



Single-Year Assistance Program (SYAP) FY 2011-2012 Results Report

A. PROGRAM IDENTIFICATION

- Date of Report Submission: **11/05/2012**
- Cooperating Sponsor(s): **Batey Relief Alliance (BRA)**
- Country (or countries, for regional programs): **Dominican Republic**
- Program Location(s) in country: **Monte Plata, Sánchez Ramírez, Pedernales, La Romana, Santo Domingo Norte, Santo Domingo, Barahona, Dajabón, Hato Mayor, San Pedro de Macorís, Puerto Plata Monte Cristi and Elías Piñas,**
- Program Start Date: **09/23/2011**
- Program End Date: **12/23/2012**
- Program Name, if any: **IFRP- USAID/BRA Food Distribution Program**
- TA Number(s) or WFP Project Number(s): **AID-FFP-G-11-00063**
- CS Results Report Contact Name: **Ulrick Gaillard, CEO**
- Contact Email: **ugaillard@bateyrelief.org**
- Contact Address: **P.O. Box 300565, Brooklyn, N.Y. 11230-0565**
- Contact Phone: **(917) 627-5026**

B. PROGRAM OBJECTIVE (S) AND ACTIVITIES

(B1) Briefly describe the overall purpose/objectives of your program, and the main beneficiary groups.

The purpose of the USAID-funded International Food Relief Program (IFRP) – through the generous support of the American people – is to enhance Batey Relief Alliance’s (BRA) primary health care and HIV/AIDS/Tuberculosis programs that treat the most vulnerable members of the Dominican Republic’s *bateyes* (communities of Dominican and Haitian immigrant sugar-cane workers), urban barrios, rural slums, and impoverished border localities.

The Breedlove food supplements particularly support BRA’s programs in HIV/AIDS and Tuberculosis, Child Health Campaign, parasitic infections, and malnutrition, focusing on the following vulnerable beneficiary groups: people living with HIV/AIDS (PLWHA), orphans and vulnerable children (OVC), pregnant women and the elderly. These individuals live in extreme poverty and often face the additional burden of disease.

Many of BRA’s patients require supplements to their diets to complete lengthy and toxic treatment regimens. Distributing antiretroviral medications to PLWHA without ensuring an adequate diet is not only ineffectual, but also falls short of accomplishing long-term health recovery objectives for the patients. The Breedlove dehydrated food product donated by the USAID’s IFRP-Food for Peace Program allowed BRA to carry out its work more effectively by supplementing the poor diets of impoverished Dominicans and Haitians—particularly in food-deprived sugarcane batey regions where immigrant workers (cane cutters) face the multiple burdens of extreme poverty, disease, hard physical labor, and social isolation.

Moreover, many of our beneficiaries—such as elderly retired cane cutters who lack access to health insurance or pensions—rely on family or community members to care for them, even though their families often carry the double burden of poverty and disease as well. Therefore, the food supplements are given not only to members of the main beneficiary groups – PLWHA, OVC, pregnant women, and the elderly – but also to family members of these individuals, in order to provide support to households that are struggling with difficult economic situations and the ongoing need to provide for a loved one.

In addition to the Breedlove food products, program beneficiaries are also provided with multivitamins, antiparasitic medications, low-cost food supplies (through BRA's USDA-funded agricultural project), complete health services, health workshops, vocational training, home visits from health promoters and access to social support networks. In this way, food distribution becomes the core of a comprehensive health outreach effort that allows individuals to regain their strength and resume their role in their families and communities.

(B2) Provide a short summary of major program activities (general free food distribution, supplementary feeding, therapeutic feeding, Food for Work, Food for Agriculture, complementary feeding, etc.).

After the DR was hit by hurricane Isaac, BRA informed USAID-Washington that it would divert two containers of Breedlove food to distribute to families that were affected in the provinces of Monte Plata, Pedernales and Santo Domingo. During the intervention, BRA and its partners distributed 38,780 bags of high protein dehydrated food to more than 63 communities within these three provinces. Thanks to this swift response, 4,647 men, 5,092 women, 4,053 children, 1,094 pregnant women and 2,218 elderly received the emergency food assistance they needed to overcome the hardship of the hurricane Isaac as hundreds of acres of croplands were destroyed.

The Batey Relief Alliance, through its Recipient Organization in the DR, BRA Dominicana, distributed 93.8 MT of supplementary Breedlove food rations to individuals who suffer from severe malnutrition and disease (AIDS and TB sufferers, pregnant women, orphaned/vulnerable children and the elderly) and to their family members who are poor and also at high risk for malnutrition. Food distributions were allocated according to the following criteria:

- In homes with over 5 members, the main beneficiary received 5 bags per week
- In homes with less than 5 individuals, the main beneficiary received 3 bags per week

BRA continued to work through strategic partnerships with Dominican Ministry of Health (Dirección Provincial de Salud de Hato Mayor) and numerous local NGOs, including SERV International, Buen Samaritano, CEPROSH, BRA DOMINICANA, Fusabi, Red People Living with HIV/AIDS, ALSOSIDA, Red Viviendo con VIH (REDOVI), Grupo PALOMA. Other partners included COSALUP, Servicio Social Iglesias Dominicanas, Partners in Health-DR, Fundacion Apoyo Nutricional and, Templo Biblico. Through these partnerships, BRA coordinated the distribution of USAID rations to many more individuals and families living in the most impoverished communities of the Dominican Republic. In FY11-12, these partner groups reached approximately 44,320 individuals (18,777 direct beneficiaries and 25,543 indirect beneficiaries) who received between 3 and 5 bags of dehydrated food product per week, depending on their level of nutritional need.

Furthermore, BRA and its partner organizations assured the effectiveness of the rations by sending health promoters to recipients' houses and organizing talks for all beneficiaries to learn about the food product. During these talks, BRA also ensured that USAID's name is seen (banners and pamphlets) and/or mentioned as the main donor with the generous support of the American people. Talks and home visits have allowed BRA and its partners to make sure that their beneficiaries are eating the food and resolving any problems that might interfere with the consumption of the rations.

In support of the IFRP program, 66 of BRA's community health promoters and coordinators participated in 8 hours of nutrition workshops (organized by the Ministry of Health's Nutrition Department) in order to establish a solid base of knowledge in the relationship between diet and health. The network of health promoters has since been able to impart what they have learned to the community. Through these workshops, health promoters provided nutrition education to 1900 community members in Monte Plata, Sanchez Ramirez, Pedernales, Puerto Plata, Monte Cristi, Dajabon, Hato Mayor, Pedernales, La Romana, Santo Domingo Norte, Santo Domingo, Barahona, San Pedro de Macoris, Puerto Plata and Elias Pinas, and Sabana Grande de Boya. As a result, recipients of USAID rations understand better both the benefits of the food product and how to supplement the rations to create a complete and healthy diet.

In FY 11-12, even more beneficiaries were able to supplement their Breedlove food rations with produce from their own small vegetable gardens or low-cost food and animal produced by BRA's agricultural development projects formerly funded by USDA and now by the European Union under a partnership with the UN High Commissioner for Refugees (UNHCR). This year, the Dominican Ministry of Agriculture continues to collaborate with BRA by donating to more than 300 families agricultural products, along with training and workshops on best cultivation practices. Individuals who are severely nutritionally-at-risk received, in addition to the Breedlove food, received other food supplies to complete their daily diet, including rice, beans, vegetables, oil, etc.—a collaboration from a local BRA Dominican partner, the IDCP (Instituto Dermatologico de Cirugia de Piel)

Moreover, through HIV funding from DR-COPRESIDA and the support of the Dominican's Ministry of Health-Directorate for the Control of Sexually-transmitted Infections and HIV/AIDS (DIGECITTS), BRA Medical Center located inside Batey Cinco Casas, province of Monte Plata, provided free HIV counseling, testing, antiretroviral (ARV) treatment, and follow-up medical care for many of the individuals who received food rations. Currently, 678 PLWHA are receiving ARV treatment, medicines to fight opportunistic infections and follow-up care through BRA's medical center in Batey Cinco Casas. As part of this program, 40 community health promoters who worked closely with patients to ensure treatment adherence and healthy living conditions carried out approximately 1500 home visits during FY11-12. This large increase in home visits is part of BRA's ongoing intensive support program—carried out by health promoters and physicians—to ensure the survival of patients in the most vulnerable conditions. Furthermore, as will be discussed in section C3, many individuals within the HIV/AIDS program received vocational training, often accompanied by micro-credit loans and business assistance.

C. LINKING RELIEF AND DEVELOPMENT

(C1) Did the program incorporate strategies and activities to accelerate the establishment/reestablishment of beneficiaries' livelihoods and self-sufficiency (such as resettlement or rehabilitation)? **YES**

(C2) If yes, what were the strategies and activities? If no, please explain why these kinds of activities are not necessary or appropriate.

BRA focused on a range of activities aimed at supporting the self-sufficiency of the beneficiaries, many of whom are battling HIV infection, tuberculosis, old age, and conditions of severe poverty and marginalization.

BRA's most significant effort to linking relief and local community development and self-reliance was its USDA-funded FY09-11 *BRAteyana* Agricultural Cooperative under a Food for Progress program. BRA brought together representatives from 15 of the poorest communities in Monte Plata to form a network of agricultural cooperatives. The initiative's goal was to ensure sustainable food security and economic self-sufficiency

through long-term agricultural development – as BRA’s USAID/IFRP will continue to be an integral part of the new Food Security System as a temporary bridge to meet emergency food needs for the most vulnerable and impoverished. BRA’s new Agricultural System is expected to benefit nearly 35,000 individuals in the same communities of high food insecurity that receive the majority of USAID rations. BRA dedicated the past year to strengthen the agricultural production for sale and outsourcing services such as land plowing. Meanwhile the IFRP food aid continued to be used as an immediate emergency or supplementary food supply system for those at immediate risk of malnutrition or suffering from serious diseases, while engaging other recipients in long-term agricultural development and community rebuilding projects. Approximately 7,700 farmers/cooperative members and health promoters participated in agricultural and community development activities in their communities. The objective is to allow *batey* communities to produce food that they need to eat a healthy diet and to develop a production capacity that will eventually allow them to sell and profit from what they produce. Many of those involved in the formation of the cooperatives are beneficiaries of the USAID nutritional support. As BRA’s USDA agricultural program ended in 2011, we took two other important steps to ensure that food security and economic self-sufficiency for the beneficiaries continue.

Partnership with the United Nations High Commissioner for Refugees

This year, BRA entered into an important agreement with the United Nations High Commissioner for Refugees (UNHCR) to engage 500 rural *batey* farmers in income-producing agricultural activities—thus expanding its USDA -funded agricultural cooperative production in the province of Monte Plata. This new partnership will help create economic empowerment opportunities for hundreds of families that will use the land to produce crops and animals for household consumption. BRA will further equip them with additional knowledge, tools and equipment to better store, market and sell products of the highest organic quality to other communities. BRA’s medical center inside *batey* Cinco Casas will be ready to offer affordable healthcare and free medicines – and HIV/AIDS prevention assistance to an additional 2000 people.

Partnership with the Clinton Global Initiative

In 2011, BRA and Vestergaard Frandsen LLC committed to CGI to expanding BRA’s health-related clean water program activities in the Dominican Republic (DR) to an additional 3200 vulnerable and impoverished families living in 20 rural and “*batey*” communities in the province Monte Plata. BRA and Frandsen will focus on three major areas of community improvement: 1) distributing 3,200 **LifeStraw® Family water** filters to secure potable water for 16,000 people, 2) training community health promoters to organize/educate local residents about health crisis prevention techniques, adverse health conditions associated with drinking contaminated water, and proper filter usage and management, and 3) delivering comprehensive health and HIV/AIDS care, antiretroviral therapy, counseling, medicines and nutrition to **LifeStraw® Family water** filter recipients. Over a two-year period, 16,000 people will have **sustainable** access to clean water in their homes and be well equipped to challenge adverse health-related conditions related to contaminated water, and receive comprehensive health services – thus improving the quality of their lives. BRA’s water/sanitations program contributed to the reduction of diarrhea in children, parasitic and other water-borne infections, and, importantly, the impact of cholera in the Dominican Republic.

(C3) What results were achieved in FY11-12?

The food rations enabled BRA to carry out an extensive program in general health, nutrition, and economic self-sufficiency, focusing on various educational, vocational, and agricultural projects around the distribution of food. In FY11-12, BRA and its partners reached 18,777 individuals with important nutritional supplements – approximately, 877 men and women without HIV; 2,780 vulnerable and impoverished children and; 2,290 elderly individuals; 1,010 pregnant women, and 11,820 PLWHA and many of their immediate family members. Through the food distribution program, these individuals were incorporated into a network of resources made up of NGOs and government institutions, which they will be able to access for many years to come. The food

distribution provided an opportunity for the initial contact between individuals living in extreme poverty and organizations that have been able to provide health care, economics relief, job training, education and social support.

D. PROGRESS AND ACHIEVEMENTS

(D1) On the whole, did the program achieve agreed-upon objectives and targets (beneficiary levels, etc.)? YES

(D2) What objectives/targets were achieved or exceeded, and how? Explain the significance of what was accomplished and identify reasons for greater than expected results or factors that led to higher than expected achievement. Provide supportive data, if available.

BRA and its partner organizations achieved and exceeded the target number of beneficiaries for FY 2011. By June 2011, BRA and its partners distributed food rations to 3,533 vulnerable and impoverished children and elderly individuals, 766 pregnant women, and 8,530 PLWHA and many of their immediate family members. The objectives set for FY 2011 were to distribute to 3,700 beneficiaries. BRA dramatically exceeded this goal with 12,829 recipients. By October 2012, BRA and its partners distributed food rations to; 5,947 vulnerable and impoverished men, women, children and elderly individuals, 1,010 pregnant women, and 11,820 PLWHA and many of their immediate family members. The objectives set for FY 2012 were to distribute to 12,800 beneficiaries. BRA dramatically exceeded this goal with 18,777 recipients.

BRA's accomplishment in expanding its beneficiary population was achieved by carefully monitoring and expanding its own distributions from 3,160 individuals to 14,677 individuals and by allowing partner organizations to also expand their beneficiary groups, as they deemed appropriate. Through BRA's collaborations with 14 strategic partners, BRA reached 110 bateyes, rural impoverished communities, and urban slums in 15 provinces.

Throughout this financial year, BRA's project coordinator continued to carry out evaluations and monitoring of the work that BRA's partners are accomplishing, thereby ensuring that all partners are distributing food rations in an appropriate and timely manner. BRA ensured that rations reached the patients who are most in need by dividing up our beneficiaries according to the severity of their health status. In BRA's medical center catchment area, a total of 4,100 patients were enrolled in this intensive feeding program over the course of the fiscal year. Our partner organizations, which brought rations to additional 14,677 direct beneficiaries, have similar methods of dividing up rations to assure that each month those with the most need receive the necessary quantity.

A total of 66 community health promoters worked side-by-side with community members to ensure proper preparation and use of the food product, thereby ensuring the effectiveness of the nutrition intervention. Furthermore, BRA's healthcare professionals and administrators maintained the quality of work by providing periodic training sessions and evaluations. Additionally, BRA's medical director and health promoters provided a nutrition workshop to representatives of our partner organizations in which each group received training on relevant nutrition information and were also able to share challenges and successful techniques for the distribution and preparation of the USAID rations. BRA expected that by organizing such education events all of our partner organizations would be able to learn from one another's experiences.

(D3) What objectives/targets were not achieved, and how? Identify reasons for performance shortfalls or factors that led to lower than expected targets, and discuss how these problems were or will be addressed (or how these should be addressed by FFP). Examples might include civil unrest, personnel issues, shipping or ground transportation delays, budgetary constraints, etc. How will these experiences be incorporated into future implementation to improve performance?

All of our objectives/targets were achieved during FY11-12. However, this past year was marred by intense political and presidential elections in the DR. Many of our NGO and government partners were heavily involved, in some ways, supporting their political causes. As a result, collaboration was, at times, slow, but not enough to materially affect the rapid and secure distribution of food to our target beneficiaries and meet out program objectives. In fact, after the election was over in May, distribution activities resumed smoothly.

(D4) Provide any additional information on the overall performance of your program, including success stories, lessons learned, best practices, etc. (or provide as a separate attachment). Although individual and household examples are welcome, community- and program-level examples are most useful for reporting program successes and lessons learned to a wider audience.

The USAID/BRA Food Distribution Program has been an essential component of BRA program structures since 2007—an integral part of its new Food Security System. The Breedlove dehydrated food product allowed BRA to provide the most comprehensive medical care and support, supplementing health care and education with greatly needed rations. **More than 80% of the 37,000 patients who visited BRA's center last year came not only because of the quality health services they received, but also of the free Breedlove food we provided to them.** Many of the families currently receiving food donations would otherwise eat only one small meal a day. Supplementing nutritious food of this kind can change a person's life, allowing them to become productive members of their community. Particularly for children living in impoverished bateyes where many do not participate in the national school feeding program, the additional food rations have allowed for their bodies to develop healthily and allowed them, like for other children, to concentrate adequately in school, which would not be possible if they were arriving at school on an empty stomach. For expecting mothers, as well, nutrition support greatly reduces the risk of maternal and child mortality. The nutrition supplements that BRA and its partners provided made it possible for malnourished women to safely give birth, potentially averting the crisis of a mother or infant's death. Moreover, for BRA's many patients being treated for a range of serious diseases, including HIV/AIDS, tuberculosis, malaria, and severe malnutrition, the supplementary food rations have been vital for them to be successful in completing and following through with potent treatments – thus saving their lives.

Through BRA's humanitarian health work, recipients receive more than merely food. All participants are eligible to participate in workshops on nutrition, food preparation, and health. And all received complete medical care. The BRA comprehensive health and HIV/AIDS intervention model is closely observed, praised, and amply promoted by the local media and partner organizations, and is now being to be reproduced by other organizations around the country. For example, the Dominican Republic's Presidential Council on AIDS (COPRESIDA) receiving funding from the Global Fund for the prevention of AIDS, Malaria and Tuberculosis that included nutrition support for PLWHA who are receiving ARV treatment.

As we have observed in the past five years, when BRA introduces the Breedlove food to new communities, residents still feel a little uneasy and curious about its taste and how to prepare it using local spices. But after numerous training and workshops, families become more comfortable preparing the food in its original state or at other times in innovative ways based on local cultural recipes. During FY2011-12, BRA continued to collect

the recipes that its beneficiaries create. They are used to expand a cookbook, which is distributed to partner organizations. Community health promoters also held over 250 ‘Food Samplings’, in which staff cooked the Breedlove product following one of the recipes previously compiled from beneficiaries, which received a portion to sample. During these tastings promoters also held informal Q&A sessions with beneficiaries to assess the nutritional properties of the food product they’ve learned about.

Each of our partner organizations also found its own way to supplement the USAID rations that makes sense for its beneficiary population:

Templo Biblico bolstered the nutritional component of the program by adding rice, beans, milk and salami to food allocations. FUSABI also provides milk and bread aside from the Breedlove food product. The Buen Samaritano hospital and ASOLSIDA provide additional rations of rice. The DPS Hato Mayor provides 2 liters of milk with each food distribution and egg-laying hens. COSALUP enhances the protein and mineral value of their rations by providing sardines to beneficiaries. BRA Dominicana provides the highest added value to their food distributions by complementing rations with rice, beans, salami, sardines and chocolate to the PLWA receiving food donations. These additional donations are possible through BRA’s partnership with the Instituto Dermatologico y Cirugia de Piel (IDCP), funded by the Global Fund. For all of these partner organizations and for others, the nutrition distribution has become the core of more comprehensive interventions that are tailored to the specific needs of the communities where they work.

The USAID/BRA nutrition program continued to grow significantly through the fiscal year of 2011-12 in the Dominican Republic. BRA and its partner organizations exceed the planned number of beneficiaries, and many supplementary programs, such as BRA’s micro-agriculture project, expanded dramatically, helping an even greater number of beneficiaries to achieve self-sufficiency.