

Child and Family Services Policy Manual: Reference Information
Human Immuno virus or Acquired Immune Deficiency Syndrome (HIV or AIDS)

Purpose This section establishes guidelines for staff providing services to children and youth at risk for human immuno deficiency virus (HIV) or acquired immune deficiency syndrome (AIDS).

Definitions **Human Immuno Deficiency Virus (HIV)** is the virus that causes acquired immune deficiency syndrome (AIDS). The virus was identified in 1983.

Acquired Immune Deficiency Syndrome (AIDS) is a condition that results from HIV infection. The infection is caused by a virus (HIV). By the time people with HIV develop AIDS, their immune systems have become damaged and can no longer fight off other infections. These infections may eventually be fatal.

Opportunistic Condition is an infection or cancer that occurs especially or exclusively in persons with weak immune systems due to AIDS, cancer, or immunosuppressive drugs such as corticosteroids or chemotherapy. KS, PCP, toxoplasmosis, and cytomegalovirus are all examples of opportunistic conditions. Also more loosely termed Opportunistic Infection (OI).

Testing positive means a person's blood contains antibodies to HIV as determined by blood tests conducted at the Montana State Public Health Laboratory.

Testing negative means a person's blood shows no sign of having antibodies to HIV (the virus that causes AIDS). However, if you were infected recently, you might test negative even though you have the virus.

Clinical symptoms of AIDS: Only a doctor can tell if someone has AIDS, which is a result of HIV infection. At first, many people with HIV begin by having flu-like symptoms, followed by no signs or symptoms at all. Later, some people may have severe or prolonged –

- fever
- fatigue
- diarrhea
- skin rashes
- night sweats
- loss of appetite
- swollen lymph glands
- significant weight loss

Child and Family Services Policy Manual: Reference Information
Human Immuno virus or Acquired Immune Deficiency Syndrome (HIV or AIDS)

- white spots in the mouth or vaginal discharge (signs of yeast infection)
- memory or movement problems

In addition, people with AIDS may suffer from infections that most healthy people can resist (opportunistic infections), as well as from cancer (including Kaposi's sarcoma, lymphoma, and invasive cervical cancer in women), pneumonia, and tuberculosis.

Modes of transmission: **High risk** means those -

- who have had unprotected sexual contact with an infected person, or a person with risk behaviors;
- have shared needles for IV drugs for non-medical purposes;
- have been born to an infected parent or a parent with high risk behavior (prostitute, IV drug user, sex partner of infected person, sex partner of homosexual or bisexual male); or
- have received blood transfusions prior to testing of the U.S. blood supply in 1985 (including people with hemophilia).

Universal precautions mean following sanitation and hygiene practices with the assumption that every person contacted may be infected.

Foster Care
Infected Children

Children may be infected with HIV at birth, or by exposure through contaminated blood products, or sexual contact. They may show some symptoms of illness or be asymptomatic. Children who have tested positive for HIV antibodies and are asymptomatic are still able to transmit the virus through sexual or blood contact.

Whenever possible, the health of the child's parents should be monitored if the child was born with high risk factors. The biological, foster, and adoptive parents should be informed of the testing results and of the fact that due to a child's receiving maternal antibodies at birth, the infection status of a baby will be indeterminate up to approximately 15 months after its birth. Current research indicates about 25% of the infants born to HIV positive mothers will develop AIDS.

Foster Home

Children with HIV/AIDS may enter the foster care system and

Child and Family Services Policy Manual: Reference Information
Human Immuno virus or Acquired Immune Deficiency Syndrome (HIV or AIDS)

Issues

cause extreme time demands on the foster parent. The foster parent must be able to cope with family's, friends', relatives' or service providers' fear of transmission. Other children in the home must be capable of following universal precautions with respect to blood or body fluids. The HIV positive child is highly susceptible to common illnesses which may cause repeated hospitalizations or death of the child. **Effort must therefore be made to reduce exposure of the HIV positive child to communicable illnesses.**

The foster parent will have to cope with the child's own separation issues upon entering foster care. Ample time and transportation will be needed for frequent trips for medical care for the child.

The foster parent will need the ability to cope with the child's medical needs. A medical or nursing background will be helpful. Licensing may need to be prioritized to accommodate the needs of the child more quickly.

Training

A training course on HIV/AIDS, caring for HIV/AIDS patients and issues of long-term, chronic illness should be completed prior to providing care. When the child protection specialist becomes aware of the diagnosis of HIV/AIDS, the worker will notify the foster parents that the child has HIV/AIDS. Foster parents have the right to know the child's diagnosis prior to accepting the placement and to give informed consent for providing care.

Training is needed regarding measures to prevent, anticipate or treat deadly opportunistic infections and to cope with side effects of medications. People with HIV/AIDS need to have a high nutritional intake. Medications must be administered precisely.

General wellness precautions need to be taken, such as:

- avoid crowds and sick people, especially people with chicken pox;
- review the need for and type of immunizations with the doctor prior to immunization;
- follow good hand washing techniques;
- wear gloves to change diapers or clean up messes;
- wear gloves when handling or cleaning up bodily fluids;

Child and Family Services Policy Manual: Reference Information
Human Immuno virus or Acquired Immune Deficiency Syndrome (HIV or AIDS)

- wash up spills with fresh bleach solution (one part bleach for nine parts of water made fresh daily);
- put soiled diapers in plastic bags or wrap securely in newspaper and put into the trash;
- do not share razors or toothbrushes;
- wash dishes with hot soapy water and air dry, or use the dishwasher;
- avoid tattooing and other activities involving exchanges of blood or body fluids;
- receive chemical dependency treatment, when needed, and learn about sexuality choices and consequences.

Confidentiality
Children

Confidentiality is an important issue regarding a person's "need to know" the child's condition and the child's right to privacy. "Need to know" includes foster parents, school, doctor, dentist and the foster care review, Citizen Review Board, or child protection team. Written information on a HIV-positive child should be marked "Restricted" and kept in a sealed envelope in the case record. When information regarding a child's HIV-positive status is shared with others, each person must be advised of the need for strict confidentiality. Specialized foster care should be considered for a HIV-positive child when placement is needed.

Day Care and Respite Care

Careful evaluation should be done on children or young adults who scratch, bite, soil excessively, have open wounds, or who are careless about hygiene practices (i.e., use of sanitary pads) due to concerns about cross-infection. Care should be used in day care placement of children younger than three years of age. They should not be placed into a facility with younger children.

Testing

Children who are victims of sexual abuse need to be tested if recommended by a physician.

Adoption

HIV testing should be done on children prior to adoptive placement if recommended by a physician.

Testing may be done at HIV prevention sites, family planning or private clinics. Consent must be given by the parent or guardian unless the department has permanent legal custody of the child. The department may consent only when the department has permanent legal custody and the test is ordered by a physician. Both pre- and post-test counseling are required, regardless of anticipated results. Counseling is

Child and Family Services Policy Manual: Reference Information
Human Immuno virus or Acquired Immune Deficiency Syndrome (HIV or AIDS)

intended to reduce or stop high risk behaviors which can lead to or spread infection. Harmful results can occur to the youth or his or her family from violation of civil rights (privacy) or inaccurate test results. Before testing is done on a child in care, a plan should be in place as to whom will need to know the results and what will be done if the test is positive.

**Interstate
Compacts**

The child's service needs and medical and financial resources should be adequately explored prior to placement.

Counseling

The following guidelines are helpful for reducing stress when working with clients with HIV/AIDS:

- educate yourself. At this time, AIDS has no known cure. People with AIDS are living longer and people with HIV are not converting to AIDS as readily;
- explore your own personal attitudes about sexual issues and drug users;
- ask coworkers for clarification, support and encouragement;
- be nonjudgmental; hysteria about HIV/AIDS can be a problem in providing services; HIV is not easily transmitted;
- assess client's needs as disease progresses;
- encourage and support your clients in maintaining family and other supportive relationships;
- balance issues of life and death when working with your client;
- assist your client and his or her family in planning for death if you are asked; and
- be clear that HIV/AIDS is a blood-borne, sexually transmitted disease that is not spread by casual contact.

Casual contact may be defined and illustrated as living in the same house with an infected person, caring for an AIDS patient, social kissing or swimming in a pool with an infected person.

Many drugs are now available for treatment of HIV/AIDS. They do not cure or prevent transmission. They are hard to take and cause many side effects.

Support Groups

Most larger communities have support groups for people living with HIV/AIDS. The Department of Public Health and Human Services HIV prevention sites may be contacted regarding

Child and Family Services Policy Manual: Reference Information
Human Immuno virus or Acquired Immune Deficiency Syndrome (HIV or AIDS)

support groups and other information such as toll-free telephone numbers regarding HIV/AIDS, drugs and sexuality.