

Promoting Health in the *Bateyes*



Reaching the Community

Radio programs and community discussions will distinguish the PRIME II Project's new intervention to improve reproductive health in the Dominican Republic's *bateyes*.

Home to former sugar cane workers displaced when the industry was privatized, *bateyes* are characterized by substandard living conditions and a close-knit sense of community. Housing is overcrowded and makeshift, built largely of tin, cardboard, and scraps of wood. Electricity is intermittent, water is often unfit to drink, and problems with sewage and trash disposal create public health hazards. Health care in the *bateyes*, when available, suffers from lack of infrastructure, supplies, and properly trained providers. Compounding these challenges, residents of the more than 400 *bateya* communities are frequently ill informed about issues and behaviors that affect their health.

Tapping into the culture of the *bateyes* with positive health messages, PRIME II will focus its efforts through community health promoters and the popular medium of local radio. In collaboration with the Dominican Institute for Community Action (IDAC), a non-governmental organization with 15 years experience working in *bateyes*, PRIME will initially train 35 promoters in seven *bateyes* in the province of San Pedro de Macoris. The combined population of the seven *bateyes* is approximately 8,000.

Training Health Promoters

Health promoters present the ideal conduit for this grassroots effort to improve health education, referrals, and provision of services in the *bateyes*. A dynamic and highly motivated group of women, promoters are recognized leaders in their communities, serving on school boards, neighborhood

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associations, and other committees. They wear their promoter badges proudly, conduct home visits, and display signs at their own homes to remind community members to call on them for assistance with health-related problems and concerns. Promoters are currently involved in a variety of areas including infant, child, and adolescent health; improving nutrition, water quality, and sanitation; and preventing dengue and malaria, STIs and HIV. As there are not enough promoters at present to adequately serve the seven *bateyes*, about half of those trained by PRIME will be new recruits or former providers who have been inactive.

PRIME II's comprehensive training program will be geared to strengthening the general reproductive health skills of the promoters, particularly their role in family planning education and community-based method provision and HIV/STI prevention. The facilitators who supervise the health promoters will also receive training to make sure they have the skills they need to provide coaching, communicate job expectations, give constructive feedback, and help maintain the promoters' equipment and supplies.

Improving Public Health

Through a series of radio programs on specific topics, the intervention will reach out directly to the community with educational and motivational messages about reproductive health. Promoters will hold *charlas*, or guided community discussions, following the broadcasts, which will be advertised in the *bateyes* on posters or fliers.

In the *bateyes*, a vibrant culture binds communities with limited resources and a history of hardship, struggle, and resilience. By working within those communities and taking advantage of their highly social nature, PRIME II and IDAC will strive to improve public health through a program that's accessible, cost-effective, and sustainable.



PRIME II

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