## Health Promotion Partnerships: Cholera Mitigation and Water, Sanitation, and Hygiene Education Along the Haitian-Dominican Frontier

Ganador a nivel naciona

## **University of Texas Health Science Center San Antonio**

DOR 201 Health Promotion Community Outreach

The Center for Medical Humanities & Ethics (CMHE) at the University of Texas Health Science Center San Antonio, in collaboration with Children of the Nations (COTN) and the Universidad Iberoamericana (UNIBE), began collaboration in November 2011 to implement and evaluate a Community Health Club (CHC) program in Barahona Province, Dominican Republic. This project set out to establish 6 Community Health Clubs in an effort to improve knowledge and practices associated with water, sanitation and hygiene (WASH), thereby contributing to a reduction in preventable diseases such as diarrhea, respiratory illnesses and skin diseases. The objective of the experience is to train 6 community-based health educators who will start the CHCs..

In October 2010, Haitian authorities reported the first cases of a cholera epidemic that quickly spread, resulting in over 580,000 confirmed cases and almost 7,500 deaths, including over 7,500 confirmed cases and 131 deaths in the Dominican Republic. After an absence of over a century, cholera is now expected to remain endemic on Hispaniola until the underlying structural, behavioral and social conditions on both sides of the island are addressed. In the Dominican Republic, those populations most likely to be exposed to cholera are those who are already most vulnerable to water, sanitation and hygiene illnesses due to location, knowledge, economic status, and access to public health infrastructure. Water, sanitation and hygiene practices are part of the link between poverty and disease and disrupting this link in bateyes could help reduce the health disparities and the burden of water, sanitation and hygiene related diseases, most importantly cholera, in this population.

The Community Health Club (CHC) Approach is based upon the premise that water, sanitation and hygiene behaviors, while mostly individual in nature, are communal in effect. As such, community-wide behavioral changes should be sought, which are to be stimulated through the creation of knowledge and consensus building around new practices. A CHC is a voluntary group of between 50 and 100 individuals from a geographically defined area of any age, gender and education level that are led through 8 months of regular health education sessions by trained Community-Based Facilitators.

Interviews with Club Members and their Facilitators indicate that the burden of diarrhea and skin diseases has been reduced, particularly in children. Most importantly, social cohesion has been increased amongst Club Members, which is an important precursor to improved community health and development. This will be measured quantitatively at final evaluation using Social Capital indicators, such as increased trust between neighbors, number of neighbors considered friends, self-reported involvement in community decision-making, and increased willingness to help a neighbor (reciprocity).







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