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THE STRUGGLE FOR HEALTH AUTONOMY IN CHIAPAS

By Frank Coughlin

This past March, I was fortunate enough to return to Chiapas to begin working with Dr. Juan Manuel Canales and the health promoters in the autonomous Zapatista communities. Chiapas is in the southern part of Mexico, home to one of the largest indigenous populations in the country, with the many ancient temples and structures as proof of distant civilizations. For much of Mexican history, it has been a forgotten place, isolated by the government, thought of as a place for ranchers and large landowners. But with the many indigenous uprisings, most recently the 1994 uprising of the EZLN, the Mexican government and the world have been forced to remember again the territory of Chiapas. In addition, because of the many natural resources in the region, multi-national corporations are continuing their neo-liberal conquest of Mexico, now with an eye on Chiapas. It is in this context that the Zapatistas continue their 20-year struggle for autonomy.

This was my second trip as a DGH volunteer to Chiapas and to the autonomous territories (for more information see “The Humility of Love,” <https://is.gd/YJldFk>). Dr. Canales, DGH’s in-country project coordinator, has been working with the autonomous Zapatista communities for the last 15 years. In line with the “Sixth Declaration of the Lacandon Jungle,” the most expansive declaration of the EZLN that defined the future goals of the Zapatistas, Dr. Canales has been assisting the caracole of Morelia in developing and training health promoters (there are five Zapatista caracoles, which are each autonomous regions located in Chiapas). He also assists in the training of midwives, herbalists and bone setters. I was able to help him in his work with two groups of health promoters.

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“ We are only trying to show what we are building, with many difficulties, but also with many desires constructing another world, one in which those that command, command obeying.

– Zapatista Commander ”

Our focus in the trainings was on risk factors for complications related to pregnancy and delivery. We delivered it to two different groups of health promoters, aiming to ensure they would be able to recognize the risk factors that meant the mothers-to-be needed to be referred to a higher-level medical professional, like an obstetrician. Although the content of the training consists of a summary of advanced obstetrical care, it was basic in terms of the language and structure used, being geared towards the health promoters. We also assisted the promoters in their local vaccination campaign.

Given that the overwhelming majority of births are in the home, usually attended to by a midwife, there is a strong cultur-





PHOTOS: FRONT PAGE: Dr. Canales, DGH's in-country project director (2nd from right), with DGH volunteers in Chiapas. ABOVE: Health clinic in Morelia.

al desire to keep births in the home. When asked why expectant mothers would want to deliver at home, many of the health promoters stated that: “mothers felt comfortable at home, in contrast to the foreignness of the hospital setting;” “higher risk of C-section and *episiotomy* [cutting of vaginal tissue during labor] in the hospital;” “cost of procedures, transportation, food;” “invasiveness of repeated vaginal exams;” and “general disrespect for being poor.” In addition, it can be politically and socially risky for indigenous people to travel to government centers.

In their quest for autonomy, the Zapatistas have worked to develop new infrastruc-

tural systems as well as fostering the growth of indigenous customs. More so, access is guarded by for-profit corporations, specifically the insurance and pharmaceutical industries.

The Zapatistas have built their health system based on centuries of indigenous knowledge, with a strong focus on preventative care: Healthy food, physical activity, no drinking or smoking, no drugs, and a sense of community and purpose. But they also recognize the benefits of Western medicine and so look to combine both. They have primary care clinics, herbalists, bone setters, regional hospitals that practice indigenous medicine, and a strong health promoter staff that are from and live in the communities. They provide vaccines, common modern medications and have the mechanism to transfer patients to regional medical hospitals. Beyond all of it, they foster a communal empowerment, a feeling that health is a communal knowledge, not something to be relegated to the realm of distant professionals.

A common saying in Mexico, taken up by the many who struggle says, “They tried to bury us. They didn’t know we were seeds.” As we learn from and continue to support the Zapatista struggle, let us all, like seeds, grow on our own path towards health autonomy. 🌱

TWO MEMORIALS HELP MOVE CDH COMMUNITY HEALTH WORK FORWARD

By Shirley Novak

For over a decade, many development projects of *Asociación de Campesinos para el Desarrollo Humano* (CDH, Peasant Association for Human Development) in rural north-eastern El Salvador have put great emphasis on health to move the community forward. DGH has provided numerous updates about that effort over the years on its website, in this newsletter and in fundraising letters. We have shared with you the inspiring work of CDH community health promoters climbing up and down Estancia’s hills to make home visits; reforestation projects, combating erosion to keep the already poor topsoil from washing away in the rainy season; securing funding to replace some of the most inadequate bamboo-stick and dirt floor houses with cement floor brick structures;

promoting community gardens and planting fruit trees to enrich the diets in families that would otherwise go without, both by expanding traditional vegetable crops of corn and beans and eventually adding fruit to those often unable to afford these “luxuries” grown elsewhere.

Now, two Memorials will help continue the work. Thanks to a very generous donor, some important infrastructure has been updated in the CDH Estancia community. Long-term DGH supporter Roberta Lanford’s donation allowed for a lasting tribute in memory of her mother, Evelyn Mason: A new kitchen and educational center designed by CDH to support and enhance their work. Construction is completed, – finally replacing the tired “temporary” building that served as a kitchen for more than a decade! A fitting plaque to acknowledge the Evelyn Mason Memorial will be installed in the near future.

CDH planned the center to strengthen their infrastructure, to provide better conditions for food prep for its staff, volunteers and guests, as well as to create space for classes. Educational and training goals for the facility will be to promote healthy eating, better nutrition, combat malnutrition, and teach food preservation using excess food in the community. Thousands of ripe mangos currently go to waste. CDH plans to provide classes especially for mothers (the primary food preparers in this culture) who have children with various health problems, including malnutrition, dietary deficiencies and allergies. By offering these classes on a variety of food and diet related topics, in an improved facility, CDH expects some local fathers and youth might be

interested and encouraged to get involved in their family's health as it relates to food too.

And now to purchase materials for the resource library, completing the vision of the kitchen as a teaching center, DGH is accepting directed donations in memory of Dr. Juan Carlos Martinez. Juan Carlos, born and raised in Estancia, El Salvador, and trained as a physician in Cuba at The Latin American School of Medicine (ELAM), returned to his home town to serve his people as a physician. He suffered a life-threatening illness, ultimately resulting in his death in February 2015. The Juan Carlos Martinez Memorial Fund will help to deal with and recover from the tragic loss to our partner community, his family and our DGH community, and to continue the work to which he devoted his life. The resource library and equipment will be housed in the kitchen/educational center with a fitting plaque, visible to all, so that Carlos' own words – which will be chosen by his family and CDH – might serve as an inspiration to Estancia's youth to dream big, work hard and succeed!

Some DGH past volunteers may remember Juan Carlos as the little kid riding with his health promoter dad, Ramiro Cortez, making his rounds by bicycle or horseback. Others may remember him from time spent at CAIPES ("the clinic") as a medical student during July and August breaks back home throughout his six years of study at ELAM. More recent DGH volunteers worked closely with him alongside patients or making house calls when he was Medical Director of the CAIPES clinic. Some may remember Juan Carlos playing the guitar late at night, telling stories about growing up in Estancia and dreaming of making a difference for Salvadorans living in poverty. He completed his dream of returning to serve his community in Morazán as a physician, but plans to complete a residency program to better prepare himself to serve his community were cut short. He tragically became ill and died shortly after completing his medical studies. A tribute to Juan Carlos will serve as motivation for youth in this

isolated rural community to realize that they too can reach high and achieve their dreams.

By remembering and honoring both Evelyn Mason and Juan Carlos Martinez in these ways, a living legacy is being created to keeping their memories alive while improving the health and nutrition of the Estancia Community for many years to come. Join us in the Latin American tradition in declaring Evelyn Mason: ¡Presente! Juan Carlos Martinez: ¡Presente!



Juan Carlos Martinez (right) and DGH Board Member, Shirley Novak (left), during one of her annual visits to Estancia, a DGH-partner community.

DGH Announcements

► **Highlights from the DGH 2016 General Assembly.** The 21st Annual DGH GA was held this July at the University of Minnesota in Minneapolis, MN. The presentations and collaboration among participants highlighted the intersectionality of several human rights and social justice movements that are urgently being fought for. We are humbled and honored to have shared this weekend with passionate activists engaged in human rights work around the world. On the DGH web site, you can read inspiring presentations by our keynote speakers as well as summaries of the panel presentations. We hope you will find their words moving and that you will be inspired to act. You can find a comprehensive look at the weekend's activities and read full transcripts of presentations at: <https://is.gd/Grn4HI>.

■ **KEYNOTES:** Commissioner Dr. Edward Ehlinger – The State of Disparities in Health in Minnesota; Nekima Levy-Pounds – Toward Justice, Healing, and Reconciliation; Syl Jones – The Absence of We; and Olivia Cáceres – Environmental Activism and Indigenous Rights.

■ **PANELS:** Working to Heal Community Experiences of Migration and Trauma; Preserving and Mobilizing Cultural Assets; and Land Use and Indigenous Rights.

■ **WORKSHOPS/BREAK-OUT SESSIONS:** Volunteering Internationally: Process, Ethics, & Community Perspectives; Experiences in Commu-

nity Health: Community Health Worker Training in El Salvador and Mexico; Promoting Diversity In Health Professions: Pipeline Program Case Studies & Strategies; Ebola Survivor Care and Disease Surveillance in West Africa: Is a patient-rights approach viable?

► **DGH Members Participate in the Inaugural MGH Chelsea Research Day.** The brainchild of the Massachusetts General Hospital's (MGH's) Chelsea Research Program (<https://is.gd/h13Cuf>), Research Day was a wonderful opportunity to showcase the diversity of collaborative research among health center staff, other MGH-affiliated departments, community members and other academic departments, institutes and centers. CoCoSI (Committee Against AIDS) Director Brenda Hubbard, DGH volunteer and Harvard Medical Student Annie Symonds, and DGH Board Member Jennifer Kasper created three posters that highlighted DGH's accompaniment work in Estancia and Santa Marta, El Salvador. Research Day highlighted the mission of the Community Research Program at MGH Chelsea Healthcare Center: to support research across the lifespan and emphasize interdisciplinary collaborations that target health disparities, advance clinical practice, and improve the well-being of the Chelsea community. The model is similar to DGH's accompaniment approach: listen to the needs and priorities of our partner communities and, when indicated, conduct participatory research to address these needs and priorities. Poster presentations focused on six health-



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related themes facing the community: Immigrant Health; Practice Transformation & Health Care Redesign; Maternal Health & Child Development; Language Development & Health Communication; Behavioral Health; and Medical Education. The posters will be available for viewing online at: <https://is.gd/TMSVz0>.

► **DGH Members Join in the Border Vigil Against US State Violence.** Over a thousand activists from the US and Mexico converged at the border wall on Sunday, October 9, 2016 for a vigil to remember the victims of US state violence and celebrate resistance against it. DGH Advisory Council Members, Ed Kinane and Ann Tiffany,

were there with SOA Watch: "For us, the Nogales SOA Watch weekend, with marches and bilingual rallies and workshops on both sides of the Sonora/Arizona border, provided an inspiring window on work being done in that region on border and refugee issues. We were especially impressed with the hands-on work of *Las Patronas*, Mexican women who, for the last 22 years, have been tossing packets of food to migrants as they reach out from northbound trains speeding by. Also impressive were the Tucson Samaritans. *Los Samaritanos* go out into the desert providing medical care and placing food and gallons of water along trails used by refugees heading north on foot through that lethal wilderness. On October 9 we attended "Migrant Sunday" at Tucson's Southside Presbyterian Church. Its moving trilingual woman-led liturgy culminated with a procession of the whole congregation out to a shrine in the court yard. Each of us, chanting, bore a rock with the name of a refugee whose body had been found in the desert during the past year and placed that rock under the shrine. With the accumulated rocks of earlier years, that pile was all too high." You can learn more about the SOA Watch Convergence weekend at: <https://is.gd/pAQH2r>.

► **Save the Date!** The 22nd Annual DGH General Assembly will be held August 4-6, 2017 at Agnes Scott College, Decatur, GA.

► **Become a DGH Sustainer!** Our work is not done until a dignified life, optimal health and well-being, and social equity are realities for all. Help DGH work toward that goal by becoming a Sustainer: Establish an automatic, monthly or annual donation by clicking on the "Donate Now" button on the DGH web site (www.dghonline.org).



Break-out session at the 2016 DGH General Assembly at the U. of MN.