Caregiving for Childhood Illness in Dominican Republic Bateyes

RESEARCH QUESTIONS
- What are the most common signs and symptoms of sick children in bateyes as reported by caregivers?
- How serious do the caregivers perceive the child’s illness to be?
- How do water sources influence childhood illnesses?
- What barriers to health care do caregivers experience?

METHODS
- Mixed-method design
- Quantitative questionnaire developed by investigator
- Several open-ended variables included in questionnaire addressed during interviews
- A convenience sample was used to interview 22 caregivers of children under the age of 10 from 4 different bateyes
- A translator fluent in Creole and Spanish interpreted
- Data was analyzed using SPSS

Illnesses were divided into three main categories:
- **Gripe (Flu)** signs and symptoms included: fever, chills, fatigue, weakness, body aches, headache
- **Gastrointestinal** signs and symptoms included: diarrhea, poor appetite, nausea, vomiting, stomachaches
- **Respiratory** signs and symptoms included: shortness of breath, asthma, troubled breathing

PurPOSE
- To explore childhood illness, care seeking behaviors, and health needs in bateyes from the perspective of caregivers.

FINDINGS

<table>
<thead>
<tr>
<th>Illness Category</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gripe (Flu)</td>
<td>10</td>
<td>45.5</td>
</tr>
<tr>
<td>Gastrointestinal</td>
<td>7</td>
<td>31.8</td>
</tr>
<tr>
<td>Respiratory</td>
<td>5</td>
<td>22.7</td>
</tr>
</tbody>
</table>

- The mean wait time to seek treatment was 3 days. Wait times ranged from 2 days to 7 days.
- 86% of caregivers brought their sick child to a hospital or clinic. The rest cared for their child at home.
- 63.6% of caregivers borrowed money to pay for transportation and healthcare costs.
- Over 59% of caregivers reported crying and feeling warm as warning signs of illness. Only 9% reported diarrhea.
- The mean age of children with gripe (flu) was older (5 years old) compared to those with GI illness (3 years old).
- Caregivers whose children had a GI illness took action sooner than those with other illnesses. GI illness was perceived as the “most serious” illness category by caregivers.
- Those with gripe (flu) had a longer duration of illness than those with other illnesses.

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What barriers to health care do caregivers experience?
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SUGGESTIONS FOR THE FUTURE
- There is a need for increased health education in bateyes. This could be achieved during traveling clinics with Hospital El Buen Samaritano.
- Distribution of filters to improve water quality.
- Greater availability of over-the-counter medications in nearby clinics.
- A greater emphasis on health prevention for caregivers.
- Results are being shared with Hospital El Buen Samaritano to establish future health-related goals for the bateyes during traveling clinics.

ACKNOWLEDGEMENTS
- Gracias al Hospital el Buen Samaritano y Emilio por todo durante mis aventuras.
- Thank you to Gene Harkess, my nursing mentor, for helping me through the research process every step of the way.
- Thank you to my friends and family who support me endlessly, no matter what country I am in.

INFORMATION ON CAREGIVERS

- Ages 18 to 44 (mean of 30)
- All females
- Only one caregiver was employed
- The majority (75%) had some middle school education or less
- The caregivers had 0 to 9 other children (mean of 3.7)
- Number of rooms in home ranged from 1 to 4 (mean of 2)
- Number of people in home ranged from 3 to 10 (mean of 6)
- 3 of 4 bateyes did not have any electricity

DISCUSSION
- Although a small sample and not generalizable to the batey population at large, this study provides information to guide future research.
- The extreme poverty and inaccessibility to quality healthcare was very evident in all 4 bateyes.
- Some of the greatest needs in the bateyes were related to sanitation. All 4 utilized community latrines and when available, spickets with poorly filtered water. One batey drank and bathed out of water from a river.
- Caregivers did not have access to over-the-counter medications (i.e. Tylenol) that we often take for granted.
- The majority of caregivers did not utilize any modes of health prevention when caring for their children.

BARRIERS TO CARE
- Limited transportation was frequently described as a barrier to care. Caregivers expressed the need to wait for an available truck, moto, or bus.
- While clinics are sometimes within walking distance of a batey, they usually do not have a laboratory and have a limited supply of medications.
- The majority of subjects reported a lack of financial resources being a barrier to care. If a caregiver refused treatment for their child, it was due to a lack of finances.
- Caregivers expressed food and water sources contributing to childhood illness. Six caregivers said they believed better food and water would make a difference to their child’s health.