**Jungle Mamas/Inkiama Nakuri: Mothers As Protectors of the Rainforest**

**Grant Amount:** $40,000

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**Goals:**
1. Promote safe birthing practices and women’s health
2. Eliminate all preventable deaths in childbirth of mothers and babies
3. Promote family and community health

**Findings and Overall Outcomes**

Jungle Mamas began 2013 with a powerful organizational change by partnering with One Heart World-Wide (OHWW). OHWW is an organization whose staff members have over 25 years experience dedicated to saving the lives of pregnant women, mothers, and their children in low resource, rural settings. The partnership has brought together two complementary skill sets: experience in developing and bringing to scale programs for pregnant women, mothers, and their children with the organizational respect and positive relations with the Achuar communities in delivering culturally sensitive yet critically important information and skills to their members.

As part of the new organizational structure, Jungle Mamas re-designed its original training component. The new training is component is a Master Trainer model whereby fewer women are trained each year but at a much deeper level. The Master Trainers (MT) participate in two in-depth trainings and then work in their communities and those in the surrounding areas as community health outreach workers, attending to pregnant women, assisting births, and providing post partum support. The trainings focus on the following topics:

- Calculating the date of expected delivery
- Measuring fundal uterine height
- Calculating pulse of the mother and baby in utero
- Measuring blood pressure
- Calculating temperature
- Conducting a prenatal visit to monitor mother and baby’s progress
- Recognizing early danger signs of a risky pregnancy
- Working with families and community authorities to develop emergency evacuation plans
- Elements and necessary steps for a safe birth
- Steps for treating the mother and preparing evacuation in the case of postpartum hemorrhage
- Importance of data collection and maintaining a clinical history of the mother during the prenatal visit
- Importance of, implementation, and distribution of safe birth kits

In 2013, a total of 20 Achuar women from the provinces of Morona-Santiago and Pastaza were trained to be MTs in the “Health Outreach Provider Training for Community Empowerment” series. The first training took place in June 2013 with 20 women and the second took place in November 2013 with these same 20 women plus six additional women who were trained as apprentices. The November workshop reinforced the theoretical and practical concepts learned previously and served to evaluate the knowledge retention of the participants and assess the feasibility of measuring the impact of the Master Trainers on the women and their communities. The November workshop was a true landmark in that no other program for Achuar women has attempted to integrate participatory data collection into the work. Meeting directly with these 26 women assured us that we had: 1) effectively taught the importance and value of data collection; and 2) the women had been collecting accurate data during their prenatal visits. The workshops
were co-facilitated by a team composed of certified nurse-midwives, Achuar workshop facilitators, a perinatal epidemiologist from OHWW, and a Nurse-Practitioner/Master Trainer from the indigenous Tarahumara nation and representative of OHWW.

Each MT committed to visiting their surrounding communities to conduct prenatal visits regularly throughout the expecting mothers’ pregnancies and distribute safe birth kits. The 20 women have provided prenatal coverage to 47 out of 78 total Achuar communities, reaching a population of over 4,000 people out of a total of 6,600. This new MT model, which is designed to broaden the reach of the services, has helped us to exceed our original goal of reaching 60% of the population by 2014. The 26 women successfully visited and collected maternal health data on 153 pregnant women from approximately 70% of the population. In 2013, Jungle Mamas staff and the MTs distributed 175 safe birth kits to women in approximately 30 communities.

In 2013 we developed a partnership with the WISE Initiative for Surgical Education at the New York University School of Medicine. This group works to develop educational medical training videos and collaborates with global health organizations doing similar work in developing countries. We are currently working to translate prenatal and infant care videos from the Global Health Media Project (http://globalhealthmedia.org/) from Spanish into the Achuar language. In
2014, we will begin the design phase to develop culturally appropriate maternal and neonatal health training materials and videos into the Achuar language to incorporate into the pilot program that will launch in late 2014 using these materials for trainings.

In April 2013, we presented the Jungle Mamas model of safe birth at the International Confederation of Midwives (ICM) 4th Regional Conference of the Americas in Quito, Ecuador. Narcisa Mashienta (Jungle Mamas local coordinator), Isabel Wisum (all-star community birth attendant and female Achuar leader), and Robin Fink (Jungle Mamas Program Director) presented on various topics related to natural birth and the methods used in the program. The team held two panel discussions: one for the pre-Congress event and one during the conference, as a special invitation presentation. In front of over 400 professional midwives, obstetricians, and doctors, the team presented the birth realities faced by Achuar women living deep in the Amazon, the limitations with which they are faced, and how the Jungle Mamas program has been working to address these challenges. Our presence and the quality and content of the presentations generated a great deal of public interest towards and awareness of the valuable work that indigenous Achuar women are doing to prevent maternal and neonatal deaths in the Amazon rainforest. At this event, Jungle Mamas staff networked with key officials from the Ministry of Public Health, the National Federation for Obstetricians of Ecuador, the Canadian Association of Midwives, and the International Confederation of Midwives; all important steps towards establishing a Safe Motherhood Advisory Committee in 2014.

In October, 2013, Jungle Mamas met with midwives from the organization Midwifery Today, the president of the Ecuadorian National Federation of Obstetricians, and the Director of the Obstetrics Program at the Central University of Ecuador to 1) lecture 3rd year OB students on the importance of midwifery and intercultural birth models, and 2) begin planning a Midwifery Today conference in Ecuador to incorporate more indigenous midwives into the public sector.

**Key Challenges and Unexpected Outcomes**

Recently, the Ecuadorian government has been restricting freedom of the press and the operations of nonprofit organizations perceived to be working against its social, economic, and environmental policies. As part of this trend, the government has been increasingly suspicious of organizations working with indigenous groups living in areas where it is seeking to develop new oil fields. Although The Pachamama Alliance has been working in harmony with the government for over 16 years, under this highly restrictive environment the Ecuadorian government shut down The Pachamama Alliance’s sister organization and the organization under which Jungle Mamas operates in Ecuador, Fundación Pachamama, due to its work with the Achuar and other indigenous groups in the Ecuadorian Amazon. Despite this, Jungle Mamas was able to achieve the majority of its programmatic goals for the year and is currently operating directly under the management of The Pachamama Alliance’s San Francisco-based office. Since its inception in 2006, Jungle Mamas has had positive working relations with the Ecuadorian government’s Ministry of Health (MoH) given their shared priority of eradicating maternal and infant morbidity and mortality. Jungle Mamas serves a critical role in this initiative due to the fact that indigenous groups have historically fallen outside of the MoH’s program reach and that we are one of the only nonprofit organizations working directly with them to increase access to lifesaving services aligned with the government’s health priorities. As such, we foresee no major obstacles to continuing to meet our goals for 2014 and beyond.
One key challenge Jungle Mamas faces is related to the distribution of the safe birth kits. The number of kits that we assemble is based on the number of pregnant women reported to us. Given the isolation of the communities, the tradition of giving birth alone, and challenges related to data collection, we find that there are often more pregnant women than birth kits. For example, in late December we found out about an additional 80 pregnant women and are currently in the process of preparing their safe birth kits. Another challenge related to the safe birth kits is that some Achuar women do not yet fully trust the MTs even though they are Achuar and from the surrounding communities. In these instances the pregnant women choose not to meet with the MTs and the safe birth kits are not delivered to the mothers until after the birth, if at all, and no training on their use takes place. Jungle Mamas and OHWW staff are addressing both of these issues as part of the 2014-15 strategic program planning process.

In 2013, we also experienced some unexpected outcomes: For the November follow-up workshop, six more women arrived than had participated in the June workshop and these women were trained as apprentice MTs. Also, despite this being the first time we had collected data from the communities and the challenges inherent to collecting data among this population we successfully collected data on 153 pregnant women. The data collected on the pregnant women has yet to be systematized given the quantity of information and staff resources necessary for the cleaning and processing of data.

As a result of the ICM conference, the Jungle Mamas program story has been picked up by two publications. In November 2013, an Ecuadorian health and lifestyle magazine called Aguadulce (“Sweet/Fresh Water”), with a distribution of approximately 70,000, ran a feature on the program. Additionally, Jungle Mamas submitted a chapter on Achuar birth traditions for a book to be published by the White Ribbon Alliance for Safe Motherhood called “On Becoming A Mother: Welcoming Your New Baby and Your New Life with Wisdom from Around the World.” This publication features the birth traditions of cultures around the world.

**Change in Strategy**
After the closure of Fundación Pachamama we changed our management structure so that we are working directly under The Pachamama Alliance’s San Francisco office.

**Program Reach and Impact**
Jungle Mamas is an on-going program whose direct and indirect impacts continue to grow each year. Seven years ago, before the program existed, it was considered taboo to address areas of women’s health, birth, and family planning. Women were not given a public space to voice their concerns for their families or their own livelihoods. Through our approach with Jungle Mamas, using workshops, trainings, and community dialogue, we have created an environment that generates safety, trust, and mutual respect. The presence of these three key elements in the dynamics of our work, particularly with male Achuar leaders, has allowed Jungle Mamas to gain the trust and respect of the Achuar people in assuring the health and well-being of their mothers and children.

Since our inception in 2006, each year an increasing number of women were requesting that our workshop participants and birth attendants attended their births and that they had access to safe birth kits. In the beginning, we were only permitted to work in one Achuar association,
composed of seven communities, directly impacting 20 people (as workshop trainees) and indirectly impacting approximately 500 people (as mothers and families attended to by the workshop trainees). In 2012, that work expanded to include three other associations, or approximately 15 communities, and directly impacting about 175 people (workshop trainees) and indirectly impacting approximately 1,000 people in the communities.

Building on the success from previous years, our collaboration with OHWW has allowed us to scale our work to 10 of the 12 Achuar associations. In 2013, 20 Achuar women were trained to be MTs and six Achuar women were trained as apprentices. While the number of women trained is fewer than in the past, the MTs receive a more in-depth level of capacity building and can reach a greater number of women in the surrounding communities given that they work as community health outreach workers in the areas where they live. The Jungle Mamas program is now reaching approximately 70% of the Achuar population, or 4,000 out of 6,600 people. The MTs attended to 153 pregnant women during the year. It is our goal to reach 100% of the population by the end of 2014 (see Expected Outcomes below for our 2014 objectives).
Jungle Mamas’ program monitoring and measurement takes place on two levels: 1) the pregnant women in the communities receiving support from the MTs, and 2) the MTs themselves. For the first level of assessment, the Master Trainers fill out survey forms each time they conduct prenatal, birth, and post partum follow-up visits. In 2013, we collected data on 153 pregnant women in Achuar territory. Data collected include: basic demographics of the woman and her children; history of birth complications; history of births attended by a midwife or other health worker; number and types of prenatal visits; and use of the safe birth kit, among others. The data have not yet been systematized given that we collected more data than originally anticipated. In 2014 we will be working diligently to create a database for tracking these and future data collected during program activities as part of our improved program monitoring system.

For the second level of assessment, at our November workshop, we conducted a participatory evaluation where each MT expressed the benefits and the challenges she faced within the communities. The women divided up into small groups to discuss amongst themselves what they perceive as the benefits and difficulties of the Master Trainer program. All of the benefits and difficulties were discussed as a large group and the women worked together to find solutions to the difficulties and problems they encountered. At the end of the session, we worked closely with the group to help identify the ways in which Jungle Mamas could support them in addressing the challenges. Additionally, at each workshop, we conduct pre- and post-tests in the Achuar language to assess their retention of the material. Although these data are part of the larger dataset that has yet to be systematized, it is clear from the preliminary analyses that a vast majority of the women have shown improved retention from one workshop to the next.

**Budget**
Please see the associated budget for the projected and actual expenses in 2013 as well as the allocation of Dining for Women funds. The DFW funding covered 31.2% of Jungle Mamas’ 2013 actual expenses.

**Sustainability**
As a result of the Jungle Mamas program, a greater number Achuar mothers are receiving advanced maternal care and are able to recognize the signs of birth risks early on. For example, Master Trainers were able to identify a number of cases where the position of the baby was not adequate for delivery in the field. They also activated a birth emergency plan during a post partum hemorrhage that saved the life of the mother and her baby.

In some communities, we are beginning to see a shift in female empowerment and leadership in the communities where we work: A number of communities have elected female presidents or representatives of the local government, all of whom have been a part of Jungle Mamas.

Other communities are actively engaging informal maternal health policies at the community level. For example, a woman is exempt from mandatory collective manual labor each week for up to three months after birth. Women are gaining more legitimacy in their communities as being vocal members. Men are starting to listen to their wives more about when they want and do not want to have children. Fathers participate more in the development of birth plans and some are even helping to attend the births of their children. Communities that in the past were not
receptive to learning about family health and family planning are now requesting informational workshops. These will be conducted in 2014.

Jungle Mamas places a great deal of importance and effort on sensitizing the communities and their leaders on the importance of protecting maternal and infant health using the information and materials from the program. As described above, we are seeing an increasing level of interest and uptake of the program among the Achuar, an indigenous nation that historically had very little trust for outsiders. The new program design, using Achuar Master Trainers, will help build the trust required for the success of the program and ensure a greater level of acceptance among the women, community leaders, and their families.

In the next three to five years, we hope to see the program transition to local ownership, run primarily by Achuar women with support from the Ministry of Public Health. This will provide us with the proof of concept necessary to scale the program into other indigenous territories in the southeastern Ecuadorian Amazon where The Pachamama Alliance is working. Within the next five years, our goal is to expand Jungle Mamas into the Shuar population in the Amazon, which consists of approximately 68,000 people, delivering the same model of maternal and infant health care services but tailored to the specificities of the Shuar culture.

**Quotes from the Women Served**

A Master Trainer from Sapaapentsa: “I have attended every birth of all the women in my community. I attended my first birth when I was 11 years old. I do not know how to read or write, so I bring my daughter-in-law as my secretary when I go to visit women. She writes down the words and we keep it in a booklet. She too wants to become a midwife. People in my community are proud of the work we do taking care of the mothers”

An elderly woman from Sapaapentsa: “I love working with the birth kits (almost in tears). The families are happy to receive them. You have truly discovered a part of our needs as mothers. I heard about the workshop over the radio. I live far away and my husband went all over the community to find gas to put into the boat so that I could come here to help women. My husband gave me his blessings to come here.”
Master Trainers learning how to detect the position of the baby

The success of Jungle Mamas has also extended into women’s leadership at the community level through an increase in women being elected as a part of their local governments, increased participation in political assemblies to voice their concerns, and an overall increase in families making well-informed and empowered decisions on how they want to plan their births and families. We are increasingly receiving requests for workshops from communities who have historically been against Jungle Mamas and learning about women’s and family health. Due to the impact of our work, there is now no longer a single community in all 78 of the Achuar communities that has not requested some form of participation in the program.

New Opportunities
The Dining for Women partnership has been a powerful force in allowing Jungle Mamas to take the steps necessary for deepening the relationship with One Heart World-Wide, obtaining new sources of funding, and increasing the program’s profile. The DFW grant helped to pay for the OHWW consultant team to support the program re-design and rollout of the Master Trainer workshops. We were able to leverage the support from DFW to obtain funding for the first time from the International Foundation and the Lush Cosmetics Charity Pot as well as continued funding from the Good Works Institute. The support from DFW has aided Jungle Mamas in raising the profile of its work in 2013 resulting in increases in donations from individuals interested in supporting maternal and infant health among the Achuar in Ecuador.

Thanks to Dining for Women, Jungle Mamas took the first steps toward developing the necessary allies and partners at the national and regional level for establishing practices in safe
motherhood throughout Achuar territory. As previously discussed, in April 2013, Jungle Mamas presented its model of safe birth at the International Confederation of Midwives 4th Regional Conference of the Americas in Quito, Ecuador. Because of the recognition received through our participation in the ICM Conference, we were approached to contribute to the two publications, as discussed previously.

**Organizational Information**

In early 2013, Jungle Mamas began a powerful collaboration with One Heart World-Wide that resulted in a significant organizational change and program re-design. Due to this collaboration, the year of 2013 proved to be the year of most widespread impact on ensuring the health of mothers and babies in the history of the Jungle Mamas program!

In Jungle Mamas, all of the individuals involved with the program are women. We use a model of women’s empowerment among indigenous populations that is so useful and relevant that the other Pachamama Alliance programs have requested that our team work with them in order to implement a gender equity component in their work. For example, we have been working with solar boat transportation program to get Achuar women involved in administrating the local operations of the boats in the future.

One important lesson we have learned throughout this program is that in the indigenous communities where we work, the buy-in of men is critical to the sustainability of the program. Empowering women without also empowering the men will completely derail any project that requires complete community support. It is necessary to be sensitive to the cultural and gender needs and dynamics of each group and to constantly reflect upon and engage with one’s own cultural notions of “empowerment” to be sure it is relevant to the Achuar context.

**Next Steps**

In 2014, Jungle Mamas will focus on the following objectives:

1. Expand Master Trainer trainings in order to reach the remaining 30% of the Achuar population so that by 2015, all 78 communities from Achuar territory will have a Master Trainer visiting their territory to provide prenatal care to expecting mothers
2. Increase access to culturally adequate and environmentally friendly safe birth kits for Achuar women: 500 safe birth kits will be distributed by 2015
3. Create a category of skilled birth attendant training based on international standards that is recognized by the Ecuadorian government
4. Promote the education of Achuar obstetricians through the establishment of a scholarship program to study obstetrics at a university in Quito
5. Improve program monitoring system through systematized data collection
6. Improve community-based communication to establish more efficient emergency evacuation and radio communications systems

**Impact Summary**

2013 was a very important and groundbreaking year for the Jungle Mamas program and for the empowerment of Achuar women in Ecuador. Since the inception of the powerful collaboration with One Heart World-Wide in early 2013, Jungle Mamas has empowered a team of 20 Achuar Master Trainers and six apprentices who are currently providing prenatal care to women in 47
Achuar communities, indirectly impacting over 4,000 people or 70% of the population. These Achuar women are working to ensure that each mother has access to a safe and culturally empowering birth while strengthening the capacity of the community to support them during the process.