

Our objective is to provide to patients with blood diseases and their families with the help necessary to better their quality of life. A diagnosis with a blood disease produces major changes both in the lives of the patient and their principal caregiver (including their social, work, family, and economic environments), and these services become necessary to help better said quality of life. As a result, at ASCOL we have developed the following programs:

1 Assistance to the patient and his/her family

Information and Advice Services: The new situation that comes with a diagnosis of a blood disease brings forth a series of questions about family, work, money, etc. The purpose of this service is provide families with the tools necessary for the situation to become as normal as possible.

Accommodation: Many patients and their families are displaced from their homes to our city, Salamanca, for periods of at least a month. ASCOL has two flats available, equipped with all the benefits of a traditional home, which helps the family rest in a positive environment. And, if necessary, the patient and his/her family may stay after being discharged from the hospital.

Material Help: The hospital stay can become very prolonged. To make it more manageable and to avoid the deterioration of the family's economic situation, ASCOL makes available televisions in all of the hospital rooms. And for better comfort for patients and families, ASCOL also provides a pull-out bed, refrigerator, and computer.

2 Psychosocial Support

Through different programs, we hope to alleviate the impact caused by the diagnosis to family members as well as the patients.

Coffee with ASCOL: We offer in the living room of the hospital floor coffee and teas with pastries/cookies. We provide daily newspapers, books, games, microwaves, a toaster, and more. We hope to strengthen the communication between families, patients, and ASCOL by encouraging, listening, and assisting with all of their needs that are within our means.

Match-ups: ASCOL matches one patient who has overcome his/her disease with another, where they can meet for an hour

per week to support each other and help diminish the anxiety caused by their diagnoses.

Relaxation: Directed to the primary caregivers. Through different relaxation techniques (breathing, visualization, Reiki, stories...) we teach how to control the anxiety and stress that can be produced as a consequence of the long periods of hospitalization.

Accompaniment: A volunteer accompanies the patient and/or primary caregiver inside or outside the hospital, in order to support them emotionally.

Games/Crafts: Through different activities, we encourage the formation of small groups with a focus on entertainment. We provide these distractions in order to diminish the worry of the patients that participate and their families.

Psychosocial Support Group for Families: Our goal is **TO CARE FOR THE CAREGIVERS** and to help family members and other caregivers who participate generate alternative strategies to confront the difficulties that can arise throughout the course of the illness.

3 Volunteer Work

Dedicated exclusively to our current and potential group of volunteers, we have developed the following programs:

Being a volunteer isn't easy. For this reason ASCOL works with them and defines their roles, in addition to providing them with the theoretical and practical knowledge necessary to be a successful volunteer. For this we run the following programs:

- Recruitment and Training;
- Coordination;
- Follow-up.

4 Increasing Awareness

ASCOL provides information about **BONE MARROW DONATION**, different aspects of the disease, and the **advancements** that have been accomplished in this field. We organize social and cultural events such as concerts, plays and skits, and conferences, where we also provide this information.

Registration Form

Mr./Mrs./Ms. _____

who resides at _____

number ____ flat ____ City _____

Province _____

Postal code _____ Phone _____

DNI/Passport Number _____

Email _____

As a partner collaborating with the purposes of the same by means of a quarterly contribution of ____ Euros. (A minimum of 10 Euros per quarter, please).

The contribution can be made with care to my account number:

International Bank Account Number: _____

Entity _____ Branch _____

Control Digit ____ AccountNumber _____

From bank _____

Signed: Mr./Mrs./Ms. _____

In agreement with the mandate in the law 15/1999 of Protection of Personal Character Information, the interested party is aware that the collected information forms part of the file SOCIOS registered in the General Registry of Protection of Information, which is responsible for ASCOL, and whose purpose is the management and control of payments and fees, institutional communication of summons and events, as well as the sending of information about the activities done by ASCOL and Christmas cards.

However, you may refuse to authorize the use of your information for some of the above purposes by marking the corresponding boxes:

- I do not authorize the use of my information for sending Christmas cards and other greetings.
- I do not authorize the use of my information in sending information about ASCOL activities.

The associate is responsible for the veracity of the information that he/she provides, as well as the communication of any changes that occur, so that at any moment the information corresponds exactly to his/her current situation.

You may exercise your rights of access, rectification, cancelation, and opposition in writing to ASCOL, Ribera del Puente 6, 37008, Salamanca, or to any of the other ASCOL centers, along with valid proof of your identity, such as a photocopy of your DNI or passport.

ASCOL reserves the right to use, in their methods of information, photographs and/or other materials from the activities facilitated by ASCOL, in which the interested party participates, except for previous expressed opposition on the part of the same, their parents, or tutors.

- I do not authorize the use of my image in the methods of information of ASCOL.

Signature:

**association against leukemia
and blood diseases**



Calle Ribera de la Puente 6, 37008. Salamanca, Spain.
Phone and Tax: 923-260-066. www.ascolcyl.org
Email: ascal.1992@gmail.com

All of the contributions are tax-deductible (from the I.R.P.F. in Spain) within the limits established by the law

4 Ways to Contribute:

- Donation:
NCC: ES04 3035 0305 41 3050016847
- Partner: 10 Euros every three months
- Cooperating Entity: 50 Euros a year
- Teaming: 1 Euro a month (teaming.net/ascal)

We are in:

www.ascolcyl.org
www.facebook.com/ascal.cyl
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ascal

**asociación contra la leucemia
y enfermedades de la sangre**

DECLARADA DE UTILIDAD PÚBLICA

**association against leukemia and
blood diseases**

DECLARED OF PUBLIC INTEREST