

## Public policies awareness toward the AIDS combat under the perspective of health professionals

Despertar das políticas públicas de combate à AIDS na perspectiva de profissionais de saúde

Despertar de la política pública para combatir el SIDA en salud perspectiva profesional

Rebeca Coelho de Moura Angelim;<sup>1</sup> Brígida Maria Gonçalves de Melo Brandão;<sup>2</sup> Denize Cristina de Oliveira;<sup>3</sup> Fátima Maria da Silva Abrão<sup>4</sup>

### How to quote this article:

Angelim RCM, Brandão BMGM, Oliveira DC, Abrão FMS. Public policies awareness toward the aids combat under the perspective of health professionals. Rev Fun Care Online. 2018 oct/dec; 10(4):913-918.

DOI: <http://dx.doi.org/10.9789/2175-5361.2018.v10i4.913-918>

### ABSTRACT

**Objective:** The study's aim has been to identify the advances and failures of public policies during the AIDS epidemic event under the perspective of health professionals. **Methods:** This is a field study, exploratory-descriptive type and with a qualitative approach, which has been carried out with 46 technical and high levels health professionals, who worked in either the HIV/AIDS Specialized Assistance Services or Testing and Advising Center. It has been used the semi-structured interview technique that was analyzed using the lexical content analysis technique. **Results:** Based on the identification of the discursive contents, two classes were analyzed, which were classified as follows: Category 1 - Treatment of HIV/AIDS by means of antiretroviral medication; Category 2 - Public policies aiming the AIDS control, revealing the changes that have occurred in the political and social context of AIDS. **Conclusion:** The need to encourage financial investments in campaigns for HIV prevention was frequently perceived.

**Descriptors:** HIV, Acquired immunodeficiency syndrome, health public policies.

### RESUMO

**Objetivo:** Identificar os avanços e as falhas das políticas públicas no decorrer da epidemia da AIDS na perspectiva de profissionais de saúde. **Métodos:** Trata-se de um estudo de campo, exploratório, descritivo e qualitativo, realizado com 46 profissionais de saúde de nível técnico e superior que atuavam nos Serviços de Assistência Especializada em HIV/AIDS ou Centro de Testagem e Aconselhamento. Utilizou-se a técnica de entrevista semiestruturada, sendo analisada por meio da técnica de análise de conteúdo lexical. **Resultados:** A partir da identificação dos conteúdos discursivos foram analisadas duas classes que obtiveram as seguintes denominações: Categoria 1 – Tratamento do HIV/AIDS por meio de antirretrovirais; Categoria 2 – Políticas públicas direcionadas ao controle da AIDS, sendo

1 Nurse. PhD student in Nursing by the Associate Program of Nursing Post-graduation at the University of Pernambuco and the State University of Paraíba (PAPGenf UPE / UEPB).

2 Nurse. Master Student in Nursing by PAPGenf UPE / UEPB.

3 Nurse. PhD in Public Health. Professor of the Graduate Program in Nursing at the State University of Rio de Janeiro (PPGenf UERJ).

4 Nurse. PhD in Nursing. Coordinator and teacher of PAPGenf UPE / UEPB.

reveladas as mudanças ocorridas no contexto político e social da AIDS.

**Conclusão:** Percebeu-se a necessidade de incentivar a realização de investimentos financeiros acerca das campanhas voltadas à prevenção do HIV de forma frequente.

**Descritores:** HIV, Síndrome da Imunodeficiência Adquirida, Políticas Públicas de Saúde.

## RESUMEN

**Objetivo:** Identificar el progreso y los fracasos de las políticas públicas en el curso de la epidemia del SIDA en la perspectiva profesional de la salud. **Métodos:** Se trata de un campo de estudio, de carácter exploratorio, descriptivo y cualitativo, realizado con 46 de nivel técnico profesional de la salud y más alto que trabajaba para servicios de atención especializada en VIH/SIDA o de asesoramiento y pruebas. Técnica de entrevista semiestructurada siendo analizado por la técnica se utilizó el análisis de contenido léxico. **Resultados:** Se analizaron desde la identificación del contenido discursivo dos clases que obtuvieron los siguientes nombres: Categoría 1 - El tratamiento del VIH/SIDA por medicamentos antirretrovirales; Categoría 2 - Las políticas públicas dirigidas a controlar el SIDA, y reveló los cambios en el contexto político y social del SIDA. **Conclusión:** Se consideró la necesidad de fomentar la realización de las inversiones en campañas dirigidas a la prevención del VIH con frecuencia. **Descriptores:** VIH, Síndrome de Inmunodeficiencia Adquirida, Políticas Públicas de Salud.

## INTRODUCTION

The Acquired Immunodeficiency Syndrome (AIDS) epidemic event emerged in Brazil in the early 1980s, which was a time of intense political and social mobilization, culminating initially in various forms of responses in the different Brazilian States. Based on pressure from states and municipalities showing an increase in the epidemic, the national media and militant groups that initially formed, the Federal Government has officially decided to officially take Human Immunodeficiency Virus (HIV) and AIDS as a public health problem, resulting in the need to formulate public policies on HIV/AIDS with the society participation through Non-Governmental Organizations (NGOs), media, among other organized groups.<sup>1</sup>

The national policy on Sexually Transmitted Diseases (STDs) and AIDS has the purpose of guiding the actions of the STD/AIDS National Program in the scope of health promotion; Protection of the fundamental rights of people living with HIV/AIDS; Prevention of transmission of STDs, HIV / AIDS and drug misuse; Diagnosis, treatment and care of people bearing of STD/HIV/AIDS; and the development and institutional strengthening of local programs and project managers in this field.<sup>2</sup>

Among the preventive strategies to reduce HIV infection, the consistent and regular use of condoms remains a highly relevant prevention measure in controlling the epidemic.<sup>3</sup> Thus, it is important that people living with HIV/AIDS (PLHA) to use the condom consistently for prevention among couples having either the same or different serology in order to avoid reinfection of strains already resistant to antiretroviral medication, reduce viral load during sexual intercourse and avoid the transmission of other sexually transmitted infections.<sup>4</sup>

In this perspective, considering the integral health care towards HIV bearing people, ensure that health services address aspects related to sexual life, including broad access to condoms and the guarantee of other prevention inputs, as well as broadening their acceptance and use in sexual relations, are still central policies in the field of HIV/AIDS prevention.<sup>3,4</sup>

In view of the changes that have occurred during the AIDS epidemic on the national scene, the present study aimed to identify the advances and failures of public policies during the AIDS epidemic event from the perspective of health professionals.

## METHODS

It is a field study, exploratory-descriptive type and with a qualitative approach, which derived from the database of a Master's Thesis originated from local data that are part of a national multicenter project.

The study included 46 health professionals at both technical and high levels, who met the following inclusion criteria: professional activity from the beginning of the HIV/AIDS epidemic in Recife; To be working in the HIV/AIDS Specialized Service or Testing and Advising Center and developing actions of the STD/AIDS National Program.

Data collection was carried out from February 2011 to August 2013, using a semi-structured interview technique based on a thematic roadmap that among the subjects investigated included the exploration of the HIV/AIDS timing since the beginning of the epidemic, which was the focus of this research.

The interviews were recorded, transcribed in full and organized into a corpus. In order to do the analysis of this corpus was used the lexical content analysis technique, with the help of the ALCESTE 4.10 software (*Analyze Lexicale para Context d'ensemble de Segments de Texte*). In this analysis, a class was developed with contents about antiretroviral therapy and public policies to combat AIDS, which will be addressed in this study.

To ensure anonymity, the research participants were identified by the letter I (initial letter of the word Interview), followed by the interview number (Ex: I1) and its profession.

The project complied with the Resolution No. 466 of December 12<sup>th</sup>, 2012 of the National Health Council and was approved by the Ethics and Research Committee of the *Universidade de Pernambuco (UPE)*, under Legal Opinion No. 125-A/11 and the *Certificado de Apresentação para Apreciação Ética (CAAE)* [Certificate of Presentation for Ethical Assessment] No. 01080.0.097.000-11.

## RESULTS AND DISCUSSION

The analysis of the interviews conducted with 46 health professionals using the ALCESTE software, which resulted in two large blocks. The first one, composed of two classes, addressed the historical and social context of AIDS, and the second block, with three classes, gathered information on

the care practices of professionals in the context of assistance to people with AIDS. In this study will be deepened the Class 1 of the first block, entitled "Antiretroviral therapy and public policies to combat AIDS," which includes information about scientific advances and failures about the fight against AIDS during the epidemic event.

For a better understanding of this class, it will be described according to the thematic groups that emerged from the Ascending Hierarchical Classification, receiving the following denomination: Category 1 - Treatment of HIV/AIDS by means of antiretroviral medication; Category 2 - Public policies aiming the AIDS control.

### **Category 1 - Treatment of HIV/AIDS by means of antiretroviral medication**

In this category, we observe the professionals' vision regarding the treatment of seropositive individuals, as shown in the following statements:

It has become a chronic disease due to the STD/AIDS program and the current antiretroviral medication. [...] High-impact antiretroviral therapy of high potency emerged in the 1990s. (I5, physician)

When the question of antiretroviral came up, it was not that it brought a certain hope, we had another problem: that was the cost of the treatment. (I18, nursing auxiliary or technician)

In my opinion, the big difference nowadays is having the antiretroviral drugs, which are very effective and give a quiet control of the disease. (I41, physician)

Antiretroviral drugs brought a better quality of life for HIV positive and that was good on the one hand; but, to the other side it was not, because unfortunately there is a portion of the population that is ignorant and that thinks that these HIV positives currently live very well and that they have no problem in having AIDS. (I26, dentist)

The issue of the retroviral is that in the past there was no drug, people struggled and suffered, social networks contributed so much that Brazil won the patent of antiretroviral drugs, it started with a category, and today we already have a huge range of antiretroviral drugs. I think HIV studies are very advanced studies. (I24, nurse)

It was possible to perceive through the above-mentioned speeches the question of technological and scientific advances about antiretroviral drugs, which have greatly contributed to the improvement of PLHA life quality, as well as prolongation of survival, by minimizing the signs and symptoms of the disease. Such advances in therapy corroborated that AIDS became a chronic condition, as

well as diabetes and hypertension, for example, requiring continuous follow-up.

However, there are still some negative aspects related to antiretroviral therapy, considering that the chronic condition of AIDS has caused to the general population a kind of negligence feeling about its contamination, contributing to a greater exposure to HIV infection.

In this line of thought, we see a transformation in the vision of health professionals about AIDS, starting to view it as a chronic disease and its care for antiretroviral therapy, increasingly clarifying the concept of a dangerous and permeated disease by the death proximity.

However, considering that being a PLHA involves psychological factors, such as depression, motivation, anxiety and other influences, it is worth noting that adherence to antiretroviral therapy involves, in addition to taking medications, social support, seeking to strengthen autonomy for the self-care, and also making it possible to identify the difficulties related to the treatment, such as the time of treatment and the number of daily pills, in order to facilitate reflection on the form of intervention.<sup>5</sup>

You now see that it is a three-antiretroviral regimen for taking in the morning, afternoon and evening. There was, indeed, an evolution in this part of medication. (I4, social assistant)

In Brazil, the access to treatment and prevention of STD and AIDS is a milestone in the history of the AIDS epidemic due to its universal and egalitarian character for the population, which is guaranteed by the Health Ministry under the *Sistema Único de Saúde (SUS) [Health Unique System]*. This Brazilian attribution demonstrates that developing countries are in a position to promote universal and free access to treatment with equity and regardless of socioeconomic conditions.<sup>6</sup> Thus, universal treatment should be the long-term goal for the benefit of infected and its effect on deceleration. Moreover, it is important to promote efforts to implement existing World Health Organization treatment guidelines worldwide and to apply proven HIV prevention methods.<sup>7</sup>

We managed to move forward today, in the 90's we had the guarantee of antiretroviral drugs and this, indeed, was a step forward in view that in other countries of the world there is a policy that guarantees medicines, the antiretroviral drugs. (I42, social assistant)

In this perspective, after three decades of the epidemic event, AIDS is still a chronic condition, needing to reformulate the structure of health care, and the professional must attend the person as a whole, investigating issues that until then were little explored in health care, such as the exercise of sexuality, differences, losses and death, as well as prioritizing affective and social issues, previously denied to the background, giving visibility to the unpreparedness and disorientation of health professionals in the care of people affected by illness.<sup>8</sup>

It is also worth noting that, given the changes that HIV/Aids individuals undergo in the clinical context

that leads to irregular adherence, it is important, among other things, to promote interventions aimed at reducing body dissatisfaction and self-esteem. Thus, nutritional interventions, changes in lifestyle and other less conventional actions aimed at aesthetics, health and beauty can be adopted in the clinical environment aiming at the reinforcement of adherence.<sup>9</sup>

Regarding the non-adherent patients to therapy, it is worth emphasizing that health professionals are a fundamental component in the identification of patients who do not respond to treatment, since they are able to promote effective strategies to reverse this situation. Additionally, patient compliance can be enhanced through a good relationship between the professional and the patient and his/her family, conducting more frequent consultations, and providing adequate information in a detailed way so that the patient can better understand his/her health state and can correspond to the therapeutic guidelines.<sup>10</sup>

## Category 2 - Public policies aiming the AIDS control

In this other category, it was approached about national public policies and campaigns aimed at the prevention of AIDS, according to the following statements:

I see very little with the population in general, I see little in the media, I see little in relation to the issue of government, I see more in the carnival, but much more in the sense of controlling AIDS than in the sense of a struggle against prejudice. (I29, pharmacist)

When it was not a compulsory disease, it was seen with different eyes. Currently it is not that it is dropped, but the investment to do our part I think it is small yet, because we only see campaigns in time of carnival, these kinds of parties. (I31, nurse)

There were campaigns focused on this issue. We also saw that it was not only a risk group, but also the vulnerability. Campaigns have also been generated in this regard. Of course you see NGOs always seeking the rights of HIV positive, it is a constant struggle, and something that will not stop, is always evolving. (I4, social assistant)

It is a disease that is spreading, because you do not have this profile anymore, and it grows, although in Brazil is considered a country that has very effective measures, it has a big alert, but we see that aids continues to grow frighteningly. (I28, nutritionist)

There is evidence of precariousness and ineffectiveness in the campaigns promoted for AIDS prevention, since they do not occur routinely, being disclosed in specific periods, causing gaps in the process of promotion and prevention of STD.

The campaigns to prevent STDs, especially HIV, are usually carried out in the carnival period, possibly because people's thinking about sex is somewhat liberated, and people are only thinking about the moment and prevention.

Fifteen years ago, we had a much more frequent incidence of campaigns. So it's one thing, one after another. Nowadays, it is practically only in carnival period. (I18, nursing auxiliary ortechician)

Currently, it seems that the thing has not been so publicized, eventually campaigns for AIDS, eventually in the carnival period. Always in these commemorative dates, carnival, Aids Day - that is in August - in these periods some actions are done, but I think it has to be something more remembered during the whole year. (I46, nutritionist)

This way, the importance of constantly encouraging preventive measures through public campaigns is evident, not only in situations in which sexual relationships occur with partner turnover, but also in fixed relationships involving two partners, since the use of condoms is not only associated with attitudes of promiscuity.<sup>11</sup>

Much more information is needed. A while ago there was in the media the issue of condom use that reached many people, I thought that it has been stabilized. But then it fell on chance and the number of cases began to grow as well. (I19, social assistant)

Furthermore, it has been perceived the very important influence of the NGOs in favor of PLHA.

In fact, all the achievements in HIV/AIDS in Brazil are due to these NGOs. If it were not for these NGOs, the country was not in such a prominent position in the world in relation to its STD/AIDS program. Would not be! Thanks to them. (I6, physician)

I see it as a satisfactory thing, but one thing that is diminishing, perhaps, is the pressure of civil society. As it is under control, it seems that people do not die more than AIDS, it is in the imagination, both to reduce prevention practices and also in relation to the situation of fighting for the maintenance of antiretroviral drugs, of NGO support. (I36, physician)

Especially at the beginning of the epidemic, we managed not to control, but at least to reduce the number of people who would become infected if it were not for the NGOs. Currently, at the public level, we have the STD/AIDS program set up by the Health Ministry. Of course, here and there, there is a flaw, an error, but overall, it is very good, you can deal directly with HIV positive. (I22, psychologist)

In this regard, it is known that the movement, mainly composed of NGOs supporting and fighting for the rights of people with AIDS, was fundamental in the achievement of rights in the field of health, both nationally and internationally, due to its repercussion generated in the society and in the State. Through this struggle between society and the State, it was possible to construct public policies in the face of AIDS, both in prevention strategies, with models appropriate to local realities, and in health care and treatment.<sup>12</sup>

Some of the interviewees' suggestions on actions and strategies aimed at the reduction of new cases and/or control of AIDS are highlighted.

They are always doing research. I think there should be more investment in advertising and encouragement on television and radio. (I12, nursing auxiliary or technician)

Education campaigns in relation to preventive measures of STD and education, even. From the school point of view, to be together since the formation of the adolescent, a child, so that it can really bear fruit in the future. (I30, physician)

It is a role of the issue of health promotion and precaution that has to start with the Health Ministry, have a stronger performance. It is investing much more in the treatment than in the side of the prevention and promotion. There should be more of this stimulation of these actions. (I7, social assistant)

I think there is a need to have more seminars, get more outreach, be more alert to the general population in the middle schools. (I28, nutritionist)

Therefore, it is of great importance the incentive to constantly carry out campaigns for the prevention and demystification of AIDS, mainly through the television media, since it is a medium of information widely used by the population in general. Furthermore, the distribution of condoms should be increasingly accessible to the population. Another issue to be mentioned is with regard to young people and adolescents, who have presented increasing rates of incidence of AIDS. The best way to reach them is through the school environment, because it is a place where they spend most of their time and where there is an exchange of ideas, experiences, doubts and uncertainties.

Regarding the transformations that have taken place during the AIDS epidemic, it has been noticed that, despite this infection has caused irreparable losses and suffering, on the other hand, it has brought advances in public health, such as the search for improvement of health systems, the effective incorporation of social control, the establishment of multidisciplinary and intersectoral strategies, and placed human rights at the center of the health policy agenda, which are essential requirements for dealing with most public health problems.<sup>13</sup>

## CONCLUSION

Through the present study, it was possible to identify that the scientific advances could provide to people living with HIV/AIDS an improvement of the quality of life and increase of the survival, clarifying the perception of fatal disease to the concept of chronic disease. This characteristic corroborates for a better care done by health professionals, since they have subsidies to guide their patients about the treatment and provide a better well-being to them.

Regarding public policies with emphasis on HIV/AIDS, it is known that there are free and universal drug dispensation programs for the treatment of AIDS and opportunistic diseases, distribution of condoms, specialized HIV/AIDS care services, among others. However, there was a need to encourage financial investments on HIV prevention campaigns more often.

It is also worth noting that the AIDS epidemic was also supported by NGOs, which were and still are of great importance in the fight against and fight against PLHA.

New research on the subject in the HIV/AIDS Specialized Service and Testing and Advising Center of the different Brazilian states is recommended as a way of identifying the advances and failures of public policies during the AIDS epidemic event according to the perspective of the health professionals, so as to have a vision of the whole and to draw more and more improvements for the public policies of this disease in Brazil.

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Received from: 02/02/2017

Reviews required: No

Approved on: 07/02/2017

Published on: 10/05/2018

**Corresponding Author:**

Rebeca Coelho de Moura Angelim

Rua Padre Landim, 292, apt. 504

Madalena, Recife, Pernambuco

ZIP CODE: 50.710-485

E-mail: <rebecaangelim@hotmail.com>