



T21 ONLINE CLINIC

An interdisciplinary virtual model expanding access to comprehensive care across the lifespan.

*Lidia Gómez, M.D.
Alejandra Ochoa, M.D.
María J. Delgado, M.D.
Gabriel Couto, LPC*



DISCLOSURES

- The *T21 Online Clinic* project received funding from the 2025 Education Award granted by the Global Down Syndrome Foundation .
- The funding organization had no role in the design, content, interpretation, or presentation of this work.

LEARNING OBJECTIVES

01

Identify the key barriers limiting access to comprehensive healthcare for individuals with Down syndrome.

02

Describe the essential components of a person- and family-centered interdisciplinary digital clinic.

03

Evaluate the outcomes and key lessons learned from the T21 Online Clinic model.



PRESENTATION OUTLINE

01

Who we are

02

Pilot project

03

Results

04

Challenges and
Limitations

05

Future Directions
and Next Steps

06

Key Takeaways



1_ WHO WE ARE

MISSION, VISION AND OBJECTIVES



Individuals with trisomy 21 are at increased risk for a wide range of physical and mental health conditions.



Comprehensive, interdisciplinary care across the lifespan is essential to:

- Promote prevention
- Facilitate early recognition
- Ensure timely intervention

**Individuals
with
trisomy 21**



**Families
and
Caregivers**



BARRIERS TO HEALTHCARE ACCESS



Geographic

Limited access to specialists.



Institutional

High demand, referral complexity, and delayed access to care.



Workforce

Knowledge gaps in trisomy 21 care and follow-up.



Economic

Cost barriers to private healthcare and insurance.



T21 ONLINE
CLINIC

A Virtual Care Model



OBJECTIVE

Empower families through coordinated medical, therapeutic, and emotional support.



VISION

To become a leading virtual center of excellence for Down syndrome care and family support.



CARE MODEL

Virtual, family-centered, interdisciplinary support.



MISSION

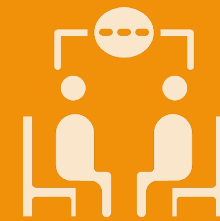
To improve quality of life through accessible, evidence-based, family-centered care.

CLINICAL SERVICES



Medical Consultation and Care Coordination

- Medical guidance and care planning.
- Specialist and subspecialist consultations.



Psychotherapy

- Individual psychotherapy
- Couples psychotherapy
- Group psychotherapy



Therapy Assessment and Follow - up

- Speech and language therapy
- Cognitive and behavioral therapy
- Guidance for orofacial myofunctional, sensory integration, and occupational therapy

TARGET POPULATION



Individuals with
trisomy 21



Families and
caregivers



Healthcare
professionals



Education
professionals



T21 ONLINE
CLINIC
A Virtual Care Model

TARGET POPULATION

Community



T21 ONLINE
CLINIC
A Virtual Care Model

**Is this virtual care model
feasible?**

2 PILOT PROJECT

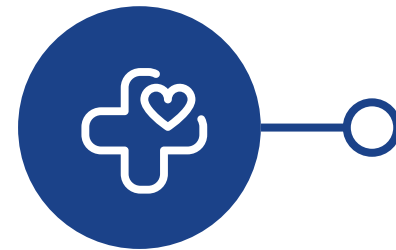
COMPREHENSIVE CARE PATHWAY



T21 ONLINE
CLINIC
A Virtual Care Model

PILOT PROJECT

Comprehensive
interdisciplinary care model
3-month pilot program



Medical care for individuals
with trisomy 21



Emotional support for
parents or caregivers



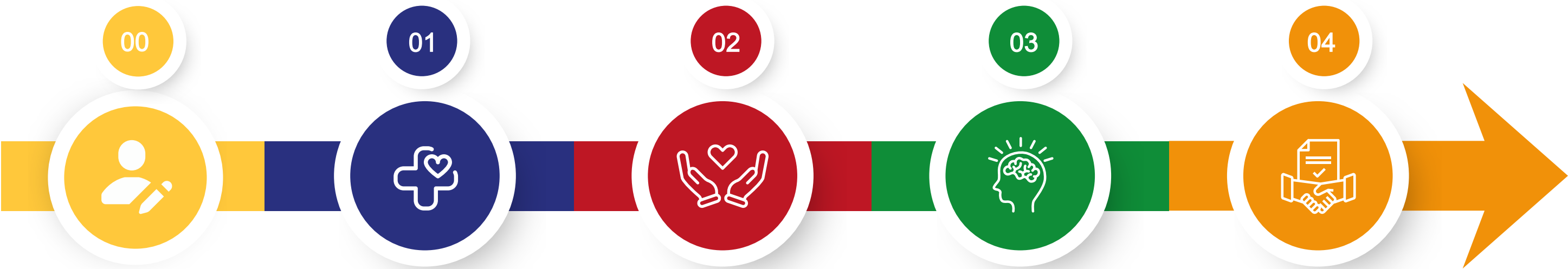
Therapeutic strategies
for neurodevelopment
and adaptive self-care



Health Education and access
to educational resources

COMPREHENSIVE CARE PATHWAY

Pilot Project



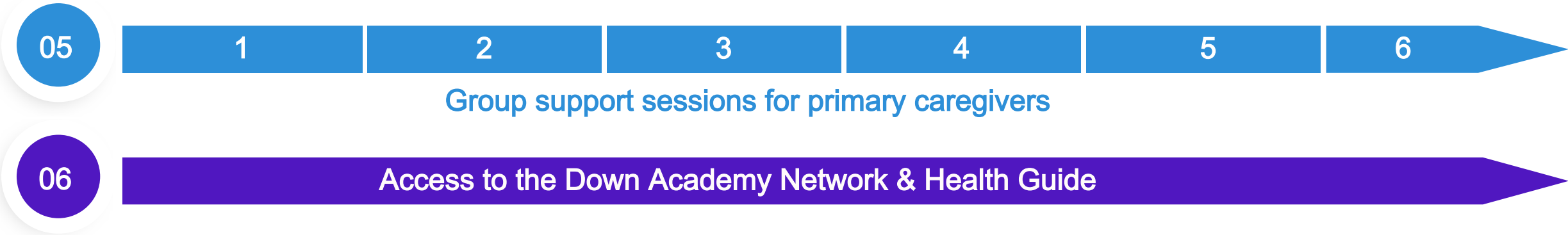
Registration

Initial assessment

Psychological support

Therapeutic Assessment & Care Planning

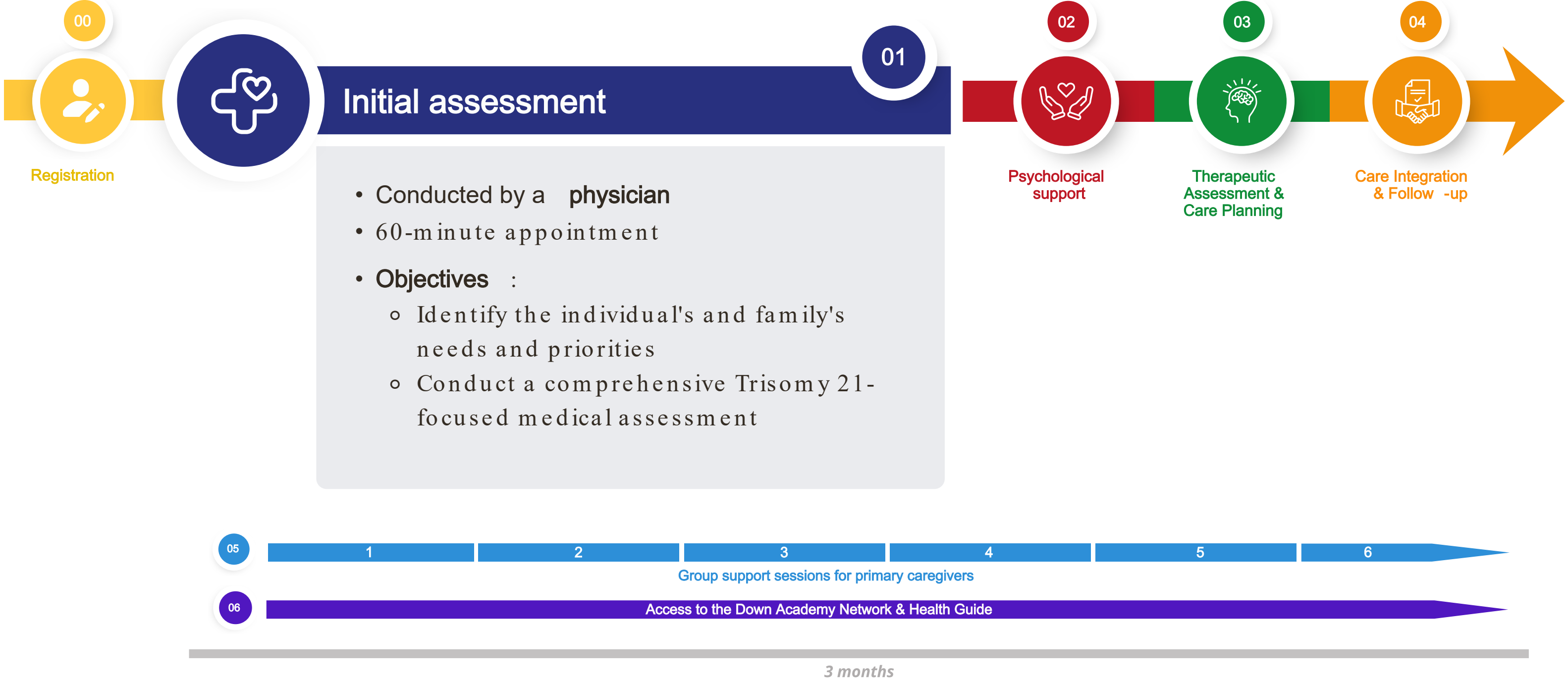
Care Integration & Follow-up



3 months

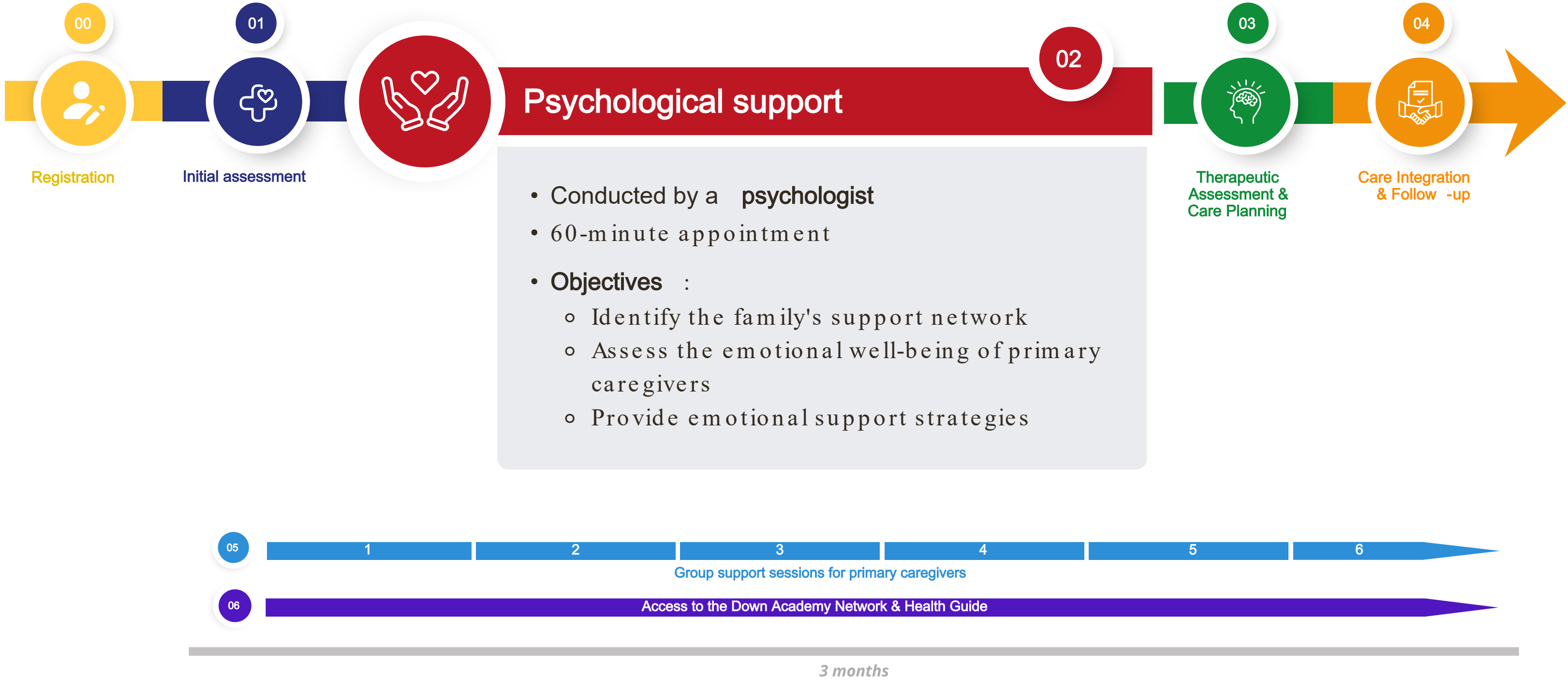
COMPREHENSIVE CARE PATHWAY

Pilot Project



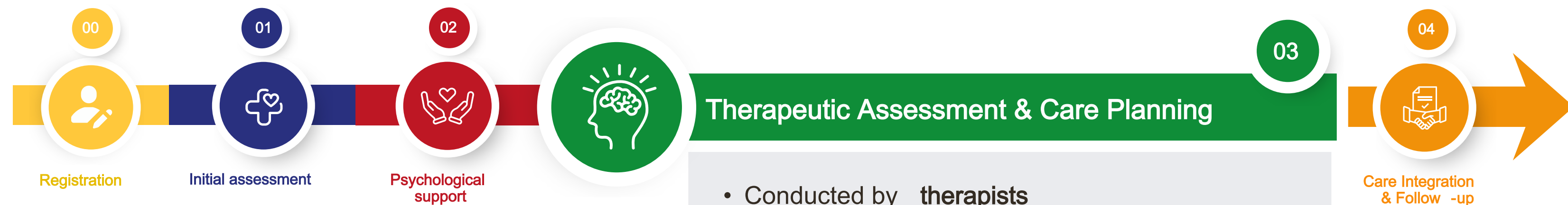
COMPREHENSIVE CARE PATHWAY

Pilot Project



COMPREHENSIVE CARE PATHWAY

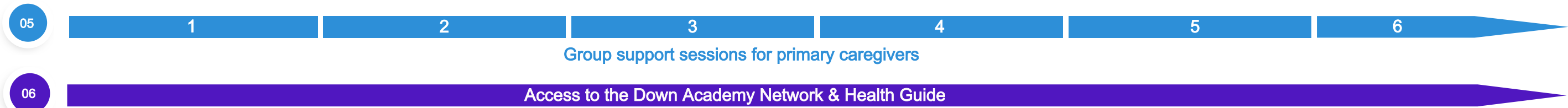
Pilot Project



Therapy options based on the individual's primary needs:

- Physical therapy
- Speech and orofacial myofunctional therapy
- Applied Behavior Analysis (ABA)
- Occupational therapy and sensory integration
- Academic support and learning strategies

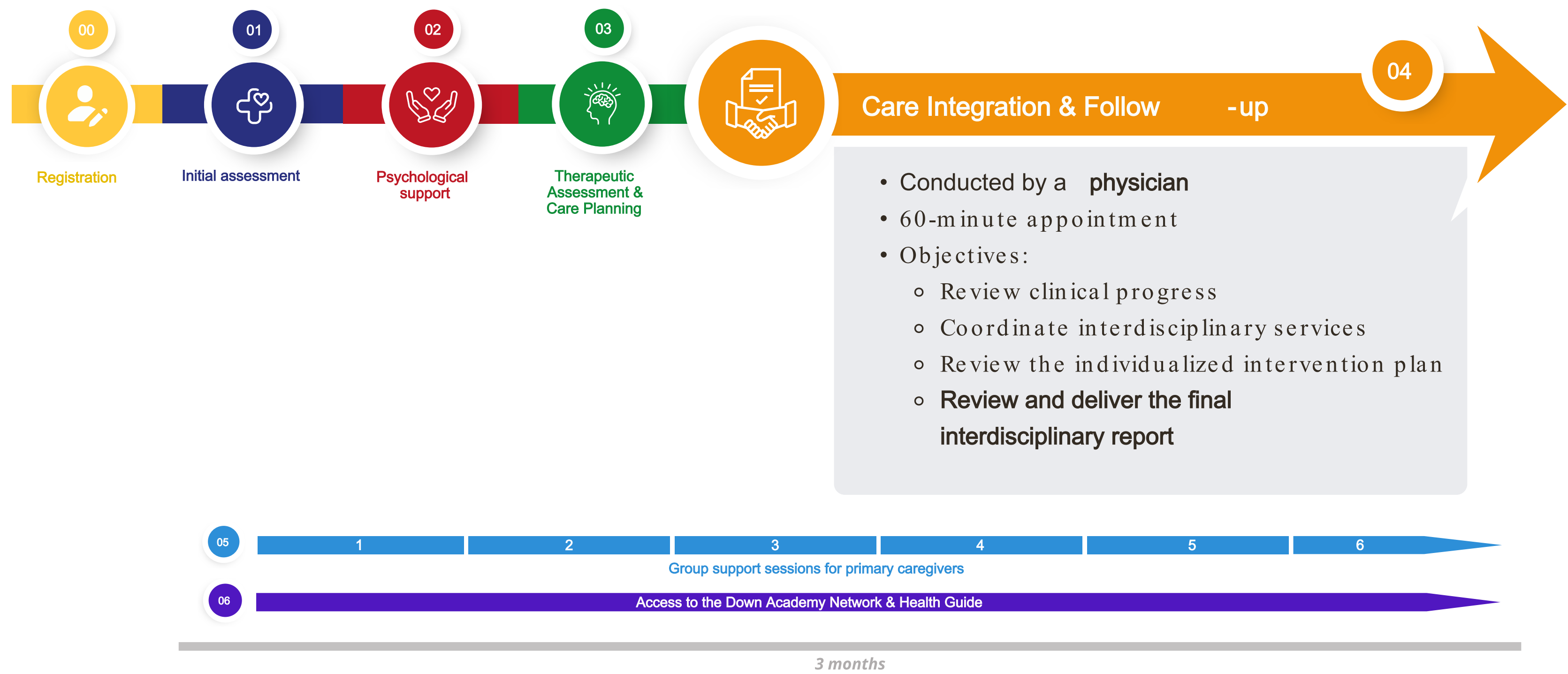
- Conducted by **therapists**
- Three 60-minute sessions
- Objectives :
 - **Identify priority areas for intervention**
 - Develop individualized strategies to promote neurodevelopment and functional independence



3 months

COMPREHENSIVE CARE PATHWAY

Pilot Project



COMPREHENSIVE CARE PATHWAY

Pilot Project



05

Group support sessions for primary caregivers



- Virtual group sessions
- One 90 -minute session every two weeks
- Objectives:
 - Provide a **safe space** for caregivers to share experiences
 - Offer strategies to **reduce emotional burden** and prevent social isolation
 - Promote **self -care** and caregiver well-being

06

Access to the Down Academy Network & Health Guide

3 months

COMPREHENSIVE CARE PATHWAY

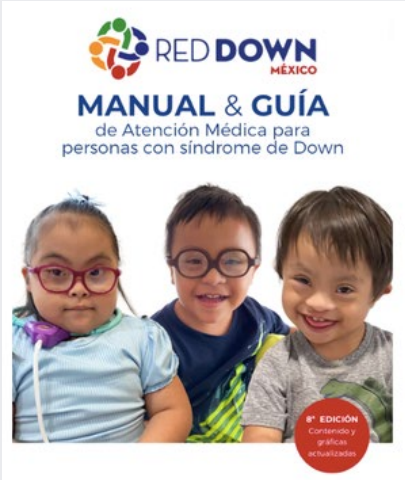
Pilot Project



06

Access to the Down Academy Network & Health Guide

- Online educational platform
- Digital version Health Care Guidelines



SALUD Y BIENESTAR

El impacto de la nutrición en la salud y el desarrollo

DRA. TANIA VARGAS

Curso

En esta sesión se abordarán temas de suma importancia relacionados con la nutrición y sus consideraciones especiales cuando se...

\$150

SALUD Y BIENESTAR

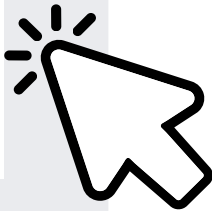
Dejar el Pañal

DRA. KARLA FLORES

Curso

En la charla, exploraremos qué es el control de esfínteres y discutiremos la anatomía, los prerrequisitos y las fases necesarias para...

\$150



3 months

3 RESULTS

PRELIMINARY EXPERIENCE



44
FAMILIES



88 MEDICAL
CONSULTATIONS



44 PSYCHOLOGY
CONSULTATIONS



107 THERAPY
ASSESSMENTS



24 GROUP THERAPY
SESSIONS



ACROSS 3 COHORTS
2025-2026

PROGRAM REACH

GEOGRAPHIC REACH



18
MEXICAN
STATES

Families from across
México, urban and
rural communities
+ 4 Countries



COLOMBIA



UNITED STATES



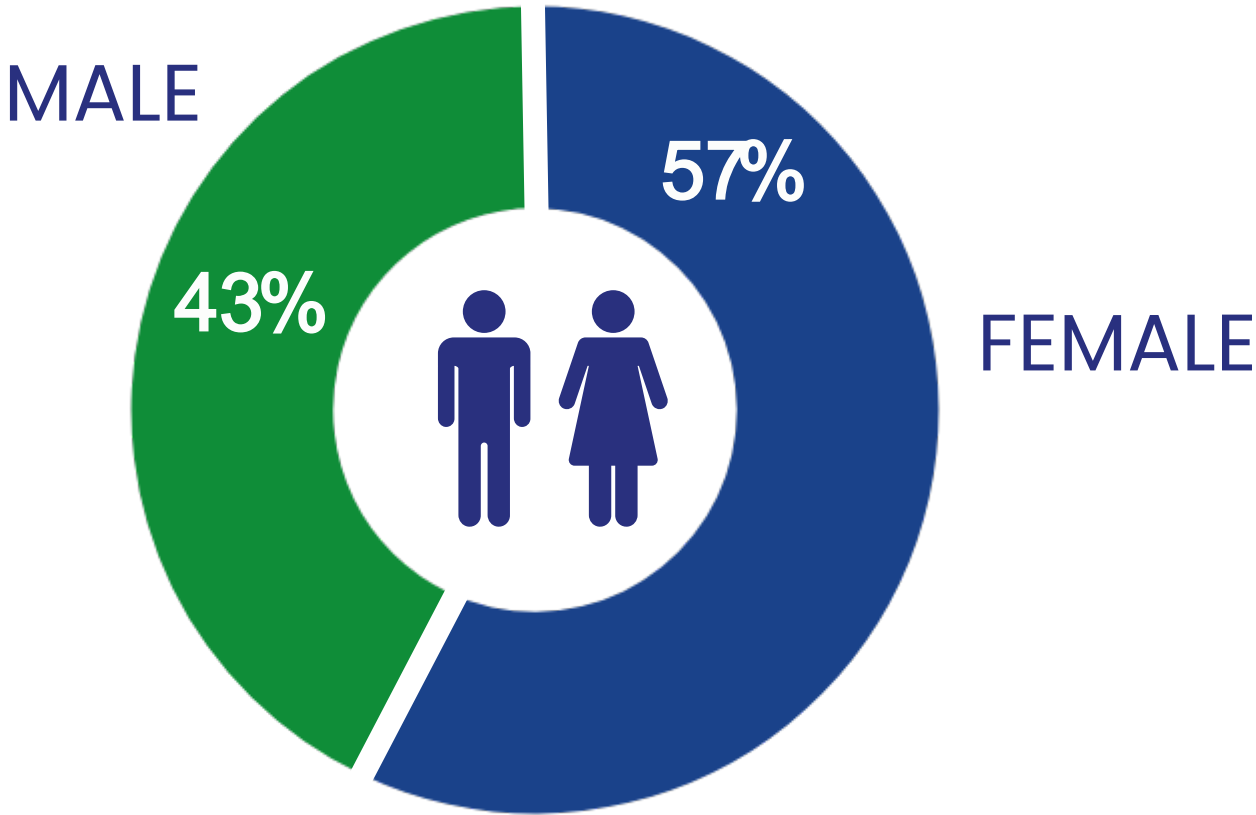
PANAM
A
SWITZERLAND



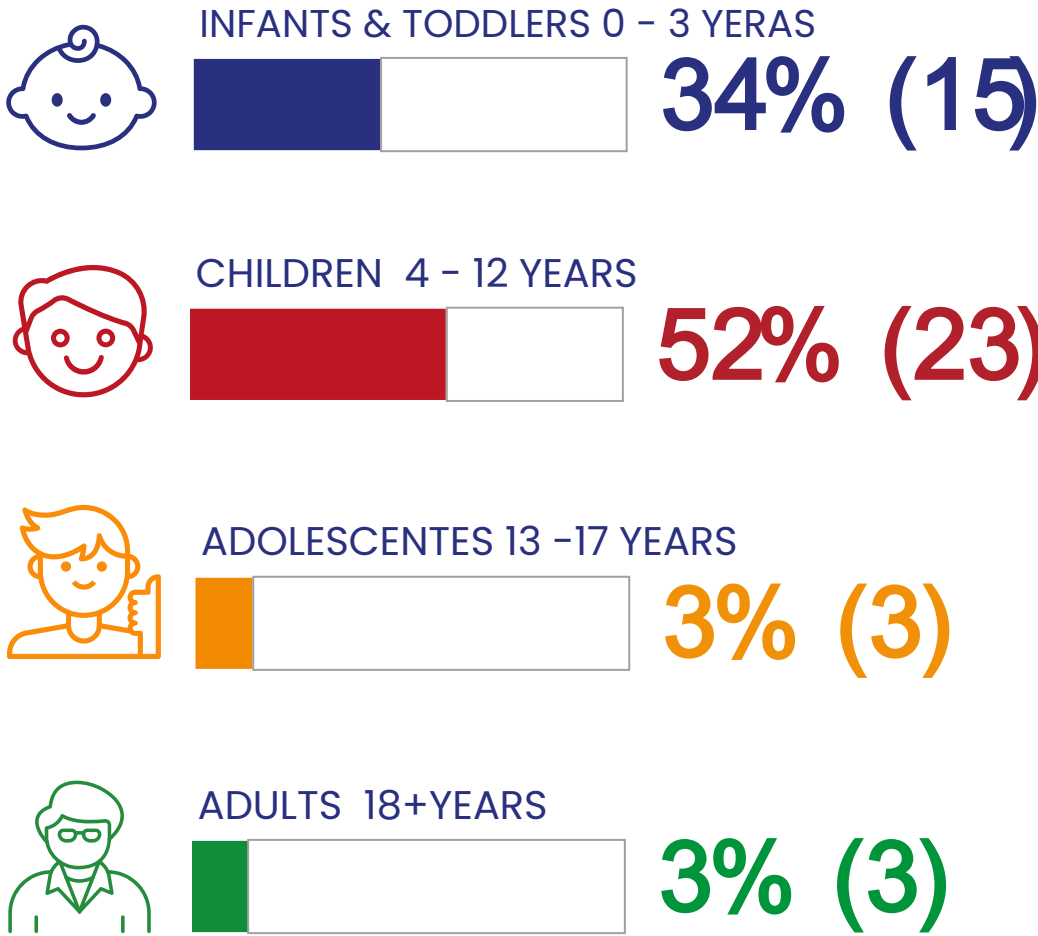
PARTICIPANT PROFILE

WHO DID WE ATTENDED?

SEX



AGE DISTRIBUTION



AGE RANGE



6 MONTHS
TO
41 YEARS

Diverse ages,
unique needs

IMPACT ON FAMILIES



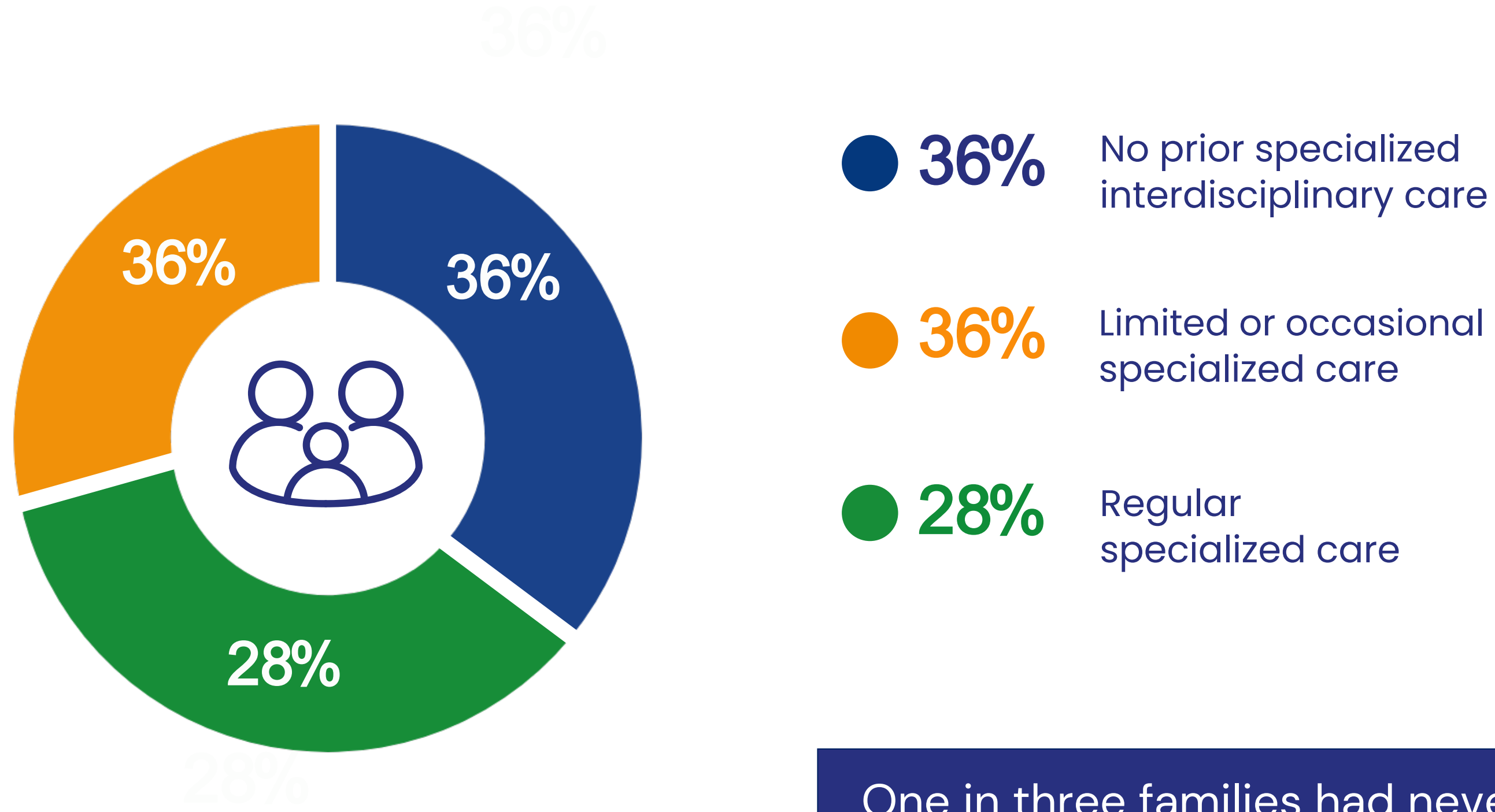
36/44

Completed the
post -program
survey

ACCESS TO CARE → EMPOWERMENT → ACTION → CONTINUITY

ACCESS TO CARE

WHO DID WE REACH ?



One in three families had never accessed specialized interdisciplinary care before T21 Clinic

EMPOWERMENT FAMILIES GAINED CLARITY

Clarity about next steps (1 to 5 scale)



- More supported
- Greater confidence to make decisions
- Better understanding of needs
- Less alone in the journey

More than 75% of families agreed with all four statements

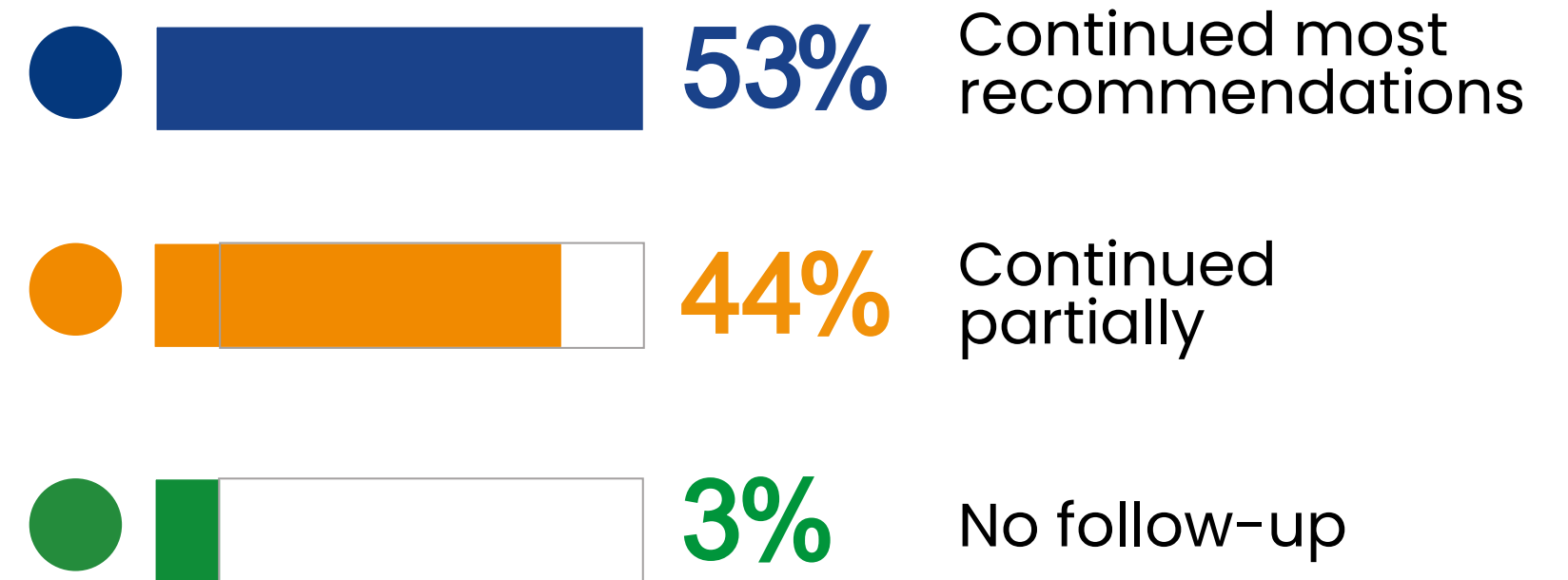
ACTION

FROM KNOWLEDGE TO ACTION

Most common actions after the Clinic

- Consulted specialists
- Scheduled evaluations
- Adjusted therapies
- Implemented changes at home
- Organized care plan

Continuity after the program



The program generated sustained engagement beyond the intervention

CONTINUITY THE JOURNEY CONTINUES

Current situation

● 36%

Following a clear plan

● 8%

Need help reorganizing care

● 50%

Still have pending actions

● 6%

Feel lost again

The main challenge is no longer providing information but sustaining coordinated care over time.

GROUP SUPPORT SESSIONS

GROUP SUPPORT SESSIONS

Participation & satisfaction

90%



Attended
all or most
of the
sessions

4.6/5



Very high interest in participating
in other similar cycle

GROUP SUPPORT SESSIONS

Emotional benefits

4.3/5
★★★★★

Confident sharing
experiences

4.3/5
★★★★★

Improved stress and emotion
management

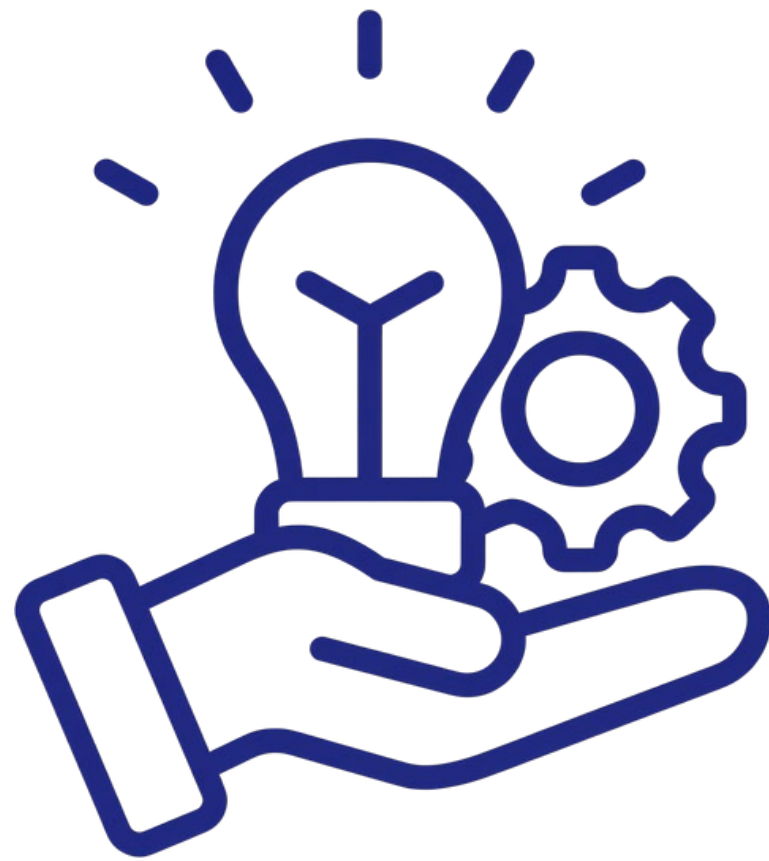
4.2/5
★★★★★

Felt supported by other
families



GROUP SUPPORT SESSIONS

Practical application



4.6/5



Found the topics useful for
daily care giving

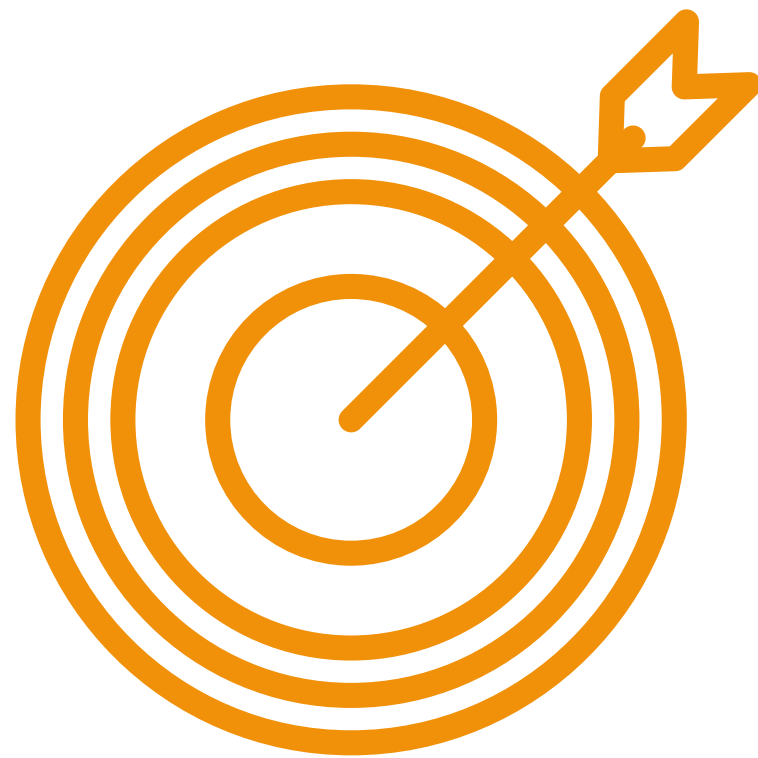
3.9/5



Applied tools and strategies
learned during the sessions

GROUP SUPPORT SESSIONS

Most relevant topics



- Caregiver burnout and emotional burden
- Concerns about their child's future and development
- Sharing personal caregiving experiences
- Guilt and self-imposed pressure

FAMILY PERSPECTIVES

VOICES THAT INSPIRE US

WHAT FAMILIES TOLD US

“

Now we have clear answers and a path forward.



“

It was a game changer for our family.



“

We feel more confident making decisions for our child.



“

For the first time, we no longer felt alone.



“

We found not only specialists, but also a community.





4 CHALLENGES AND LIMITATIONS

CHALLENGES & LIMITATIONS

Financial constraints

- Significant financial burden for many families.
- Not financially sustainable without external support.



COST OF DELIVERING THE T21 ONLINE CLINIC



Average cost
per family

\$550_{USD}

Includes medical, psychological, and therapy services, group support sessions, care coordination, and follow -up.

CHALLENGES & LIMITATIONS

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Limited access to specialists

Limited access to trained local specialists for in-person follow-up.



CHALLENGES & LIMITATIONS



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Time constraints

- Scheduling challenges within the 3-month program.
- Some participants required additional sessions.

5 FUTURE DIRECTIONS AND NEXT STEPS

FUTURE DIRECTIONS & NEXT STEPS

01

Sustainability

Expand access through strategic partnerships and sustainable funding.

02

Scalability

Strengthen local capacity through provider training and care networks.

03

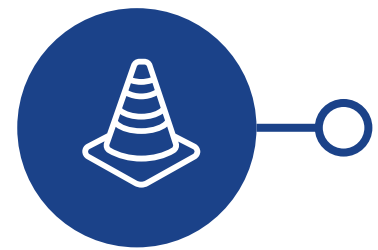
Evidence Generation

Evaluate long-term outcomes and optimize the model.



6— KEY TAKEAWAYS

KEY TAKEAWAYS



Key barriers

Limited access to specialists, transportation barriers and lack of professional guidance.



Essential elements

Integrating interdisciplinary collaboration, family participation and accessible virtual communication tools.



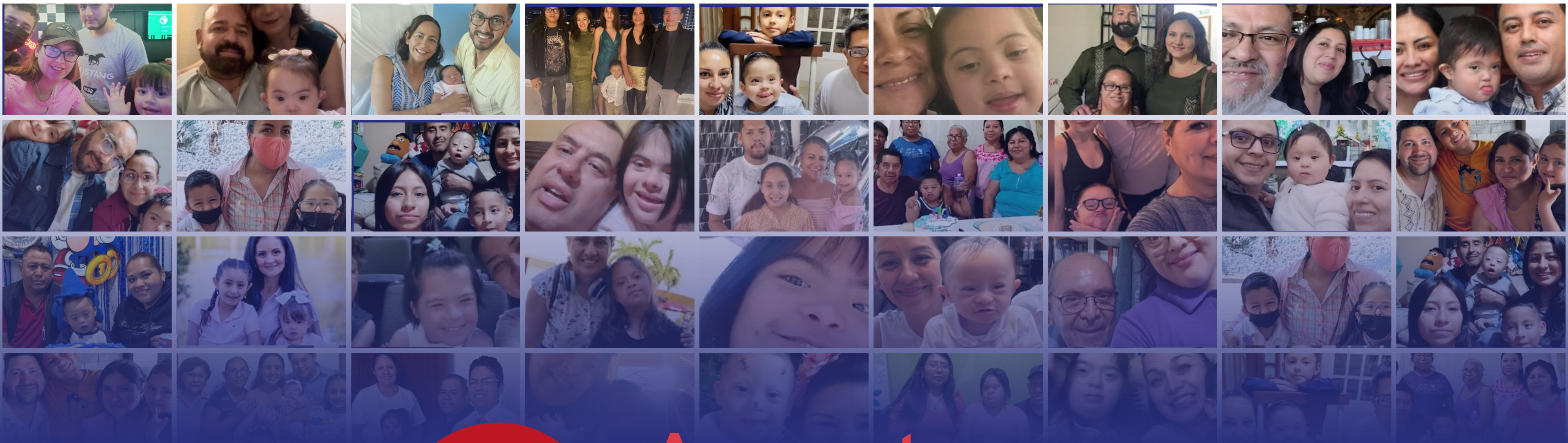
Outcomes

44 families, 5 countries, a new way of reaching families without time or distance constraints.



*Expanding access to comprehensive
care across the lifespan.*

AWAKEN AWARENESS
STRENGTHEN FAMILIES
BUILD COMMUNITY



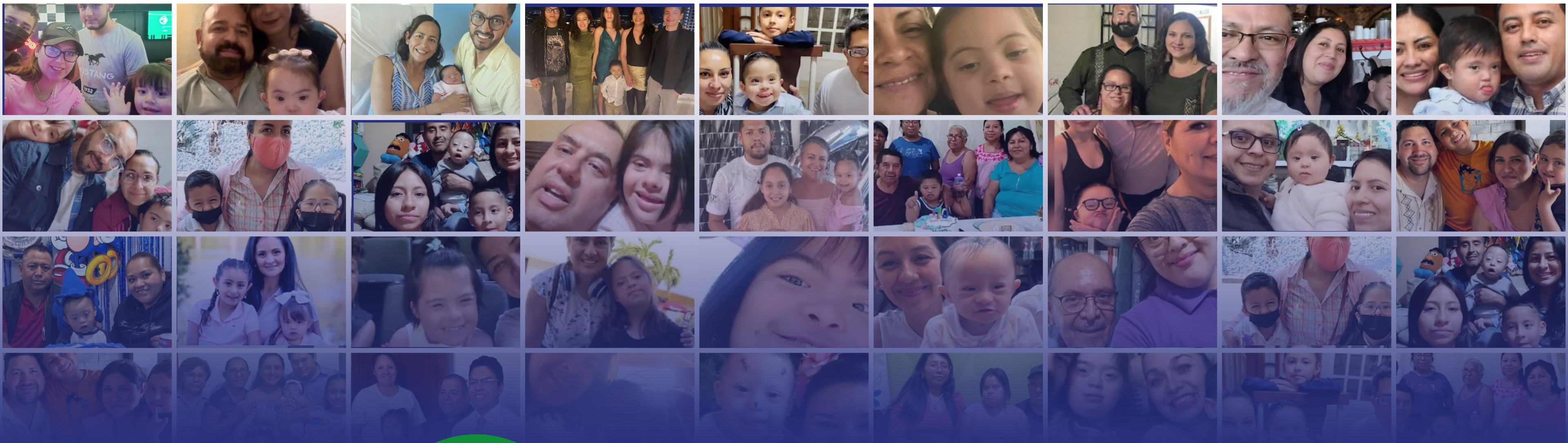
Access to care

Reached families with limited
access to specialized care.



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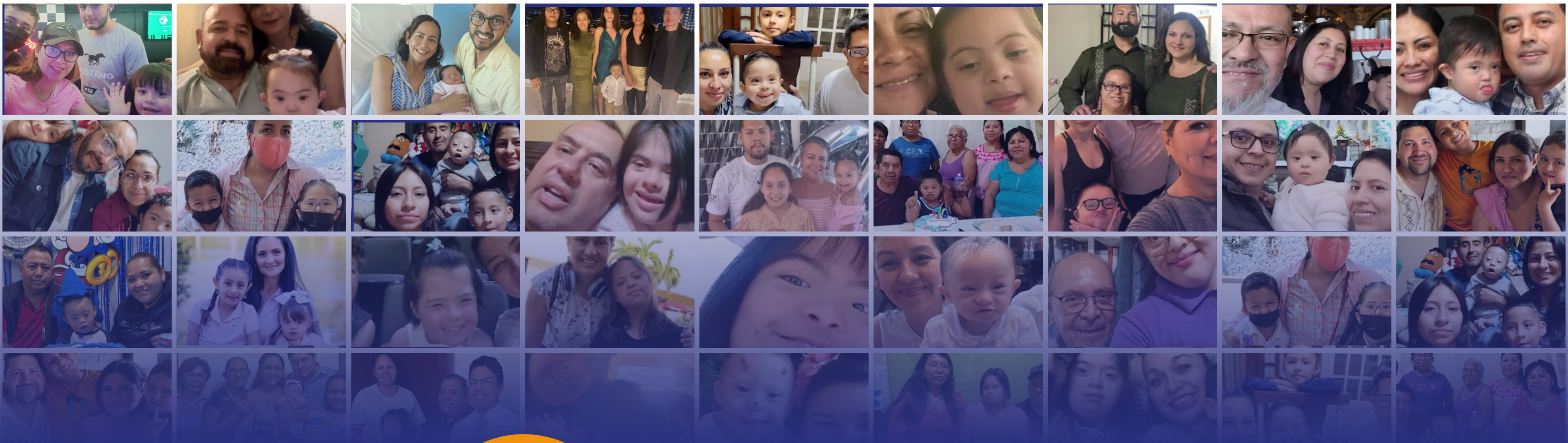
Empowerment

Families gained confidence,
knowledge, and felt supported.



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STRENGTHEN FAMILIES
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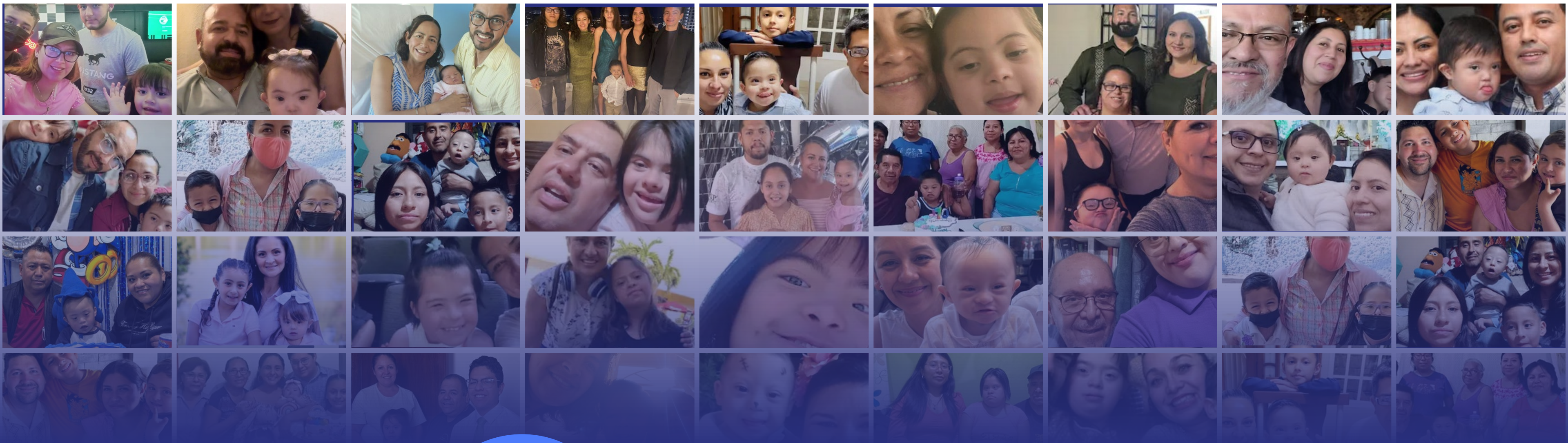
Action

Recommendations translated
into real -life changes.



*Expanding access to comprehensive
care across the lifespan.*

AWAKEN AWARENESS
STRENGTHEN FAMILIES
BUILD COMMUNITY



Continuity

Long-Term follow -up is
needed to sustain progress.



Expanding access to comprehensive care across the lifespan.

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STRENGTHEN FAMILIES
BUILD COMMUNITY





Thank you!



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[+52 1 998 277 0766](tel:+5219982770766)

