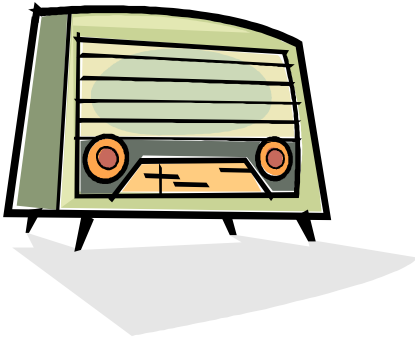


**Listening and Healing in the Peruvian Amazon: An Assessment of Minga Peru's Intercultural  
Radio Educative Project to Prevent and Control Domestic Violence and HIV/AIDS**



By

Arvind Singhal, Ph.D.  
Samuel Shirley and Edna Holt Marston Endowed Professor  
Department of Communication  
University of Texas @ El Paso  
Email: [asinghal@utep.edu](mailto:asinghal@utep.edu)

and

Lucia Dura  
Doctoral Student  
Rhetoric and Writing Studies  
University of Texas @ El Paso  
Email: [ldura@miners.utep.edu](mailto:ldura@miners.utep.edu)

**Project Assessment Submitted to Minga Peru  
June 30, 2008**

# Listening and Healing in the Peruvian Amazon: An Assessment of Minga Peru's Intercultural Radio Educative Project to Prevent and Control Domestic Violence and HIV/AIDS<sup>1</sup>

## Executive Summary

For 27 months, between January 2006 and March 2008, Minga Peru, a non-governmental organization in Peru, with support from UNIFEM, implemented an Intercultural Radio Educative Project to fight against violence and HIV/AIDS in rural communities and schools of the Peruvian Amazon. The UNIFEM project capitalized on the popularity and credibility of Minga's thrice-weekly radio program (*Bienvenida Salud*), its on-the-ground community resource persons (community *promotoras*), and strategically leveraged it with a school-based initiative, involving teachers, students, and community members to prevent and reduce domestic violence and HIV/AIDS, empower victims of violence (mostly children and women), and reduce prejudice, stigma, and discrimination associated with being HIV-positive.

The present report documents the main findings from an independent assessment of Minga Peru's Intercultural Radio Educative Project (January 2006 to March 2008) to fight against violence and HIV/AIDS in rural communities and schools of the Peruvian Amazon. First, a description of the Minga Peru's on-air and on-the-ground communication strategy, including its intercultural and grounded praxis, is provided. The various components of the Intercultural Radio Educative project are described, including the training of teachers and radio correspondents, integration of domestic violence and HIV/AIDS topics in the existing school secondary curriculum, and the development of culturally-resonant radio scripts in a process aptly labeled "listener-as-producer". Our method and data-collection procedures, including sources of primary and secondary data, are described, and key findings distilled.

Our main findings from the present assessment are summarized below:

Dedicated listenership to *Bienvenida Salud* was significantly higher (89%) among students attending school in rural areas than in urban areas (50%), suggesting that the radio program is actually reaching those young audiences who, to begin with, have little access to outside information. In this sense, *Bienvenida Salud* is helping reduce information inequity gaps.

During the duration of the UNIFEM project (January 2006 to March 2008), the staff of *Bienvenida Salud* received a total of 4,860 letters. Of these, 21% of the letters (N=1003) made a direct and explicit reference to issues of violence in the community or domestic sphere, or raised questions or concerns on HIV/AIDS.

Adult women, the primary target audience of *Bienvenida Salud*, wrote most of the letters (45 percent) to the radio program. Many of the adult women listeners wrote in to share that they have either abused their children or been abused by their partners. Adult men and youth (both male and female) are increasing as an audience segment of *Bienvenida Salud* and

also increasingly writing in to the program. This finding suggests increased involvement of men in the welfare of their families and their partners.

The newly-trained radio correspondents played a key role in spurring letter-writing. Correspondents voiced a sense of “pride” in that their school and Minga trusted them to receive the training, and take seriously their role as providers of community feedback and conveyors of community joys and concerns.

The topics of violence and HIV/AIDS were closely incorporated into different subject areas through the integrated curriculum developed by the teachers. The most effective pedagogical techniques to convey these topics was student-centered class-room dialogue, followed by dramatization, role plays, and case studies.

Participating secondary school students reported learning about their rights as individuals, about different forms of violence, and about taking preventive measures for not contracting HIV/AIDS. They reported talking about these issues with their friends and family members, especially about domestic violence. Many students noticed changes – both ideological and behavioral -- in male-female and parent-child relationships.

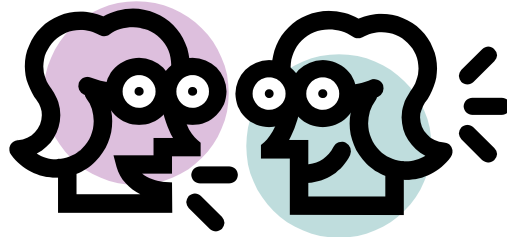
Prior to the implementation of the school-based program, students reported harboring several misconceptions about HIV/AIDS. Although some misconceptions still persist, they now show mindfulness in acknowledging that the person they have sex with may have multiple partners. Students also acknowledged the difficulties in broaching these topics with their girlfriends or boyfriends, but they expressed a desire for change, including delaying of sexual relations, limiting sexual partners, and using condoms in sexual encounters.

After undergoing Minga Peru’s training, secondary school teachers feel a sense of pride, responsibility, and accountability in making a difference in their communities. Many teachers noted that these trainings served a useful function in terms of their professional development and networking, equipping them to serve their students and communities better.

Overall, Minga Peru’s intercultural educative project to prevent and reduce domestic violence and HIV/AIDS in the Peruvian Amazon has made a positive impact in the lives of participating riverine communities. While such deep-rooted beliefs and attitudes are slow to change, there is progress on both issues, at least in certain communities.

Minga’s strength lies in its mindfulness about, and appreciation of, the communication resources that exist in the Amazonia -- such as orality, expressiveness, and extroversion – to address issues that are sensitive and taboo. Further, by promoting gentler, kinder, and more responsible masculinities, Minga avoids the trap of censuring men for violence or HIV infections. Minga’s intercultural approach in the Peruvian Amazon demonstrates that it is possible to talk about, and to live, a whole sexual life with responsibility; and it is possible to enjoy physical closeness while preserving women’s dignities and bodies.

## Listening and Healing in the Peruvian Amazon: An Assessment of Minga Peru's Intercultural Radio Educative Project to Prevent and Control Domestic Violence and HIV/AIDS



### Listener-Speak!

*One of my neighbors finally made the decision to leave her husband.... she no longer supports his machismo....he is also an alcoholic. She told me that for some 42 years, from the age of 11 until now when she is 53, she tolerated him. She had 16 children with this man of which seven are alive. The others died because of her husband's irresponsibility....some got tetanus, some others died with pellagra. While remembering all her suffering, she finally told him she could not cope with his maltreatment and live with his insults. She has told him 'How many years we have lived together thinking that you will be a better man? Instead you've become worse. Before I've been afraid of you.... afraid of even answering you. But now there are other women who protect me.*

A radio correspondent trained by Minga Peru writing in from a riverine community (July, 2007).

*One day my brother-in-law got sick and he did not know what he was suffering from. His fever and diarrhea was permanent. One day I asked my wife to take him to the hospital and the doctor told us he had AIDS. For a long time, we marginalized him, treating him badly. But after hearing Bienvenida Salud, we came to know that AIDS is not contagious and cannot be transmitted through touch. Previously, none of his brothers assisted him because they feared they would be infected. After listening to radio program, we have begun to give him attention and our love.*

A listener from a riverine community on the Tigre river writing in to Minga Peru (December, 2007).

*I, as a young woman, have been watching what happens in my community, and have begun to question certain practices. Parents must understand and recognize their children rights. I would like to urge you to speak [in the radio program] about child abuse because in my community there is a lot of child abuse. Parents mistreat their children, causing them harm.*

A listener from a riverine community on the Marañón River writing in to Minga Peru (November, 2006).

## Background and Purpose



For 27 months, between January 2006 and March 2008, Minga Peru, a non-governmental organization in Peru, implemented an Intercultural Radio Educative Project to fight against violence and HIV/AIDS in rural communities and schools of the Peruvian Amazon.

With funding from UNIFEM, some 174 school teachers in 24 rural schools were trained by Minga Peru to integrate issues of domestic violence and HIV/AIDS in the secondary school curriculum, directly spurring class discussion on these issues – in multiple courses -- with some 4,650 students. Further, these ground-based, year-round educational efforts in rural schools were complemented with Minga's popular on-air, intercultural radio educative program, *Bienvenida Salud* (Welcome Health) which purposely incorporated themes of domestic violence, HIV/AIDS, and others in its thrice-weekly broadcasts. Further, as part of the UNIFEM project, several students in each participating school were trained as radio correspondents, in-charge of encouraging youth in their respective communities to listen to *Bienvenida Salud* and then provide feedback, including proposing new subjects for inclusion and treatment on the radio program. Further, these radio correspondents, along with their teachers and Minga's cadre of community-based *promotoras*, local women acting as sparkplugs of change, undertook training and other programmatic activities on the topic of domestic violence and HIV/AIDS for their respective communities.

In essence, the UNIFEM-funded project capitalized on the popularity and credibility of Minga's thrice-weekly radio program (*Bienvenida Salud*), its on-the-ground community resource persons (community *promotoras*), and strategically leveraged it with a school-based initiative, involving teachers, students, and community members to prevent and reduce domestic violence and HIV/AIDS, empower victims of violence (mostly children and women), and reduce prejudice, stigma, and discrimination associated with being HIV-positive.

The present report documents the main findings from an independent assessment of Minga Peru's Intercultural Radio Educative Project (January 2006 to March 2008) to fight against violence and HIV/AIDS in rural communities and schools of the Peruvian Amazon. To embed our assessment contextually, a description of the Minga Peru's on-air and on-the-ground communication strategy, including its intercultural and grounded praxis, is provided. The various components of the Intercultural Radio Educative project are described, including the training of teachers and radio correspondents, integration of domestic violence and

HIV/AIDS topics in the existing school secondary curriculum, and the development of culturally-resonant radio scripts in a process aptly labeled “listener-as-producer”. Our method and data-collection procedures, including sources of primary and secondary data, are described, and key findings are reported.

### Minga Peru’s Decade-Long Interventions in the Peruvian Amazon

Minga Perú, a non-governmental organization, was established in 1998 by Eliana Elías, a graduate of the department of social communications from the University of Lima, and her husband, Luis Gonzalez, an Argentinean social worker who has worked in the Amazonas for over 15 years.<sup>2</sup> Its objective: to improve the lives of people living in the Peruvian Amazon -- one of the poorest, most inaccessible, and most neglected regions in Peru<sup>3</sup>. “Minga” in the local language means “collaborative community work,” and Minga’s interventions, from day one, have been consciously guided by a culturally-respectful, participatory communication framework (Table 1).

**Table 1. Minga Peru’s Theoretical Framework**

<b>Principles Underlying Culturally-Respectful Participatory Communication Framework</b>
<u>Listeners</u> as producers
<u>Process</u> of dialogue and democratic participation
<u>Long-term</u> process of sustainable change
<u>Collective</u> empowerment and decision-making
<u>With</u> community’s involvement
<u>Specific</u> in content, language, and culture
<u>Consciousness</u> raising and critical action

Minga’s community-centered ameliorative activities are focused in the Region of Loreto, a territory comprising one-fourth of Peru's geographic area, including 146,000 square miles of the Amazon rainforest.<sup>4</sup> About one million people live in Loreto: Half in Iquitos City, the main city, and the other half in some 500 riverine communities<sup>5</sup> along the Amazon River and its serpentine tributaries. Some 65 ethno-linguistic groups make up the Peruvian Amazon, representing a non-homogenous population. The river is the main transportation channel and most people travel by manually-powered shallow canoes made of balsa wood<sup>6</sup>. Steamers, ferries, and motor boats connect major riverine routes along the Amazon. There are no roads in these remote communities, nor a dedicated power supply. The number of health clinics and posts, mostly located in big towns, are insufficient to adequately serve all riverine communities.



The Amazon River and its tributaries are the main transportation channel in the region that Minga Peru works

Minga promotes reproductive health, sexual rights, gender equality, and income generating activities in a region plagued by geographical isolation, poverty, disease, and patriarchal traditions<sup>7</sup>. Minga especially seeks to empower Amazonian women, who suffer from poor reproductive health, a repressive home environment, and low self-esteem<sup>8</sup>. In certain riverine communities, especially those inhabited by the Huambisa, Aguajun, and Shipibo-Conibo ethnic groups, women may bear on average 10 children (three times the national average), lose one or two children to disease, perhaps contract a sexually transmitted infection, and die before reaching the age of 50 (22 years less than the national average).<sup>9</sup>

Minga's programmatic activities in the Peruvian Amazon include the production and broadcast of a popular radio program called *Bienvenida Salud* (Welcome Health); the training a cadre of community *promotoras* (promoters) who organize group listening sessions around *Bienvenida Salud*, and serve as local leaders for Minga's various health and community development activities; and on-the-ground, environmentally-sustainable, income-generating activities through the establishment of fish farms, agro-forestry enterprises, small animal husbandry projects, as well as training in crocheting, sewing, and carpentry to meet local needs. Minga's present work in the Peruvian Amazon is focused in the Marañon and El Tigre river basins (both represent major tributaries of the Amazon River and are easily accessible from Iquitos City, where Minga is headquartered).



*Bienvenida Salud*, produced by Minga Perú, is a half-hour radio program broadcast three times a week (Monday, Wednesday and Friday) at 5:30 a.m. -- the time when people are waking up in the Amazonas, and then repeated the same days in the evening. *Bienvenida Salud* is purposely designed to both entertain and educate to increase audience members' knowledge about reproductive health, sexual rights, and gender equality, creating favorable attitudes, shifting social norms, and changing overt behavior<sup>10</sup>. By mid-2008, Minga Perú had broadcast over 1,100 episodes of *Bienvenida Salud*, earning audience ratings of about 40 to between 45 to 50 percent among radio owning households in the rural area of the Loreto Region.

The *Bienvenida Salud* stories are based on real-life events, and often sent to Minga by audience members as cards, hand-sewn letters, or even painted on bark. Vegetable and natural colors are used as ink. To encourage audience feedback and formative inputs to designing *Bienvenida Salud*, Minga has made arrangements with boat companies to ferry listeners' letters from the interior of the Amazon jungle to Iquitos City, where the headquarters of Minga is located. Letter-writers do not pay for this "postal" service; Minga Perú pays a small fee for each letter that is delivered. In encouraging listeners to write letters, Minga not only receives feedback on its radio programs, but uses these letters (as we detail later) to design its scripts for new programs. In this way, Minga views its listeners not as passive consumers of the program but rather as active producers.





Ferries bring listener letters from distant riverine communities to Iquitos where they are collected by a Minga representative.

By mid-2008, Minga has received over 10,000 audience letters. Audience members describe their personal problems, struggles, and dilemmas with remarkable vividness and candor in these letters. For instance, in December, 2002, a listener wrote in about his abusive father: "I suffered psychological abuse from my father....He often came home drunk and would insult my mother and hit her....Sometimes I would see blood on her face. It's a big problem for me"<sup>11</sup>.

Minga distills stories like the ones provided by Romel into short social dramas on *Bienvenida Salud*, each illustrating a carefully chosen topic for the episode, such as why eradicating violence in the community is important, or how to recognize the side effects of contraceptive injections. In a typical episode, popular socio-drama characters might discuss how pregnancy happens; how to prevent it; how to manage an abusive relationship; or what to do when your child has diarrhea<sup>12</sup>. In addition, *Bienvenida Salud* incorporates catchy jingles, music, informational spots, testimonials, and contests to enhance its audience appeal.



A recording of *Bienvenida Salud* in progress.

The language used in *Bienvenida Salud* is simple; technical terms are avoided<sup>13</sup>. Each show is taped and sent to local stations for rebroadcast. Tapes are also given to local school teachers as well as Minga Perú's community *promotoras* to play on audio-cassettes.

Complementing Minga's on-air broadcasts of *Bienvenida Salud*, are a host of ongoing on-the-ground interventions, led by a trained cadre of community *promotoras*. They are carefully chosen on the strength of their personality, drive, and motivation. Minga trains them to work as health promoters and change agents in the communities where they live. As part of their training, *promotoras* learn the basics of male and female anatomy, detection of breast and cervical cancers, and simulation of the birth process.<sup>14</sup> They also implement sewing, weaving, and crocheting projects; how to establish and run a fish farm; how to grow medicinal herbs; and create environmentally sustainable eco-systems through agro-forestry and small animal husbandry projects. These income-generating activities are part of Minga's strategy to create conditions that allow women to exercise their right to live a healthy and productive life, free of violence.

In sum, Minga Perú's work in the Peruvian Amazonas is geared toward empowering members of riverine communities, especially its women, to experience a higher quality of life; to make better informed choices with respect to their reproductive health; and to gain in self-esteem to value their sexual and human rights. Minga's strategic strength lies in its deep consideration of Amazonian culture in the design and implementation of its on-air and on-the-ground programmatic activities.

### **Minga's Intercultural Approach**



Minga Peru recognizes that there exist multiple indigenous populations in the Peruvian Amazon – with both similar and different life styles, gender systems, and ways of using natural resources<sup>15</sup>. Such knowledge allows it to address difficult issues in local contexts of understanding.

For instance, in its treatment of health issues – whether in the radio program or its trainings for *promotoras*, teachers, and radio correspondents, Minga respects the view that Amazonian cultures consider everything in the world as living beings. So, in addition to human beings, animals, and plants, the Amazonians view rivers, stars, and stones as living beings -- that can be harmed, fall sick, and die. There exist counter forces that can reverse damage, implying everything that has been *cutipado* (harmed or sick) could be *icarado* that is, cured or protected against disease and damage<sup>16</sup>. So the Amazonian cultural ethic emphasizes that it is important to care for the body, to tend to it, to prevent damage, and to repair it when sick.

In order to better address domestic violence and HIV/AIDS, Minga, tries to take into account several local cultural undercurrents. For instance, in the Peruvian Amazon physical violence is less private, or more open, than in other areas of Peru. Also, Amazonian cultures bring unique communication resources – such as orality, expressiveness, and extroversion – to address issues that are sensitive and taboo, including sexuality. Further, Minga’s experience in the region suggests that Amazonian cultures seem relatively more flexible (as compared to the Andina culture, for instance) to adapt to changes in their physical, social, and cultural environment. This means that Minga, in its programs and trainings, has the possibility to ride these cultural undercurrents in proposing new gender roles, especially the adoption of new gentler, kinder, and supportive masculinities.

So in its programs Minga avoids condemning or censuring men, trying to unpack what lies behind a machismo mindset. Minga’s communicative methodology includes the purposive exercise of empathizing with the male, which probably grew up in a violent environment and was a victim of violence, creating an aggressive and repressive masculinity. Hence in *Bienvenida Salud*, Minga avoids creating characters that represent uni-dimensional masculine stereotypes; it tries to humanize them in all their complexity.<sup>17</sup>

In its UNIFEM project activities it posed the following challenge: Is it possible to talk about, and to live, a whole sexual life with responsibility; is it possible to enjoy physical closeness without violating women’s rights. Not surprisingly, the tone of Minga’s programs is non-judgmental and conciliatory, inviting the audience to find solutions that transcend masculine stereotypes.

### **Elements of the Programmatic Intervention**

With funding from UNIFEM, in 2007, some 174 school teachers<sup>18</sup> in 24 rural schools in the Peruvian Amazon were trained by Minga Peru to integrate issues of domestic violence and HIV/AIDS in the secondary school curriculum, building on the cultural understanding of health in the region. So, the training exercises were designed to make the teachers think about *cutipa* (damage) and *icara* (the solution to repair the damage). Teachers discussed among themselves the possible causes of *cutipa*, including its manifestations as HIV/AIDS and domestic violence, as well as alternatives and solutions to take care of the body, family, community, and the environment. Building on these discussions, the participating teachers developed educative

projects<sup>19</sup> to be integrated in 10 subject areas of the school curricula, covering students in all five secondary grades.



Teachers in the Peruvian Amazon Undergoing Minga's Training in 2007

These teachers, in their regular classes, systematically broached the topics of domestic violence and HIV/AIDS through a revamped school curriculum, reaching 283 primary school students and 4,254 secondary school students.



Teachers in the Peruvian Amazon integrated topics of violence and HIV/AIDS in the regular school curriculum.

These ground-based, year-round educational efforts in rural schools were complemented with Minga's popular on-air, intercultural radio educative program, *Bienvenida*

*Salud* (Welcome Health) which purposely incorporated themes of domestic violence, HIV/AIDS, and others in its thrice-weekly broadcasts. Further, as part of the UNIFEM project, several students in each participating school were trained as radio correspondents, in-charge of encouraging youth in their respective communities to listen to *Bienvenida Salud* and then provide feedback, including proposing new subjects for inclusion and treatment on the radio program.



Radio correspondents undergoing training in writing letters to the radio program

Further, these radio correspondents, along with their teachers and Minga's cadre of community-based *promotoras*, local women acting as sparkplugs of change, undertook training and other programmatic activities on the topic of domestic violence and HIV/AIDS for their respective communities, reaching an estimated 3,600 families in the Peruvian Amazon.

In essence, the UNIFEM-funded project capitalized on the popularity and credibility of Minga's thrice-weekly radio program (*Bienvenida Salud*), its on-the-ground community resource persons (community *promotoras*), and strategically leveraged it with a school-based initiative, involving teachers, students, and community members to prevent and reduce domestic violence and HIV/AIDS, empower victims of violence (mostly children and women), and reduce prejudice, stigma, and discrimination associated with being HIV-positive.

Other key elements of the programmatic intervention included

(1) designing a data base to code and categorize letters, especially on the topic of domestic violence and HIV/AIDS, received in response to *Bienvenida Salud*, and the operationalization of a systematic methodology to select and analyze these letters to shape future scripts of the radio program,

(2) expanding the audience reach for *Bienvenida Salud* by adding another new radio station in Requena district to the broadcast footprint, supplementing the broadcasts on *La Voz de la Selva* (The Voice of the Jungle) and six additional radio stations in the region,

(3) announcing several contests – with attractive prizes -- to promote the listening of *Bienvenida Salud*, including holding of raffles of radios, batteries, t-shirts, caps, and other mementos to sustain buzz about the program in riverine communities,

(4) distributing relevant educational material on domestic violence and HIV/AIDS to teachers, including a CD of several episodes of *Bienvenida Salud* which they could play in classes or in their communities,

(5) distributing recorders and cassettes to the trained radio correspondents so that they could provide real (and reel) feedback and inputs to *Bienvenida Salud*,

(6) making presentations to parents of students on domestic violence, HIV/AIDS and community health issues in several participating schools, and so on.

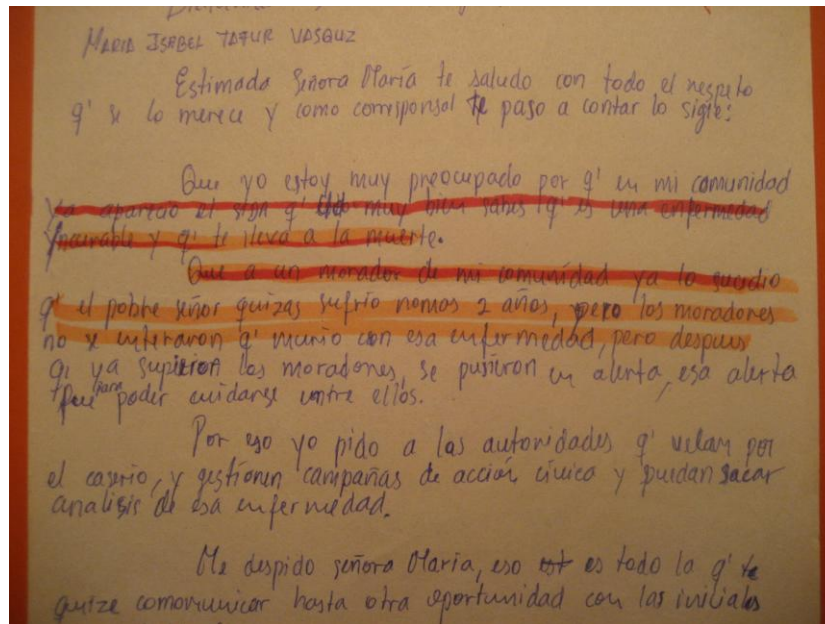
### **Listeners as Producers of the Intercultural Educative Radio Program**

During the UNIFEM-supported project from January 2006 to March 2008, Minga Peru broadcast 140 episodes of *Bienvenida Salud*, averaging 12 new episodes per month. Nearly half of these 140 episodes purposely (and thematically) focused on HIV/AIDS, sexuality, and reproductive health, and the other half emphasized issues of domestic and community violence.

As emphasized previously, Minga works with a deep understanding of the Amazonia culture, and hence *Bienvenida Salud* stays away from a prescriptive “do this” tone; rather it strives to be respectful of people’s world views and working within that cosmivision to make issues relevant. Thus, for Minga, it is important that each episode of *Bienvenida Salud* is produced with direct listener input. For instance, listeners should have a say in both proposing and adopting new gentler, supportive masculinities.

How do the listeners contribute to the scripting process for *Bienvenida Salud*? Listener letters, for the most part, arrive in Minga’s Iquitos office by ferries and in part through visits of *promotoras*, radio correspondents, or community members to Iquitos. The letters are collated at the Minga office in Iquitos and sent to Rafael in Lima, who manages the letters data-base and catalogues and codes each letter on several pre-established themes: for instance, whether or not it addresses the topic of domestic violence or HIV/AIDS. Rafael scours and analyzes the letters for nuggets and insights, forwarding them to the production team in Iquitos on a regular basis for the scripting process. Before being recorded, scripts are reviewed by Minga’s

executive director and the Iquitos-based regional director, and when necessary, experts or subject matter specialists are brought on board.



Each letter is carefully read, catalogued, and screened for possible inputs to the radio scripts.

In essence, Minga has instituted an information-based system of managing feedback, feed-forward, and culturally-resonant content development for *Bienvenida Salud*. By systematically analyzing audience letters, Minga can identify unfulfilled informational needs and gaps and accordingly provide timely information about service delivery, in particular to women and young girls and boys, who are often marginalized from such discourses. So, if a listener letter, for instance, suggests that there may be suspected cases of HIV in a particular riverine community, Minga would provide information about voluntary testing and counseling services on *Bienvenida Salud*, pro-actively address the issue of stigma and discrimination, and also put the community in contact with the regional coordinator of Sanitary Strategy of Prevention and Control of STD and HIV/AIDS so they can obtain governmental support services.

The process of cataloguing, transcribing, and distilling each audience letter deserves more detailed description. When Rafael in Lima receives the letters from Minga's office in Iquitos, he codes and transcribes them, and analyzes them for possibilities to shape a future script outline. Structurally, a script outline consists of an overarching topic, an objective, transcripts of relevant letters, editorial comments about the letters, and suggestions for resources (such as expert interviews) for a particular episode of *Bienvenida Salud*. Once the letter and outline is entered into a data base in Lima, Rafael sends the outline back to Iquitos via the Internet-based SKYPE teleconference software, which Minga has been using since early 2008, given it "guarantees" delivery to the other end, and does so without restrictions on file

size. In Iquitos, the radio production team, led by Emira, fleshes out the script, dramatizes the issue with narration or dialogue, and after a few iterative rounds of consultation and finessing, finalizes the program for airing.



Emira finalizing a *Bienvenida Salud* script on her laptop in the Tambo. Emira herself began listening to *Bienvenida Salud* as a young girl, on the urging of her mother. At 13, she started her training with Minga as a community promotora. At 19, she began to help with the production of the radio program and wrote her first script. Now at age 24, Emira has trained many young radio correspondents and her voice is recognized throughout the Peruvian Amazonia. In 2008, Emira won a scholarship to study in the United States.

### **Managing the Listener-as-Producer Communication Circuit**

Here we describe this “listener-as-producer” communication circuit in detail for *three* episodes of *Bienvenida Salud* that dealt with issues of HIV/AIDS and domestic violence.



**Episode #1090** of *Bienvenida Salud* was created around a series of letters describing discrimination faced as a result of being HIV-positive. In March of 2007 one listener wrote:

*Dearest Mr. HIV/AIDS,*

*During our time together I have been angry at you for being a part of my life. I felt as if you had violated my being up to this point; the most intense emotion in our relationship has been rage. But now I want to see you in a new light. I no longer hate you or feel angry at you. I realize that you have been a positive force in my life. You are a messenger that has brought me a new understanding of life and of myself, and for that I thank you and I forgive you.*

*Sincerely,*

ABC

Rafael catalogued the letter and wrote the program objective: To make listeners of *Bienvenida Salud* aware that discrimination against HIV/AIDS or any other illness is a violation of peoples' rights. He further commented on the letter:

Doña ABC is a hard-working and courageous woman who knew how to confront discrimination from relatives and friends as they found out she was infected with HIV/AIDS. Doña ABC is currently undergoing treatment for HIV/AIDS and lives day to day appreciating the good and bad things that life presents.

The radio production team in Iquitos takes Rafael's inputs and over several iterations writes a script around the message. This program addressed Doña Saida's letter without referencing her directly.

Sandra: (Sighing...), Aayay!!!, well as the music says, not everything is rose-colored in our family life, because sometimes problems that we think don't have a solution arise, and if we don't talk things out and support each other, we become sad and don't feel like doing anything. Our self esteem falls to the floor and we only have negative thoughts.

Medali: That's right Sandra, and that's how it is when someone has HIV/AIDS and other people ignore and abandon her, she feels lonely, sad, and discouraged, lacking the desire to keep on living.

Rosita: That's why, today, girls, we'll be learning along with our listeners why having discriminatory attitudes towards people who live with HIV/AIDS or any other illness is a violation of their rights because their emotional and physical health are affected.

**Episode #1130** of *Bienvenida Salud* focused on institutions and organizations that offer resources for HIV/AIDS prevention and intervention. The program objective was driven by listeners like Emerita Vela, a *promotora* from Requena, a town in the basin of the Ucayali river.

*...this sickness has already taken over my village and that's why I had meetings often with my network of women, so that we could talk about these illnesses and the deaths we are seeing...the majority of [the women in my network] are young and single mothers so I talk to them about the conversations we have had in the trainings of Minga Peru...*

After cataloguing the letter, Rafael commented that Emerita is very concerned about the spread of HIV/AIDS in her town and highlights the fact that it affects young women between 18 and 20 years of age – on whom the future of Peru depends. He also cited the need for partnerships with other community organizations that can help with HIV/AIDS education, prevention, and treatment. The ensuing script then read:

Rosita:           There's a time for everything, like studying, working, and watch out....there is no sense in being mischievous by you know, having sexual intercourse at an early age because we run a big risk of getting or transmitting an STI or HIV if we're not careful.

Emira:           That's right doñita, you know today we'll be having a conversation with our listeners about HIV/AIDS and some institutions or organizations that come together to help prevent and confront HIV/AIDS and STIs as well as to support people who are undergoing treatment.

During this episode, the production team interviewed Lucia Ruiz Escalante who is in charge of community education for the Amazonic Jungle Association. She spoke about HIV/AIDS education efforts and ways people could overcome their fears of testing and treatment.

...Many HIV patients don't seek care, one of the reasons is the fear of being identified. I think that with time, there's no reason why this illness should make us feel embarrassed because it can happen to anyone be they man, woman, or child, and we have to think that with antiretroviral treatment a person can keep on living and can be productive and take care of their families, their children, and not be dependent.

**Episode #1143** of *Bienvenida Salud* focused on violence against women—making women aware that when they press charges against somebody who has been violent they have the right and obligation to follow through with the sentencing and its consequences. A listener wrote in:

*In my community when a woman fights with her husband and presses charges with the deputy governor, and then the deputy follows through with sentence, but in the morning the woman goes and retracts the charges. That happens regularly...Women say that they feel bad when their husbands are put in the cell and [that they pressed charges] only because they were angry at the moment...*

After cataloguing the letter, Rafael added the following comment:

The authorities have worked with the people of the riverine communities to come up with sanctions for men who commit acts of violence. In many cases these sanctions are never solidified because there are women who fear the repercussions of having to be single mothers or because they feel pity towards the men so they remove the charges. Unfortunately, the aggressor does not suffer the consequences and the violence is repeated, and in some cases compounded.

And the script directly addresses this issue of not following up on sentences:

Emira: But doñita, the authorities of the community have to seek justice. Against these cases of violence we women have to “wear the pants” and demand respect and follow through with the consequences of the law.

Emira: That’s why doñita today we will be talking about the issue of violence against women, so that many of us women can be aware and can report cases of violence because we all have the right and the obligation to follow through with the punishment against the aggressor down to the last consequence.

The socio-drama in *Bienvenida Salud* featured the following dialogue:

Dora: (A little sad...), Oh Pasionaria, it’s been a while since our neighbor Peta’s husband, Pedro, well he would hit her and she says she wants to press charges.

Peta: Yes, but he tells me I won’t get anything out of it.

Pasionaria: Well what are you waiting for neighbor Peta, go to the community authorities and ask that he be punished for being a beater.

Peta: (Scared...), Oh no neighbor Pashuca, my poor old man, I feel sorry to see him sitting locked in the cell, plus he’s the father of my children so I just have to put up with it.

## Method and Data Collection

The authors of the present report (Singhal and Dura) spent a week in Peru in mid-April 2008 collecting both primary and secondary data in Lima, Iquitos, and in the Amazonia on the impact of the curricular integration of HIV/AIDS and violence prevention in schools and riverine communities, as well as analyzing the treatment of these topics on *Bienvenida Salud*.

### Primary Data

Our primary data collection activities included *six* focus group discussions, comprising a total of 57 participants, and *four* in-depth interviews. Our focus group discussions included:

- (1) A discussion at Minga's Tambo training center in Nauta with 22 participants, including teachers, *promotoras*, and radio correspondents, who attended Minga-sponsored trainings on violence and HIV/AIDS,



Focus group discussion underway with teachers, *promotoras*, and radio correspondents at the Tambo

- (2) A discussion with 20 students, teachers, radio correspondents, parents, listeners, and other community members in the riverine community of San Francisco,

- (3) A discussion with four officials of Nauta's Unit of Local Educative Management (UGEL), who collaborated with Minga on the training of teachers in rural secondary schools,

- (4) A discussion with three members of a network of HIV-positive persons in Iquitos who serve as informal resource persons to Minga's HIV/AIDS programmatic activities in the Amazonia,

- (5) A discussion with five staff members of Minga's Iquitos office, including Emira and Cesar, who are part of the production crew of *Bienvenida Salud*; Rosa Maria, a lawyer and a psychologist specializing in community affairs, who manages Minga's Iquitos office; Rafael Elias,

who manages the Minga's arts and crafts product development and marketing initiative; and Sandra, a biologist, who works closely with Minga's *promotoras* in riverine communities on agro-forestry, plantations, and the like.

(6) A discussion with three staff members of Minga's office in Lima, including Eliana Elias, Executive Director, Eloy Neira, a noted Peruvian sociologist, and Aroma, a Minga team member with several years of experience in rural education.

Our *four* in-depth interviews were with the following respondents:

(1) An interview with Gina, a Peruvian social scientist with expertise in gender issues, whom Minga engaged to conduct focus groups and in-depth interviews with teachers, radio correspondents, listeners and community members to gauge the effects of the UNIFEM-supported domestic violence and HIV/AIDS project in the Amazonia,

(2) An interview in Minga's Lima office with Rafael, who coordinates the data-base of *Bienvenida Salud* listeners' letters, catalogues each letter that is received, analyzes them on several thematic axis (including whether or not it deals with domestic violence or HIV/AIDS), and feeds forward the gist of letters to the production team in Iquitos on a regular basis, shaping the content of episodes that follow. Rafael showed us how the letters' data-base is managed in real-time and how listeners' feedback systematically translates into feed-forward input for script development, and

(3) Two interviews with public health officials in Iquitos, responsible for the administration and implementation of HIV/AIDS programs.

## **Secondary Data**

In addition to the primary data we collected, Minga provided us with reams of secondary and archival data sources on the UNIFEM-supported domestic violence and HIV/AIDS project. Most of this data was coded, categorized, and analyzed by Minga based on their ongoing feedback and reporting needs. This secondary data included:

(1) Insights gleaned from 12 community-centered focus group discussions, comprising a total of about 260 participants, conducted by Gina in six riverine communities of the Peruvian Amazon, where the UNIFEM project was implemented. The participants included 37 Minga-trained radio correspondents,

(2) Insights gleaned from two focus group discussions, comprising over two dozen teachers, conducted by Gina in the participating riverine communities,

(3) Insights gleaned from 17 recorded and transcribed interviews with teachers, local health officials, and other knowledgeable key respondents,

(4) Insights gleaned from survey data collected from both teachers and students in 24 participating schools (3 in Requena area, 14 in the Loreto-Nauta area, and 7 belonging to UGEL).

A total of 164 teachers<sup>20</sup> were surveyed. The teachers were asked 24 questions (mostly open-ended), including: What is the most useful information you learned in Minga's intercultural communication training to prevent and control domestic violence and HIV/AIDS? How have these trainings been helpful to you as a teacher? How are you integrating these topics into the learning process of your students? Have you been able to do it across the curriculum? What limitations have you encountered in trying to implement these topics in your courses? Have your views or ideas about HIV/AIDS changed after these trainings? Do you listen to *Bienvenida Salud* and do you write letters to the program? Are you utilizing active learning techniques? Which ones? Which ones seemed to have worked best? Has talking about integral health and caring for the body influenced the self-esteem of your students? How so?

A total of 235 students (roughly ten each from the 24 participating schools) were surveyed, including 118 female students and 117 male students. The surveyed students were between the ages of 12 and 21. The student survey consisted of several open-ended questions, including: Have your teachers talked to you about violence and HIV/AIDS as part of the class? How do you feel about the ways they have incorporated these topics? How has this affected your personal, familial, and love life? Have your views about sexual health, STIs, HIV/AIDS, and family violence changed as a result of these conversations? How? How do you feel about these issues? Have you been able to talk to your parents, brothers, significant other, and/or friends about HIV/AIDS? What have you talked about? Have you been able to notice changes amongst your classmates and friends regarding violence?

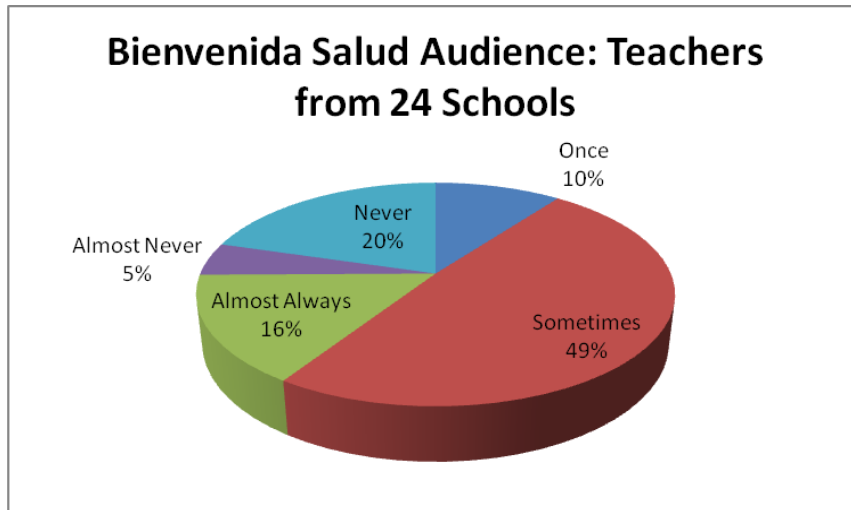
## Results

We organize our results around several key questions:

### Who Listened?

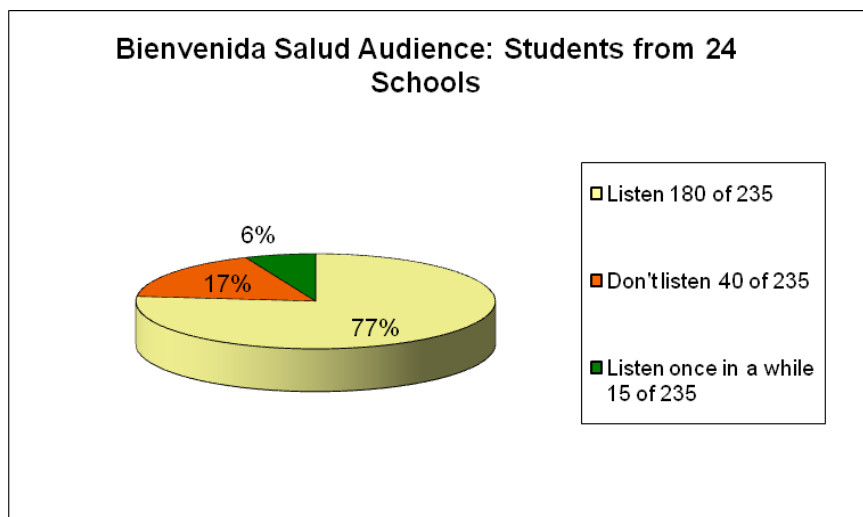
*To what extent did the teachers and students who participated in the HIV/AIDS and domestic violence program listen to *Bienvenida Salud*? Were there any differences in listenership patterns in rural and urban communities of the Peruvian Amazon?*

Some 75% of the 170 surveyed teachers had listened to *Bienvenida Salud* at least once, and 16 percent claimed to be avid listeners of the radio program.



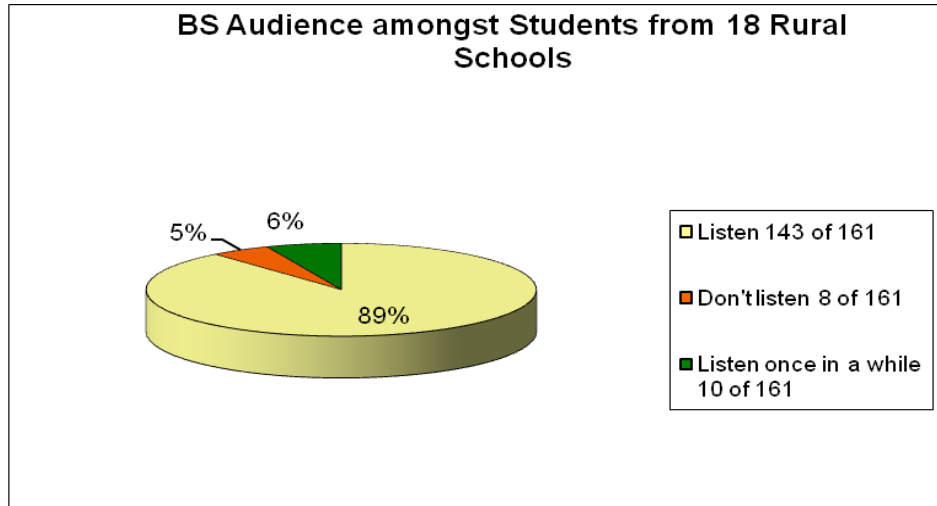
Some three-quarters of surveyed teachers listened to *Bienvenida Salud*, and 16 percent almost never missing a broadcast.

As compared to teachers, listenership among students was higher. Some 94% of the 235 surveyed listened to *Bienvenida Salud*, and a whopping 77% claimed to be regular listeners.

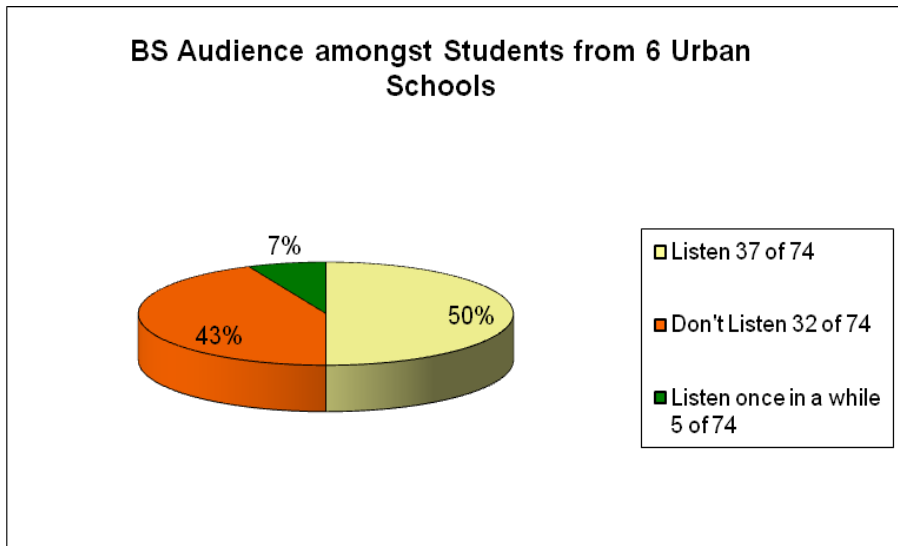


A whopping 77 percent of the surveyed students were regular listeners of *Bienvenida Salud*.

Interestingly, dedicated listenership to *Bienvenida Salud* was significantly higher (89%) among students attending school in rural areas than in urban areas (50%), where presumably there exist more entertainment options (see the following two figures). This finding suggests that *Bienvenida Salud* is actually reaching those young audiences who, to begin with, have little access to outside information. In this sense, *Bienvenida Salud* is helping reduce information inequity gaps.



Dedicated listenership to *Bienvenida Salud* was significantly higher in rural schools, suggesting that the program was helping to reducing “information gaps.



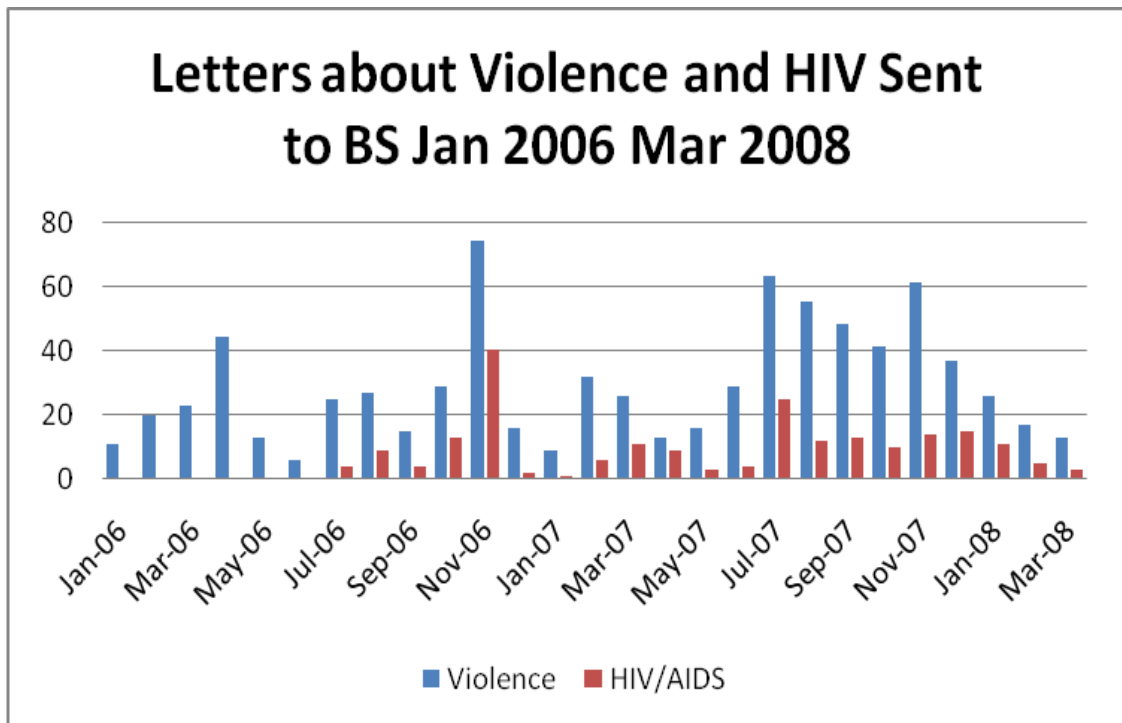
**Who Wrote? What was Said?**

*To what extent did listeners of Bienvenida Salud raise the issue of domestic violence and HIV/AIDS in the letters that they wrote to Minga? Were there any shifts in patterns of letter-writing [e.g. who was writing, on what topics, etc.] since the intercultural radio educative project was launched in secondary schools of the Peruvian Amazon? What do the letters say about what the listeners are learning? What has been the role of the radio correspondents in spurring letter-writing and as a consequence influencing the content of the radio program?*



As emphasized previously, listener letters are the basis for much of *Bienvenida Salud's* content and form. They also provide insights into the impact of the radio program on its regular listeners, of whom the largest audience segment is of adult women.

From January 2006 to March 2008, the duration of the UNIFEM-supported project, the staff of *Bienvenida Salud* received a total of 4,860 letters. While Minga's radio program addresses a whole host of health and social issues, nearly 21 percent of all letters (N=1003) made a direct and explicit reference either to the issues of violence in the community or family, or raised questions or concerns on HIV/AIDS.

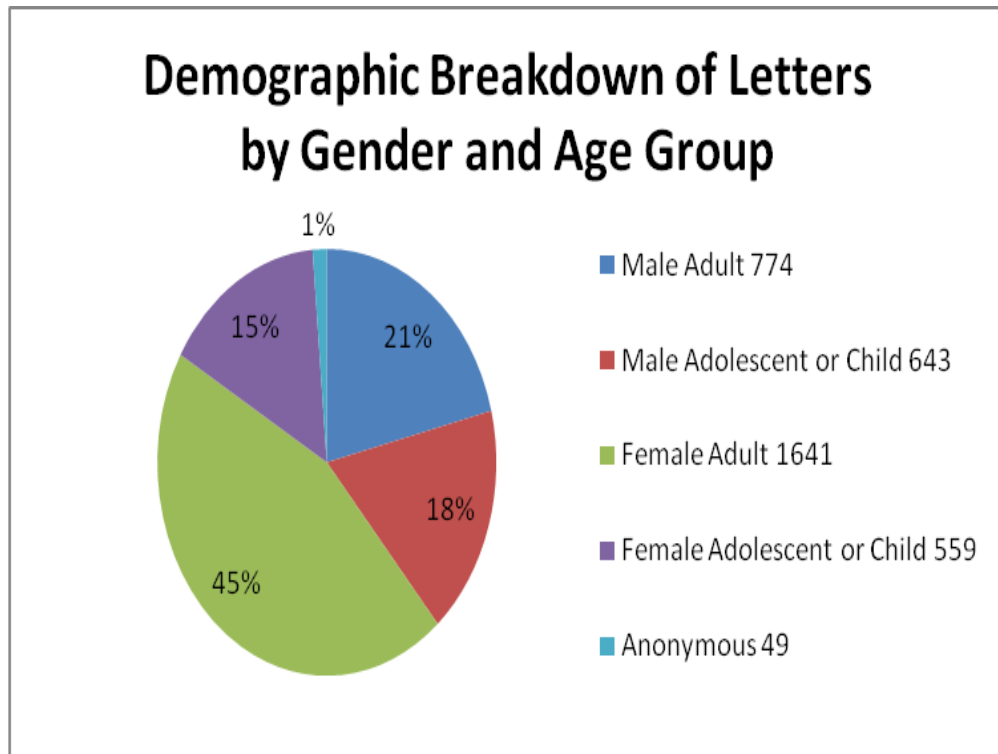


A demographic analysis of the letter-writers clarifies that adult women send most of the letters (45 percent), followed by adult men, and then young men and women. The primary target audience of *Bienvenida Salud*, since it was launched eight years ago, has been adult women. Many of the adult women listeners write in to share that they have either abused their children or been abused by their husbands or partners, and point to the debilitating consequences of such abusive behaviors on family life, emphasizing the need to find alternatives. Some women confidently narrate their personal experiences with their partners, especially how they faced violence at home and found ways to overcome it<sup>21</sup>.

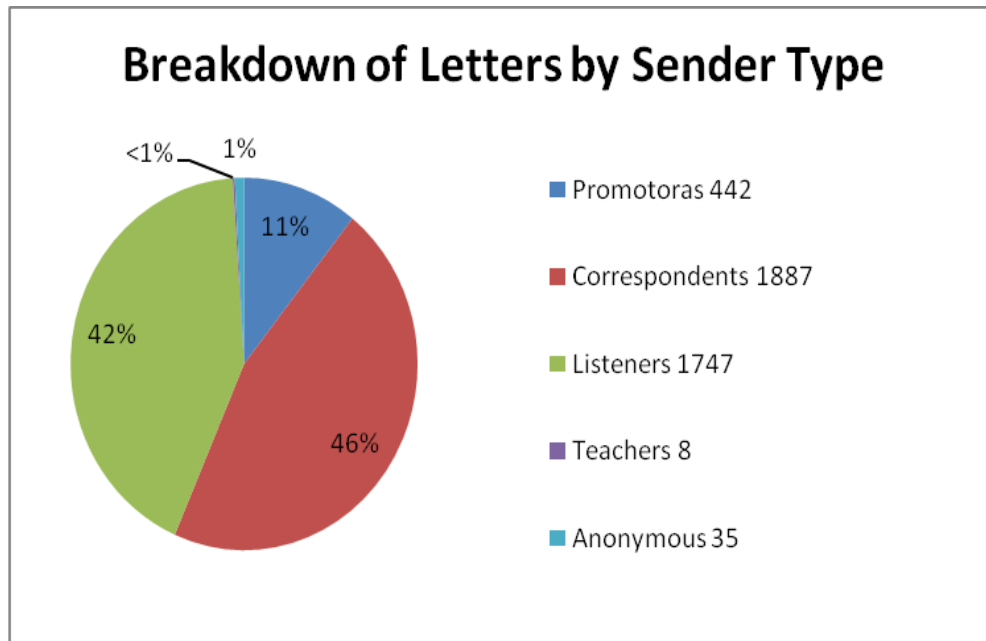
Most letters written by adult women point to a rise in self- and collective efficacy, a movement from silence to action, a slow but sure grasp of their rights as individuals, expanding

opportunities to make their voices heard (in their homes and communities and in the public sphere through listener-letters, for instance), and a growing self-respect in what they know, what they can do, and in their femininity, emotions, and agencies.

What is interesting from the letters-analysis is that men and youth (both male and female) are increasing as an audience segment of *Bienvenida Salud* and also writing in more frequently to the program. This finding perhaps suggests shifts in gender relations in the Peruvian Amazon, whereby men are becoming more actively involved in the welfare of their families. By writing letters to Minga Peru, the male involvement in the preparation of scripts has become even stronger.



A breakdown of the letters by sender type shows the important role of the newly-trained radio correspondents in spurring letter-writing. Some 46 percent of the letters received by Minga from January 2006 to March 2008 were written by radio correspondents. In focus group interviews, correspondents voiced a sense of “pride” in that their school and Minga trusted them to receive the training. They take seriously their role in writing letters to Minga informing of cases of violence in their communities, as also their responsibility to search for alternative and local solutions to problems of domestic or community violence.



**By having the legitimacy to be more actively involved in their communities, as also the credibility to amplify and voice the concerns of other youth, correspondents feel valued citizens – both in their schools and neighborhoods. There is evidence that their academic performance in the school has improved during this time, and their interaction with their classmates has increased. Our conversation with their teachers confirmed that radio correspondents – both boys and girls -- have become a referent (or role model) for others.**

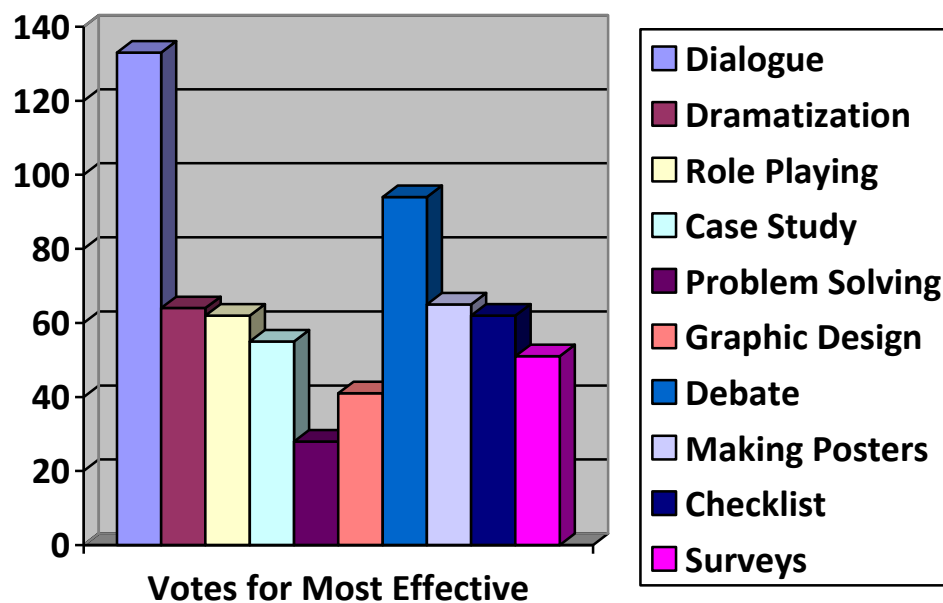
### **Integrating Curriculum, Active Learning**

*To what extent are topics of domestic violence and HIV/AIDS incorporated in the school curriculum? Are there some subject areas where these topics could be more closely integrated in the future? And, what pedagogical, active-learning techniques work especially well in conveying these sensitive topics?*

After surveying 235 students in the 24 participating secondary schools, it is evident that the topics of violence and HIV/AIDS were closely incorporated into different subject areas through the integrated curriculum developed by the teachers. Of the nine or ten subject areas that are covered in secondary school, violence and HIV/AIDS were mostly closely integrated, as per the students, in the following four subjects (in order of listing) *Personal, Family, and Human Relationships; Tutoring; Science, Technology, and Environment; and Integrated Communication*. Subjects like *Mathematics* and *History* also became sites for discussion of HIV/AIDS, for instance. As Betty, a secondary school teacher in Nauta noted: “All the teachers in all nine subject areas have tried to insert these issues. Even in mathematics, we discuss statistics and rates of infections; and in history, we deal with the history of the disease.”

Surprisingly, students believed that violence and HIV/AIDS issues were not incorporated (or addressed) in subjects such as *Physical Education*; *Art Education*; and *Orientation for Well-Being*. Clearly, these subject areas naturally lend themselves to the inclusion of these topics, and perhaps some effort may be invested on capitalizing on these subject areas in the future.

When teachers were asked about what pedagogical techniques seemed to be most effective in conveying these sensitive topics, they overwhelmingly picked back-and-forth classroom dialogue as the most effective. Such dialogue allowed for topics to be explored in depth and questions and concerns to be addressed. Dramatization, role plays, and case studies were named as being the next most effective pedagogical techniques.



Most Effective Active Learning Techniques According to Teachers

As an UGEL teacher remarked: “The dramatization technique was used for the topic of family violence....At the surface it was humorous because the students carved out their roles and dressed up as family members. They would act out and dramatize the situations. But at the end they would reflect and the tone would change. Parents were invited to these events because we would ordinarily hold them on mother’s day or father’s day.” She further reflected: “These dramatizations led to attitudinal change not only in the teachers but also in students and parents. They have all been sensitized on these topics. Now it is easy to talk—let’s talk about more things, they say.”



Students dramatizing a domestic violence situation

Profesora Karim, another UGEL teacher, highlighted the value of real cases as a learning tool: “As a science and environment teacher in health we saw interesting cases of students who described first-hand experience with HIV/AIDS primarily through the experience of relatives. Generally they did not give the names of their relatives for privacy. There were also cases of family violence where parents beat their children for misbehaving. We held meetings with parents and the children in their homes, and learned a lot from these experiences.”

Ruth, a teacher in San Jose de Lupuna, emphasized how the teachers, students, community members, and Minga worked closely together to create an outside-the-class, action-oriented program to address the topics head-on: “There is not so much violence in our community as there is HIV. So as teachers, we have worked with all the six secondary grades to explain what HIV/AIDS is, how to protect oneself, and so on. The students have come up with slogans and have made posters. We selected the best ones and then had a parade in the community, and the children were so loud that everyone could hear. After that we moved to the San Pedro community, which is 10 minutes away. The principal and teachers of the town were very happy and thankful—they congratulated us. Minga had given us stickers and we distributed them. The activity was a big success and raised community awareness in a big way.”

### **Students’ Perceptions of Impact**

*What have the students gained from Minga Peru’s intercultural educative radio project to prevent and reduce domestic violence and HIV/AIDS in the Peruvian Amazon, by listening to radio and participating in classroom-based, extra-curricular, and community-centered activities?*

Our primary and secondary data clearly shows that students have learned about their rights as individuals, about different forms of violence, and about taking preventive measures for not contracting HIV/AIDS. As Jimmy Aldo Yaicate Macuyama, a student from Santa Fe, Rio Marañon, noted: “I learned to be cautious about diseases. I learned that we have rights as people and they must be respected.”

In general terms, students emphasized that they now talk about these issues with their friends and family members, especially about domestic violence. Thirteen-year old Milagros Paredes Ocmin of Santa Rita emphasized: “Well yes, in the afternoons we sit and talk about these things [as a family] and my dad is aware and feels repentant because he used to hit my mom a lot. Now, no longer.” Many students said that they have noticed changes – both ideological and behavioral -- in male-female and parent-child relationships. Many also cited improvements in relationships among teachers and students. For instance, 19-year old Edson Sandi Tamani of Villa Canan, noted: “In class, the teachers used to be more severe. Now they are calmer; they have a better way of reaching their students, for if they speak about violence they know that they have to set an example.”

Prior to the implementation of the school-based program, students noted that they had several misconceptions about HIV/AIDS. Many thought that it was “a small animal” that could be transmitted by touching someone. HIV also attributed as being synonymous with having sex with homosexuals or prostitutes. Although some misconceptions still persist, the secondary school students show mindfulness in acknowledging that the person they have sex with may have multiple partners.

In our discussions with students, while acknowledging the difficulties in broaching these topics with their girlfriends or boyfriends, they expressed a desire for change, including delaying of sexual relations, limiting sexual partners, and using condoms in sexual encounters. A great majority of the students said that they are “better informed and less afraid”: that after talking to their teachers and listening to *Bienvenida Salud*, they now know how to prevent the spread of HIV and other sexually-transmitted infections. Many emphasized that what they learned from their teachers, they share with others in the family and community. As Galita Zumba Quiroz, a 14-year old female student from the town of Requena, noted: [These conversations] have benefitted me a lot because thanks to the teachers I have shared what I have learned with some people, especially my younger brothers—I have told them how to take care of themselves. Personally, with my boyfriend sometimes I talk, but not about HIV yet. But I hope we will. Within my family I have spoken with my older brother. I have told him to take care of himself.”

### **Teachers’ Perceptions of Impact**

*What have the teachers gained from Minga Peru’s intercultural educative radio project to prevent and reduce domestic violence and HIV/AIDS in the Peruvian Amazon, by undergoing*

*Minga's training and by their involvement in classroom-based curricular and community-centered extra-curricular activities?*

Our primary and secondary data clearly shows that after undergoing the Minga Peru's training, several teachers feel a sense of pride, responsibility, and accountability in making a difference in the communities. As one teacher from San Jose de Lupuna noted: "We are the leaders that take a people towards their development and prosperity—what better way than by caring for their health".

Many teachers highlighted the professional development, networking, and relational functions of such school-based health initiatives. As one teacher noted: "We are able to acquire accurate knowledge about health issues, form relationships with educational and development institutions like Minga Peru, and meet other teachers. In this way, we can learn together and get organized to mobilize entire communities and local educational and health institutions for everyone's good."

Many teachers acknowledged their own biases, misconceptions, about HIV/AIDS and family violence, and how they now know what they should have known all along. For instance, a teacher in Nauta noted: "Before, I thought that when somebody was infected with HIV and they did not eat all of their food that another person could get infected through the food, or when somebody kissed an infected person they would become infected. Now I know I was wrong." Another teacher emphasized: "From this project, I have learned that with respect to family violence it is important not to stay silent. It is important to make women's rights known to her and others and for them to be respected. With regard to HIV/AIDS, it should be prioritized as a social problem. We can't forget that we are a population at risk and we should promote the prevention of this disease."

### **Community Members' Perceptions of Impacts**

*What have the members of riverine communities gained from Minga Peru's intercultural educative radio project to prevent and reduce domestic violence and HIV/AIDS in the Peruvian Amazon?*

An analysis of our primary and secondary data shows that Minga Peru's intercultural educative project to prevent and reduce domestic violence and HIV/AIDS in the Peruvian Amazon has made a positive impact in the lives of participating riverine communities. While such deep-rooted beliefs and attitudes are slow to change, there is progress on both issues, at least in certain communities.

#### ***More Communication, Reduced Violence***

As a community leader in San Francisco noted: "Sometimes after parties where there was a lot of alcohol we would see violence in the community and then violence in the home—

lots of screams would be heard at night. After this project began, one of the teachers opened up a dialogue in the community to create a sense of collective conscience. Now it is very rare to see violence after parties in our community.”

Merceditas, a women in her late 30s in the community of San Francisco, sat by her husband and two boys and noted: “When I got married I was very irritable—there was a lot of violence within me and I used to hit my children a lot. Many times as a woman you are marginalized in the home or the kitchen. It is nice for us as women to receive training through teachers and to improve our relationships through conversation.



Merceditas (right) with her son Jacques in San Francisco openly talking about family violence

Jacques, Merceditas son, noted: “It’s true, my mom used to hit us—but it was good so that we would be respectful and study instead of play. It has its good points and its bad points. It helped me become obedient. That’s why we ask her [jokingly] why she doesn’t hit the younger children. But Minga has helped us have better familial communication.”

Adilia, a radio correspondent from San Jose de Lupuna, also echoed a similar sentiment. “Now, in our family, we talk about prevention. There is less violence. I have changed within my family, and so have others. I was timid and afraid to speak, but I’m not embarrassed anymore. We communicate better.”

Profesor Carlos, in San Francisco, reinforced the beneficial effects of Minga’s programs on the community: “I’ve been living here for more than 10 years, and I’ve noticed a change. Now people are more tranquil—there are fewer fights. I don’t know if the violent people



moved, but there has been great improvement.” Profesor Nelson echoed a similar sentiment by noting: “In the past 12 years I’ve seen a change in the amount of violence, especially after parties....San Francisco used to be a rebellious community, and they used to make fun of Minga’s *promotoras*. But through perseverance they started to convince and transform people so that they became more responsible and hard-working. Mothers used to suffer a lot with their *machista* husbands. They wouldn’t even let them speak. Now women can speak. They can say what they feel. They have the same rights and responsibilities. This is especially effective through work with the students in classrooms and through radio correspondents because they bring about change.”

Another indicator of deep-lasting change was the repeated acknowledgment by men of how “*paso a paso* (that is, “step by step”)” they themselves have changed. Jose Manuel from San Jorge said: “I have been a listener of the radio program for one year. Since I didn’t know about violence and all these things I used to feel *machista*. I thought because I was a man all decisions were mine and any little thing made me blow up. My partner was a *promotora* and she told me I wasn’t living the right way, but I didn’t believe her. But it stayed in the back of my mind and I began to listen to the program a little harder. I think I have slowly changed, not completely, but still, now we dialogue, we talk. I have stopped gossiping and only talk about the joys and triumphs in our family and other families. I now feel a sense of commitment to these issues and have become a correspondent. This is an important and arduous job because we have the responsibility to talk about these issues.”

### ***Spurring Conversations on Responsible Sexuality, Healthy Passions***

In the Peruvian Amazonia, normatively, sexual activity for both girls and boys begins early. As a consequence, it is not unusual for girls as young as 12 or 13 or 14 years to become pregnant. Minga knows that when it comes to issues of sexuality, there is lack of communication between parents and children in the Amazonia, and a general lack of accurate and timely information that youngsters could dialogue about, and act on. Hence Minga’s programs – both in the form of on-air broadcasts and community-based initiatives -- are geared to create more conversations about the importance of “coming of age” before young people find themselves burdened with the care of children, especially as early pregnancy leads to poor maternal and child health, limits options for continuing education, and contributes to perpetuating the cycle of poverty. Profesora Nerida noted: “Young people here become sexually active when they are 12 or 13 years old. It is seen as normal in the communities and as teachers we try to talk about these issues, but we can only do so much. If we had more parental support, perhaps we could do better.”

Profesora Nerida’s statement exemplifies the challenges that undergird the prevention of sexually-transmitted infections in the Peruvian Amazon, including HIV/AIDS. In our interview with Pilar Jarama Bardales, a public health official in Iquitos, she emphasized: “The greatest challenge here is getting information to rural communities. Our health centers are closer to the outskirts of cities. We provide condoms, but people are afraid to ask. Rural areas don’t have

easy condoms.” Gabriela, a 14-year old radio correspondent from Requena, stated: “They are very young and need to prevent pregnancies and STIs. We can have access to free birth control and condoms, but the guys just don’t think about who they are with; they just think about having a good time. I hope we can be continually trained, not just we women but also men, because this way we can make changes.”

Jose Manuel, a radio listener in San Jorge, credited Minga’s treatment of HIV/AIDS in *Bienvenida Salud* and through school-based programs as “opening the doors” for conversations about responsible sexuality to occur. But more sustained efforts in this area are warranted. As he noted: “We like to gather in the late afternoons or evenings to listen to cassettes of *Bienvenida Salud*, often played through the community loudspeaker. We want to hear more programs on sexually-transmitted infections. We would like to see a video about our bodies and body parts. This can help us learn about pregnancy and clear our misconceptions. We need to gradually build awareness about these issues and also self-esteem among young people which can lead to responsible sexuality.”

The teacher trainings and the school-based curriculum helped clear many misguided perceptions about HIV/AIDS: As Maria Hernandez, administrator of the San Juan Health Center in Iquitos, noted: “In the trainings, there were several myths and misconceptions about HIV transmission. People were afraid of transmission through mosquitoes. They also asked if you could get it from the person who chewed the yucca and spit it in a bottle to make *masato*, a local brew. They wondered if, like gonorrhea, one could get HIV from a toilet or a towel. And they wanted to know if HIV/AIDS could be cured by eating vegetables and herbs because they saw that some people who were infected did that instead of seeking treatment.” These trainings also provided an opportunity to reframe the discourse of responsible sexuality not just as “safe sex” or “time out” in a passionate encounter, but also as an exercise in “healthy passions”. Maria Hernandez continued: “In the docent [teacher] training one person had never used a condom because he noted that sex with the condom did not feel the same. So we asked them to explore creative options. We taught them how a woman could put a condom on a man with her mouth, and we also showed them that it could be made fun, for instance, by using fruit-flavored condoms.”

### **Local Broadcasting: The Loudspeaker Way**

An interesting, unplanned off-shoot of the present assessment was to observe and document the role of community loudspeakers in (1) echoing and amplifying the messages of *Bienvenida Salud*, and (2) creating a home-grown, community owned and operated “broadcast” system.

In the past few years, nearly ten communities in the Peruvian Amazon, spurred by their own initiative and with help from Minga, have established loudspeakers to amplify radio broadcasts. Commenting on this phenomenon, Eliana Elias, the executive director of Minga

Peru, noted: “Previously, communities earned credibility through the construction of schools and roads, but now a community also gains visibility and credibility through media consumption and production. When people can listen to their voices, they begin to realize that everyone has the right to listen and to be heard. By hearing themselves in public, their way of speaking is legitimized.”

As we (the present authors) alighted from the boat to enter the San Francisco community, we could hear the loudspeaker echoing all the way to the Marañon River. We noticed immediately that apart from radio broadcasts, the loudspeaker serves multiple functions.



The loudspeaker outside the secondary school in San Francisco

We listened to Margoli, the town’s radio correspondent, welcoming visitors and community members to our focus group discussion. She also fulfilled broadcast requests from people who were in attendance, sending out special greetings and messages to other community members.



Radio correspondent Margoli making announcements  
on the loudspeaker in San Francisco

Different members of the San Francisco community spoke about the different functions served by the loudspeaker. The local teacher noted: “Sometimes the parents don’t want to talk about these difficult issues with their kids. Now with a loudspeaker the whole community of 436 inhabitants can listen to *Bienvenida Salud* and discuss these topics.” Roxana, a school teacher, added how the loudspeaker is not just a tool of media consumption but also one of media production: “Students record their own programs for the *Integrated Communication* class and broadcast them on the loudspeaker. They openly discuss topics like abortion, alcoholism, pollution, and family issues.” Rosario, another school teacher, talked about the value of informal loudspeaker broadcasts: “The students use it during recess, reinforcing the notion that everyone should protect themselves, that it is best not to have multiple partners, that family unity is important, and there be no violence in the family.”

A community member noted: “Before the loudspeaker we used to call for peoples’ attention by blowing into bottles, and before that we used animal horns. Today, we use the loudspeaker to call town meetings, gatherings of the *madres artesanas* (mother artists), or to remind the community of buffalo feeding times.” Another added: “The loudspeaker allows us to broadcast all over the area, and it gives us the opportunity to gather if there’s an emergency. When one of our community member’s home caught fire, we used the loudspeaker to call everyone for help in putting it out. I live at the edge of the community, and I still hear it very clearly.”

In communities outside of San Francisco that have installed loudspeakers, teachers, correspondents, and residents emphasized that the loudspeaker is used to extend lessons about HIV/AIDS and family violence to everyone in the community. These insightful affirmations about the varied use of loudspeakers were found aplenty in our interviews, surveys, and letters. For instance, in one of the community focus groups in another riverine community, a teacher noted: “Through the loudspeaker, we are addressing sexuality issues and in our school each grade has a loudspeaker-based radio program. The third grade of secondary

school which I teach has a program that is broadcast on the loudspeaker on Mondays at 5 p.m. It is called "Student Sunset: The Voice of the Marañon River," noted a proud teacher in a riverine community.

While the loudspeakers serve an immensely useful role in amplifying messages across communities, and creating community dialogue on issues that were hitherto taboo, community members expressed concerns about the continued maintenance and repair of the loudspeakers.

### Summary and Conclusions

The present report documented the main findings from our assessment of Minga Peru's Intercultural Radio Educative Project (January 2006 to March 2008) to fight against violence and HIV/AIDS in rural communities and schools of the Peruvian Amazon.

Our main findings include:

Dedicated listenership to *Bienvenida Salud* was significantly higher (89%) among students attending school in rural areas than in urban areas (50%), suggesting that the radio program is actually reaching those young audiences who are traditionally "information-poor," reducing information inequity gaps.

During the duration of the UNIFEM project (January 2006 to March 2008), the staff of *Bienvenida Salud* received a total of 4,860 letters. Of these, 12% of the letters (N=585) made a direct and explicit reference to issues of violence in the community or domestic sphere, or raised questions or concerns on HIV/AIDS.

Adult women, the primary target audience of *Bienvenida Salud*, wrote most of the letters (45 percent) to the radio program. Many of the adult women listeners wrote in to share that they have either abused their children or been abused by their partners. Adult men and youth (both male and female) are increasing as an audience segment of *Bienvenida Salud* and also increasingly writing in to the program. This finding suggests increased involvement of men in the welfare of their families and their partners.

The newly-trained radio correspondents played a key role in spurring letter-writing. Correspondents voiced a sense of "pride" in that their school and Minga trusted them to receive the training, and take seriously their role as providers of community feedback and conveyors of community joys and concerns.

The topics of violence and HIV/AIDS were closely incorporated into different subject areas through the integrated curriculum developed by the teachers. The most effective

pedagogical techniques to convey these topics was student-centered class-room dialogue, followed by dramatization, role plays, and case studies.

Participating secondary school students reported learning about their rights as individuals, about different forms of violence, and about taking preventive measures for not contracting HIV/AIDS. They reported talking about these issues with their friends and family members, especially about domestic violence. Many students noticed changes – both ideological and behavioral -- in male-female and parent-child relationships.

Prior to the implementation of the school-based program, students reported harboring several misconceptions about HIV/AIDS. Although some misconceptions still persist, they now show mindfulness in acknowledging that the person they have sex with may have multiple partners. Students also acknowledged the difficulties in broaching these topics with their girlfriends or boyfriends, but they expressed a desire for change, including delaying of sexual relations, limiting sexual partners, and using condoms in sexual encounters.

After undergoing Minga Peru's training, secondary school teachers feel a sense of pride, responsibility, and accountability in making a difference in their communities. Many teachers noted that these trainings served a useful function in terms of their professional development and networking, equipping them to serve their students and communities better.

In overall terms, our findings suggest that Minga Peru's intercultural educative project to prevent and reduce domestic violence and HIV/AIDS in the Peruvian Amazon has made a positive impact in the lives of participating riverine communities. The project capitalized on the popularity and credibility of Minga's thrice-weekly radio program (*Bienvenida Salud*), its on-the-ground community resource persons (community *promotoras*), and strategically leveraged it with a school-based initiative, involving teachers, students, and community members to prevent and reduce domestic violence and HIV/AIDS, empower victims of violence (mostly children and women), and reduce stigma and discrimination associated with HIV/AIDS.

In our opinion, not only did the project meet its objectives, it surpassed them. The project demonstrated how ongoing on-air and on-ground communication initiatives can be strategically layered and leveraged with other institutionalized education outlets such as schools, teachers, and the larger community that they serve. It showed that domestic violence and HIV/AIDS are complex social phenomenon, and hence require a multi-layered interventionist approach predicated on enhancing community participation, community conversations, and increased feedback and feed-forward loops. In this sense, Minga's present project in the Peruvian Amazon holds important lessons (for diffusion, replication, and adaptation) for designing other large-scale, community-centered interventions to prevent and reduce domestic violence and HIV/AIDS.

Minga's intercultural approach in the Peruvian Amazon demonstrates that it is possible to talk about, and to live, a whole sexual life with responsibility; and it is possible to enjoy physical closeness while preserving women's dignities and bodies.

## References

- Bustamante, C. (2004). Saludes públicas y salud reproductiva en la Amazonía. In E. Elías and E. Neira (Eds.), *Salud reproductiva en la Amazonía: perspectivas desde la cultura, el género y la comunicación* (pp. 269-281). Lima, Peru: Minga Perú.
- Elías, E. (2002, October). *Comunicar para icarar: El modelo Minga de comunicación para la salud desde la cultura*. Paper presented to the International Conference on Reproductive Health in the Amazonian Region, Iquitos, Peru.
- Elías, E. (2007). Intercultural Radio Educative Project of fight against violence and HIV/AIDS, in rural communities and schools in the Peruvian Amazonian Region. Report presented to UNIFEM.
- Elías, E. and Neira, E. (Eds.) (2004), *Salud reproductiva en la Amazonía: perspectivas desde la cultura, el género y la comunicación*. Lima, Peru: Minga Perú
- Farrington, A. (2003) 'Family matters' in the Amazon. *Ford Foundation Report*, 34 (4), 16-19.
- Singhal, A., & Rattine-Flaherty, E. (2006). Pencils and Photos as Tools of Communicative Research and Praxis: Analyzing Minga Peru's Quest for Social Justice in the Amazon. *International Communication Gazette*, 68 (4): 313-330.
- Singhal, A., & Rogers, E. M. (1999). *Entertainment-education: A communication strategy for social change*. Mahwah, NJ: Lawrence Erlbaum.
- Singhal, A., & Rogers, E. M. (2002). A theoretical agenda for entertainment-education. *Communication Theory*, 12 (2): 117-135.
- Sypher, B. D., McKinley, M., Ventsam, S., & Elías, E. (2002). Fostering reproductive health through entertainment-education in the Peruvian Amazon: The social construction of *Bienvenida Salud!* *Communication Theory*, 12 (2), 192-205.



## Endnotes

---

<sup>1</sup> We thank Eliana Elias, Eloy Neira, Aroma De la Cadena, Rafael Elias, Luis Gonzalez, Rosa Maria, Emira, Cesar, and Sandra of Minga Peru, and other friends, colleagues, and respondents who made this research possible in the . The present report, especially in its description of Minga Peru, draws upon Singhal and Rattine-Flaherty (2006).

<sup>2</sup> Minga Perú started its work in the Peruvian Amazon in collaboration with the Amazonian Peoples Resources Initiative (APRI) of the University of Kansas. Currently, Minga works independently of APRI. Minga's work is supported by the Ford Foundation, The American Jewish World Service, AVINA Foundation, Empower, Moriah Fund, and Match International.

<sup>3</sup> See Elías (2002).

<sup>4</sup> See Sypher, McKinley, Ventsam, and Elías (2002); Singhal and Rogers (1999; 2002).

<sup>5</sup> These numbers pertain to officially-recognized riverine communities. The actual number is higher.

<sup>6</sup> See Farrington (2003).

<sup>7</sup> See Elías (2002)

<sup>8</sup> See Elías and Neira (2004).

<sup>9</sup> See Bustamente (2004); Farrington (2003).

<sup>10</sup> See Singhal and Rogers (1999; 2002); Sypher et al. (2002)

<sup>11</sup> quoted in Farrington (2003, p. 2)

<sup>12</sup> See Farrington (2003)

<sup>13</sup> See Farrington (2003)

<sup>14</sup> See Farrington (2003).

<sup>15</sup> See Elias (2007).

<sup>16</sup> See Elias (2007).

<sup>17</sup> See Elias (2007).

---

<sup>18</sup> Of these 14 were primary school teachers and 156 were secondary teachers.

<sup>19</sup> These projects were then monitored by an expert in rural education belonging to the Minga Peru team and an expert from the Unit of Local Educative Management (UGEL).

<sup>20</sup> including 9 teachers who did not undergo Minga's training but who claimed to have incorporated the topics of HIV/AIDS and violence into their curriculum

<sup>21</sup> Elias (2007).