Jungle Mamas
Inkiama Nakurí: Mothers As Protectors of the Rainforest

Interim Progress Report for Dining for Women
September 2013

Prepared by:
Robin Fink, Jungle Mamas Program Director
Adam Weiner, Pachamama Alliance Grants Manager

Achuar participant during the Master Trainer workshop learning to measure blood pressure to ensure she can detect problems before they arise during childbirth
PROGRAM GOALS AND OBJECTIVES

The Jungle Mamas program is designed to eliminate all preventable deaths in childbirth of mothers and babies, and to improve community health by focusing on the education of women, family planning education, and the improvement of environmental health. The new project design will ensure sustainability by involving a greater number of local women and men at a deeper level.

The program objectives are:

1. Increase pregnant women’s access to prenatal and postpartum care by expanding the Health Outreach Provider Training for Community Empowerment Master Trainer workshop.

2. Conduct a feasibility assessment and pilot program to assess whether the delivery of audio-visual materials via iPads improves the retention level of knowledge among trained community health volunteers and community knowledge, attitudes, and practices related to the topics presented.

3. Increase the access to and frequency of use of clean and safe delivery kits among pregnant mothers.

4. Create a Skilled Birth Attendant training program based on international standards recognized by the Ecuadorian Government, while promoting the education of Achuar obstetricians.

5. Formalize a Jungle Mamas Safe Motherhood Advisory Committee, with members from the Ecuadorian Ministry of Public Health, the National Federation of Obstetricians of Ecuador, the Central University of Ecuador, local and municipal governments, and representatives of One Heart World-Wide and Fundación Pachamama/Jungle Mamas.

6. Assess the effectiveness of the local communication and emergency evacuation systems and advocate for greater government involvement in the maintenance of the systems.

1. A brief description of what has been accomplished so far, including progress on the goals and objectives of the program DFW is funding.

Objective 1: On June 6-13, 2013 in the community of Sharamentsa, Ecuador, 20 Achuar women from the Provinces of Morona-Santiago and Pastaza were trained in the Health Outreach Provider Training for Community Empowerment Master Trainer workshop. This workshop was co-facilitated by a team comprised of certified nurse-midwives, Achuar facilitators, a perinatal epidemiologist from One Heart World-Wide (OHWW), and a Nurse-Practitioner/Master Trainer from the indigenous Tarahumara nation (who is also a representative of OHWW). The Dining for Women grant has significantly contributed to our partnership with One Heart World-Wide by providing the funds to launch the first training of the new cadre of Master Trainers. It created the possibility for Carlos Tapadero-Konsheno, an indigenous Tarahumara Master Trainer, and Sibylle Kristensen, the Chief Operations Officer and peri-natal epidemiologist, both of OHWW, to help design and co-facilitate the workshop. It was the first workshop collaboration effort in the field that integrated OHWW and Jungle Mamas teaching methodologies. Participants were trained in the following areas:
- Calculating the date of expected delivery
- Measuring fundal uterine height using a tape measure and hand measurements
- Calculating pulse of the mother and baby in utero
- Measuring blood pressure using blood pressure cuffs
- Calculating temperature
- Conducting a prenatal visit to monitor mother and baby's progress
- Recognizing early danger signs and symptoms of a risky pregnancy
- Working with families and community authorities to develop both a birth and evacuation plan
- The elements and necessary steps of a safe birth
- The steps for treating the mother and preparing evacuation in the case of postpartum hemorrhage
- The importance of data collection and maintaining a clinical history of the mother during the prenatal visit
- The importance of, implementation, and distribution of safe birth kits

As a result of the workshop, each Health Outreach Provider/Master Trainer (Master Trainer) committed to visiting their surrounding communities and conducting prenatal visits regularly throughout the mothers’ pregnancies and to distributing safe birth kits. The 20 women will provide prenatal coverage to 47 Achuar communities, with a total population of over 4,000 people, thus working to exceed our goal of benefitting 60% of the population by 2014 and 100% by 2015 (there is an estimated total 7,400 Achuar in the territory in which we are working). Master Trainers are now responsible for filling out data collection forms during each of the three prenatal visits and one postpartum visit. The Master Trainers will receive a compensation for each mother they visit.

A four-day follow-up workshop in November 2013 will reinforce theoretical and practical concepts learned during the June Master Trainer workshop. During the follow-up workshop, Master Trainers will be evaluated on their knowledge retention and the potential impact of their work in the communities. The Dining for Women funds will help support this workshop in addition to the activities for the following five objectives.
Objective 2: Currently, we are in the process of developing a partnership with the WISE Initiative for Surgical Education at the New York University School of Medicine. This organization works to develop educational medical training videos and collaborates with global health organizations doing similar work in developing countries. We are in the design phase to develop culturally appropriate maternal and neonatal health training videos in the Achuar language to be used with iPads. These materials will be piloted in early 2014 to test whether the iPads are an effective method of delivery for the information and help to improve the retention of knowledge among Master Trainers as well as among the community members they train.

Objective 3: To date, we have distributed 100 safe birth kits to women in approximately 30 communities. Our Master Trainers will be responsible for their distribution and for tracking their use and implementation. We have found that some mothers do not want to be attended to by another woman, opting for the traditional solitary birth in their Achuar gardens. In this case, Master Trainers and birth attendants will provide mothers with birth kits and training on its use before they give birth so they can use it effectively without supervision.

Objective 4: We are in the process of developing a strategy with representatives from the Ecuadorian government to build a Skilled Birth Attendant curriculum and certification that is officially recognized by the government. To date, we have had several meetings with the National Federation of Obstetricians of Ecuador who are assisting in the effort. Additionally, we have taken the preliminary steps to educating the Achuar women on the benefits of studying to be an obstetrician and the opportunities that exist for this at Universidad Central de Ecuador. Scholarships will be awarded in the near future.

Objective 5: 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. In April 2013, Jungle Mamas presented the Jungle Mamas model of safe birth at the International Confederation of Midwives 4th Regional Conference of the Americas in Quito, Ecuador. Narcisa Mashienta, Jungle Mamas local coordinator, Isabel Wisum, an 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 death 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.

Objective 6: We are currently collecting information about the existing radio communication and evacuation systems and compiling it into a database. Once this information is ready, we will present it in a proposal to the necessary counterparts to begin a dialogue on the state of emergency evacuation preparedness in Achuar territory. We anticipate having this information ready by the end of October.

2. Has anything changed in regard to the original program goals and objectives? Since the Jungle Mamas proposal was originally submitted, a great deal of effort has been put into strengthen existing programmatic structures and organizational capacity. The result of this effort was that in early 2013, Jungle Mamas formalized a partnership with One Heart World-Wide, an organization whose staff has over 25 years’ experience working on maternal and infant health programs in rural, low resource settings. This partnership
brings 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. Upon beginning the work together, an assessment of the old program was conducted and a new program design was created and launched. This new design is based on training Master Trainers or Health Outreach Providers who work in their communities and the surrounding areas delivering critical information and services to pregnant women, mothers, and their families. This design deepens and expands Jungle Mama’s previous years’ goals and objectives, reaching a greater number of women and their families in a larger number of Achuar communities in a more effective and efficient manner. The goals and objectives presented in this report reflect the new Jungle Mamas programmatic structure.

3. Have you experienced any significant challenges or obstacles in implementation? If so, how are they being addressed?
To date, we have not experienced any significant challenges. The only obstacle that continues to pose a challenge is related to radio communication in the communities. In communities where strong radio systems exist, it is at times difficult to establish a constant radio communication due to weather conditions. We have worked to improve this by holding weekly radio calls between our local and regional coordinators, to avoid the possibility of messages getting lost. In other communities, there are no radio communications systems and therefore maintaining regular contact there is extremely difficult.

4. Has the timeline for the program changed from the original funding application?
We have pushed our audiovisual pilot project and feasibility study to 2014, due to the timing it took to establish the new partnerships with the WISE Initiative and other partners. The Jungle Mamas team is developing a proposed public policy for safe motherhood in the Achuar territories and this includes components discussed above such as the Skilled Birth Attendant certification and enhanced emergency and communications systems. Jungle Mamas staff is surveying each community to collect data to include in the proposed policy. Given the remoteness and lack of radio communication systems in some of the communities, this process is taking longer than originally anticipated. As a result, the presentation of the proposed policy to the Ministry of Public Health will occur in early 2014.

5. Has the funding changed for this program?
Jungle Mamas has received additional funding for the program: In June 2013 we received $15,000 from the Lush Cosmetics Charity Pot initiative and $20,000 for 2014 from the Good Works Institute.

6. How much of the DFW restricted funds have been disbursed and how much remain?
The total budget for the DFW grant was $40,000 to be used in 2013 over a one-year period. Please see the attached revised budget for the new allocations. To date, the Jungle Mamas program has used $15,000 of the total on personnel costs, $5,000 for the Master Trainers
associated costs, $2,500 on birth kits, and $5,000 on logistical costs for the first Master Trainer workshop. The remaining $12,500 will be used in the upcoming months on the follow up workshop in November, birth kits, and consultant fees for the policy and advocacy work.

7. Is your organization or program situation different than in the approved proposal?
See #2 above

Participants and facilitators of the Health Outreach Provider Training for Community Empowerment Master Trainer workshop - June 6-13, 2013, Sharamentsa, Ecuador