

July 23-26, 2024

Learning exchange among health rights activists from Guatemala and Chiapas, Mexico



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Exchange of experiences and learning among frontline health rights activists from Guatemala and Chiapas, Mexico
2024

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Monday, July 22:
Welcome to
in San Cristobal
de Las Casas

Getting to know each other at lunch...

and at the welcome dinner.
The dinner was attended by Traditional Birth Attendants spokeswomen and representatives of the Nich Ixim Movement and Defenders of the REDC-SALUD and members of the Center Center for the Study of Equity and Health System Governance.



Purpose:

The **purpose** of the meeting was to:

- Nurture trust, solidarity and relationships between health rights advocates, midwives and academic-activists.
- Exchange knowledge and experiences, learn from each other and collectively reflect on challenges, opportunities and possibly new ways of thinking and acting in a safe, welcoming and inclusive space.
- Having the opportunity for different individuals and organizations to reflect with each other on their own work with new knowledge and dialogue with each other.
- Seek collective strength in the diversity and similarity of experiences and capabilities.

The specific objectives were the following:

- For the organizations of the Chiapas Committee and midwives to learn first-hand about the experience of registering extemporaneous births carried out by indigenous midwives in rural areas of Guatemala.
- That midwives from REDC-SALUD in Guatemala learn about the work and experience of the midwives' network in Chiapas.
- Develop a plan of action to continue the exchange, including a visit to Guatemala by the Chiapas organizations, regarding different topics of interest that arose during the first exchange.

Methodology

A participatory agenda and priorities were established, in which participants expressed their preferences and expectations, and facilitation was shared as much as possible with those who were naturally inclined or more knowledgeable about a particular topic. Flexibility, respect for a participatory process and co-construction of objectives and outcomes were essential.

Since there was a somewhat different group of participants each day, there were different objectives and processes involved every day. The overall culture and purpose of the meeting remained the same, but the process for deciding on next steps was different.



Tuesday, July 23:
**Meeting with
midwives**

Beginning of collaborative activities

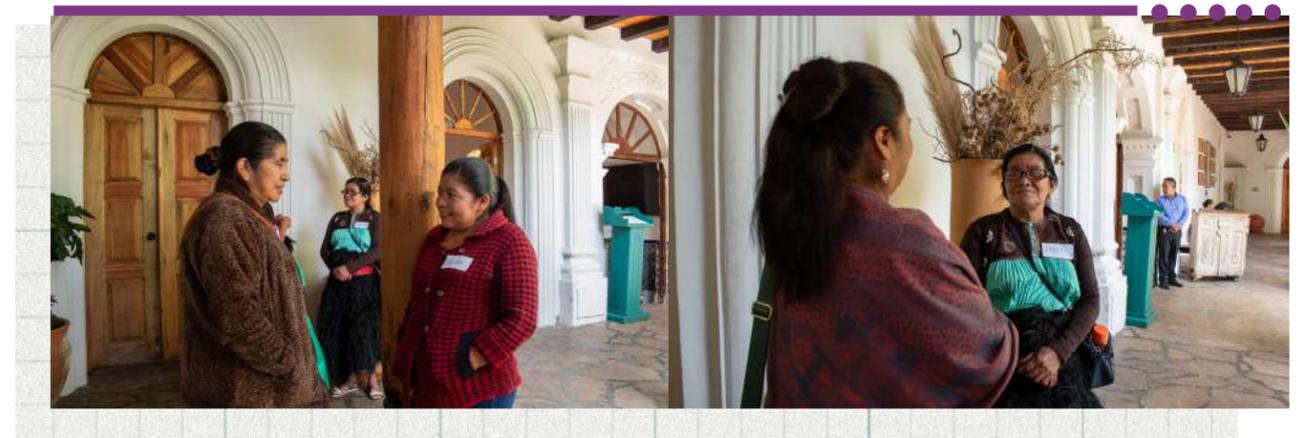
The day began with an opening ritual in charge of Don Crisanto, health advocate and traditional birth attendant from Guatemala, who performed ritual prayers in Mayan. This symbolic act was intended to generate a propitious environment full of positive energy for the meeting and the activities of the week. Then we had a special intervention by our colleague Miguel Angel, an outstanding puppeteer artist, who enlivened the beginning of the meeting with a dynamic puppet show.

After the ritual, Rosaura and Evaristo from the Guatemalan organization Centro de Estudios para la Equidad y Gobernanza de los Sistemas de Salud (CEGSS) led the meeting and began with an activity called "The Interview". In this activity, pairs were formed by a member of the Committee for a Safe Motherhood and a member of CEGSS. Each pair was given four guiding questions:

- What is your name?
- Where do you come from?
- What do you do?
- How many years of experience do you have in your work?

The main objective of this dynamic was to bring the participants together, allowing them to get to know each other better and introduce their partner to the whole group.

With this initial interaction, an atmosphere of closeness and trust was achieved, laying the groundwork for a fruitful exchange of knowledge and experiences between the midwives from Guatemala and Chiapas.



On the first day of work, the activities of the Nich Ixim Movement were presented by two of its spokeswomen:



Evolution of the workshop: exchange of experiences and reflections on the role of traditional midwifery

The following session began around 10:39 a.m. and was led by the CEGSS organization. As a gesture of welcome and appreciation, a gift was given to each participant: a notebook decorated with Guatemalan embroidery, a symbol of the art and culture of the region.

Afterwards, an exercise focused on the theme “Comadronas y Parteras” was introduced. During this activity, participants stood up to share their accumulated experiences over the years, reflecting on how they have faced changes in the social context and how these have impacted their work.

They highlighted the similarities between the realities of Mexico and Guatemala, emerging common concerns among the traditional midwives. Many expressed their fear of the possibility of the disappearance of this ancestral practice, emphasizing the urgency of

creating channels of communication and solid links to guarantee the continuity and recognition of their labor.

During the session, doctors Marcos Arana from CCESC and Gabriel García from GPA, and midwife Rosi from the Nich Ixim Movement, shared their personal experiences and the challenges they have faced both in the practice of their profession and in research in the field. These stories enriched the discussion and allowed the participants to identify common ground and strategies to overcome current challenges.

This session generated an atmosphere of reflection and commitment, consolidating the importance of working collaboratively to preserve and strengthen the practice of traditional midwifery as a fundamental aspect of community health and ancestral culture.



CEGSS Presentation: Experiences and Challenges in the Health Network



CEGSS began their presentation by sharing information about how they work with the defenders in the REDC-Salud network and how they have accumulated experience working on the recognition and defense of legal rights. Their focus is on identifying rights that can support traditional midwives, especially in cases related to the registration of children, not only newborns, but also those who, due to various circumstances, have not been registered in a timely manner.

In this context, don Crisanto shared a personal experience that illustrated the positive impact of the work of CEGSS and the Health Network. He related how, thanks to the support of these entities, he achieved the extemporaneous registration of an orphaned child, a process that seemed impossible without proper guidance and resources. This testimony highlighted the importance of having legal tools and community support in complex situations.

One of the central issues addressed was the discrimination faced by traditional midwives from some sectors of the health system, as well as the devaluation of their ancestral work. The participants pointed out how these attitudes not only affect their daily work, but also threaten the continuity of this millenary profession, which is fundamental for many communities.

The CEGSS presentation generated a space for reflection on the importance of strengthening support networks, promoting respect towards traditional midwives and guaranteeing access to legal tools that protect their rights and their invaluable contribution to society.



Participation of traditional midwives in Chiapas: an inclusive and committed movement

The traditional midwifery movement in Chiapas is an open and inclusive space that brings together traditional midwives with decades of experience, such as Carlota and Virginia, as well as men who also perform this work, such as don Arturo. Currently, the movement has over 650 traditional midwives and apprentices, in addition to 56 representatives who actively work to strengthen their practice and guarantee the rights of women and newborns.

A prominent feature of the movement is the existence of spokeswomen and a spokeswoman's committee, which emerged in response to the need for representation and leadership on key midwifery issues. This model also seeks to respond to urgent situations, such as the absence of midwife Rosalinda, affected by the critical situation of violence in Frontera Comalapa.

Among the movement's main claims are the full recognition of traditional midwifery as an essential practice and respect for the right of midwives to attend to women, ensuring that women can freely decide where they wish to give birth. In addition, it emphasizes the need to establish clear and functional routes that guarantee the right to identity of newborns, especially in communities with limited access to vital registration services.

The movement is building a support network that not only preserves ancestral knowledge, but also seeks to adapt to contemporary challenges, ensuring respect and dignity for those who carry out this fundamental work.



Wednesday July 24:

Meeting with member

organizations of the Comité

Promotor por una Maternidad

Segura y Voluntaria en Chiapas

(Committee for the Promotion

of Safe and Voluntary

Motherhood in Chiapas)

On July 24, the meeting was led by the team from the Maternal Mortality Observatory (OMM). The day began with the intervention of our colleague Miguel Angel. Miguel led activities that stimulated our motor skills, allowing participants to reflect on their different ways of reacting to challenges. This initial activity provided us with a valuable example of how, despite our differences, it is possible to work as a team and achieve common goals.

This second day was attended by the organizations that make up the CPMSV-Chiapas network, CCEGS, Defenders of the REDC-Salud and the young promoters of the OMM.

Following the introduction, the attendees took their seats to begin the participation of various invited organizations, whose main objective was to form a roundtable discussion. This space facilitated the exchange of experiences in traditional midwifery, addressing the current challenges faced by communities and traditional midwives in their daily work.



Sharing experiences



Movement of Traditional Midwives of Chiapas Nich Ixim

15 highlights of their presentation:

- 1 Main objective:** Defend traditional midwifery as a human, cultural and health right for indigenous, rural and urban women, promoting their practice and rights.
- 2 Advocacy:** Including the rights of women to decide where, how and with whom to give birth, and the recognition of midwives' knowledge.
- 3 Beginning and growth:** They began in 2014 as an organized group and formalized the movement in 2017. They currently have more than 650 members from 34 municipalities in Chiapas.
- 4 Cultural diversity:** Many traditional midwives come from Mayan villages and speak languages such as Tsotsil, Tseltal, Chol and Tojolabal, preserving ancestral traditions.

- 5 Organizational structure:** The movement has a general assembly, 56 municipal representatives, and 9 spokeswomen in charge of their representation.
- 6 Major demands:** Recognition of traditional midwifery as part of traditional medical systems, respect for women's decisions, and adequate equipment for midwives.
- 7 Milestones:** Roundtables with institutions, greater visibility in the media, distribution of care kits, participation in legal reforms, and creation of international alliances.
- 8 Contribution during the pandemic:** Traditional midwives were essential in their communities during the collapse and distrust of health services, attending safe deliveries under adverse conditions.
- 9 Care statistics:** Between 2020 and 2023 they attended thousands of births, with notable participation in rural and indigenous areas.
- 10 Obstacles faced:** Include lack of institutional recognition, rejection in some hospitals and internal communication problems due to the pandemic and distances.
- 11 Legal recognition:** The practice of traditional midwifery is protected by national and international laws, such as the Mexican Constitution and ILO Convention 169, although its effective implementation is lacking.
- 12 Strategic allies:** They collaborate with local, national and international organizations, such as UNFPA and the Maternal Mortality Observatory.
- 13 Political advocacy:** They participated in the reform of the General Health Law and in spaces such as the National Political Assembly of Indigenous Women.
- 14 Social recognition:** During the pandemic, their work was recognized for the importance of their knowledge in maternal and neonatal health.
- 15 Role in cultural preservation:** Traditional midwifery is understood as a key element of indigenous cultural identity, which strengthens collective rights and community autonomy.

This Movement embodies a collective effort to dignify the practice of traditional midwifery and guarantee the fundamental rights of women and communities in Chiapas.



CAMATI “Women from the bottom up”

Here are 15 highlights from their presentation:

- 1 Organization Identity:** CAMATI is an organization of traditional midwives in Chiapas, focused on the sexual and reproductive health of young women.
- 2 Mission:** To promote traditional midwifery and traditional medicine, ensuring the right of women to decide about their health care.
- 3 Visibilization:** Seek recognition of the traditional midwives’ work and traditional medicine in the communities.
- 4 Institutional Advocacy:** Lobbying with the health sector to improve care and recognition of traditional midwifery.
- 5 Reduction in Mortality and Morbidity:** Contribute to the reduction of maternal and neonatal morbimortality through quality care.
- 6 Strategic Alliances:** Collaboration with various national and international organizations to defend midwifery and women’s health rights.

- 7 Comprehensive Care:** Provision of comprehensive care to displaced women, migrants and women in situations of violence, free of charge.
- 8 Local Recognition:** Accomplishments in the recognition of the work of traditional midwives by the authorities in the communities.
- 9 Defense of Ancestral Knowledge:** Promotion and defense of traditional medicine and ancestral knowledge in the communities.
- 10 Training of Apprentices:** Promotion of the formation of new traditional midwives through training programs.
- 11 Political Advocacy:** Active participation in the National Agenda for the defense of traditional midwifery.
- 12 Lobbying at Different Levels:** Work with local, state and national authorities to position traditional midwifery in public policies.
- 13 Strategic Axes:** Definition of three fundamental lines of work to guide the organization’s projects and actions.
- 14 Community Engagement:** Promoting the participation of communities in the defense of their health and culture.
- 15 Social Impact:** Contribution to the social and cultural well-being of the communities through health care and promotion.

These highlights reflect CAMATI’s mission, vision and strategic actions for the health and empowerment of women in Chiapas.



**Formación y
Capacitación A.C.
(FOCA)**

The following are the 15 key points of his presentation:

- 1 Empowerment of Women:** Accompanying women in their empowerment and defense of their rights, especially in sexual and reproductive health.
- 2 Indigenous Peoples' Rights:** Focusing efforts on the rights of women of indigenous peoples and in situations of migration.
- 3 Strategic Alliances:** Promote alliances between networks, organizations and institutional advocacy to strengthen maternal health.
- 4 A State Platform:** Create a statewide platform that includes traditional midwives and organizations advocating for maternal health rights.
- 5 Spaces for Young People:** Generate spaces where young people may strengthen the work of traditional midwifery and associated rights.
- 6 Multiplier Effect:** Achieve a multiplier effect that encourages more women to participate in traditional midwifery as a human right.

- 7 Advocacy:** Facilitate tools for women to advocate for their rights in maternal and sexual health.
- 8 Institutional Advocacy:** Work with local, state, national and international institutions to defend traditional midwifery.
- 9 Rights Recognition:** Strengthen the recognition of the rights of traditional midwives in five specific municipalities.
- 10 Community Dialogue:** Promote spaces for dialogue with community leaders on sexual and reproductive health.
- 11 Women's Leadership:** Promote women's leadership in the defense of their rights.
- 12 Midwives Movement Nich Ixim:** Support and strengthen the Midwives Movement Nich Ixim.
- 13 Culture and Rights:** Integrate traditional midwifery as a cultural, gender and health right.
- 14 Continuing Education:** Provide continuing education for traditional midwives to improve their skills and knowledge.
- 15 Midwifery Visibility:** Increase the visibility and recognition of traditional midwifery as an essential practice in community health.

These points reflect the key objectives and strategies presented by the organization.



**Alianza Pediátrica
Global (Global
Pediatric Alliance,
GPA)**

15 main points of his presentation:

- 1 Decolonizing Approach:** Promotes a decolonizing and depatriarchal approach to education and community health.
- 2 Rights Perspective:** It is based on a rights perspective, emphasizing the importance of health as a human right.
- 3 Exchange among Traditional Midwives:** Promotes the creation of spaces for exchange and enrichment among traditional midwives.
- 4 Community Awareness Raising:** Works to raise awareness among women and men about the care of life and the promotion of a life free of violence.
- 5 Strengthening of Leadership:** Seeks to strengthen local leadership to improve community health.

- 6 Community Organization:** Promotes community organization for the defense of health-related rights.
- 7 Support to Local Groups:** Offers support to communities and local groups organized around health.
- 8 Advocacy:** Establishes alliances for advocacy to promote the rights of traditional midwives and sexual and reproductive rights.
- 9 Awareness Workshops:** Implements awareness workshops with a curriculum that covers topics such as violence prevention and women's rights.
- 10 Group Accompaniment:** Provides accompaniment to groups that carry out actions for health care in their communities.
- 11 Deconstruction of Masculinities:** Conducts workshops with men to deconstruct violent masculinities.
- 12 Health Programs:** Develops programs such as "Women and Men caring for life" and "Respectful Maternal Care".
- 13 Traditional Midwives Movement:** Supports the Chiapas Traditional Midwives Movement Nich Ixim.
- 14 Project Funds:** Provides small funds for community health projects.
- 15 Expected Results:** Seeks men and women sensitized and active in health care, promoting conditions for the prevention of violence and dignified lives.

The above points summarize the key strategies and objectives of the document, reflecting its commitment to the health and well-being of communities.



Compañeros en Salud (CES or Partners in Health)

The 15 highlights of CES:

- 1 Maternity Home (Casa materna):** It is an environment designed for care centered on women's needs, operated by CES in coordination with the Ministry of Health (SS).
- 2 Leadership and Autonomy:** The Casa Materna promotes leadership and autonomy of nurse-midwives and midwives in public spaces.
- 3 PIH Approach:** Partners In Health is dedicated to improving the health of poor and marginalized people in 10 countries.
- 4 Quality of Life:** We seek to improve the quality of life of families by facilitating access to quality and dignified health care.
- 5 Social Determinants:** Social determinants of health that affect the well-being of communities are considered.

- 6 Direct Health Care:** CES offers direct care in a variety of areas, including mental health and community involvement.
- 7 Personnel Training:** 51 interns have been trained in the social service program in the area of health.
- 8 Model of Care:** A model of care is implemented that includes private rooms and a home-like environment.
- 9 Individualized Childbirth Plan:** A childbirth plan adapted to the needs of each woman is offered.
- 10 Preparation Sessions:** Birth preparation sessions are conducted.
- 11 Allopathic and Herbal Medicine:** Allopathic and herbal medicine approaches are combined in the care.
- 12 Collaboration with Traditional Midwives:** We work collaboratively with midwives in the community.
- 13 Monitoring System:** An automated electronic monitoring system is used to track clinical indicators.
- 14 Satisfaction Evaluation:** Women have rated their experience at the maternity homes with an average of 9.1 on a scale of 0 to 10.
- 15 Care in 2023:** In 2023, 486 women received care at the maternity homes.



Centro de Investigaciones en Salud de Comitán A. C. (CISC)

The 15 most important aspects of their presentation:

- 1 Experience:** Dedicated to creating knowledge on health, gender and society, with more than 30 years of experience in the Meseta Comiteca Tojolabal Region in Chiapas and other states in Mexico.
- 2 Key Programs:** The organization implements programs in maternal health, sexual and reproductive rights, prevention of gender violence, and prevention of HIV/AIDS and STIs.
- 3 Focus on Midwifery:** Supports the teaching and practice of midwifery, focusing on a model that protects women's rights and health.
- 4 Interculturality:** Promotes intercultural dialogues as an integral part of its approach to midwifery care.
- 5 Strategic Alliances:** It has achieved multiple public policy outcomes through collaborations with private, public and academic partners.

- 6 Midwifery Curriculum:** Collaborates with the United Nations Population Fund (UNFPA) to develop a basic curriculum structure for midwifery education.
- 7 Research and Systematization:** Focuses on research and systematization of actions in health, gender and society.
- 8 Health Awareness:** Conducts awareness campaigns on health and prevention, using various means of communication.
- 9 Multilingual Approach:** Communication campaigns are conducted in Spanish and indigenous languages such as Tsotsil, Tzeltal and Tojolabal.
- 10 Women's Rights:** It is part of the State Council of the Gender Alert, promoting the right to a voluntary and safe abortion in Chiapas.
- 11 Sex Education:** Works to sensitize adults on communication with adolescents regarding sexuality and rights.
- 12 Crowdfunding Campaigns:** Implements crowdfunding campaigns to support its initiatives.
- 13 Crowdfunding Campaigns:** Implement crowdfunding campaigns to support your initiatives.
- 14 Information Dissemination:** Uses social networks and the media to guide citizens on health issues.
- 15 Collective Impact:** Focuses on systematizing and publicizing the impact of its actions both individually and collectively.
- 16 Leader in the Field:** It aspires to be a reference organization at the local, state, national and international levels in the development of projects related to health, gender and society.

These aspects reflect the organization's commitment to improving the health and rights of the communities in which it works.



**Sakil Nichim
Antsetik A. C.
(Mujeres de las
Flores Blancas)**

The 15 main points of Sakil's presentation:

- 1 Foundation Association:** The association was established in 2007 in the Altos de Chiapas Region of Mexico.
- 2 Composition:** The association is primarily made up of indigenous women.
- 3 Main Objective:** It was born out of the need to support women and traditional midwives in the region.
- 4 Promoted Rights:** It focuses on sexual and reproductive rights, as well as maternal and neonatal health.
- 5 Vision:** It works to ensure that indigenous women and youth have access to spaces for social participation and improve their quality of life.
- 6 Mission:** It seeks the recognition, respect, and active exercise of the rights of indigenous women and youth.
- 7 Core Values:** It is based on respect, responsibility, loyalty, and solidarity.
- 8 Strategic Areas:** Includes training and social participation, promotion of rights, awareness-raising, and networking.

- 9 Approaches:** It uses human rights, intercultural, and gender perspective approaches.
- 10 Social Impact:** It aims to transform the collective mindset regarding gender-based violence among the population and public servants.
- 11 Recognition of Rights:** Sakil promotes the recognition of indigenous women and youth as rights holders.
- 12 Empowerment:** It encourages the empowerment of women and youth in their communities.
- 13 Active Participation:** Sakil fosters the active participation of women in decision-making processes.
- 14 Awareness-Raising:** They carry out awareness-raising activities to change attitudes and behaviors in the community.
- 15 Institutional Strengthening:** They work on strengthening institutional capacities to achieve its goals.

These points summarize the mission, vision, objectives, and approaches of the association, as well as its impact on the community.



CEGSS The 15 main points about the work of the Center and the Defenders of the REDC-SALUD:

- 1 History and Mission:** The Civil Association has over 16 years of work focused on equitable access to health services and human rights for indigenous and marginalized populations.
- 2 Lines of Action:** It focuses on participatory action research, legal empowerment, citizen monitoring, capacity building for community organizations, and strategic advocacy in public policies.
- 3 Areas of Work:** The focus areas of CEGSS and REDC-Salud include training, reporting and support, citizen monitoring, strengthening of REDC-Salud, alliances, advocacy, and participatory action research.
- 4 Participatory Action Research:** Studies are conducted on the effects of climate change in rural communities, lung and nutritional health, co-creation of public policies, and mental health in indigenous communities.
- 5 Findings on Health Policies:** Issues of opacity in public health policies have been identified, highlighting the need for communities to participate in monitoring authorities.

- 6 Community Leadership:** It emphasizes that community leaders are the ones who best understand health issues and can propose appropriate solutions.
- 7 Community Defenders Program:** This program began almost a decade ago with 20 Defenders and has grown to over 100 in 31 municipalities across 5 departments.
- 8 Participation in Conferences:** REDC-Salud and CEGSS participate in international conferences and virtual events to present their work.
- 9 Academic Publications:** Scientific publications are generated to document the work carried out by REDC-Salud and CEGSS.
- 10 Strategic Alliances:** Strategic alliances are sought to drive the processes of CEGSS and REDC-Salud.
- 11 Citizen Monitoring:** Citizen monitoring is promoted as a fundamental pillar for monitoring health policies.
- 12 Strengthening Networks:** Work is done to strengthen REDC-Salud to improve collaboration and impact in communities.
- 13 Advocacy in Public Policies:** Efforts are made to influence public policies to make them more inclusive and responsive to community needs.
- 14 Capacity Building:** It focuses on capacity building for grassroots community organizations, empowering communities to take an active role in health.
- 15 Impact of Climate Change:** Research is conducted on how climate change affects health in various communities, which is crucial for the formulation of appropriate policies.

These points summarize the main activities, objectives, and achievements of the Civil Association and its work in the field of health and human rights.



JOY JOY The 15 main points of the presentation:

- 1 Meaning of “Joy Joy”:** In Tsotsil, it means “circle.” In Tzeltal, it means “companion.” In English, it evokes “joy.”
- 2 Origins of the Project:** Founded in 2018 in San Cristóbal de Las Casas, Chiapas, by Jesús and Miriam.
- 3 Main Motivation:** Reduce the barriers to accessing antiretroviral treatment in vulnerable populations.
- 4 Most Affected Groups:** Children and adolescents who face discrimination, orphanhood, poverty, illiteracy, and malnutrition.
- 5 Central Issue:** Difficulties in ensuring access to antiretroviral treatment for children and adolescents.
- 6 Key Objective:** Promote the human development and comprehensive capacities of children, adolescents, and pregnant women living with HIV.
- 7 Project Approach:** Ensure equitable access to health services and promote a dignified life.

- 8 Organization’s Vision:** Transform situations of vulnerability into opportunities through a holistic and self-management approach.
- 9 Populations Served:** Children, adolescents, and pregnant women in marginalized situations.
- 10 Vulnerability Factors Addressed:** Social lag, illiteracy, language barriers, malnutrition, orphanhood, structural marginalization, and HIV.
- 11 Impacts Achieved:** Promotion of knowledge and full exercise of rights, health improvement, and effective prevention.
- 12 Accompaniment Model:** Based on social cohesion, human rights, and comprehensive care.
- 13 Project Coverage:** Prevention workshops, informational booths, and screening tests.
- 14 Multidisciplinary Team:** Includes specialists in international relations, pedagogy, medicine, global health, and HIV.
- 15 Mission:** Create an equitable society where vulnerable people can claim their human rights.



Asesoría, Capacitación y Asistencia en Salud A. C. (ACASAC)

The 15 main points of the work carried out by the organization Asesoría:

- 1 Origin and Mission:** ACASAC is a non-profit organization founded in 1995 to improve health and quality of life based on principles of human rights, gender equity, and interculturality.
- 2 Main Objectives:** Promote women's citizenship, defend sexual and reproductive rights, ensure safe and voluntary motherhood, and influence public policies.
- 3 Training and Capacity Building:** Focused on developing youth leadership, promoting the use of technologies, and fostering community participation.
- 4 Promotion and Awareness:** Raises awareness about sexual and reproductive rights and disseminates information in indigenous municipalities such as Aldama, Chenalhó, Tenejapa, and San Juan Cancuc.
- 5 Monitoring and Evaluation:** Evaluates the impact of projects in communities to ensure their effectiveness.
- 6 Advocacy and Networking:** Promotes alliances with community groups, organizations, and institutional actors to strengthen capacities.

- 7 Culture of Transparency:** Encourages accountability and combats corruption.
- 8 Intervention in Indigenous Municipalities:** Carries out projects with the support of the W.K. Kellogg Foundation, focusing on youth community leadership.
- 9 Comprehensive Approach:** Combines human rights, interculturality, and gender for community development and solving social problems.
- 10 Training in High Schools:** Trains educational staff to promote sexual and reproductive rights among adolescents and youth.
- 11 Community Diagnosis:** Conducted studies on perceptions of sexual rights among youth and indigenous communities in Chiapas.
- 12 Educational Survey:** In partnership with the Colegio de Bachilleres de Chiapas, surveyed over 10,000 students to design educational strategies.
- 13 Intercultural Forums:** Organized meetings with 231 indigenous adolescents from five ethnic groups in Chiapas, fostering cultural dialogue on sexual rights.
- 14 Inclusive Public Agenda:** Created an agenda to strengthen the sexual and reproductive rights of indigenous youth, promoting inclusive policies.
- 15 Social Impact:** Combines education, leadership, research, and youth participation to promote rights and equity in marginalized communities in Chiapas.



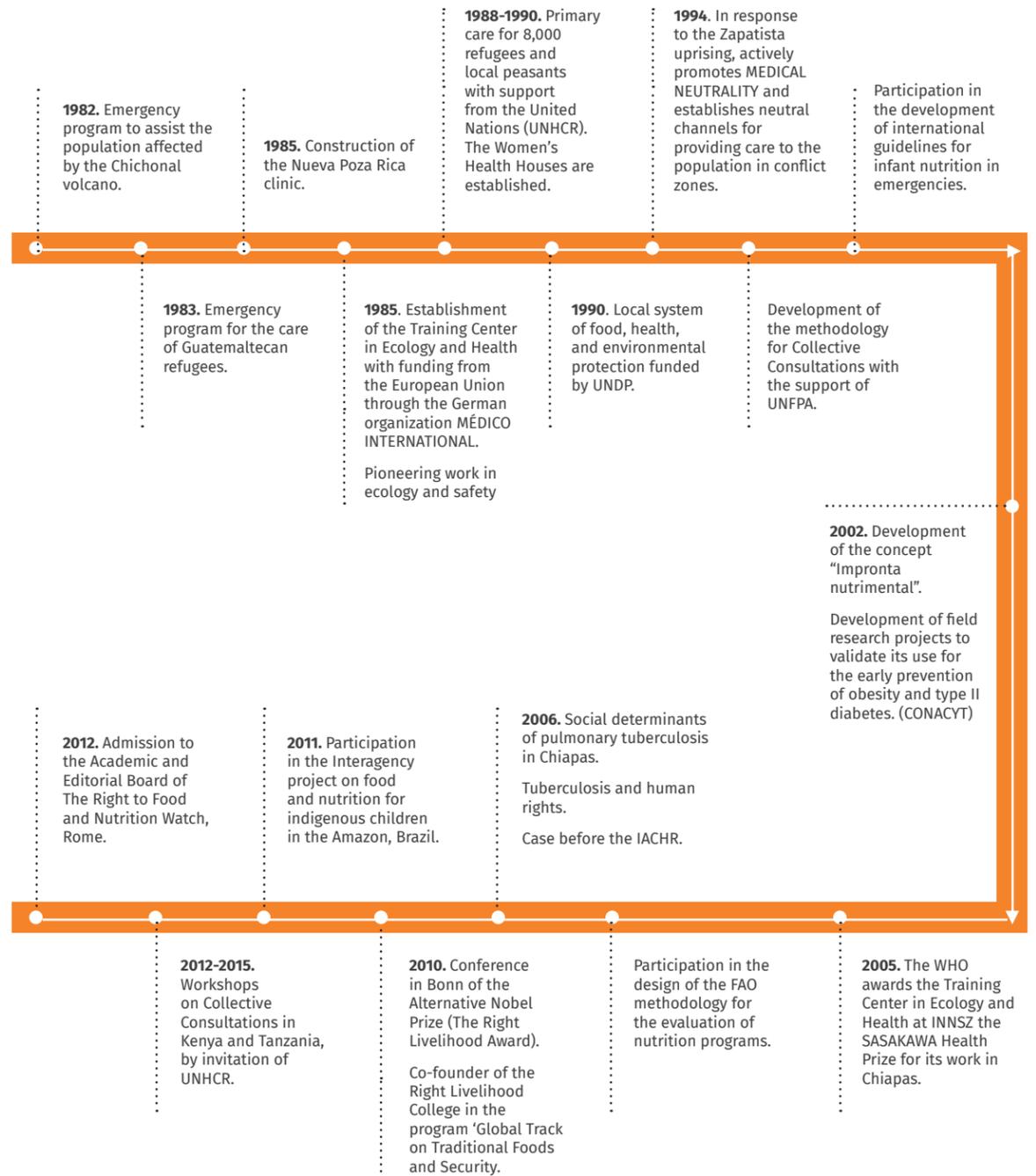
Centro de Capacitación en Ecología y Salud para Campesinos (CCESC) / Instituto Nacional de Ciencias Médicas y Nutrición Salvador Zubirán (INCMNSZ)

Since 1982, their work has been crucial in assisting those affected by the eruption of the Chichonal volcano, an event that devastated entire communities. One of their main areas of focus is nutrition, with a particular emphasis on ensuring food security from the earliest stages of life.

Later, in 1985, they strengthened their commitment by establishing a clinic in Poza Rica, Chiapas, designed to serve Guatemalan refugees, who faced serious medical and social needs. This effort was complemented by the creation of health houses and a community center specialized in caring for children with disabilities, further reinforcing their mission to serve the most vulnerable populations.

Thanks to these actions, they have built a comprehensive support network that not only responds to immediate emergencies but also works on the sustainable development of affected communities, promoting access to basic services and fostering an environment of well-being.

Cronology of Centro de Capacitación en Ecología y Salud para Campesinos (CCESC)





Médicos del mundo Suiza (MDMS)

The 15 Main Points about the work of MDMS:

- 1 Program Focus:** Reduce gender-based violence (GBV) and promote sexual and reproductive health (SRH) in school, family, and community settings in Chiapas.
- 2 Care for GBV Victims:** Coordination to improve the quality of medical and psychosocial care for victims.
- 3 Prevention of Obstetric Violence:** Training for dignified and gender-sensitive treatment in health institutions.
- 4 Sexual Education and Prevention:** Training in schools and educational communities on violence prevention, human rights, and sexual education.
- 5 Workshops on Non-Violent Masculinities:** Promotion of non-violent and equitable attitudes through workshops aimed at students, teachers, and families.
- 6 Development of School Guidelines:** Creation of procedures and guidelines to address school violence with a gender perspective.

- 7 Community Reflection Spaces:** Implementation of activities in neighborhoods and communities to foster a culture of non-violence.
- 8 Psychosocial Support:** Support for groups affected by traumatic events in the communities.
- 9 CAVIF Pilot Model:** Creation of a model for centers assisting GBV victims, with the goal of replicating it in other states as public policy.
- 10 Educational Proposal for UNACH:** Inclusion of training on dignified treatment and a gender perspective in health programs at the Autonomous University of Chiapas.
- 11 Strategic Alliances:** Collaboration with hospitals, midwives, and community actors to strengthen SRH care and prevent obstetric violence.
- 12 International Recognition:** The United Nations highlighted the program's methodology on masculinities as a best practice.
- 13 Large-scale Training:** Over 2,500 people (students, parents, teachers, and health personnel) have been trained between 2023 and 2024.
- 14 Practical Tools:** Systematization of methodologies and creation of a toolbox for working on non-violent masculinities.
- 15 Sustainable Impact:** The program is established as a comprehensive strategy to promote gender equality and eliminate violence in educational, community, and health settings.



Observatorio de Mortalidad Materna en México (OMM)

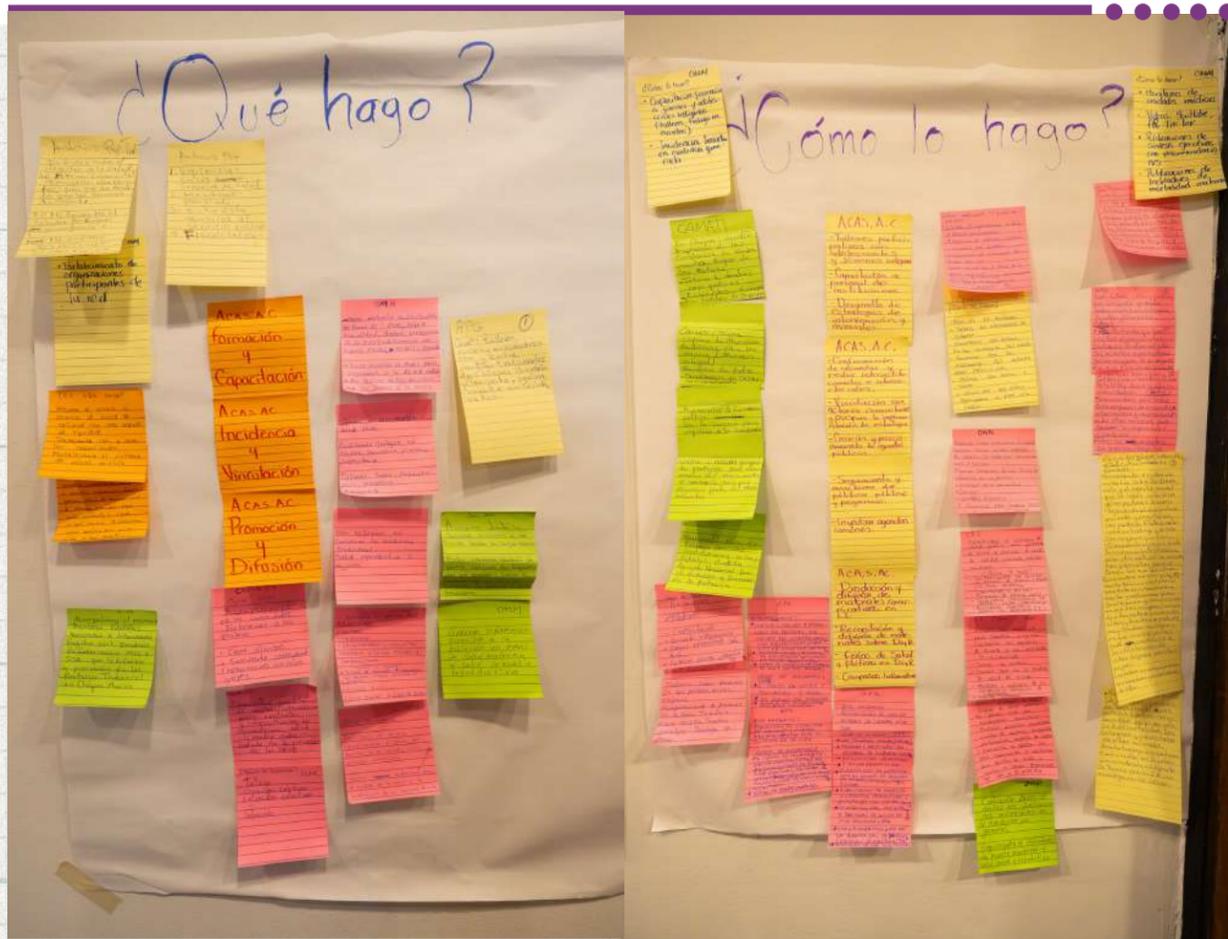
The 15 Main Aspects of their Presentation:

- 1 Objective of the Observatory:** Promote transparency and accountability in maternal mortality in Mexico.
- 2 Citizen Network:** A collaboration network is established among various institutions and organizations to address the issue of maternal mortality.
- 3 Methodologies:** Different methodologies for the collection and analysis of maternal mortality data are discussed.
- 4 Importance of Information:** The need for accurate and up-to-date information for decision-making is emphasized.
- 5 Interinstitutional Collaboration:** Participation of institutions such as CIESAS, INCM, UG, UAG, UASLP, UV, and FLACSO Mexico.
- 6 Challenges in Maternal Mortality:** Identify the main challenges the country faces regarding maternal mortality.
- 7 Prevention Strategies:** Propose strategies to prevent maternal mortality and improve women's healthcare.

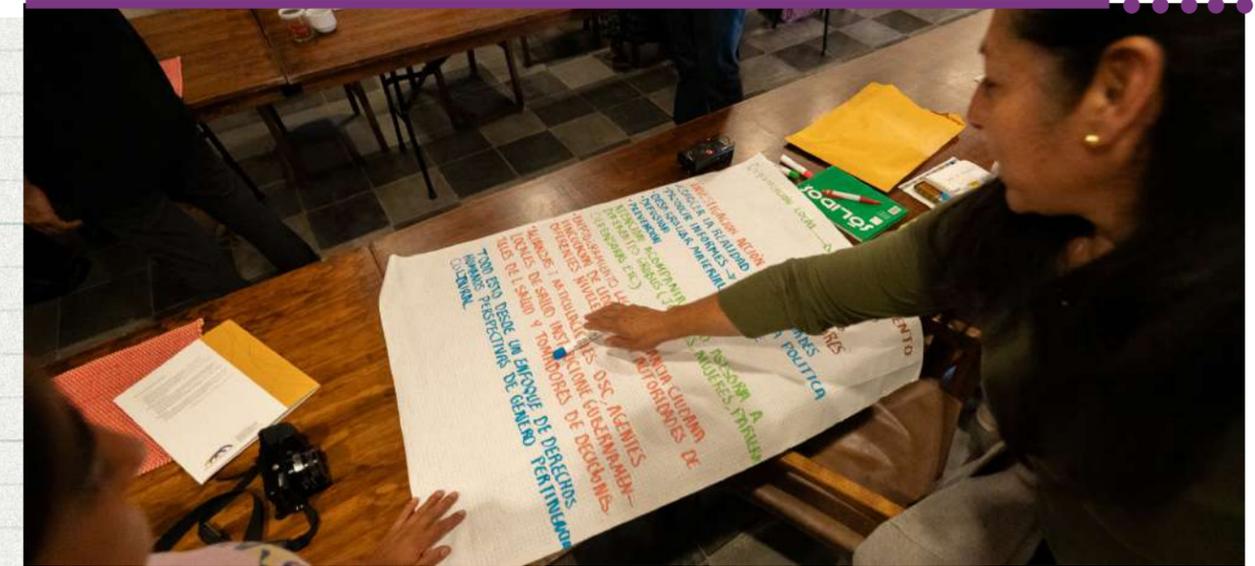
- 8 Training and Education:** The importance of training healthcare personnel on maternal mortality issues is highlighted.
- 9 Community Participation:** The involvement of the community in monitoring and improving maternal health is promoted.
- 10 Data Analysis:** The importance of data analysis to identify trends and areas for improvement is discussed.
- 11 Public Policies:** Advocacy for the implementation of evidence-based public policies to reduce maternal mortality.
- 12 International Experiences:** Experiences and lessons learned from other countries in reducing maternal mortality are shared.
- 13 Monitoring and Evaluation:** A monitoring and evaluation system is proposed to measure the impact of interventions.
- 14 Awareness:** The need to raise awareness among the population about the importance of maternal health is emphasized.
- 15 Long-Term Commitment:** A long-term commitment is established to continue working on improving maternal health in Mexico.

The second activity of the session involved forming teams by assigning numbers to each participant, thereby fostering diverse and dynamic integration. The main purpose of this activity was to showcase the work carried out by each of the participating organizations and how they address various issues in the regions where they operate.

The activity allowed the organizations to share their methods and strategies for working from different perspectives, recognizing that each one tackles specific topics related to health, such as HIV, midwifery, and other crucial areas. This exchange of experiences enriched the dialogue by demonstrating how it is possible to address challenges from complementary approaches.



The 13 invited organizations participated in this activity, which provided a valuable opportunity to learn from their practices, identify common ground, and explore possibilities for collaboration to more effectively address the needs of the communities they serve.



The following activity aimed to have the previously formed teams create brief reviews through a brainstorming session. These ideas were creatively captured on flip charts and sticky notes, which facilitated the organization and visualization of the concepts.

Each team explained how they carried out their work and detail the specific activities they conducted within their respective organizations. This activity encouraged group reflection, knowledge sharing, and the presentation of diverse approaches, strengthening mutual understanding among the participants.



The dialogue also explored how contemporary challenges have driven new forms of interaction and collaboration among organizations. These reflections highlighted the importance of building strong alliances and fostering joint efforts to preserve and strengthen traditional midwifery as an essential practice in community health.

Outcomes of the teams' collaborative work on their strategies for health work with an emphasis on maternal, sexual, and reproductive health

Below is a summary of what the teams wrote and presented as their final reflections:

Shared Reflections

Team 1

- Research, analysis, monitoring, dissemination, training.
- Advocacy for public policies.
- Training, workshops, courses.
- Intercultural dissemination in indigenous languages, exchange and coordination of roundtables, organization, advocacy, monitoring and diagnosis, support and care.
- Participatory workshops with youth and adolescents.
- Training for institutional staff.
- Formation of alliances and inter-institutional networks, collaboration with community agents, exclusive women's care spaces, childbirth care.

Team 2

- Strengthening, training, leadership development, stakeholder mapping.
- Action-research: understanding community realities, producing reports, creating political advocacy, developing dissemination materials.
- Prevention, care, support, and counseling for different groups (youth, women, midwives, and advocates).
- Alliances, coordination, local health agents, governmental health institutions, and decision-makers, legal empowerment, citizen oversight, linking leaders with authorities at different levels.

Shared Reflections

Team 3

- Training and capacity-building, strengthening participating organizations in the network.
- Advocacy and collaboration, promotion and dissemination.
- Interviews with public service users and oversight, improving access to quality health services with an equity agenda.
- Creating audiovisual materials, working in schools, working with and for communities, prevention, innovation, and support.

Team 4

- Collaboration, support.
- Training, translation.
- Strengthening, awareness-raising.
- Care for women.
- Advocacy, contributing to strengthening the exercise of SRHR (Sexual and Reproductive Health and Rights) and maternal health in the Highlands of Chiapas.
- Support for pregnant women, support for patients with kidney problems.
- Fieldwork.

Based on what was presented, six shared aspects can be identified, albeit with some differences in strategies but with the same objective.

Aspect	Team 1	Team 2	Team 3	Team 4
Training and Capacity Building	Workshops, courses, institutional training.	Strengthening leadership and training.	Training in schools and communities.	Training and awareness-raising.
Collaboration	Coordination with roundtables and community agents.	Collaboration with local agents and authorities.	Linking communities and services.	Collaboration with patients and authorities.
Advocacy	In public policies and diagnostics.	Political advocacy with mapping and oversight.	Improving access to equitable services.	Strengthening SRHR and maternal health.
Support	For youth, adolescents, and institutions.	For women, midwives, and legal advocates.	For communities and public service users.	For pregnant women and kidney patients.
Prevention	Health and adolescence topics.	Sexual and reproductive health, and legality	Innovation and audiovisuals for education.	Maternal and chronic health.
Dissemination	In indigenous languages and intercultural.	Reports and community campaigns.	Audiovisual and school materials.	Awareness-raising and translation.

Analysis of differences and similarities

Similarities

- 1 Training and Capacity Building:** All teams include activities related to the training and capacity building of different groups.
- 2 Collaboration and Coordination:** Collaboration with community agents, organizations, and institutions is a common activity.
- 3 Advocacy in Public or Institutional Policies:** The teams aim to generate changes in policies or institutions, particularly in health and rights issues.
- 4 Support and Care:** The focus is on supporting communities, vulnerable groups, and specific cases.
- 5 Prevention and Awareness-Raising:** There is an emphasis on preventing problems and raising awareness among the population about various health and rights issues.
- 6 Dissemination and Promotion:** Materials and campaigns are shared to create a greater impact in the communities.
- 7 Empowerment:** All teams seek to strengthen the capacities of target groups, whether through training, leadership, or legal empowerment.

Differences

1 Specific Approaches:

- a. Team 1:** Emphasizes intercultural dissemination, community diagnostics, participatory workshops, and work in indigenous languages.
- b. Team 2:** Highlights stakeholder mapping, citizen oversight, and legal empowerment.
- c. Team 3:** Prioritizes user interviews, oversight of public services, and production of audiovisual materials.
- d. Team 4:** Focuses on maternal health, care for patients with kidney problems, and translation.

2 Areas of Work:

- a. Teams 1 and 2:** Greater emphasis on research and diagnostics.
- b. Teams 3 and 4:** Practical work in schools, communities, and direct care.

3 Poblaciones objetivo:

- a. Teams 1 and 2:** Diverse groups (youth, women, community leaders, advocates, health agents).
- b. Team 4:** Specific focus on pregnant women and patients with chronic health conditions.

4 Methodologies:

- a. Team 1:** Participatory workshops and roundtable discussions.
- b. Team 2:** Report production and political advocacy.
- c. Team 3:** Innovation in tools such as audiovisual materials.
- d. Team 4:** Fieldwork with translation and awareness-raising.



Thursday July 25th:
Creation of audiovisual
materials aimed at the
indigenous populations
by the OMM and recap
of the meeting

Some organizations from the Committee were present, such as CAMATI, CISC, FOCA, as well as CEGSS, the Defenders of the REDC-SALUD, and the OMM.

On the final day of the exchange, during the first part of the workday, the OMM shared its experience in creating communication and educational materials on sexual and reproductive rights aimed at indigenous youth and adolescents in the region. The OMM's communication team discussed the lessons learned and challenges faced in developing these materials in indigenous languages, addressing topics such as changes during adolescence, sexual and reproductive rights, gender equity, sexually transmitted infections, contraceptive methods, and the right to access health services.



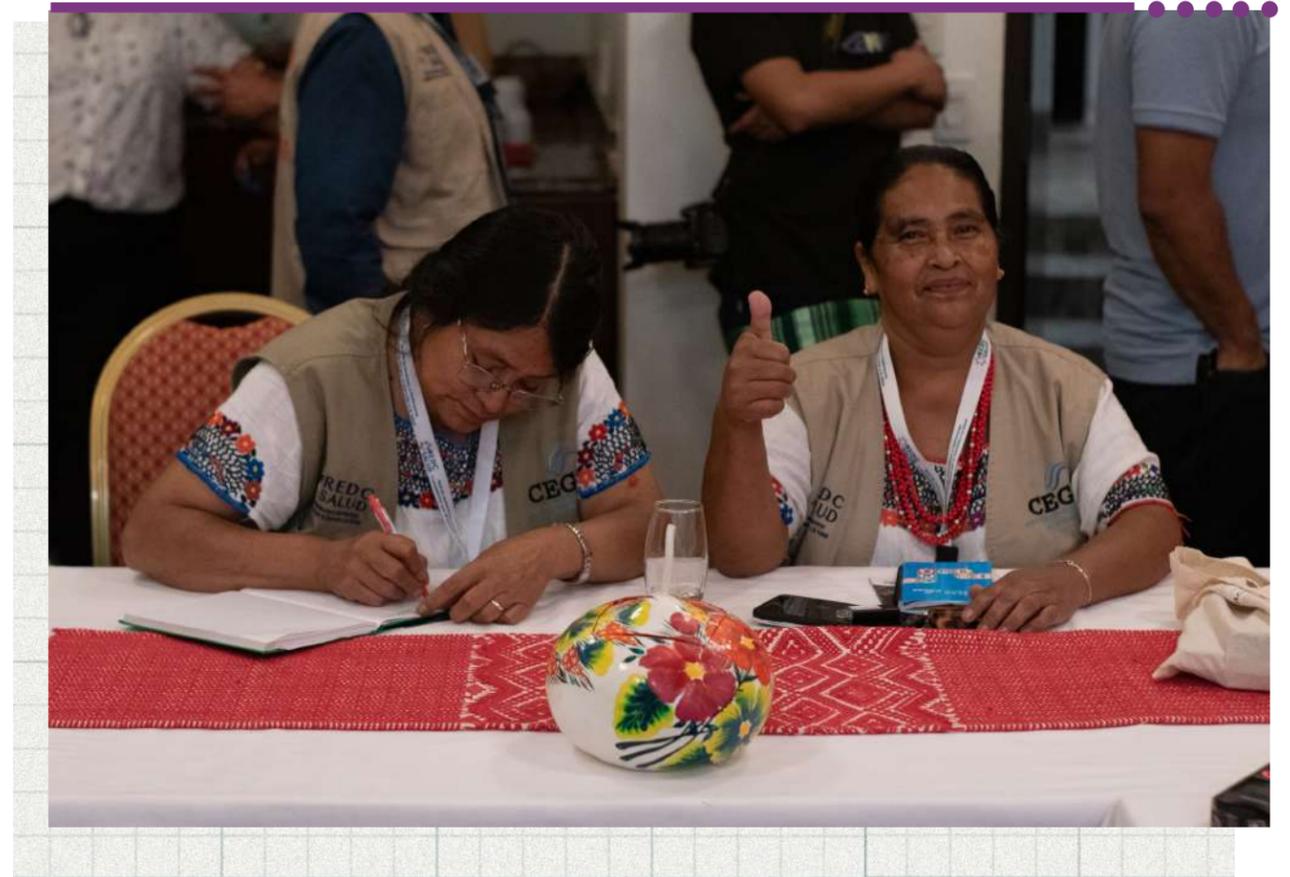


This allowed the young promoters to share their experiences as creators and cultural mediators of the information disseminated through the ongoing campaign *Sin Pena, Sin Miedo: Conozco y Cuido Mi Cuerpo* (Without Shame, Without Fear: I Know and Care for My Body).

As part of this activity, CEGSS advocates created videos in TikTok format, with the support of the OMM promoters during their development. They wrote their scripts and recorded themselves.



The second part of the agenda was dedicated to recapping the exchange, an activity led by the OMM and CEGSS. During this session, the OMM took notes on the main reflections shared by participants as they reviewed the activities carried out and the lessons learned.



**Support for Advocacy
(Technical Support),
Strengthening Citizen Advocacy**

- Strategies as advocates in response to rights violations: Documentation (forms).
- Exchange of skills in creating audiovisual content: Puppets, animations.
- Strategies and proposals for strengthening the movement of advocates and community advocacy.
- Within the framework of national assemblies, it is proposed that each municipality or department share their progress on advocacy and advocacy issues. During these meetings, activities for the following year will be planned, and concrete proposals will be presented. Additionally, a special invitation is extended to the spokeswomen of the movement to lead and strengthen these participatory spaces.

**Strengthening Youth Identity
and Participation**

- A key point is to promote the involvement of young people so they can support midwives in their work, thereby strengthening the cultural and generational identity of the movement. To facilitate this participation, strategies such as the following are proposed:
- Providing cell phone credits for sending information and maintaining fluid communication.
- Sharing strategies through audio messages and assigning individuals to assist those who cannot read or write.

**Reflections on Guatemala's
Public Policy Toward Midwives
Regarding Economic Incentives**

The one-time incentive of 3,000 quetzales established by public policy has had significant impacts. While it represents economic support, it has also led to the exclusion of some midwives, who are left out of the system and face restrictions in attending births. This has increased pressure and created risks of complications arise during deliveries. It is essential to reflect on the long-term effects of this public policy.

In this context, it is proposed that the Community Health Defenders Network (REDC) organize a virtual event to share testimonies about experiences in Guatemala. This space will be key to highlighting challenges and generating collective learning.

**Training and Integration
of Grandmother-Midwives**

- The importance of valuing the role of grandmother-midwives is emphasized. Recognizing their ancestral wisdom and incorporating them into training processes can counteract the trend of Westernized training promoted by the Ministry of Health, which sometimes disregards traditional worldviews and practices. Additionally, it is proposed to promote the legal empowerment of midwives through strategies such as:
- Creating legal codes and guides that identify problems and outline actions to take.
- Organizing short virtual or in-person workshops to guide them on steps to follow in case of rights violations.

**Dialogue Processes and
Interinstitutional Support**

It is essential to organize dialogue processes that include the participation of various agencies and organizations, ensuring that all interested parties can attend. The goal is to establish mutual support networks and leverage the similar contexts faced by organizations in Guatemala and other countries to carry out complementary work.

**Legal Empowerment
and Practical Tools**

As a strategy to strengthen citizen advocacy and the defense of rights, the following is proposed:

- Creating flowcharts to identify problems and define clear action plans.
- Introducing legal strategies that allow advocates to know and exercise their rights effectively, also serving as a deterrent against potential violations.
- Conducting virtual or in-person workshops that offer technical training on how to document violations, using standardized and accessible formats.

**Training in Communication
and Audiovisual Production
in Indigenous Contexts**

- To strengthen the communication skills of advocates, it is suggested to exchange knowledge on creating audiovisual materials. These productions could include the use of puppets and animations, facilitating the dissemination of messages in a creative and accessible way.

**Technical Support for Effective
Advocacy**

- Finally, it is proposed to provide technical support that strengthens the capacity for citizen advocacy through workshops and practical tools that promote case documentation and the articulation of defense strategies.
- These actions aim to build a stronger, more inclusive, and effective movement capable of addressing current and future challenges, amplifying the voices and rights of communities.



Portraits of members of CEGSS and REDC-SALUD



María Elena Ajpop de Zuñiga



Santiago Simón Pérez



Evaristo Choj Caal



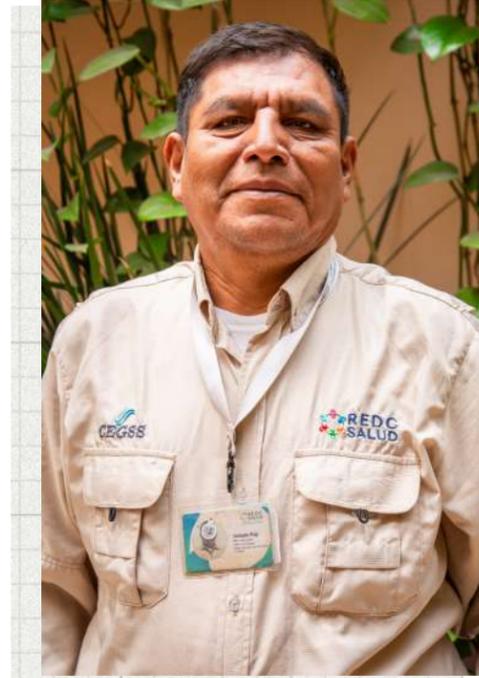
María Cristina Ponce Pacay



Rosaura Dalila Medina Prado



María Esperanza Cortéz Bocel



Antonio Pop Tiul



Adela Xol Xol de Cuc



Crisanto Asig Pop



FEBRUARY 2025