largest pediatric clinic in Europe to provide care and treatment for HIV infected children.

Baylor Foundation Romania is part of a network headquartered in Houston, Texas, at the Baylor College of Medicine and Texas Children's Hospital. Founded as Baylor College of Medicine International Pediatrics AIDS Initiative, BIPAI at Texas Children's Hospital is the largest care and treatment network based at an academic institution supporting programs for children living with HIV. BIPAI Headquarters and its network of nine affiliated, independent foundations together provide pediatric and maternal healthcare for vulnerable populations around the world.

**THE HEADQUARTERS:  
HOUSTON, TEXAS, UNITED STATES OF AMERICA**

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## **THE FOUNDATIONS IN THE BAYLOR COLLEGE OF MEDICINE INTERNATIONAL PEDIATRIC AIDS INITIATIVE AT TEXAS CHILDRENS HOSPITAL (BIPAI) NETWORK:**

Baylor College of Medicine Children's Foundation - Argentina  
Baylor Children's Clinical Centre of Excellence Trust - Botswana  
Baylor College of Medicine Children's Foundation - Colombia  
Baylor College of Medicine Children's Foundation - Eswatini  
Baylor College of Medicine Children's Foundation - Lesotho  
Baylor College of Medicine Children's Foundation - Malawi  
Baylor-Black Sea Foundation - Romania  
Baylor College of Medicine Children's Foundation - Tanzania  
Baylor College of Medicine Children's Foundation - Uganda





## KEY INFO

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**BOARD OF DIRECTORS:** Tiberiu Csaki, Michael Mizwa, Simona Ruță, Anda Șerban, Gabriel Băzdrăgan

**EXECUTIVE DIRECTOR:** Ana-Maria Schweitzer

### **CONSTANȚA:**

**The Clinical Center of Excellence**

10 Prelungirea Liliacului St.

**The Hep - HIV Voluntary Testing Center**

Clinical Hospital, 143 Tomis Ave.

## VISION

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Baylor Black Sea Foundation's vision is to live in a discrimination free community that's capable of stopping communicable and chronic diseases.

## MISSION

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Baylor Black Sea Foundation's mission is to help the community develop effective services for the prevention and care of infectious and chronic diseases. Currently, Baylor Black Sea Foundation's status is that of a public utility organization. Baylor Foundation Romania provides prevention, treatment, and care for people affected by infectious and chronic diseases, namely viral hepatitis, HIV infection, and diabetes (type II).

## WHERE WE WORK

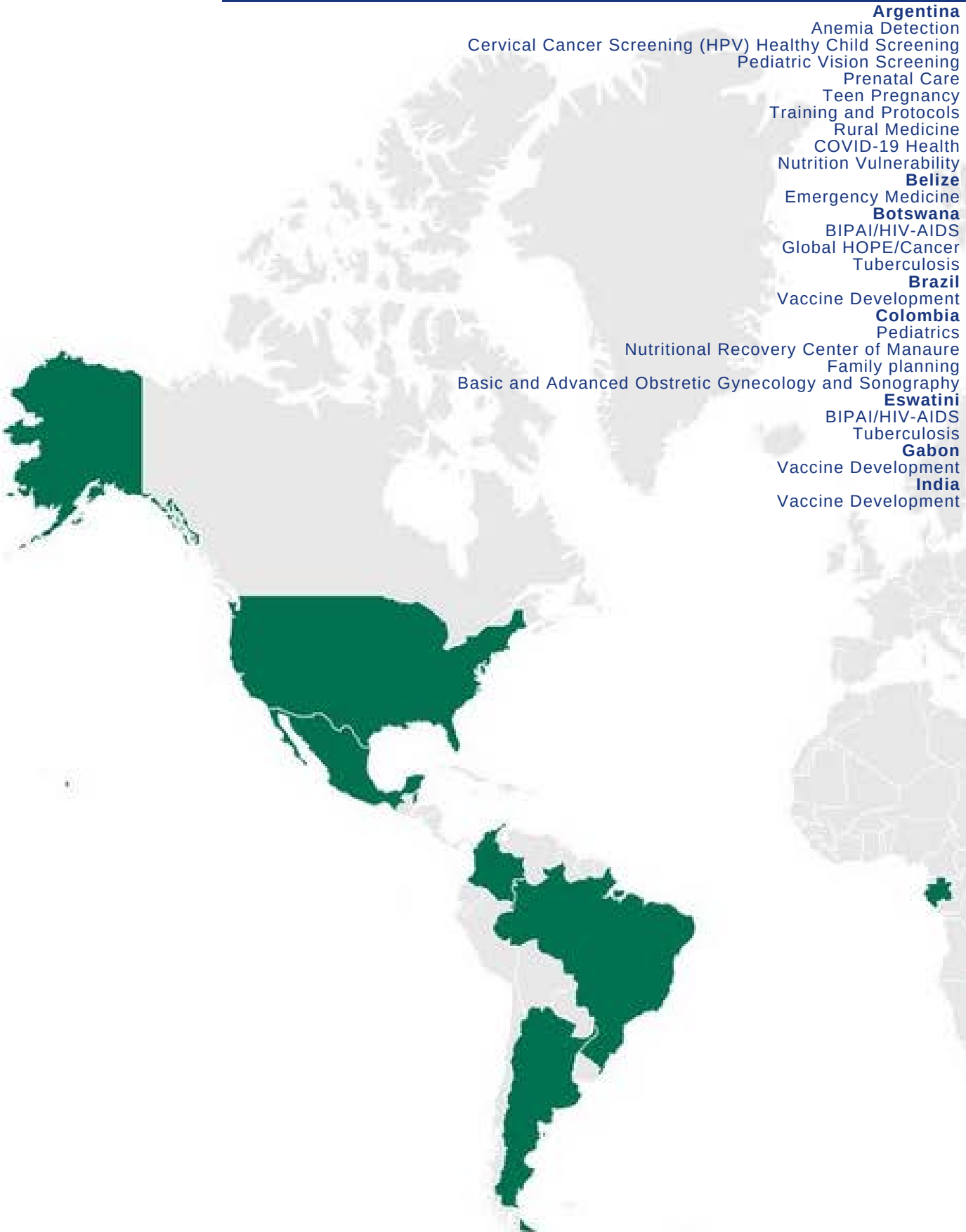
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Baylor Black Sea Foundation provides complex services at the Clinical Center of Excellence in Constanța and operates two counseling and testing centers in the Dobrogea region, as well as a mobile voluntary testing laboratory. Over the years, Baylor Black Sea Foundation has provided free-of-charge testing and counseling for approximately 100 000 people, longterm medical and psycho-social care for over 4,000 patients with HIV and hepatitis and supported the healthcare system with donations of medicines as well as professional training courses for healthcare professionals.



Global Health  
Network

# WHERE WE WORK



**Argentina**

- Anemia Detection
- Cervical Cancer Screening (HPV) Healthy Child Screening
- Pediatric Vision Screening
- Prenatal Care
- Teen Pregnancy
- Training and Protocols
- Rural Medicine
- COVID-19 Health
- Nutrition Vulnerability

**Belize**

- Emergency Medicine

**Botswana**

- BIPAI/HIV-AIDS
- Global HOPE/Cancer
- Tuberculosis

**Brazil**

- Vaccine Development

**Colombia**

- Pediatrics
- Nutritional Recovery Center of Manaure
- Family planning
- Basic and Advanced Obstretic Gynecology and Sonography

**Eswatini**

- BIPAI/HIV-AIDS
- Tuberculosis

**Gabon**

- Vaccine Development

**India**

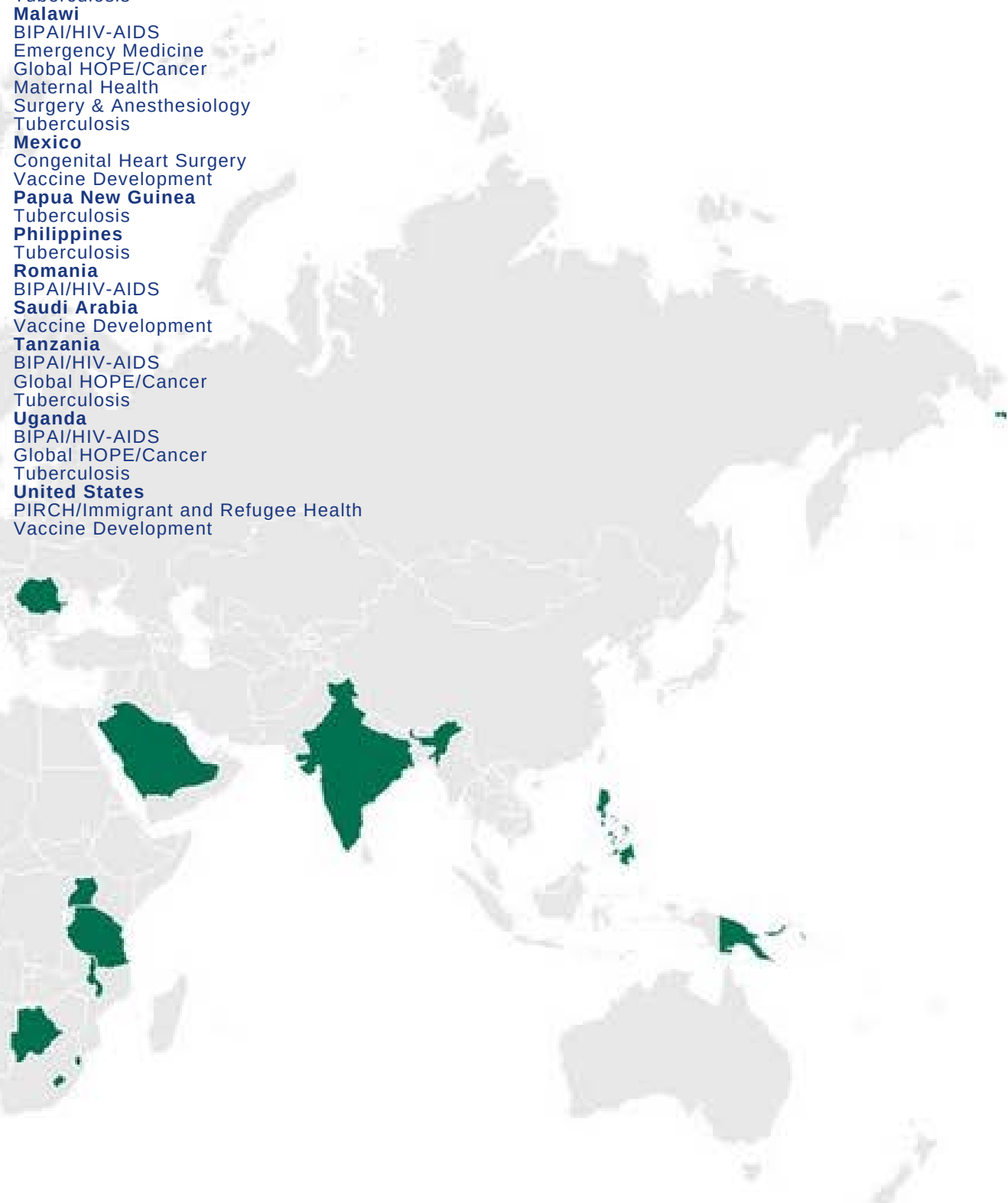
- Vaccine Development

# WHERE WE WORK



Global Health  
Network

- Lesotho**  
BIPAI/HIV-AIDS  
Tuberculosis
- Malawi**  
BIPAI/HIV-AIDS  
Emergency Medicine  
Global HOPE/Cancer  
Maternal Health  
Surgery & Anesthesiology  
Tuberculosis
- Mexico**  
Congenital Heart Surgery  
Vaccine Development
- Papua New Guinea**  
Tuberculosis
- Philippines**  
Tuberculosis
- Romania**  
BIPAI/HIV-AIDS
- Saudi Arabia**  
Vaccine Development
- Tanzania**  
BIPAI/HIV-AIDS  
Global HOPE/Cancer  
Tuberculosis
- Uganda**  
BIPAI/HIV-AIDS  
Global HOPE/Cancer  
Tuberculosis
- United States**  
PIRCH/Immigrant and Refugee Health  
Vaccine Development



# LETTER FROM THE EXECUTIVE DIRECTOR



## Opinion. Pandemic. Humanity

While 2020 put us all through the COVID-19 pandemic shock, the helplessness and the loss of life as we knew it, I think the year 2021 was the year of opinions and choices. 2021 brought within our reach several tools to deal with this pandemic. The medical staff understood better what therapeutic attitudes were more appropriate, vaccines became available, and despite the restrictions, we were able to return to work and to fulfill our mission towards patients and the community.

But 2021 was a difficult year from the point of view of the clash of opinions. All of us, patients, families, medical staff, collaborators asked questions such as "should I get vaccinated or not?" or "should I trust doctors or not?". They have affected people's morale and interactions, not only in Romania, but all over the world.

I am pleased to share with you that, despite these social divisions, the entire Baylor Foundation team has maintained the patient-centered attitude.

Our staff has actively and without hesitation implemented all the sanitary measures that have led to the protection of our beneficiaries and their families.

We have tried to be a reliable source of information and to encourage healthy choices. Our team was present at the Center of Clinical Excellence every day. We resumed screening and counseling activities at the Hep-HIV testing office in Constanța County Hospital and we restarted the outreach testing activities. We provided support for the temporary operation within the Baylor Center of Clinical Excellence to some of the medical services of the Clinical Hospital for Infectious Diseases Constanța, affected by the tragic fire of October 2021 .

I invite you to read the annual report, to find out the concrete results related to the number of beneficiaries, to discover some stories of the patients and to find information about the educational activities that we carried out. Beyond the results and photos, there are the people who made our work possible during the twentieth year since the establishment of the Baylor Center of Clinical Excellence: funders, colleagues and community partners. I thank them for their contribution, which can never be quantified completely enough. And I thank the patients and the beneficiaries in the community for trusting us in 2021 as well.

Peace and good health to all!





# IN TRANSPARENCY FINANCIAL MANAGEMENT

## Professionalism Makes the Difference

Baylor Black Sea Foundation has been delivering free-of-charge health services throughout the Dobrogea community for over two decades. And here we are, still standing and delivering care in challenging times. People rely on us being present and active in supporting them overcome hindrances. Partners rely on us knowing how to channel their donations into effective health programs. Two decades of constant efforts grew both our skills and community health outcomes.

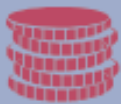
Helping people is worth doing, in spite of all challenges: effective healthcare depends on understanding local context and finding extended support - which we do here at our clinic! The results Baylor Black Sea Foundation gets each year in terms of improving the quality of life for people living with chronic infections is possible thanks to all our funders. Our donors share the same interest in living in healthier communities, and support our programs ensuring the available resources to employ in order to respond appropriately when problems arise. They chose to stay with us and support our programs through results we get in

addressing social problems like health care services for patients with chronic infections. Chronic infections and other chronic diseases are not sufficiently prevented, diagnosed and treated. It is true we find great satisfaction in working for a good cause, but bear in mind, dear reader, that we are professionals.

The donors' generosity is what allows us to take on projects that improve health and deliver quality health care in our community. Professionalism is the way we answer to the financial support. The secret of enjoying long term partnerships in respect of funding our programs stands in delivering results - the expected ones or above, ready to be successfully replicated elsewhere.

Please join me in thanking the trusting contributors supporting Baylor Romania team: they make our work possible, our results reachable, the life of our beneficiaries better. Without their action there can be no change!

## The Way We Helped Community in 2021



Total expenses: USD 691 605  
= LEI 3 024 736



● Hep-HIV Screening ● HIV Program ● Hepatitis Program

# Funds Raised in 2021



3 024 736

Romanian Leu (RON)



2 691 195 lei



93 414 lei



41 836 lei



39 600 lei

Redirecting  
3,5%  
of tax



10 462 lei

Community  
donations



125 162 lei

## In Kind Donations

Baylor  
College of  
Medicine



INTERSAT





# Programs

## HIV PROGRAM

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focused on quality of life and interventions, prevention and access to care

## VIRAL HEPATITIS PROGRAM

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counseling and guidance for treatment initiation of patients with Hepatitis B and C

## VCT PROGRAM

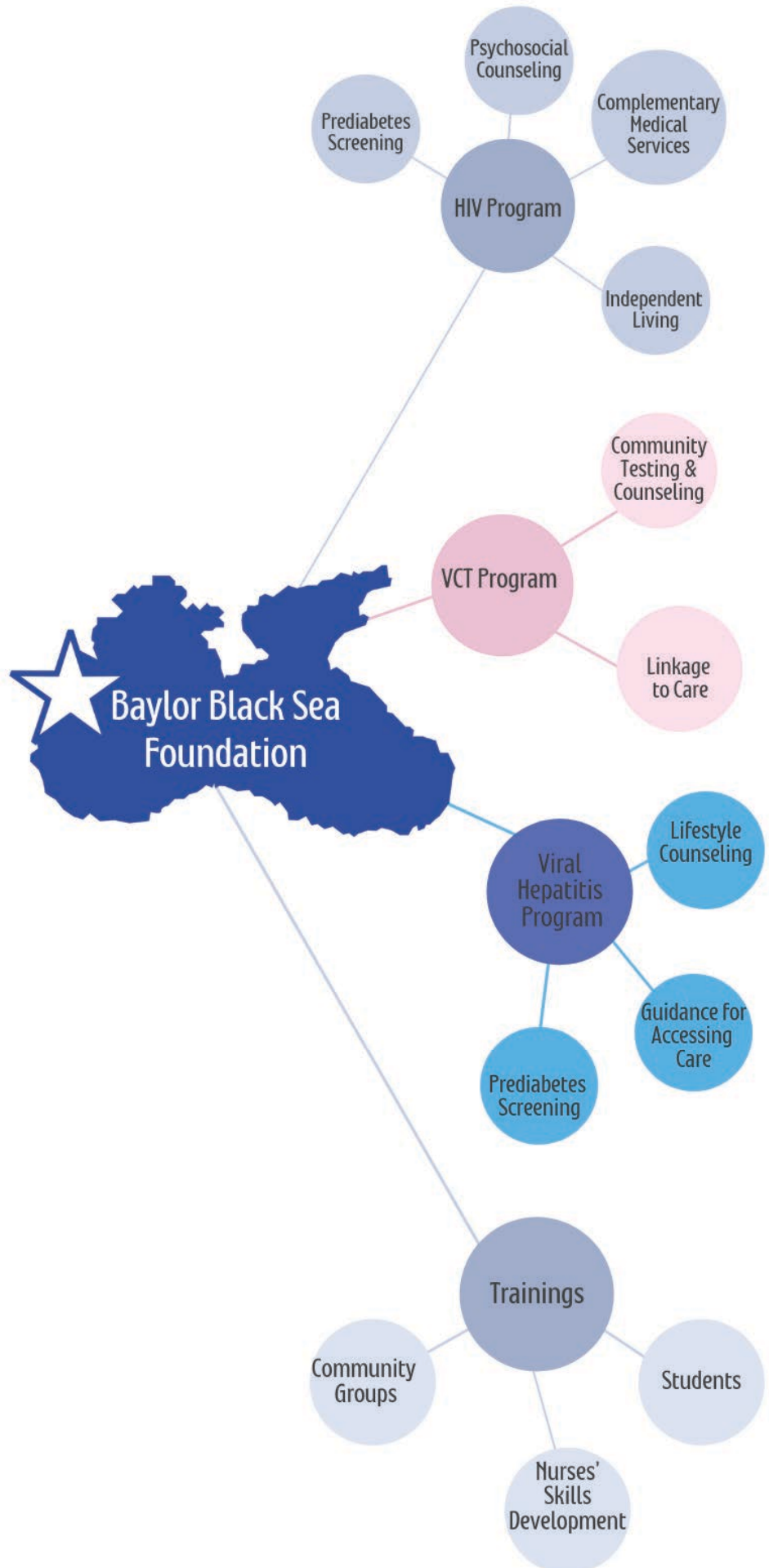
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free of charge testing for HIV and Hepatitis B and C, counseling and linkage to care


## TRAINING ACTIVITIES

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skill building for nurses in training, raising HIV and viral hepatitis awareness, students training



## VOLUNTARY TESTING AND COUNSELING

STEP 

**RAPID TESTING**

@ THE CLINICAL CENTER OF EXCELLENCE OF BAYLOR BLACK SEA FOUNDATION  
@ VOLUNTARY TESTING AND COUNSELING CENTER, POLICLINIC 1  
@ MOBILE LABORATORY

**01**

STEP 

**RISK ASSESSMENT**

3 COUNSELING ROOMS  
2 VOLUNTARY TESTING COUNSELORS  
1 DATABASE WITH INTEGRATED CALL CENTER PLATFORM

**02**

STEP 

**03** **RETESTING**

## LONG TERM CARE

STEP 

**LINKAGE TO CARE**

**01**

STEP 

**MENTAL HEALTH AND BEHAVIORAL ASSESSMENT**

**02**

STEP 

**03** **FOLLOW UP**

BAYLOR BLACK SEA FOUNDATION IN TRANSPARENCY

## YOU CAN HELP, HERE'S HOW



We would like to thank to individual persons and private businesses who donated 3.5% of the income tax, respectively 20% of the profit tax to Baylor Black Sea Foundation.

Donate today!

Baylor Black Sea Foundation  
Fiscal code: 16810410

IBAN bank account: RO34 UGBI 0000 0320 1470 2RON  
Garanti Bank Constanța

Garanti Bank clients can donate to Baylor Black Sea foundation directly through their online account (Payments/NGO donations)

Centrul Clinic de Excelență  
Spitalul Clinic de Boli Infecțioase  
Constanța  
Baylor College of Medicine  
Texas Children's Hospital  
Abbott Fund  
AbbVie Foundation

# 2021

# SHARING KNOWLEDGE

## A NEW STUDY BY THE BAYLOR ROMANIA FOUNDATION ON THE AGENDA OF THE HEPHIV CONFERENCE IN LISBON

On the agenda of the HepHIV 2021 Conference there was included the communication of the results of a study carried by Baylor Black Sea Foundation. The study regarded the knowledge about the HIV and hepatitis infections' transmission routes. The results of the study were communicated by Ana-Maria Schweitzer, as part of the team that also included Mihaela Bogdan, Florentina Stoian and Iuliana Ciocea.

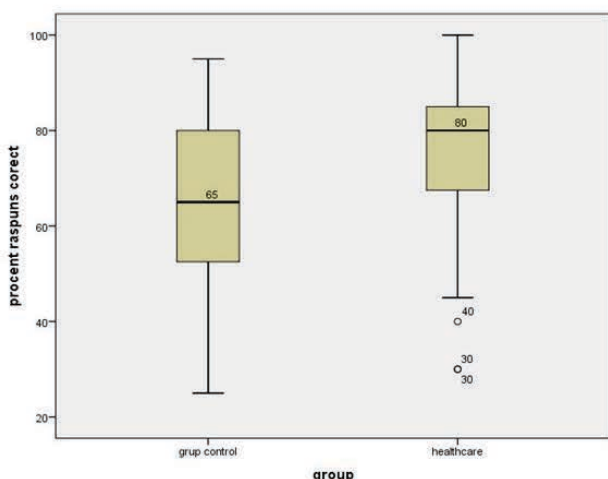
The assessment was carried out on a group of medical professionals (56 staff) and an equal number of women from the general population, the average age being 45 years, all participants coming from urban areas. In order to measure knowledge, the team designed and tested a questionnaire: respondents were asked to indicate which of the key

behaviors listed could lead to the transmission of viruses and which could not.

As expected, there was a significantly higher level of knowledge among healthcare professionals about infection transmission in situations such as living in the same home, being bitten, consuming water from the same container, sharing cutlery, sharing the toilet, kissing.

Along with Hep-HIV screening, Baylor team acts as an educator in regards of the infection risks, prevention, and transmission situations. In order increase campaigns' effectiveness, we need to know what kind of information the beneficiaries know and which are the most common and persistent myths.

## Results



Mean Score Differences among the Two Groups

HCP had higher information about transmission than the control group (F .799, sig .001, Cohen's d -.64) regarding the following items

- Living in the same household with an infected member
- Being bitten
- Drinking water from the same recipient
- Sharing cutlery
- Sharing toilet
- French kissing

The lowest level of knowledge in both groups involved transmission risks in situations like dialysis, and human and mosquito biting

# SHARING KNOWLEDGE

A NEW STUDY BY THE BAYLOR ROMANIA FOUNDATION ON THE AGENDA OF THE HEPHIV CONFERENCE IN LISBON

*The study allowed us to find out that the most vulnerable group in terms of knowledge is that of women over the age of 55, in the general population: they had the lowest level of information overall and also compared to women in other age groups in the general population." - Ana-Maria Schweitzer, executive director.*

Only 10% of the medical staff participating in the study had excellent results. In conclusion, we learned that, regardless of the group, there is still a need for clarification on risk situations related to dialysis, kissing, human bites, mosquito bites. In addition, for women in the general population, a more comprehensive information and education campaign on blood-borne viral infections would be appropriate, with a message tailored to women over the age of 55.

*"On the other hand, for the medical staff who did not have, we must admit, excellent performances, the study proves the need for recall campaigns in which myths could be dismantled or misinformation fought on the same topic." - Ana-Maria Schweitzer.*

## Results

### In the **general population:**

- Those aged 55-64 years had significantly lower information compared with 35-44 and 45-54 years in the same group,
- And this group had the lowest information level overall,
- The items with the best responses were about touching, using scissors and razors and the ritual of sworn brothers.

In the **HCP** group, there was no overall difference in knowledge over various age groups:

- The items with the best responses were about using the pool, touching, discussing at less than 20 cm and having unprotected sex.

### About the event:

The HepHIV 2021 conference in Lisbon took place between 5 and 7 May, in hybrid format. The event brought together representatives of academia and politics as well as civil society. The HepHIV 2021 conference facilitates the communication of best practices in the field of integration of prevention and screening services.



*"For women in the general population, a more comprehensive information and education campaign on blood-borne viral infections would be appropriate, with a message tailored to women over the age of 55."*

# SHARING KNOWLEDGE

IMPROVE THE HEALTH OF NEWLY DIAGNOSED PATIENTS THROUGH LINKAGE TO CARE SYSTEM AND ANTIRETROVIRAL THERAPY, DECREASING THE RISK OF TRANSMISSION

The study "Frequency of behavioural change techniques for preventive interventions aiming ART adherence among newly diagnosed HIV patients in Baylor Clinic was carried out by Ana-Maria Schweitzer, Mihaela Bogdan, Alexandra Androne, and Elena Rizea.

Newly diagnosed people living with HIV need support with adjusting to being adherent to the antiretroviral therapy. The psychosocial department has created a treatment acceptance and prevention of non-adherence program for the new cases enrolled. We wanted to evaluate the impact of this program, at 12 to 24 months after initial diagnosis; a second objective was to identify which behavioural change techniques were used most by the psychologists and thus have the potential to represent a good mix for adherence monitoring sessions.

29 patients were enrolled (79% men), 82% diagnosed in 2019 and the rest for more than 12 months. 16 patients were formally assessed with the Medical Readiness Questionnaire (MRQ) before initiation of HAART. After initiation, all patients received an average of three follow up sessions conducted by trained clinical psychologists. After the sessions, patients were reevaluated for adherence, viral load, quality of life and attitude towards treatment (self-report). For the second objective, we extracted from the database the techniques psychologists used for each patient and ranked those based on frequency.

All patients received at least one intervention to support adherence. The entire group evaluated cross-sectionally had undetectable viral loads, and all were adherent to treatment per self-report. Only 41% reported a good quality of life and 93% reported positive attitudes towards the treatment. Patients classified as ready per MRQ did not display better outcomes compared with those not evaluated in the context where all received support interventions. Psychologists used most frequently the following techniques: Biofeedback, Psychoeducation, Feedback on behaviour, Social reward, Social support (unspecified).

The usefulness of the MRQ remains to be assessed in our clinic, as the preliminary data did not include patients that could be classified as „not ready” and in this context they cannot be compared with patients that were not formally evaluated. The assessments show that all patients had excellent outcomes one-year after initiation in the context of support interventions that focus mainly on feedback, education and social support. Future work should establish if the constellation of behaviour change techniques is different for patients not ready for HAART initiation.



# SHARING KNOWLEDGE

IMPROVE THE HEALTH OF NEWLY DIAGNOSED PATIENTS THROUGH LINKING THEM TO THE HEALTH CARE SYSTEM AND ANTIRETROVIRAL THERAPY, DECREASING THE RISK OF TRANSMISSION

The Baylor Romania's study shown that brief interventions for newly diagnosed HIV patients were associated with a better understanding of the disease, a higher rate of treatment acceptance and adherence.

## WHAT OUR PATIENTS SAY

G.G.: *"What the counseling sessions helped me understand, is that there's a solution for every situation. It is not easy, especially now, with the COVID-19 pandemic and all the restrictions it brought, but I know where to ask for help and get it."*

L.M.: *"I received counseling services at the clinic and by phone as well and it helped me to adjust and continue to remain focused on health decisions. I always keep in mind a sort of mantra: Learn from yesterday. Live for today. Hope for tomorrow."*

E.V.: *"From the start of the pandemic I felt I am cared for. At the beginning, when strict measures were applied and practically all closed down, we remained in contact with Baylor Romania. The staff made sure I continue to take the same care of myself and don't discontinue the therapy. Usually, I came to the clinic to receive the formula milk for my newborn daughter, but, when pandemic restrictions came into force, the outreach team came to my door and brought it, checking on our health as well."*

C.M.: *"I am one of those still not knowing how I got infected, but that's all right now. My children are all right, without HIV, already young adults, and I maintain for many years now, thanks to therapy, the undetectable virus level. Counseling played a major role in accepting the diagnose and observing the care routine. I am into a relationship for some years, happy and planning for the wedding immediately the restrictions cease. Yes, I believe I am alright."*

## WHAT DOCTORS SAY

Roxana Cernat, infectious disease specialist, PhD, the Clinical Infectious Diseases Hospital, Constanța:

*"Under the burden of the pandemic, life is much sadder, for the medical staff and patients altogether. Our patients continue to receive good services, they remain central and around them there's a team of different specialists collaborating to find solution to their particular health issues. During the SARS-CoV-2 pandemic we saw clearer the advantage of having the integrated long term care in collaboration with Baylor Romania under the same roof. Our colleagues at Baylor Romania have a very good psychological department!"*



# SHARING KNOWLEDGE

## IS IT STILL POSSIBLE TO CHANGE ATTITUDES AMONG PEOPLE WITH HIV WHO DO NOT WANT TO BE VACCINATED AGAINST COVID-19?

Coronavirus shows us how fragile we are when science does not have the tools to counteract new dangers. People diagnosed with a chronic disease are even more vulnerable. The list includes HIV despite the fact that for many years already it has been a long-term, successfully manageable infection.

People living with HIV are a group of increased vulnerability to new coronavirus infection. COVID-19 has raised the level of attention concerning the HIV patients in certain situations, such as: CD4 lower than 50, opportunistic infections in the past 6 months, associated diseases - asthma, COPD, diabetes, heart disease, kidney or liver disease, Parkinson's disease, multiple sclerosis, severe obesity or other medical conditions. All these health factors increase the risk of developing a serious form of the COVID-19.

In order for the interventions to achieve their goal of increasing the immunization rate, at Baylor Romania

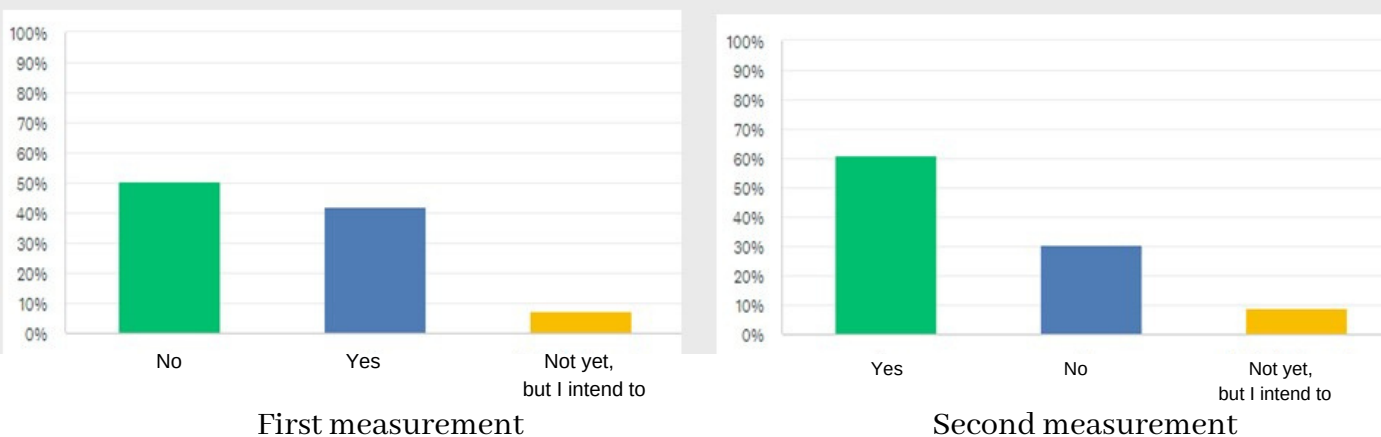
we assessed the attitudes towards vaccination - acceptance, ambivalence or rejection, aiming to understand what are the main reasons behind them.

In the study participated 135 people, 39% of whom were women, all residing Constanța County and beneficiaries of the Baylor Foundation's services. The average age of the respondents was 34 years.

*“The data we obtained during the study show that the attitudes and vaccination rates of people living with HIV in the Constanța region are similar to those of the general population. The next steps our team took consisted in adapting a psychosocial intervention for each group, the undecided and those who reject vaccination. We can use education, persuasion and social influence in clinical interventions to encourage these groups to accept vaccination.” – Ana-Maria Schweitzer, executive director of the Baylor Black Sea Foundation.*

### Registered Changes of Vaccinal Statuses

- „No” from 51% → 30%
- „Yes” from 41% → 61%





# SHARING KNOWLEDGE

IS IT STILL POSSIBLE TO CHANGE ATTITUDES AMONG PEOPLE WITH HIV WHO DO NOT WANT TO BE VACCINATED AGAINST COVID-19?

## Attitudes and rates of vaccination in people living with HIV, Baylor study results:

Most of the study participants (80.8%) reported that they had not experienced the new coronavirus infection. However, only 41.7% were vaccinated, 52.5% did not and 5.8% intend to do so.

In the case of vaccinated patients, examination of the main reasons showed that the majority (54%) were vaccinated out of a desire to prevent infection, followed by the desire to work and travel (21.6%) and not to be afraid that it could infect other family members (9.8%), followed by the positive example of others who got vaccinated and feel good, fear of COVID-19 complications.

Common reasons among undecided patients: fear of not having a serious form of the disease (42.1%), desire to work and travel (24.6%), fear of not making their family sick (17, 5%).

The most common reason for refusing the vaccine is the fear of the vaccine itself (54.65%), followed by the belief that COVID is not a serious disease (21%) and the belief that the respondent cannot become infected (7%), followed by not knowing anyone who got ill (7%) and those who follow the medical advice and not take the shot (6%).

The study also showed that 31% of the entire group said they want to know more about the vaccine - the positive aspect of this information is that 40% of them are from the groups of those undecided or those who reject the vaccination. Therefore, communication on vaccination remains possible, including with those who say they do not want to be vaccinated.

The assessment of expectations of receiving care from vaccinated health professionals showed that: 39.6% of study participants agreed, 50% stated that they were not interested in the vaccinal status of the health care providers, and 10,4% believe that no one should receive a vaccine.

The study shows no significant differences in vaccination rates when comparing the groups according to gender or previous COVID-19 status.

*“Following the study, our team developed psychosocial interventions and worked with patients to tip the scales in favor of vaccination. Contacting the patients, I noticed that some of them were waiting to find out directly from the specialist that the vaccine is recommended for them, the discussion with the communicable diseases doctor being exactly the motivation they needed. For these situations, we already had a series of video messages prepared in collaboration with the infectious disease doctors from Constanța that we were able to send to the patients. Interactions with our beneficiaries have shown a great need for accurate information and validation by doctors specialized in infectious diseases. The direct approach to the subject of vaccination by psychologists and social workers at Baylor has helped many patients to draw an action plan, to talk to the doctor or even to go to the vaccination.” – Ștefania Mihale, medical programs development director*



# SHARING KNOWLEDGE

CONTRIBUTION TO THE CONTINUOUS PROFESSIONAL TRAINING OF PSYCHOLOGISTS AND SOCIAL WORKERS

Ovidius University, Constanța

Ana-Maria Schweitzer presented solutions for identifying the psychological and social needs of institutionalized elderly in the workshop **“Interdisciplinary approach to institutionalized elderly”**.

The event was hosted by the Faculty of Psychology and Educational Sciences and was coordinated by Assoc. Prof. Dr. Laura Rodica Giurgiu and Lecturer Dr. Marinela Grigore. Psychologists, social workers and students attended the workshop.

*“In this professional dialogue we highlighted the importance of integrated measures provided to the elderly in residential institutions, in order to maintain the quality of life at an optimal level.”* - Dr. Laura Rodica Giurgiu.

*“I am pleased to be invited to present solutions to identify the psychological and social needs of institutionalized seniors. The Faculty of Psychology and Educational Sciences at Ovidius University is one of the higher education institutions with which we have one of the longest collaborative relationships. Our team's experience in adherence to treatment for people with chronic illnesses is appreciated by the professional community, and is useful to all specialists who work with people undergoing medical treatment for longer periods of time.”* - Ana-Maria Schweitzer, Executive Director

The participants have the opportunity to learn about: methods and techniques for the psycho-social assessment of the elderly, tools used to assess treatment adherence for people with chronic diseases, methods and techniques used in the interdisciplinary approach of the elderly and the family.



# SHARING KNOWLEDGE

CONTRIBUTION TO THE CONTINUOUS  
PROFESSIONAL TRAINING OF PSYCHOLOGISTS  
AND SOCIAL WORKERS

Ovidius University, Constanța

Adherence to treatment, a topic of interest for future psychologists and social workers, presented by lecturers of the Foundation for future psychologists and social workers in the workshop **"The role of the multidisciplinary team in maintaining adherence to treatment for HIV-positive patients"**.

The event was organized at the initiative of the university lecturer. Dr. Floricica Mariana Călin, director of the Department of Psychology and Social Work at the Faculty of Psychology and Educational Sciences of Ovidius University.

Baylor Romania's lecturers were Mihaela Bogdan, clinical psychologist, director of programs at the Foundation, Alexandra Androne and Elena Rizea, clinical psychologists and Florence Niculaie, senior social worker.

The 70 students and masters learned details about the Baylor Black Sea Foundation and the categories of services the organization offers in the community and addressed topics on:

- The role the psychologists and social workers play in the long-term monitoring of people living with HIV, and
- Psychological aspects related to adherence to the life-long treatment with antiretroviral drugs.

Participants also shown high interest in learning about:

- Types of reactions that can be expected by the counselor when communicating a reactive result to a person being voluntarily screened for Hep-HIV,
- How patients' beliefs influence adherence,
- Life expectancy of people living with HIV,
- Adherence and quality of life of the chronically ill patients,
- Medical, psychological and social monitoring of women living with HIV during pregnancy and later, of mother and child until the age of 18 months, when the seronegativity of the latter is confirmed.



# SHARING KNOWLEDGE

## CONTRIBUTION TO THE CONTINUOUS PROFESSIONAL TRAINING OF PSYCHOLOGISTS AND SOCIAL WORKERS

Babeş-Bolyai University, Cluj

The students Faculty and Masters' program students in UBB University attended a workshop on "The Adherence to Treatment – the Case of Life-long treatment of PLWHAs at the Baylor Romania COE.

The initiative belonged to Adriana Băban, Professor of Health Psychology, Behavioral Medicine & Psychosomatic, and Qualitative Research Methods.

*"I am confident that the future psychologists I virtually met in Cluj will be able to approach the issues*

*related to the treatment adherence with more confidence: I've witnessed interest and engagement from their part.*

*Thanks to the information and the case study I presented, as well as the long Q&A session at the end, practical examples from the day by day activities of a clinical psychologist provided the needed insights on issues related to adherent behavior, measurement of adherence, use of assessment tools."- Ana-Maria Schweitzer, the guest lecturer*



# SHARING KNOWLEDGE

CONTRIBUTION TO THE CONTINUOUS  
PROFESSIONAL TRAINING OF PSYCHOLOGISTS  
AND SOCIAL WORKERS



Alexandru Ioan Cuza University, Iași

Ana-Maria Schweitzer was invited to be the guest lecturer within the “Behavior and health risks” program.

Dr. Daniela Muntele, from the Faculty of Psychology and Educational Sciences at Alexandru Ioan Cuza University, had the initiative:

*“The work of the Baylor Center, with its extraordinary features in terms of the role of the psychologist in the care of the chronically ill patients demonstrates that a rigorous psychological practice, systematically based on valid theories, is not only possible in our country, but it is also desirable. The interaction with our students had a strong informative character and facilitated improvement, both in patient care and in collaboration with health professionals, not familiar with psychology.*”

*The Masters’ students learned about the Baylor Center’s history and progress over the past decades. They understood much better than before that elements such as socio-cognitive theories clinical psychology or pharmacopoeia-type taxonomies regarding behavioral change techniques are worth the effort to be studied because they are actually useful in psychological assessment and intervention.”* - Daniela Muntele

*“I was very happy to respond to the invitation of Dr. Daniela Muntele. Meeting the Masters’ program allowed me to present them a personal perspective on the research career a clinical psychologist can have.*”

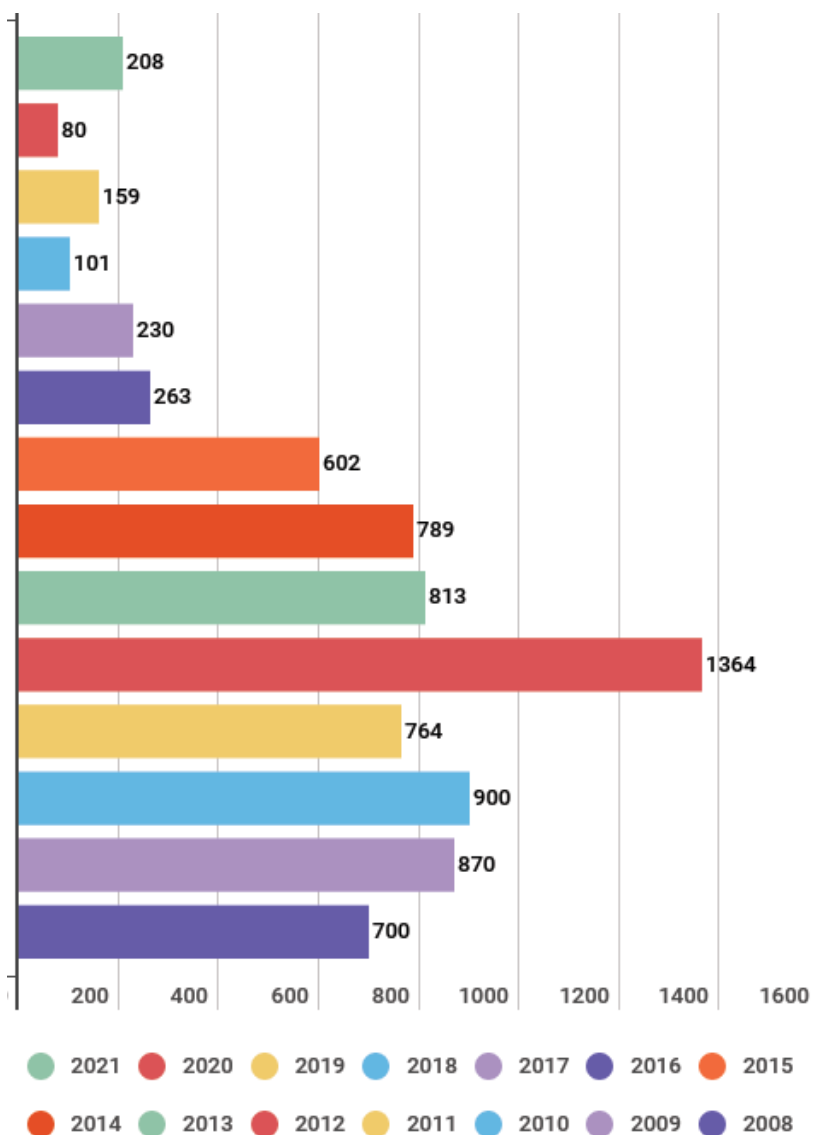
*Speaking to the Masters’ students about the activities at the Baylor Center of Clinical Excellence, about the long-term care services for people with infections and other chronic illnesses, I answered a series of questions such as:*

- *How can we prove the usefulness of the work as a clinical psychologist?*
- *How can we create a useful electronic record for the clinical psychologist?*
- *What are the advantages of modern technology and how can we use them?*
- *How useful may virtual counseling be? How can we integrate it into routine care?*

NOVA

# SHARING KNOWLEDGE

CONTRIBUTION OF BAYLOR BLACK SEA FOUNDATION TO THE CONTINUOUS PROFESSIONAL TRAINING OF MEDICAL STAFF, PSYCHOLOGISTS AND SOCIAL WORKERS



CONTRIBUTION TO THE CONTINUOUS PROFESSIONAL TRAINING OF PSYCHOLOGISTS AND SOCIAL WORKERS



“Ștefan cel Mare” University, Suceava

*"I was very happy to have the opportunity to hear from such an experienced specialist like Florica Niculaie what are the services and the role of a social worker in working with people living with or affected by HIV.*

*The COVID-19 pandemic raised barriers in training the future social workers, namely the practical training due to the lack of contact with specialists by limiting the access in institutions and non-governmental organizations." - Sergiu Raiu, assistant professor at the Faculty of Social Work, “Ștefan Cel Mare” University of Suceava.*

*"I enjoyed being able to interact with students from Suceava. I led them through a familiarization journey with the specifics of the social worker current professional activity in the field of prevention/reduction of risks associated with chronic Hep-HIV infections. In such occasions I perceive the multi-faceted value of my field experiences, after two decades of professional activity as a member of Baylor Romania team.*

*I discovered my work can help future professionals to “map the field” in which they will operate and to identify early in their professional training the working tools they will need.” - Florica (Florence) Niculaie, senior social worker*

# SHARING KNOWLEDGE

## PHLEBOTOMY, INTRAMUSCULAR AND INTRADERMAL INJECTIONS TRAINING FOR STUDENTS AND JUNIOR NURSES

**“George Emil Palade” Medical High School and College and “Pro-Scientia” Medical School, Constanța, all year-round training**

Phlebotomy, intra-muscular and intra-dermal injections training continue to prove its sustainability.

Adapted to the conditions of the pandemic and responding to a pressing need for professionalization, development of the practical skills of the medical staff, the training allows students of the various medical schools to compensate for the lack of practice activities in medical institutions.

The training reports a three years' continuity. In 2020 and 2021, the project received OMV Petrom funding to secure the material base: the funds were used to develop and maintain the complete set of molds for venous puncture, intramuscular and intradermal injections.

Before entering the practical training, the students have the opportunity to go through, guided by Dr. Cristina Maria Pătrașcu, family doctor with competencies in emergency medicine and Negivan Septar, head nurse, an extended theoretical module. The course also gives participants the opportunity to assess their knowledge.

The long experience of the mentors contributes both to the clarification of all the theoretical and practical aspects as well as to the enrichment of the course with lessons learned during their career in the field of medical services.

*“Our team is confident in the potential of new methods of education and medical practice based on simulation. These practical sessions allow us to gain the correct professional knowledge and skills, and what we enjoy the most is the fact that we can contribute to the formation of the new generations of medical staff.”* – Cristina Maria Pătrașcu, family doctor

*“It remains essential for the new generations of professionals who have had the misfortune of facing pandemic during their years of professional training, to have access to learning the techniques they are going to apply to future jobs. In a very special sanitary context, we organize this training ensuring the both participants' safety and skills development making the most of the existing simulation endowment.”* – Negivan Septar, head nurse

*“Our partnership with OMV Petrom transforms the promise of the Baylor Black Sea Foundation to ensure the transfer of knowledge and skills into a sustainable program that has the potential to transform us into partners of health schools in Constanța County.”* – Mihaela Bogdan, program director at the Baylor Black Sea Foundation.

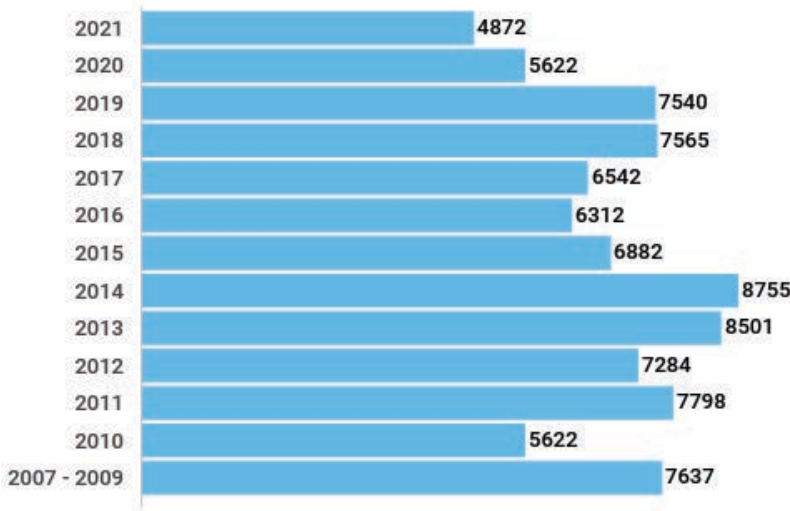


# PROFESSIONAL SERVICES - SCREENING

SCREENING CAN'T WAIT!  
WE PROVIDE FREE-OF-CHARGE HEP-HIV SCREENING IN GENERAL POPULATION SINCE 2007

## OVERALL HEP-HIV VOLUNTARY TESTS PERFORMED

 90 932



In the world, every 30 seconds, a person dies from a disease associated with liver infection. Every 30 minutes, a person finds out their serological status, free of charge at one of the permanent or at the mobile Hep-HIV screening centers.

One may have viral hepatitis without knowing it because in most cases hepatitis progresses silently to severe and irreversible stages of the disease.

Treatment can't wait! Access to treatment for those diagnosed is life-saving.

Urgent action is needed to make the global hepatitis eradication strategy a reality and Baylor Black Sea Foundation has been working in this direction since 2007, offering pre- and post-testing counseling services to all those addressing the service.

Addressing the service is voluntary, either if the persons consider that they have been exposed to a risk of infection and want to know their status, or following a medical referral.

The screening for hepatitis B and C and HIV is one of the free-of-charge services we provide: we are able to maintain its continuity in two fixed test centers in Constanța and with the help of a mobile testing unit. The Hep-HIV screening program receives funding from AbbVie Foundation since 2007.



*“The outreach screening with the support of the mobile testing team is a success. Our colleagues have managed, under pandemic restrictions, to provide Hep-HIV screening to a quarter of the overall beneficiaries of the program in 2021.*

*Hence, there are over 1000 people who, otherwise could not have the means to present themselves to one of the permanent centers in Constanța, due to health reasons, transportation costs, long distance or lack of information. The fact that a significant number of people are now aware of their serological status and could identify, as a result of counseling, the possible risks of infection to be able to avoid them in the future, is an achievement.” – Mihaela Bogdan, programs’ director*



# PROFESSIONAL SERVICES SCREENING

A LESSON FROM THE FUTURE  
IN THE EUROPEAN COUNTRY WITH THE MOST  
PREADOLESCENT BIRTHS, YOUNG PEOPLE DO  
NOT HESITATE TO BE TESTED

The European Testing Week gives us the opportunity to extend communication throughout the community.

Here are some of the questions my colleagues on the mobile Hep-HIV counseling screening team answered when meeting young adults in such an activity:

- *“What are the symptoms of HIV?”*
- *“Is it true that you can have a healthy baby if you have HIV or hepatitis?”*
- *“How do you know if you have hepatitis?”*
- *“What is the difference between hepatitis B and C?”*
- *“Is there a cure for hepatitis B Healing?”*
- *“If one of the partners has HIV, can the couple still have safe sex?”*
- *“Well, even if my liver tests are good and I have no symptoms, how can I have hepatitis and why isn't this seen in regular blood tests?”*
- *“If I am not yet 18 years old, why is it mandatory for me to get the result of the HIV test in the presence of a parent? I already have the written consent of my parents to test me!”*
- *“Why is it so important that test results are kept confidential?”*

*“In Romania the number of infections with HIV, HVB and HVC remains elevated. I believe that the information and testing initiatives carried out during European Test Week are very useful.*

*All our field activities strengthen our belief that young people want to learn health information from specialists, they are concerned about their health status! We have reason to be optimistic if we evaluate the reaction of the beneficiaries of our counseling and screening services in the community.*

*Certainly, the diversification of health education, information and counseling services would be welcome: we see great needs and expectations in the community.*

*We would be happy to see that future public health policies take into account the interest of the general population in the screening services. These services should be more accessible not only in terms of price, but also geographically and administratively.” – Ana-Maria Schweitzer, Executive Director*



# PROFESSIONAL SERVICES - SCREENING

## OUTREACH HEP-HIV SCREENING AS SEEN THROUGH THE EYES OF THE BENEFICIARIES

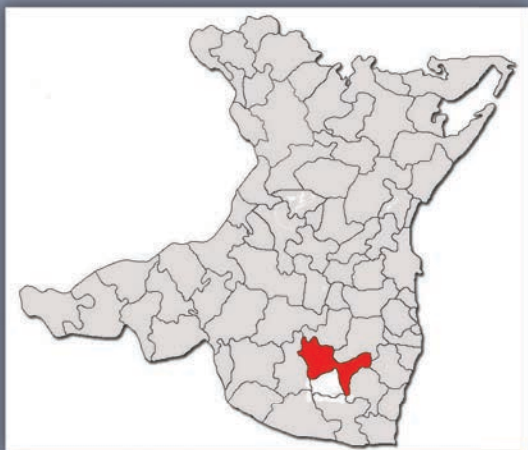
**Daniela Ileana Grigore**, Italian language teacher, host of the event and coordinator of the activity on November 26 at the George Călinescu Theoretical High School, said: *"It was a success! The high school students were interested, open, receptive and responsible. They received pre-test counseling, information on blood-borne infections. Those over 18 years old also enrolled for Hep-HIV tests. I consider it is important for students to know how these silent and deadly infections are born. It helps them avoid future risks. I am satisfied when I see that the interest in health among students is high. The number of students interested to take part in the activity was higher. However, due to health restrictions it was not possible. We are counting on your return for the next edition of the European Testing Week, in May 2022!"*

**Ferihal Omer**, the event coordinator at G.E Palade High School and Medical College, said: *"The Hep-HIV screening will be part of the annual evaluation throughout the future medical careers of our school's graduates. We appreciate the professionalism of the testing team and here I have to mention the customized counseling including a discussion on the occupational risks to which the staff may be exposed while performing medical maneuvers."*

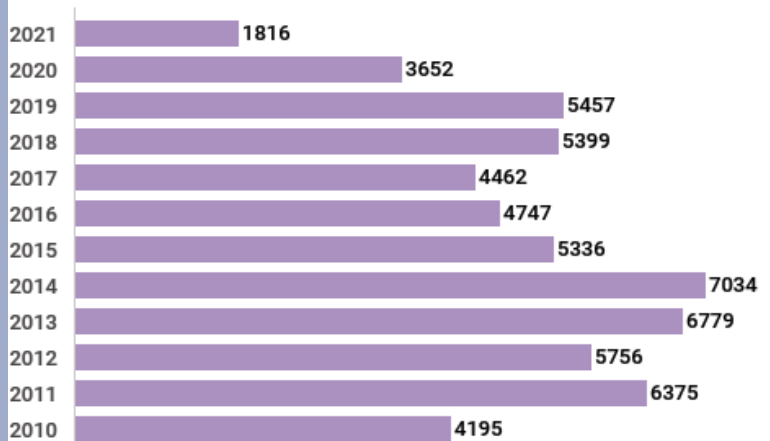
**Iuliana Costaş**, testing counselor: *"In 2021 we went to a lot of testing activities in the region with the mobile laboratory. I have to tell you that I discovered the value of the partners. We collected high and low experiences and this makes me to appreciate even more the involved partners, those I had the privilege to meet in some distant places in our county. We have found professionals for whom the involvement and concern for the health of the community can be seen! For example, the social worker, the family doctor, the local mayor from Amzacea\* (in red on the map Dobrogea region).*

*They all collaborated in organizing one of the most successful outreach screening activities. They announced the testing opportunity, and provided us a generous space for counseling and testing. We offer free services but there are significant costs behind: with the human resources, materials, transportation, equipment – behind us who make the forefront there's a team that writes projects and obtains funds for us to go out and provide screening services.*

*That is why we are happy to see that our hosts appreciate our presence in their community, they help us to comply with the sanitary measures and provide us with up-to-date information about the evolution of the pandemic at the local level. Beyond these issues, the most important thing is that people who would not otherwise have had access to rapid testing and, when the case, to confirmation through specific tests, continuing afterwards to benefit from Baylor Foundation's free long-term care services."*

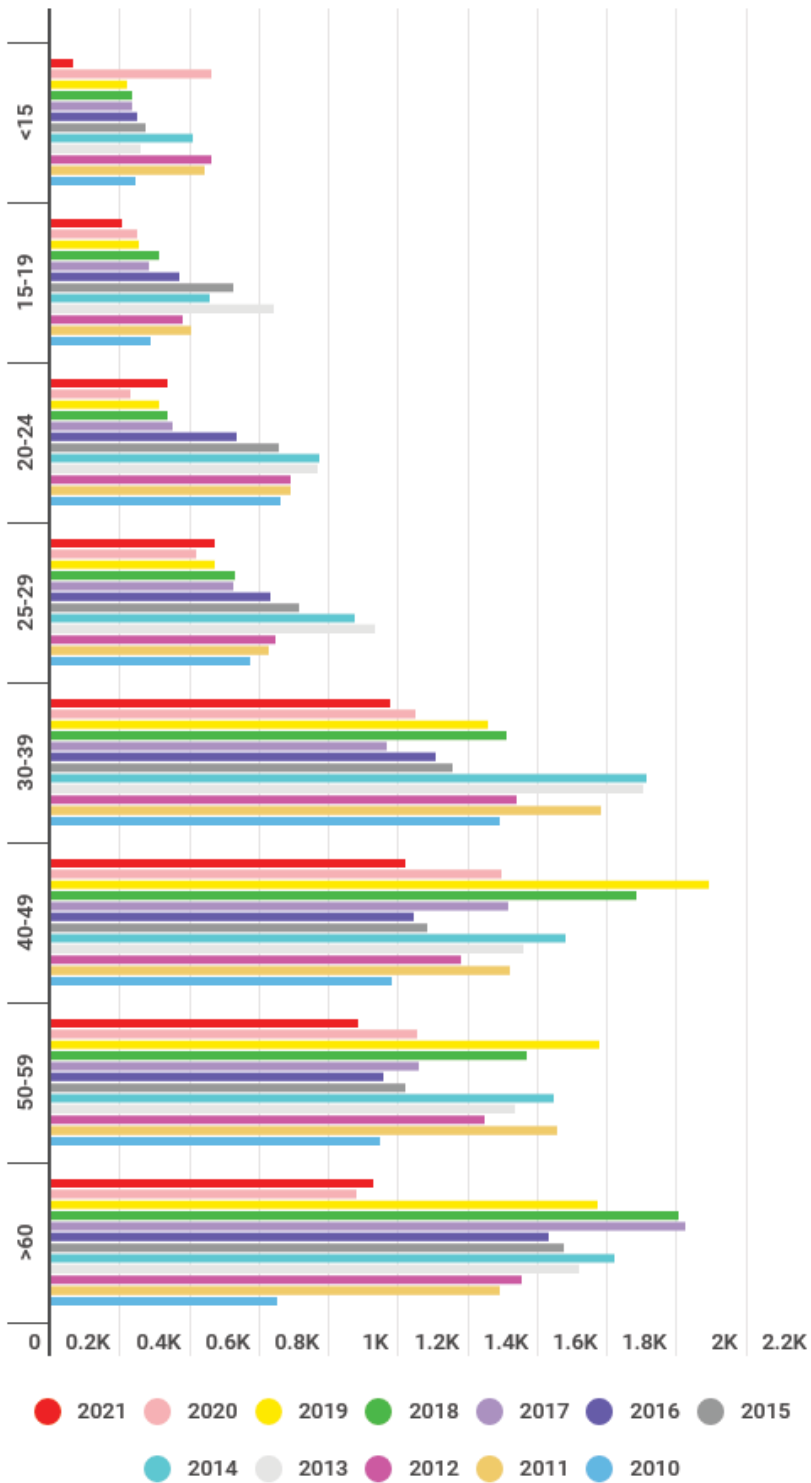


## OUTREACH HEP-HIV SCREENING

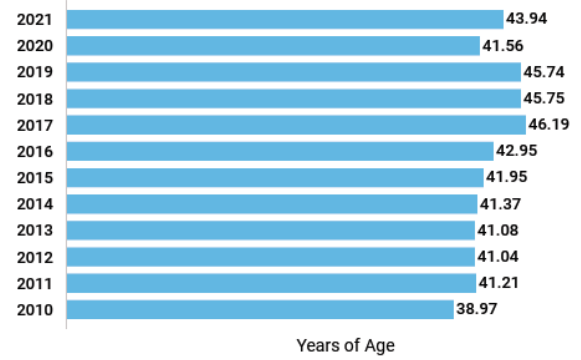


# PROFESSIONAL SERVICES - SCREENING

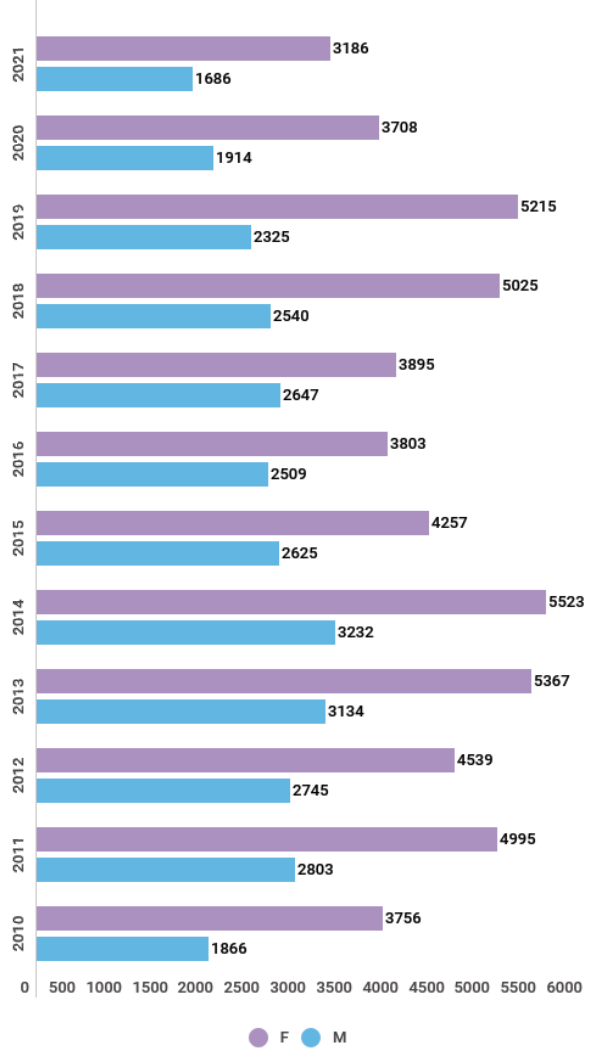
## Age Based Distribution of Tested Persons



## Average Age of Tested Persons

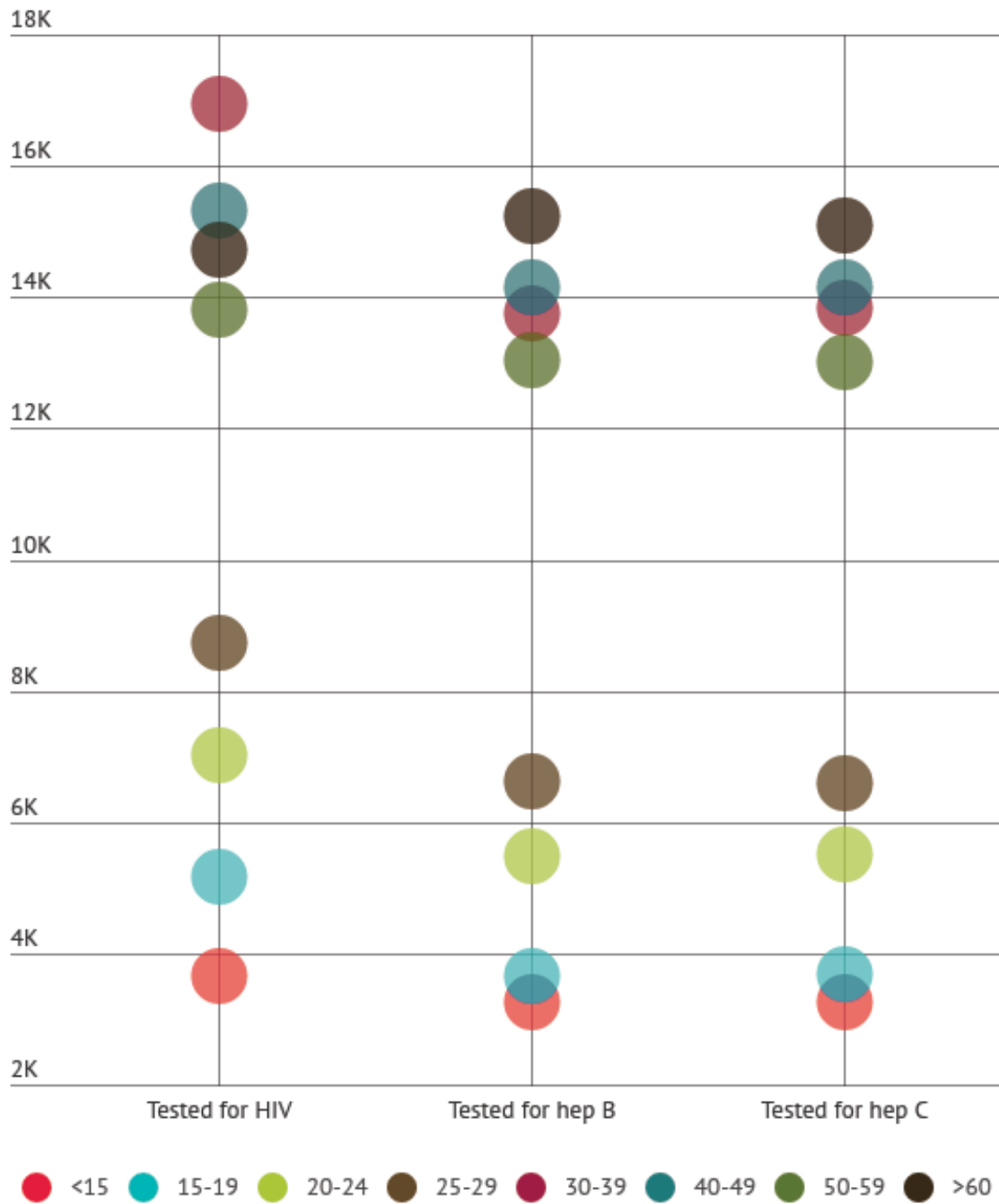


## Gender Based Distribution of Tested Persons



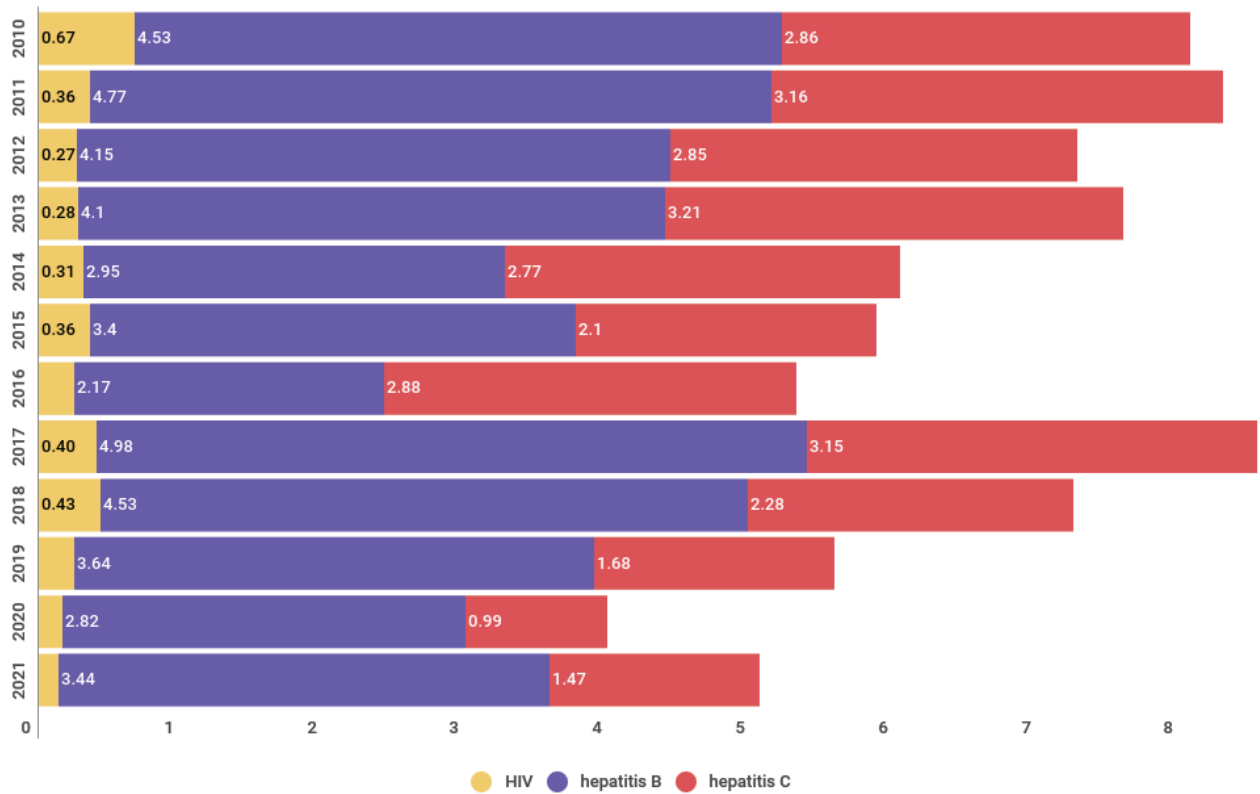
# PROFESSIONAL SERVICES - SCREENING

AGE DISTRIBUTION OF BENEFICIARIES OF THE HEP-HIV VOLUNTARY SCREENING PROGRAM, 2007 - 2021



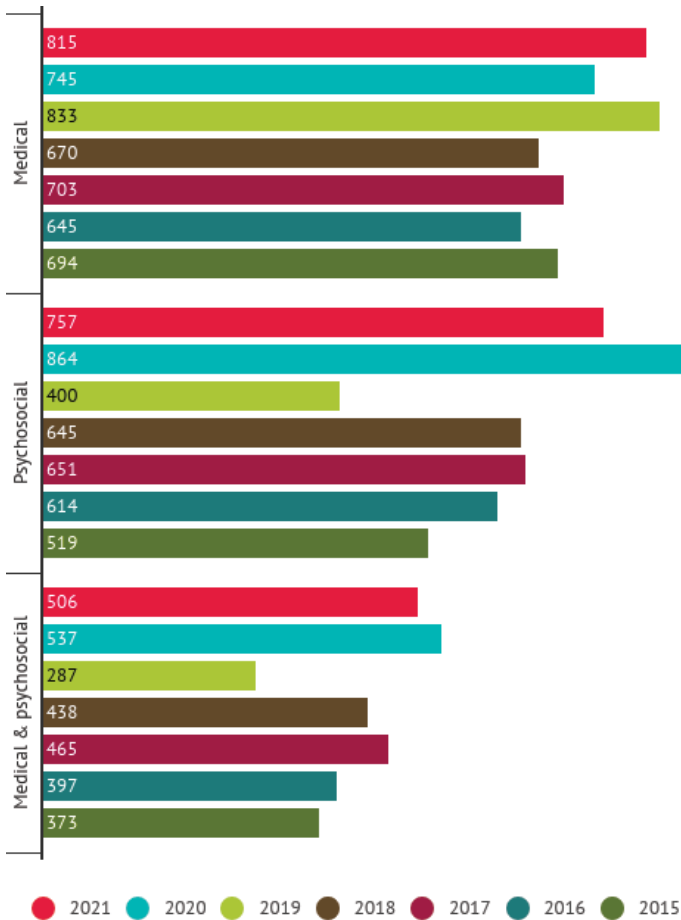
# PROFESSIONAL SERVICES - SCREENING

HIV, HVB, AND HVC PREVALENCE IDENTIFIED THROUGH THE VOLUNTARY COUNSELING AND TESTING PROGRAM AT BAYLOR BLACK SEA FOUNDATION



# PROFESSIONAL SERVICES - HIV

THE NUMBER OF PLWHA REQUESTING SERVICES AT BAYLOR BLACK SEA FOUNDATION



PSYCHO-SOCIAL SERVICES: WE SUPPORT PEOPLE LIVING WITH HIV FIGHT MENTAL ILLNESSES AND NEUROCOGNITIVE IMPAIRMENT THEY EXPERIMENT

Baylor Black Sea Foundation integrated since the start specialized services for these conditions into the long-term care system in order to ensure PLWHAs quality of life, maximize independence, and their engagement in community activities.

Mental health services integration is important and Baylor Romania may provide proven track of support services designed to:

- a. enhance patient's capabilities to help themselves and efficiently manage their health, maintain their identity and meeting their lifelong objectives,
- b. supporting any family or friends who may need assistance,
- c. while also maximizing engagement from all institutional partners – hospitals, specialized medical practices, academia as well as the local community.

*"HIV impacts the brain, mood and energy levels of those living with it. It can make them more prone to mental illnesses like depression which will seriously compromise their ability in daily activities as well as social relationships.*

*Mental illness is something that affects many of the people living with HIV; they may also develop neurocognitive impairment or other conditions. It is the psycho-social department mission to sustain the well-being and the health-related quality of life of our beneficiaries, people living with or affected by HIV. And our task is facilitated by the constant knowledge transfer and best practices Texas Children's Global Health fosters within the worldwide organization."* – Mihaela Bogdan, programs coordinator



# PROFESSIONAL SERVICES

37% OF PEOPLE LIVING WITH HIV WHO RECEIVE SERVICES AT BAYLOR HAVE TO DEAL WITH AT LEAST ONE ISSUE RELATED TO QUALITY OF LIFE AND SATISFACTION WITH LIFE.

The mental health of the chronically ill is a priority for Baylor Black Sea Foundation. Our approach is, since the establishment of the Foundation and the drawn of the main directions of action, a patient-centered one, which integrates medical and psychosocial services. Our psychosocial services include assessment and support for the management of mental health issues.

*"Patients living with chronic diseases go through stressful and difficult experiences, which test their physical and psychological strength. Consider, for example, stigmatization, the stress associated with diagnosis, difficulties in following medical treatments and interventions, or simply difficulties in the medical system. In addition, each patient has a private life, which can mean trauma, loss, conflict. All of this has an impact on mental health. International It is important that care plans are expanded to include more comprehensive patient care."* – Ana-Maria Schweitzer, executive director of the Baylor Black Sea Foundation.

## **The integration of mental health services**

The HIV infection has been considered a chronic disease for many years. From the medical point of view there are now sufficient information and therapeutic formulas to manage with good and very good results the infection, comorbidities. However, the diagnosed people diagnosed still feel the burden of living with HIV in many ways.

These people, in addition to the need to successfully manage the administration of long-term drug treatment such as antiretroviral therapy, need access to a wide range of health services that include: prevention, treatment and management of comorbidities; mental health and neurocognitive disorders; sexual and reproductive health counseling and support.

Mental illnesses such as depression and neurocognitive disorders have an increased incidence among people living with HIV. They cause a decrease in energy levels, influence the mood and the ability of individuals to perform activities of daily living and to engage in social relationships. These add to the burden of diagnosing chronic infection. If they are not diagnosed in time and no therapeutic solutions are applied, they can seriously compromise the quality of life, amplifying health problems.

Mental health problems diminish the self-management capacity of the health issues and can undermine adherence to treatment, which is essential for the care of the HIV patient.

At the Baylor Black Sea Foundation, we provide long-term multidisciplinary care services to people living with HIV. They also require systematic coordination and a personalized approach: we make sure that relevant services are provided, that - from the beneficiaries' point of view, access is easy, that medical specialties consider patient safety (for example, in relation to interactions of the administered drugs). Our way of working allows and encourages communication between the different care providers involved.

Long-term care for people living with HIV should therefore integrate services to assess and manage any mental and neurocognitive health issues, including access to psychosocial support.

Our efforts contribute to improving the quality of life of people living with HIV. The knowledge, good practices, innovative approaches to care acquired along the process are translated into designing and developing new programs and providing the same quality services to people living with other infections - hepatitis B and C, and with other chronic diseases (diabetes).

*"Within the Baylor Black Sea Foundation, the clinical psychologist uses various procedures to assess the psychological, behavioral, educational, personality, or neuropsychological aspects of people living with HIV. Regular evaluations facilitate the complex monitoring of beneficiaries and open discussions related to treatment adherence, emotional balance, health education.*

*The most common topics of discussion in the counseling office are those related to managing anxiety related to illness and depression, disclosing the diagnosis to another person, preventing HIV transmission, developing resilience to difficulties, improving self-esteem and interpersonal relationships.*

*The issue is complex, with beneficiaries experiencing difficulties in managing chronic illness, adopting a healthy lifestyle, improving quality of life, managing emotions and emotional disorders, trauma, social and medical discrimination."* – Elena Rizea, clinical psychologist

# PROFESSIONAL SERVICES - HIV

## SEXUAL AND REPRODUCTIVE HEALTH

HIV is a serious disease that can lead to the loss of intimacy, dignity and even life.

Maintaining a healthy lifestyle for people who live with this chronic infection includes their sexual health as well.

It requires understanding on how they may have contracted this infection as well as the prevention methods available to mitigate the risk of transmission, the scientifically proven validity of the Undetectable – Untransmissible mechanism developed on therapeutic adherence, thus safer sexual relations and the possibility to stop the mother to child transmission.

Services at Baylor Romania are designed to enhance beneficiaries' sexual and reproductive health through specialized interdisciplinary services as follows:

- family medicine,
- obstetrics and gynecology,
- family planning and
- customized psychological counselling services
- mother and newborn 18 months monitoring.

It is feasible to successfully plan the future of one's family based on regular sexual health assessments as part of an integrated care plan.

It is our 360 degrees PLWHAs support for which answers the particular needs of individuals. Our professionals act in addressing sexually related stigma and fear when living with HIV.



## COMBATING STIGMA AND DISCRIMINATION STIGMA AND DISCRIMINATION CONTINUE TO OBSTRUCT PLWHAS ACCESS TO HEALTH SERVICES

“60% of countries reported that stigma and discrimination among healthcare professionals is a barrier to the provision of adequate HIV prevention services for men who have sex with men (MSM) and people who inject drugs (PWID).” - the 2016 ECDC report on ‘The Status of the HIV Response in the European Union and European Economic Area

In 2021, the situation slightly improved, however not enough.

Our beneficiaries report it when addressing the medical services in our clinic.

Many of them continue to conceal their HIV status when going to another medical practice, in order to avoid refusal, with the known risk of facing treatment interactions. The most visible effect of stigma and discrimination on our operations is the request overload of certain medical practices, such as:

- Dentistry,
- Dermatology
- Obstetrics and gynecology



# PROFESSIONAL SERVICES - HIV

## COMORBIDITIES PREVENTION CONTINUOUS PROGRAM DESIGN DEVELOPMENT FOR HEALTHY AGING WITH HIV

People living with HIV are more likely to develop serious comorbidities.

These may also manifest at earlier ages, and the list include:

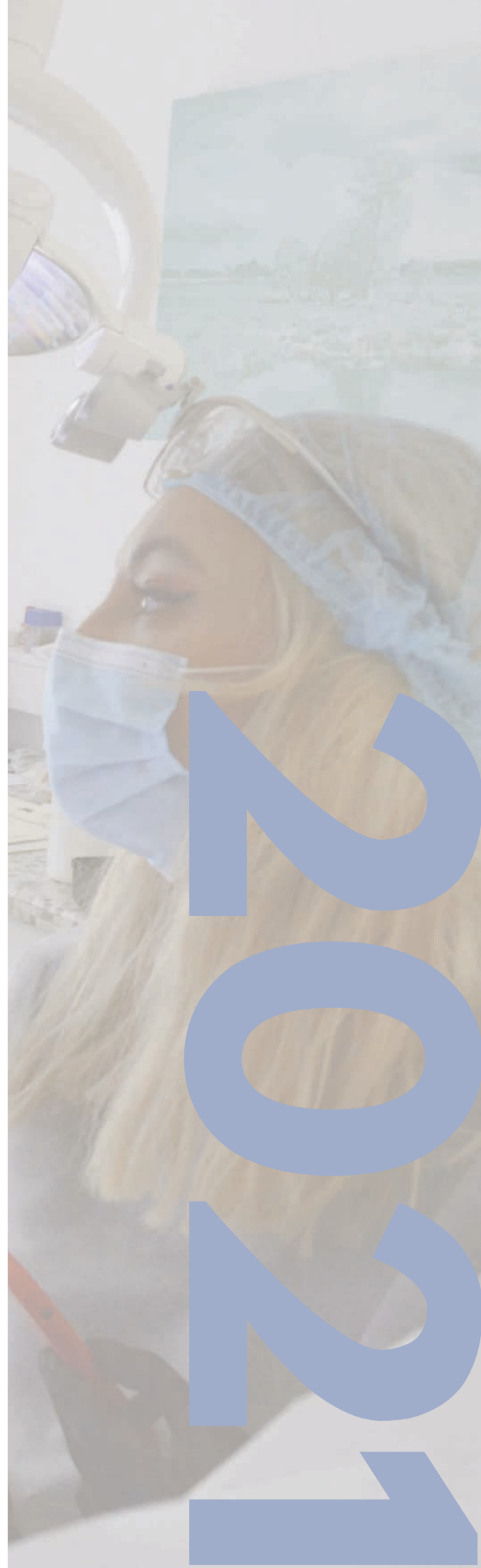
- cardiovascular diseases,
- various types of cancer,
- bone loss,
- pulmonary diseases,
- kidney diseases,
- liver diseases,
- mental health conditions,
- coinfections such as tuberculosis, hepatitis, sexually-transmitted infections (STIs),
- weight management issues,
- diabetes.

It is crucial for these conditions to be timely diagnosed and properly treated. If they are not, they can greatly complicate the long-term care of the people living with HIV, and have a negative impact on health and health-related quality of life.

*„Two essential realities meet here, within Baylor's Foundation Clinical Centre of Excellence: our partnership with AbbVie Foundation and a team of medical specialists with extensive experience in providing care to HIV patients. The grants from AbbVie Foundation allow us to provide specialized medical services: it is essential to keep comorbidities under control when providing long term care to to people living with HIV. AbbVie Foundation's support allow our experienced medical team to deliver life-improving, tailored care to our patients, to solve serious health issues and enhance their quality of live. The partnership with AbbVie is a long term one and reflects our common goal of improving community health." - Ana-Maria Schweitzer, executive director*

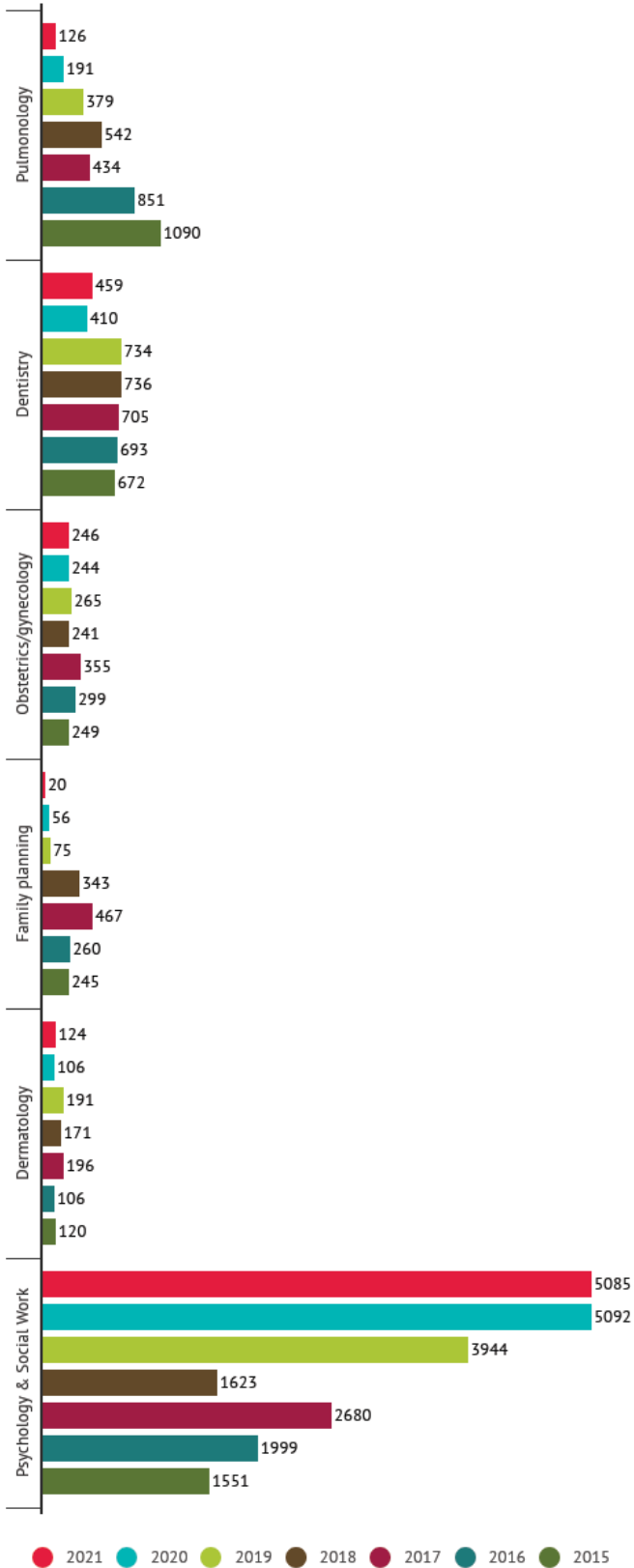
They may also significantly burden in terms of treatment duration and care costs the health systems.

*“What we strive here is to design beforehand the programs for healthy aging with HIV. The main components in this continuous process are: prevention, diagnosis, treatment, management of comorbidities, mental health assessment, ongoing counseling support. Baylor Romania's specialists support through customized interventions the patients to better adjust to healthy aging through routine screening and life-style counseling." - Ștefania Mihale, medical programs development director*

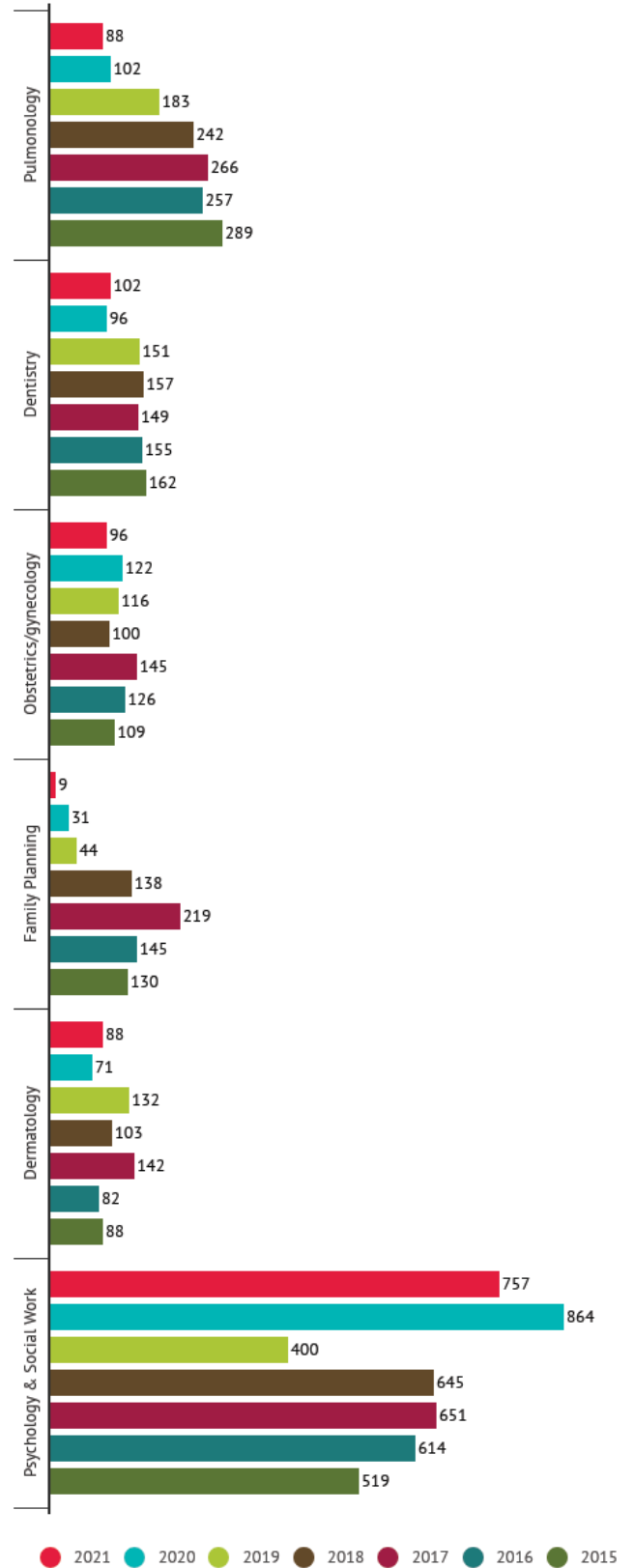


# PROFESSIONAL SERVICES - HIV

## Sessions for the beneficiaries living with HIV



## HIV Patients Served at Baylor Black Sea Foundation



# PROFESSIONAL SERVICES - VIRAL HEPATITIS

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LIFESTYLE CHANGES ARE ASSOCIATED WITH DECREASED HEALTHCARE COSTS AND INCREASED QUALITY OF LIFE

Baylor Black Sea Foundation has initiated in 2010 a viral hepatitis FIND-TEST-LINK-CARE & FOLLOW UP PROGRAM for the general population in Dobrogea. Our program empowers the patients diagnosed with hepatitis C to make positive lifestyle changes and to maintain those on long term, after reaching SVR.

The patient navigator or the counselor provides in a first stage of the process all the necessary information as per **sustaining the patients` readiness** to engage in a health behavior and treatment adherence.

Afterwards, a series of targeted interventions help him or her to develop **self management skills**: designed to enhance health behavior change.

*"The support patients` get from the Baylor Romania specialists result in decreased health care costs, and increased quality of life or well being."* – Florentina Stoian, patient navigator

Self-Management Support Program includes:

- regular assessment of progress and problems,
- goal setting,
- problem-solving support.

The care providers emphasize the patient's central role in managing his or her own illnesses.

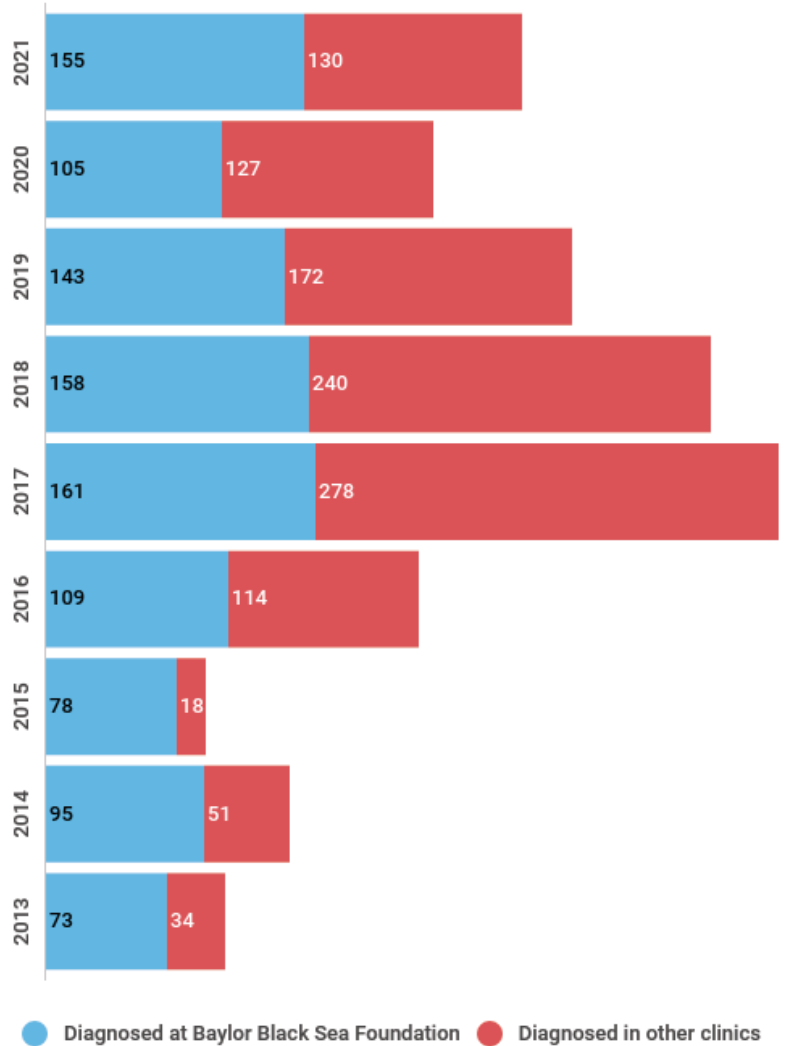
"Self-management and adherence encompasses all the activities patients perform to control their illness, prevent future complications, and cope with the impact of both the disease and its treatment on themselves and others." , and includes:

- Collaborative goal setting,
- Monitoring of symptoms,
- Lifestyle behaviors such as eating a healthy diet, getting regular exercise, and smoking and alcohol cessation,
- Taking medication in the dose and frequency prescribed,
- Communicating with the health care team, family members, and others,
- Ongoing problem-solving to overcome potential barriers.

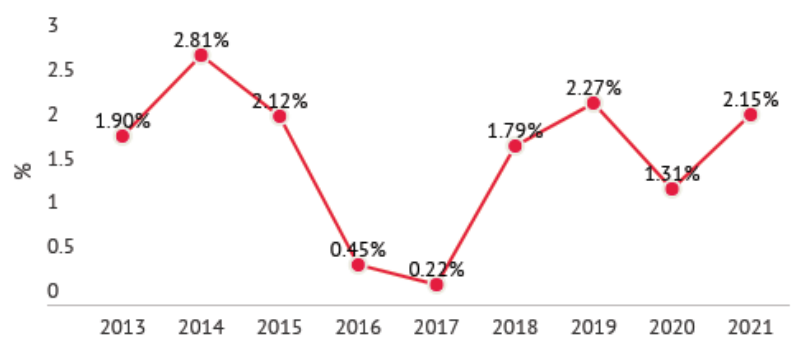


# PROFESSIONAL SERVICES - VIRAL HEPATITIS

PATIENTS RECEIVING LONG TERM SERVICES AT BAYLOR FOUNDATION ROMANIA: DIAGNOSED AT BAYLOR/DIAGNOSED IN OTHER CLINICS

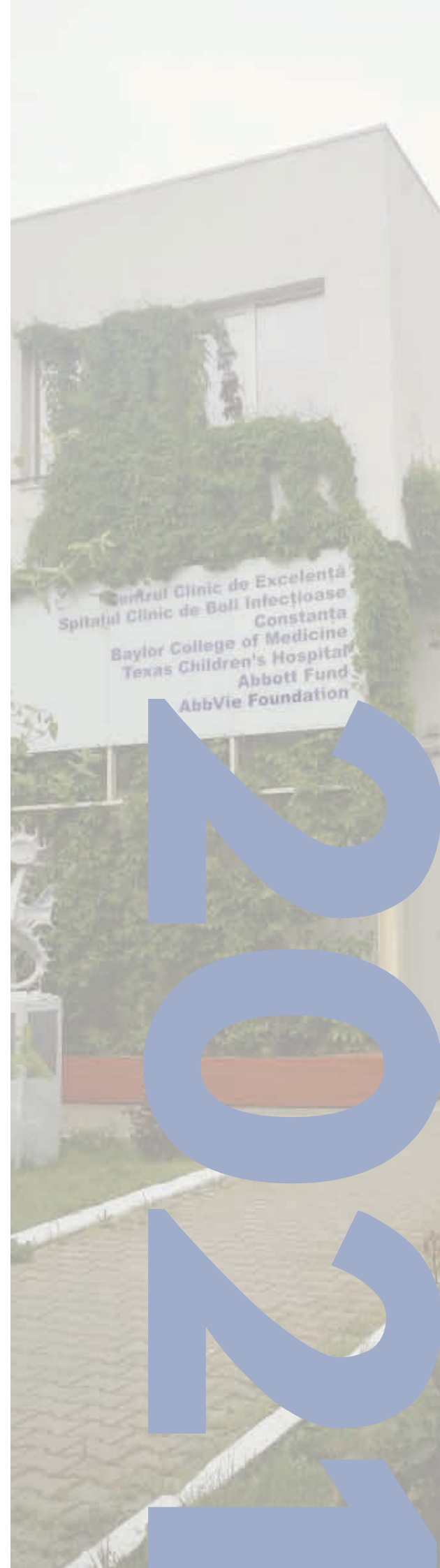
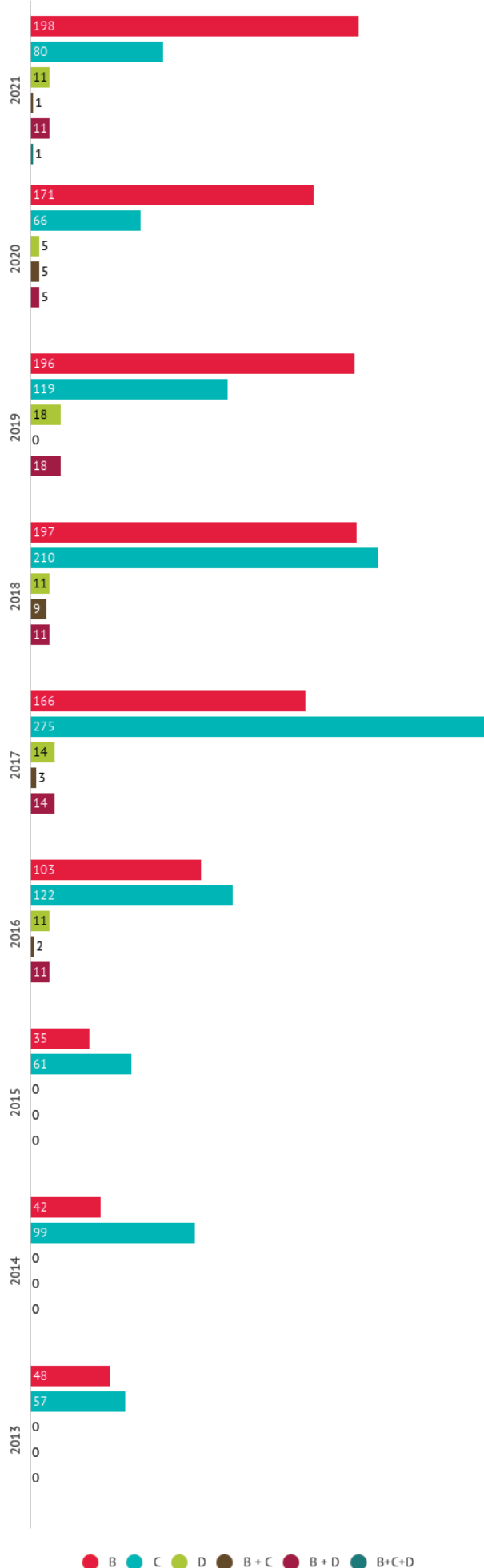


## Percentage of Patients Diagnosed with Viral Hepatitis **without** Medical Insurance, Enrolled in Long-term Services



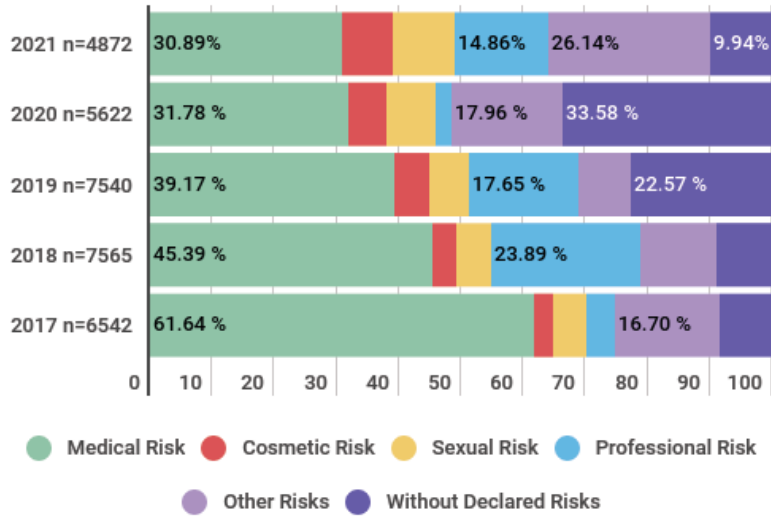
# PROFESSIONAL SERVICES - VIRAL HEPATITIS

DISTRIBUTION OF PATIENTS ENROLLED IN LONG TERM SERVICES BASED ON THE TYPE OF INFECTION

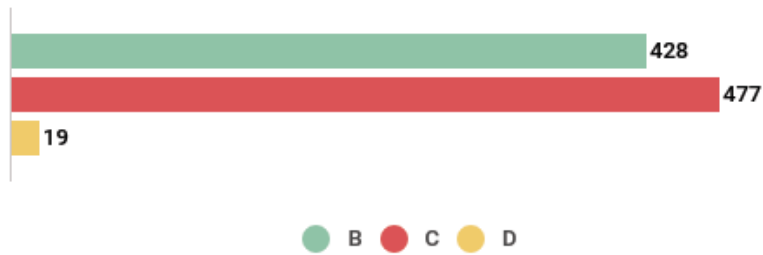


# PROFESSIONAL SERVICES - VIRAL HEPATITIS

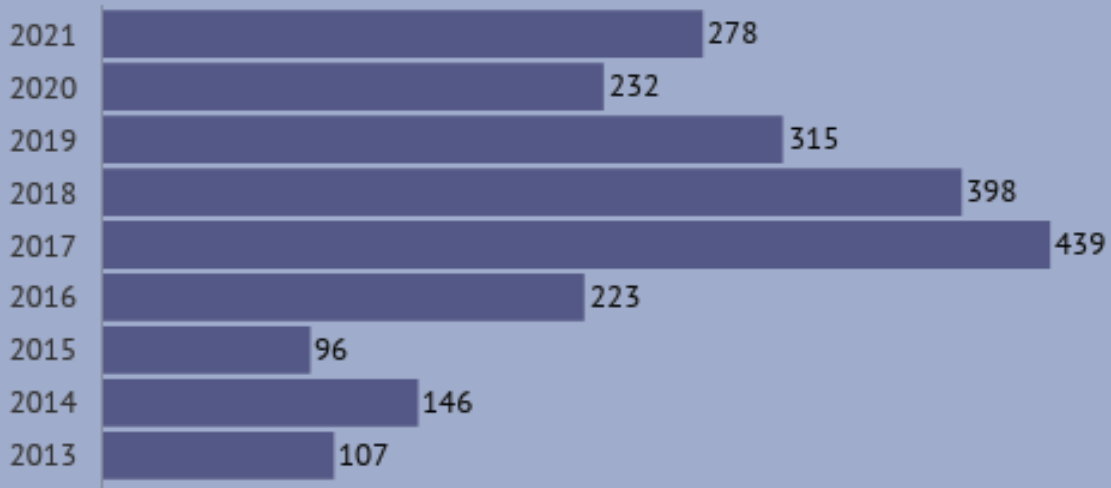
RISKS IDENTIFIED DURING THE COUNSELING SESSIONS AT BAYLOR BLACK SEA FOUNDATIONS



PATIENTS DIAGNOSED WITH HEPATITIS B, C, D BETWEEN 2013 - 2021



PATIENTS WITH VIRAL HEPATITIS NEWLY ENROLLED IN LONG TERM SERVICES



# THE COUNSELING LESSON

**The Counseling Lesson:** *“Reading articles on the internet does not replace the pre-test counseling nor rise to its value. A Hep-HIV test done one day to a man who requested the service proved it. From the initial discussion, it turned out that he read a lot. He told me that he wanted to know how to mitigate the risk of infection, so he searched the internet for information. Despite the genuine interest of our man, Dr. Google proved ineffective: the beneficiary of the voluntary testing service hesitated several times or answered incorrectly some of the risk-assessment questionnaire. There is an obvious need to bridge the gap between academic information and everyday life, to provide an effective filter to help discern true or false health information. What we do in the pre- and post-test counseling is that, based on scientifically proven data, set a series of concrete goals to lower the personal risks of each person being tested.”*

**Sunshine and Human Warmth:** *“The discovery of a voluntary, confidential, rapid and free of-charge Hep-HIV screening service, easy to access, is pleasantly surprising. On a typical working day at the Hep-HIV Screening Center in Polyclinic 1, one of the beneficiaries confessed with us his joy of finding a free-of-charge service offer for which he did not have to wait a long time. My colleague and I received thanks for the patience with which we spoke to him, the human warmth he noticed, the professional approach. When he left, he told us: “Not only has the sun come out now from behind the clouds, but you have received me with great warmth. It's different here: in other places they would have scheduled us on a long waiting list or behaved and spoke hastily.”*

**Smiles on the band aids:** *“During one of the outreach testing activities, at a children's center, we tried to help relax the atmosphere and reduce the anxiety of those we tested. So I ended by drawing a smiling face on the dressing applied after blood collection for analysis. When working with children, if you do this to one of them, you should do the same to everyone who follows. And that's what I did, without hesitation. My colleague collected and processed blood samples, I recorded the data of those who got tested and drew smiles on the patches. Until it was the turn of some temperate teenager who told us from the beginning that “I want only to get tested, I need no smiles, hearts and stuff on my band aid.”*

**The Added Value of the Right Argument:** *“We are often told in school, then in the process of vocational education many times that we have to shape the messages according to the interlocutor's features. And we do this when, in face-to-face counseling, we tell young people that they are less likely to become infected in the medical system because, at their age, the frequency with which they request medical services is quite low, but, however, it serves them to know that piece of information; then we tell them that they are more likely to come in contact with chronic infections when having sexual contacts unprotected with condoms, with partners with unknown serological status, or with multiple partners. And here's the moment when I see how the discussion paves the way for clarifying questions, to which I gladly answer: a young beneficiary of the counseling and testing service, after being presented the risks I mentioned above, asked me which groups were most at risk of infection. I answered honestly that, from what we see in the current activity, seconded by scientific studies, there are men who have sex with men, people who have accidental unprotected sexual contact without condoms and people injecting drugs. Seeing that I am franc and nonjudgmental, only providing him the needed information to be used to reduce the risks, he admitted that he used drugs and that is why he is interested in checking his serological health. At the post-test counseling, during which I continued the discussion starting from the communication of the result, he confessed to me that the anxiety he felt in those 20 minutes of waiting for the result will make him take all the precautions.” - Iuliana Costaș, Voluntary Testing Counselor*

# PATIENTS' VOICE

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## I was healed in 2021

*"I am one of the people who appear in studies and statistics with SVR (sustained virological response).*

*I was diagnosed with hepatitis C after I went to the volunteer testing office at the Baylor Foundation's Center of Clinical Excellence. Before I made an appointment, I had talked to close friends: they had just gotten married. They needed the compulsory HIV testing then and this is how they discovered the free-of-charge services Baylor Romania provides. They told me how they scheduled the appointments and how the testing underwent. It was then I realized that I had never tested for hepatitis and HIV and that it can be a good thing to take an appointment and do it. I am older than my friends and had received medical services before 1995. The details about information they received during counseling raised my attention and I filled out the appointment form over the phone, in their presence. No, I didn't feel ill, I didn't have any suspicion, some information in the discussion draw my attention.*

*I went to the Hep-HIV Screening Center, I was received by the counselor, then the blood sample was collected. I got the result: one is never "ready" to know the reactive test result for hepatitis C rapid test. The route of infection could not be determined: I do not know if it was due to a blood transfusion before 1995 or other risks; I have two tattoos and I admit that I didn't pay much attention to the working conditions in the tattoo salon, nor did I use a condom whenever I should.*

*When the result was reported and later, during treatment and during the monitoring period, the level of anxiety was well controlled with the help of the test counselor and the patient navigator. The infection was first confirmed with another lab test, I received advice on what to do next, was immediately put in contact with a gastroenterologist, and received the treatment. I continued to receive monitoring services, I went to the clinic when I was invited for a risk assessment for prediabetes, I also underwent an assessment for depression and counseling services to be able to follow the prescribed treatment, to make and maintain the life-style changes.*

*I am determined to maintain all the positive life-style changes I have made during these months. I must confess one more thing: the fact that I received a series of free services here without which I do not know if I could have obtained the same result on my own, showed me how useful the non-governmental organizations are. I recommend the services of the Baylor Black Sea Foundation!" - V.T.*





# PATIENTS' VOICE

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## **My family relationships are not affected by the diagnosis**

My 16-year-old son came for a hepatitis screening test, as referred by our family doctor. He had done some medical analysis and presented modified results, with slightly increase of the transaminase levels.

I accompanied him: with him being underage, my presence was compulsory. The testing is done with the approval of the parents or guardian and the adult attends the counseling session.

After counseling and presenting a series of risk situations, I agreed to do the test myself because I had never been tested before. The pre-test counseling revealed that I had many risk situations: medical interventions before and after 1995, sexual contacts unprotected by condom, and I spent my childhood in an orphanage.

The test results for my teenage son were negative. In my case, however, the result was reactive to the hepatitis B virus. I was counseled and decided that both my son and my partner should be informed and counseled. In turn, my partner was also tested and, following the dosage of HBs antibodies, it turned out that he was immunized.

We all learned about the right methods of protection and how viruses are NOT transmitted. I never felt isolated from my family members after learning the hepatitis B status. I returned at the center to repeat the tests six months after the diagnosis and I am now enrolled in the monitoring program. I am more confident knowing that I have support of my family and the professionals at Baylor Romania. I wouldn't have known I had this infection if I hadn't attended my son's counseling session and hadn't been told then that I could take the test as well. I am confident in the future!



# PATIENTS' VOICE

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## Wedding plans

*"I was diagnosed 12 years ago. I have three children, one daughter and two boys. Imagine how I got the news: I was raising my children alone, and they were very young at that time. One of my sons is now preparing for the university, he'll start next year. He decided he'll study engineering even if he loves history very much. The younger one is still in high school, and my daughter is a secondary school pupil. She loves both learning and painting, and, when I ask her, she tells me she'll become an architect, the same as the daughter of her Romanian language teacher.*

*I stopped wondering how I got the infection. It can be both work-related or not using a condom – as a nurse I might have been more careful! There's no use in blaming myself now, but to stay motivated to focus on my health status. I'm telling you that, at the beginning I did not believe Baylor Foundation will be so consistently supportive!*

*The infection moment was, definitely after having my children, they don't have the virus and I continue to check their status regularly. I also come regularly at COE, counseling does help me now a lot but was essential at the start of taking the therapy. It was hard adjusting my life after learning the diagnosis. I had reasons to put myself together and fight for myself and my children and I am satisfied with the outcome now.*

*The COE team helped me a lot. And it is easy, I make a phone call and schedule an appointment, then I come to the medical check-up. I felt safe during the pandemic the entire time: I knew the COE remained opened, I had regular counselling sessions both here and by phone. And I maintain the undetectable level for a very long time now. I even felt safe to start a relationship and disclose my diagnosis. My partner supports me a lot, he makes my life easier. He secretly discussed with my children and they organized a small party when he asked me to marry him. I consider I have the best possible life and good prospects for the future." - G.N.*



# CASE COUNSELOR'S VOICE

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## Turning Despair into Hope

One of the most impressive cases I've worked on so far as a patient navigator was precisely because it started without hope. A medical professional had found out about her HBV + HCV coinfection 3 years ago, considering that this was a final conviction, without the right to appeal, without any chance of improvement. An additional sentence in addition to all other life issues. The Baylor Black Sea Foundation Mobile Testing Laboratory has arrived at its workplace and has offered everyone the opportunity for voluntary, free, confidential, and rapid testing for hepatitis B and C viruses and HIV infection. In addition to testing, we informed all about the patient monitoring program - a series of integrated medical, psychological and social services - which ensures the patient's path from screening to treatment and self-management of the chronic disease.

This person was the liaison with the beneficiary institution of the service we offered in the field and supervised the testing process, helping us along the process with all the needed assistance. We were surprised from the beginning by the vehemence of the refusal to test. The testing process is always voluntary, but not always desired by patients. We know from experience that the fear of a positive outcome is sometimes so great that people postpone testing for years. We also know that postponing testing is not a good decision. The worst-case scenario for a chronic illness is not knowing if you have it, allowing it to progress unhindered and to silently deteriorate your health. One by one, the colleagues presented themselves for the blood-test and counseling, and received valuable information about the methods of transmission and prevention. Then, we processed the blood samples.

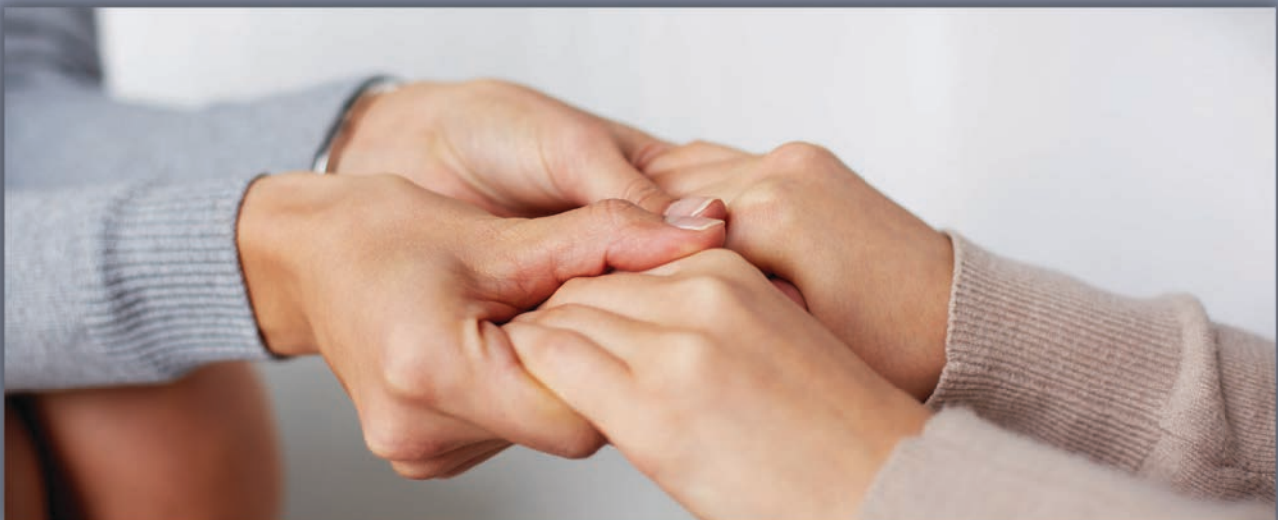
Communicating the results was done afterwards in complete confidentiality, with the door closed. And the results were given one by one, accompanied by post-test counseling in order to achieve a personalized risk-mitigation plan. No compromise was made.

From the director of the institution to the newest employee, everyone had to come in person learn his or her result. We never leave results to colleagues, nor even blood relatives, and the result remained confidential.

We worked as usual: we know that we are closely observed by all those who benefit from our services as well as by the representatives of the institutions that request our services at their headquarters. This person noticed how we were working and finally had the courage to tell us that she knew she has hepatitis. That's when I changed my tactics and focused on new discoveries in the field of treatment. "Today a hepatitis patient has treatment options. There are solutions to improve and, in the case of hepatitis C, the treatment completely eliminate the virus from the body."

We persuaded this person to undergo the analysis that confirmed the suspicion of HBV + HCV coinfection. She afterwards came to the clinic for further tests. The monitoring counselor provided information on hepatitis management, providing her a clear plan. She was helped to complete the file for receiving the HCV treatment. Then she was referred to a gastroenterologist. In less than 2 months she started the antiviral therapy and successfully eliminated the hepatitis C virus. Every time she returned to the clinic he confessed to us that she was glad that we insisted on her getting tested because she didn't think there's hope in her case! As part of the Baylor team, I can easily make the test recommendation because I know that, no matter what the outcome, there are well-developed procedures and I can rely on other team members to provide the best services with professionalism, empathy and non-discrimination.

***„Why do I love my job? Because I have proved that, together with my colleagues, I can change the state of deep despair in hope!“ I. C.***



# TWO DECADES OF CARE FOR THE 90S HIV COHORT

## EVENT



In April, Baylor Romania marked 20 years since the inauguration of the HIV Clinical Center of Excellence (Romanian-American Children's Center)

In 2001, a few people recognized the healing value of action, science, and collaboration. They have helped to write a success story for every life winning the everyday battle with HIV.

Picture: Clinical Center of Excellence, June 2016, after the extension project completion, photo credit Smiley Pool

"[...] Following a stupid idea borrowed from the Soviet medicine, the malnourished little children in the Romanian orphanages received micro-transfusions, with the false hope that the blood of others would "enforce" them. This killer, not scientifically proven solution would explain why HIV "exploded" in Constanța those years.

There were children who had been in bed for months and months, children with whom no one had time to talk. The foreigners realized that it was not enough to just bring help. There was also a need for training the staff, from doctors to nurses." - Rodica Mătușa, infectious disease specialist, excerpt from the volume "Nobody's Angels".

In these two decades, Baylor Romania constantly improved the services for people living with HIV/AIDS. Nowadays, our HIV patients have reached adulthood and they are likely healthy age with HIV.



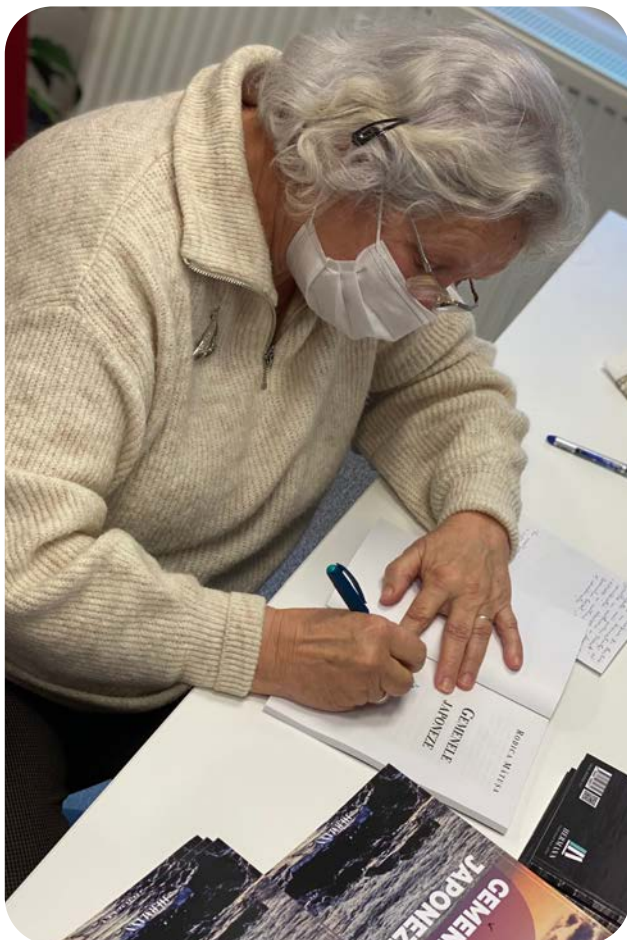
# EVENT RODICA MĂTUȘA'S SECOND BOOK LAUNCHED AMONG HER COLLABORATORS

## “The Japanese Twins”

On December 1, in a discreet event filled with emotions, we commemorated the fragile lives of AIDS victims, Dr. Rodica Mătușa chose to share the emotion of launching the second book with her collaborators. Some of them accompanied her during the almost 40 years in which she chose to work with HIV-infected children in Constanța.

AIDS is part of the collective memory of the city of Constanța. Romania had more than half of Europe's HIV-positive children, with most of them in Constanța.

*Picture: Dr. Rodica Mătușa at the book launch with the tv journalist Andreea Hahui, Dobrogea TV*



In Romania, the late 80s and first half of the 90s, 67% of HIV-infected children were institutionalized. The Clinical Hospital for Infectious Diseases took into care 200 children:

*“There, in that space, they slept, ate, took the medication; without crying, without knowing that there was something else besides that place and the hospital yard, which, when they could barely walk, they seldom reached.*

*They were carried in arms or in lame wheelchairs to the radiology or in other specialized medical offices of the polyclinic next to the hospital.”* – recalls within the pages of the book Dr. Rodica Mătușa, specialist doctor, doctor of medical sciences, medical consultant at the Baylor Black Sea Foundation.

The quoted fragment can be found in the first pages of the volume “The Japanese twins”. The second book signed by Rodica Mătușa was published by the Hermann Publishing House in Sibiu.

*“Rodica Mătușa’s new book as a meeting place of her memoirs and fiction about how to live as a doctor, not about how to do it. It is, a book about gestures, words, discussions that have remained in the doctor’s memory and that, brought to light, will change us as well. I recommend the volume not only to those who want to recover some of the memory of our city, but also to those who like a well-written book. Because it is very well written!”*, said Ana-Maria Schweitzer, executive director.

## PROFESSIONAL ACKNOWLEDGEMENT

Florence brought to Constanța the trophy “Social worker of the year in the field of prevention/reduction of risks associated with HIV infection, drug use and sexual exploitation”

Florica Niculaie, or Florence, as the beneficiaries know her, brought to Constanța the trophy of the seventh edition of the National Gala of Excellence in Social Assistance. She is a senior social worker at the Baylor Black Sea Foundation, member of our team since the start, 20 years ago. When she talks about her profession, she says that when she chose her career, she got caught up in a role that confirms her every day that life is stronger than any imagined scenario.



**Florica Niculaie, senior social worker,  
laureate in the Social Work National  
Gala of Excellence**

*“For me, the social worker Florica Niculaie, the nomination and the awarding of the trophy are just as unexpected. Social workers do not usually enjoy the spotlight. It is difficult to summarize in 20 years of activity in social assistance. [...] I learned to look for the particular needs of each person to make sure that the help I can provide is exactly the help expected, desired, sought by the beneficiary.*

*The profession of social worker offered me life lessons, power lessons: I had the opportunity to contribute to the success of young adults to integrate successfully, to attend middle and high schools, to find a place to work. work and, more than anything, start a family, have healthy children, and be confident that they can live as long as uninfected people!” - said Florence Niculaie upon receiving the trophy.*

*“We are delighted to be recognized for our colleague’s merits! In the society of forms without substance and countless people avid to collect a plethora of diplomas and degrees, professionals like her deserve to be known. Such an award will not fundamentally change Florica, but it could inspire other people to change their destiny and give a proper meaning to the social worker profession.*

*Florica Niculaie has the courage to intervene in difficult situations: I always had the confidence to let her deal with the most difficult and delicate cases, because I knew that she would be a professional, that she would honor the foundation and that she would not back down until will get what is right for the beneficiary in question, whether it was an abused child, a disoriented pregnant woman, a homeless Roma family, a newly diagnosed and stigmatized LGBT person, or an adult with HIV who is tired of life and therapy.” - Ana-Maria Schweitzer, executive director of the Baylor Black Sea Foundation*

The National College of the Romanian Social Workers (CNASR) organized on June 14, 2021\* the National Social Work Excellence Gala – the 7th edition. This is the single national event that rewards the performance of those who work in this field, as part of a campaign that aims to enhance the profession of social worker. To this end, the event brings together social workers, representatives of governmental and non-governmental institutions, politicians as well as journalists involved in social campaigns at central and local level.

**\* The 7th edition was originally scheduled for March 17, 2020, but the pandemic made it impossible for the event to take place. Rescheduled for June 14, 2021, the National Gala of Excellence in Social Work took place at the Romanian Athenaeum.**

## KEY PEOPLE AT BAYLOR BLACK SEA FOUNDATION



**Ana-Maria Schweitzer**  
*Executive Director*



**Monica Frangeti**  
*Financial Director*



**Ştefania Mihale**  
*Medical Programs Development Manager*







**Mihaela Bogdan**  
*Projects' Manager*



**Negivan Septar**  
*Head Nurse*



## Constanța, Romania

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-  The Hep-HIV Voluntary Counselling and Testing Centre, Policlinic 1, 143 Tomis Ave.
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