



Mexico's Rural Health Care Centers for Teenagers

CARA's

April, 2006.

I. Introduction

In 1998, Imss-Oportunidades designed and implemented the Integral Attention Model for Teenage Health in Rural Communities (CARA's). A strategy to respond to the health needs of this age group, especially on issues of sexuality and reproduction.

Today the program covers 1.9 million youngsters in poor rural areas.

II. What is IMSS – Oportunidades?



Federal healthcare program, administered by IMSS (federal social security institute).



Provides services to 10.2 million persons not covered by social security in poor rural areas in 17 States (2.4 millions are teenagers).



Operates 3,540 clinics (UMR) and 69 Hospitals (HR).

III. CARA's objectives

Provide integral health care for teenagers in rural communities to promote voluntary and responsible conducts and attitudes, self health-care, and risk-free sexual and reproductive practices.

Transform clinics into friendly educational, information, counseling and medical services for youngsters.

IV. What is CARA?



A physical space within a medical unit, designed as an accessible, private and exclusive space for teenagers.



Directed by an IMSS trained Juvenile Leader, a teenager from the same community.



Supervised in all activities by the health team of the medical unit (permanent adult and health supervision).



Teenagers can decide how to decorate and arrange this space.

V. Lines of action

- 1. Training in human development, counseling and self-esteem;**
- 2. bringing health services to the community;**
- 3. sexual education “from and to teenagers”;**
- 4. community participation in the use of healthcare facilities and services;**
- 5. social promotion of CARA’s services and centers in rural communities;**
- 6. epidemiological surveillance; and,**
- 7. research on teenage healthcare.**

VI. Activities and Strategies



Educational activities are organized around three main areas:

- ❖ **Human development with 18 topics**
- ❖ **Sexuality and reproductive health with 13 topics**
- ❖ **Health services with 12 topics**



Each topic is approached:

- ❖ **from a practical point of view not only from a theoretical one,**
- ❖ **with the use of participative techniques, and**
- ❖ **joint and permanent work between health teams and teenagers.**

CARA Educational Courses

	Course I “The pleasure of learning”	Course II “Knowing myself I am happy”	Course III “One last one and off we go”
Human Sexuality and Reproductive Health	<ol style="list-style-type: none"> 1) Puberty and adolescence: sex, gender and sexuality 2) Male and female sexual organs 3) Teenager sexual and reproductive rights 4) Teenage Sexuality* 5) Relationships and love.* 6) HIV/AIDS and Sexually Transmitted Infections (practice on the use of condoms) 7) Family planning 8) Teenage Pregnancy 9) Abortion 	<ol style="list-style-type: none"> 1) Pregnancy, family and gender roles. 2) Cultural diversity.* 3) Sexual orientation.* 4) Sexual diversity.* 5) Gender and domestic violence 6) Sexual violence.* 7) Human sexual response.* 8) Erotism? 9) Pregnancy and birth complications 	<ol style="list-style-type: none"> 1) Sexual dysfunctions. 2) Jealousy and infidelity 3) Sexual communication 4) Disability and sexuality 5) Games and toys 6) Pornography and sexuality 7) Gynecological health

CARA Educational Courses, cont.

	Course I “The pleasure of learning”	Course II “Knowing myself I am happy”	Course III “One last one and off we go”
Human Development	<ul style="list-style-type: none"> 1) Values 2) Self-esteem 3) Decision-making 4) Prevention of addictions} 5) Preventing accidents 	<ul style="list-style-type: none"> 1) Suicide prevention 2) Juvenile Leadership I 3) Life project 	<ul style="list-style-type: none"> 1) Empowerment 2) Entrepreneurial development 3) Responsible parenthood 4) Juvenile leadership II.
Health Services	<ul style="list-style-type: none"> 1) Nutrition and oral health 2) Respiratory diseases 3) Parasitosis 4) Diarrheic infections 	<ul style="list-style-type: none"> 1) Hygiene in adolescence 	<ul style="list-style-type: none"> 1) Chronic disease prevention

Juvenile Teams

- ❖ are formed by 10 to 25 teenagers and are segmented by age:
 - (i) 10 to 14 years old.
 - (ii) 15 to 19 years old.

- ❖ provide information on sexual and reproductive health and encourage the use of health services offered in the medical units;

- ❖ apply a peer to peer strategy.

Extra-mural activities are carried out to reach a larger number of teenagers:

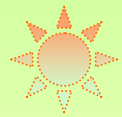


Teenage Reproductive Health Educational Encounters, where health and juvenile teams visit communities with significant sexual and reproductive health problems.



Itinerant Modules, where health and juvenile teams install virtual spaces similar to a CARA to bring educational materials closer to teenagers who live in communities without a clinic.

VII. Coverage

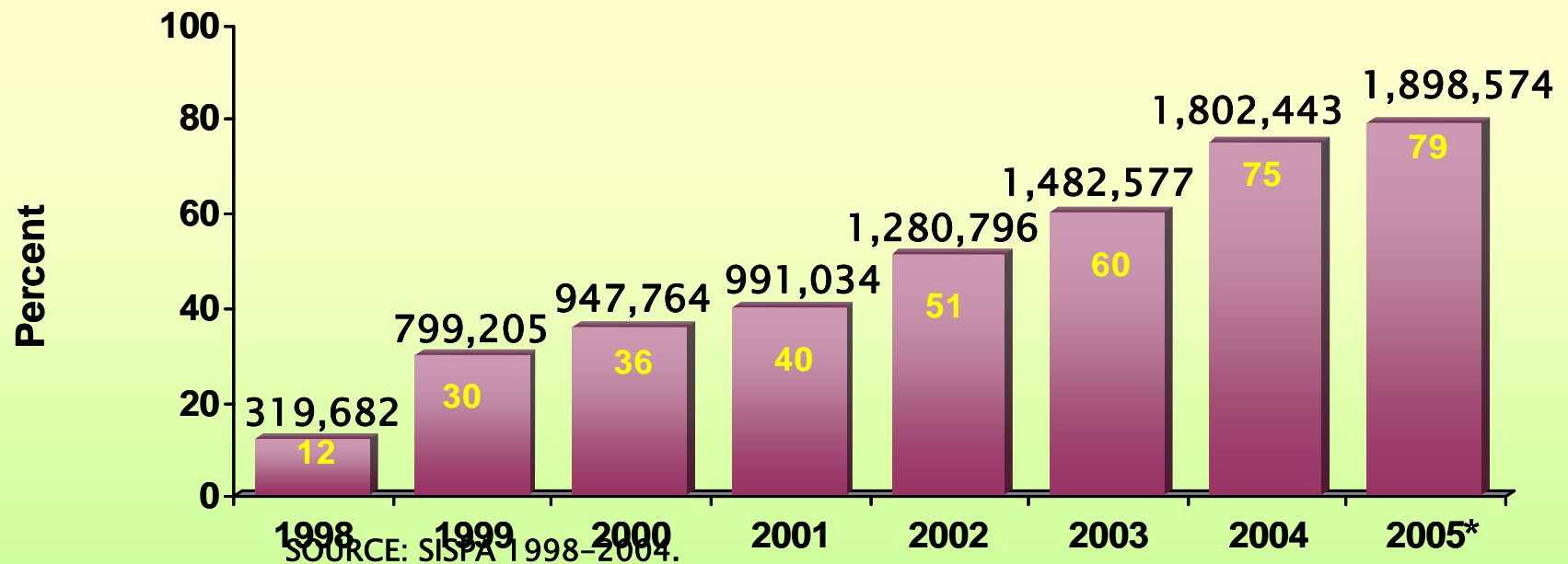


100% of Imss-Oportunidades medical units have a CARA Center.



1.9 million teenagers participated in 2005, 79% of the target population in 3,609 CARAs.

Adolescents Participating in CARA



* 2005 Estimate

VIII. Impact



Increased use of health services by teenagers

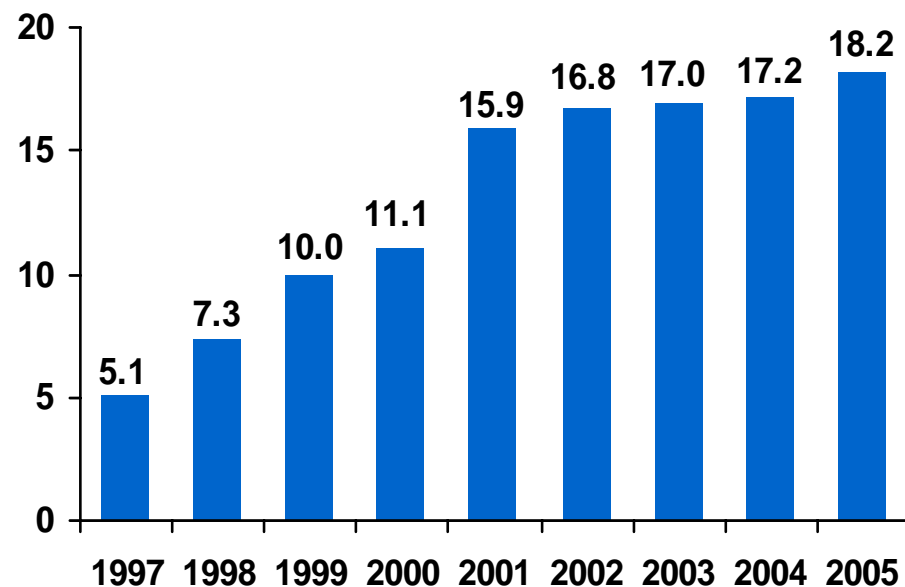
- ❖ Health Care and medical attention
- ❖ Screenings
- ❖ Evaluation of visual sharpness
- ❖ Gynecological health
- ❖ Nutrition and dental care
- ❖ Educational sessions

VIII. Impacts on attitudes

- ❖ **Significant improvement in available information on sexual education that adolescents now have and use.**
- ❖ **The emotional component is in a process of transformation, since the youngsters are in the middle of their community's and family's beliefs and the information that he/she is receiving through CARA.**
- ❖ **It is expected that as teenagers begin an active sexual life, CARA will enable them to make informed decisions.**

VIII. Impacts in health, sexuality and reproductive health

Percentage of Teenagers 15 to 19 Years Old Using Contraceptive Methods



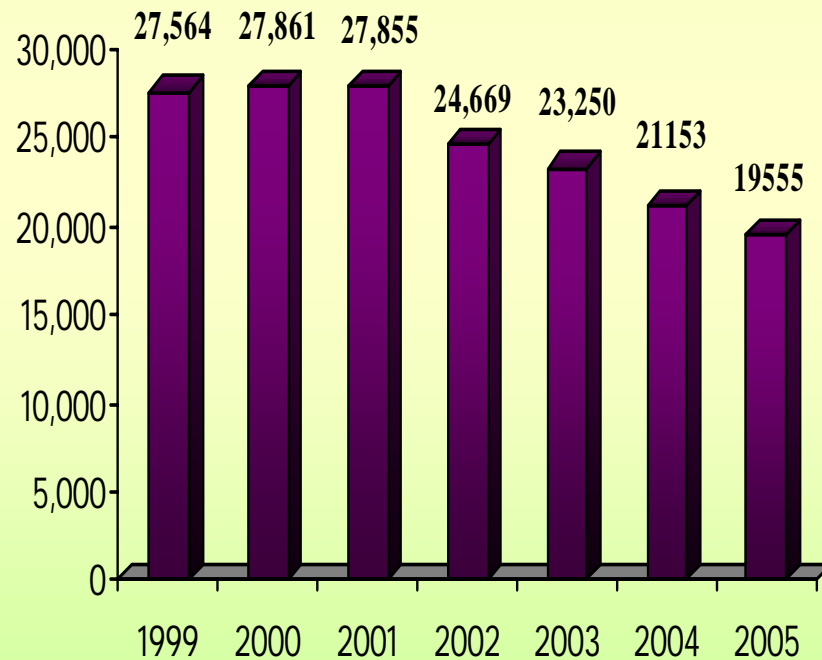
From 1997 to 2005:

- ❖ Teenagers using contraceptive methods increased from 5.1 % to 18.2 %.
- ❖ Teenage pregnancies decreased from 32 % to 26 %.

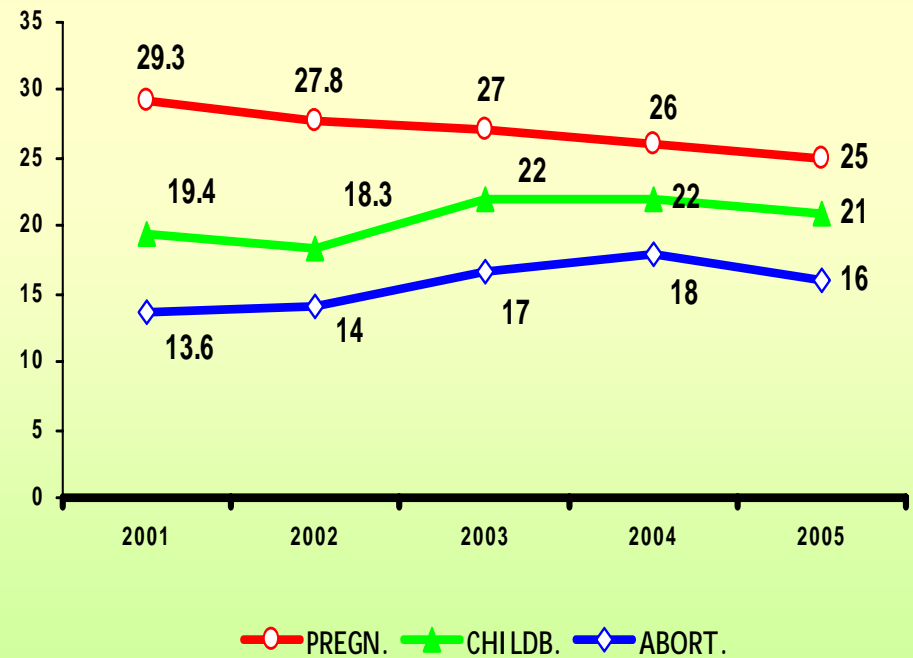
Parasitosis in teenagers decreased from 4,728 cases per 100,000 teenagers in 1999 to 1,108 cases in 2004.

Decrease on pregnancy rates in teens, from 29.3% to 25% from 2001 to 2005.

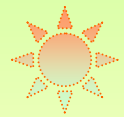
Number of Births in Teen Mothers



Evolution of Teenage Maternal and Infant Birth Rates 2001-2005



IX. Information Systems and Monitoring



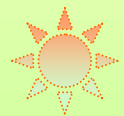
Monthly information provided by the SISPA System (number of pregnancies and births, pre-birth control, coverage of contraceptive methods, maternal and childbirth mortality, • attendance to educational sessions, and certified adolescents)



Direct supervision visits.



Teenage interviews to monitor the impact of CARA on their attitudes, based on the Care Quality for Adolescents Survey.



Each clinic and hospital uses a CARA Card, a nominal registry, for every adolescent and educational activity carried out.

X. Aspects for further Evaluation

- development of life skills,
- human development and self-esteem,
- knowledge about sexual and reproductive health,
- healthy practices and behavior regarding sexual and reproductive health,
- family and social impact of CARA,
- vision and expectations of adolescents in relation to CARA and,
- Operational challenges of CARA Program.