

Vecinos Honduras: Monitoring Visit May 2019

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Maternal and Child Health Initiatives: Valle and El Paraiso Districts

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Overview:

Gahriel

It was a privilege to see the effect these projects have on individuals. While the overall reality of the obstacles Hondurans face is intimidating it was inspiring to see the positive changes that Vecinos Honduras facilitates. The work being done is worth supporting.

It was also a very useful trip in that it will make future reporting easier.

Navjot

This was one of the strongest community-based participatory programs I have seen. I have no words to describe the work being done expect that I understand why Michael provided such strong and continued solidarity to Vecinos Honduras and their vision.

Lucas

After meeting the community leaders and members, it is safe to say the supportive outreach of the program is vast. Thanks to the work of Vecinos Honduras, the communities have become more tightly knit and self reliant.

This Report:

This report is dedicated to all of the incredible people we met during our short visit to Honduras. This includes Vecinos Honduras staff members, community volunteers including Mother Guides, Monitors, and Health Committee Members, mothers and their children involved in the current program, along with other community members we had the privilege to meet. A very special thank you to Tatiana Cortez, who not only translated conversations, but created a comforting space for dialogue to take place.

We hope to share what little knowledge we have of the incredible work that Vecinos Honduras does in order to deepen our organizational understanding of the projects we currently fund.

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"Poco a Poco, Little by Little"

Overview:

Vecinos Honduras (VH) facilitates, accompanies, and promotes development processes that are participatory, equitable and sustainable so that different population groups develop personal skills, advocate for their rights to access and control resources, and continuously empower themselves to be agents of change for the wellbeing of their community. Since 2009, VH has used a holistic rural development model that achieves to transform communities towards a just, equitable, inclusive society through capacity building. VH currently works in 5 different regions in Honduras.

The Maternal and Child Health Project is implemented by VH and supported by World Neighbours Canada and Global Affairs Canada between 2016-2020. It is one aspect of their holistic approach. The project activities aim to build greater capacity in families, organizations and communities to improve the health conditions and have healthy communities. This is done by improving child nutrition and development for children 5 and under, and decreasing the spread of disease by fostering health home environments.

- Health Committees are formed to identify needs in the communities and ensure communication between the volunteers and the local Health Centres. They also organize larger health related projects such as water safety, clean communities, and vaccinations.
- Volunteer groups, including *Mother Guides* and *Monitors* are trained to implement the Integral Care for Children in the Community (Programa de Atención Integral a la Ninez en la Comunidad, or AIN-C) and Early Stimulation (ES) Sessions to monitor child weight, provide follow-up and health literacy, and host simulation sessions to encourage and motivate mothers to engage in their child's development.
- Workshops on healthy home environments are held with community members and guides who can replicate the teachings in their communities. These workshops cover topics such as hygienic food storage, improved stoves, the importance of walls within homes, the importance of water treatments, garbage clean up, and preventing mosquito habitats.

The maternal and child health component of VH's approach is integrated into their existing framework within the communities they work. It is critical to understand the larger scope of their work in order to understand the sustainability and effectiveness of their approach to the Maternal and Child Health Project.

Communities Visited:

We visited the Maternal and Newborn Child Health Projects in the Valle and El Paraiso districts (see Appendix 1 for map). In total, we spoke with 16 Vecinos Honduras Staff, 21 Mother Guides, 19 Monitors, 42 mothers, and 3 fathers, along with others in the community. Discussions took place in individual and group settings, often in the home of one of the volunteers, mothers, or the VH regional office. We also had the pleasure of meeting 5 Vecinos Honduras board of directors. Specific communities and discussions held include:

District:	Communities:	Discussions:
	El Picacho	VH Team (n=10) Mother Guides (n=7)
	El Trapiche	Monitors (n=13) Mothers (n=3) Fathers (n=1)
	San Antonio de Las Gaurumas	Larger Group Visits:
	Malposa	Group discussion with MG, M, and Mothers (El Picacho,
	El Rincon	El Lagoon)
	Guanacastillo	Debrief with Regional VH staff
	El Lagoon	
El Paraiso	Caleves Uno	VH Team (n=6) Mother Guides (n=14)
	Caleves Dos	Monitors (n=6) Mothers (n=39) Fathers(n=2)
	Las Flores	
	La Libertad	Larger Group Visits: AIC and Early Stimulation Session (??)
		Group discussion with MG, M, and Mothers (Caleves Uno)
		Debrief with Regional VH staff

^{*}n= number of participants in each category; these numbers are estimates as it is difficult to calculate exact numbers in community-wide meetings. Number does not include Health Committee and Water Committee members.

Vecinos Honduras Approach:

VH's approach is deeply rooted in participatory approaches and popular education. The ultimate goal of their work is to build community solidarity, collaboration, and structure to ensure members can take leadership in transforming their lives and realities by taking an active role in their development and wellbeing. VH's role is to facilitate and help build community capacity from a strengths-based approach. There is a strong acknowledgement that each community is unique and therefore must start at its own place.

VH makes a commitment to stay within a community anywhere from 6-8 years, with additional follow-up. There is a strong understanding that approaches need to be tailored in order to meet communities where they are are at and use a strengths-based approach. Communities are selected by VH based on needs or at times communities invite them in. Initially, VH spends time learning about the communities needs while providing various training sessions to generate interest that include agricultural techniques, starting enterprises and businesses, raising healthy children, building smokeless stoves, manage finances etc. This phase could take anywhere from 2-4 years. VH gradually starts to set up local structures and begin to train local leaders to: organize activities themselves; include women in decision-making; run effective local organizations such as health committees and water committees, and manage finances. VH plays a role in integrating these committees to work collaboratively and with the local government structures. Eventually, capacity is developed to a point where local leaders take over the role of VH, of course with follow-up from VH when needed.

The VH commitment to participatory methods is evident from their day to day activities. There is an organization acceptance that development is complex and requires time and patience. Sometimes while hosting trainings and generating interest, over 2 years are dedicated to build trust and learn about what the true needs of a community are. Staff work in partnership with community members to implement activities such as visual community maps and problem trees to ensure capacity building is at the core of their work. Such activities could take days to implement, but contribute greatly to their ultimate goal. There are strong relationships built between VH staff and community members to ensure support is provided to build capacity amongst the community. Staff members practice patience, active listening, and relationship building on all levels, and have a strong sense of the social, political, and economic factors that impact their work.

Elements of VH's Holistic Approach:

While the timeline and activities within each community vary, VH has core elements to it's holistic approach that are often carried out in most of the program areas. During our visit, we learned about 5 of the core elements that include:

I. Maternal and Child Health: AIC and Early Stimulation Sessions

Since 2014, VH has explored adding projects in their scope that address maternal and child health, specifically the development of children under 5. After review of existing programs, in 2015 VH piloted the AIN-C and Early Simulation (ES) Sessions, which became a part of their scope in 2016. The AIN-C program was initially created by the Honduran Health Ministry, but was never implemented in the remote communities in which VH works. This program was added to VH's activities as it addresses the needs of children under the age of 5. The first 5 years of life are critical in children's development and had previously not had a focussed program. The Ministry provides training to the community volunteers (Monitors) and VH ensures coordination between the government health clinics and the volunteers. The AIN-C sessions and ES Sessions take place on a monthly basis in one or two locations in a community depending on the population size.

The AIN-C sessions are run by the Monitors, who record and plot the child's height and weight on a growth chart. If a child's height and weight measurements are inadequate, parents are connected with the Health Centre and provided support to facilitate the child's health range. Monitors will often communicate between the health clinic and the parents to get health advice and save a considerable amount of time for the parents as the health clinics are often prohibitively far away by foot.

The ES Sessions are run by Mother Guides, usually on the same day as the AIN-C sessions in order to save time for mothers. Children are divided into different age ranges and work on age appropriate stimulations and activities. Essentially, the Mother Guides demonstrate different ways that the mothers and family members can play with the children that will help with the children's development. The Mother Guides received training from Developmental Specialists from the Association "*Arca de Esperanzas*" of Tegucigalpa.

After these two activities there can be different talks let by the Mother Guides and Monitors on topics around the preparation of healthy food, healthy homes, and healthy families. Topics such as the importance of vaccinations, diarrhea treatment, water treatment, and how to detect respiratory problems and other illnesses are also discussed in this space.

II. Healthy Home Environments

Creating Healthy Home Environments has been a key component of VH's approach. The ultimate goal is to increase the health of the built environment on a household and community level. Workshops train community members how to build improved smokeless stoves from local materials, along with training on maintenance and repair. Smokeless stoves have been a key component of community engagement and collaboration amongst community members because individuals that attend initial trainings are also trained to support other community members to build their own stove.

The train the trainer (TTT) model is used for other Healthy Home initiatives such as rainwater harvesting, building walls and dividers in homes to reduce the spread of disease, reducing mosquito breeding grounds through community clean ups, building kitchen storage cabinets to keep food safe from contamination, using silos for safe storage of grain, and other topics that may be relevant to any given community based on their local needs.

III. Agriculture and Food Security

Agriculture is an important part of life in the Valle and El Paraiso District. VH works with local farmers to explore sustainable agricultural techniques rooted in local knowledge and tradition. Through agroecological farming, VH empowers community members with training and techniques that help increase food security, which is critical is drought prone regions like the Valle District. Various training programs are held that include topics such as crop diversification, nutritional values of crops, innovative and traditional techniques that build resilient farms, and introduction to crops that adapt better to the new environmental conditions in the region.

The agricultural and food security project is strongly linked to the the maternal and child health project. Staff pay special attention to foods that promote the health and wellbeing of children and support families in establishing food sources that can improve the health of household members. For instance, in one community we were given a refreshing drink of local seeds and water that is high in iron, that also helps children gain weight. The interventions used to facilitate weight gain in the maternal and child health project are grown locally, except for one cereal that is imported from Nicaragua due to the quantity that is needed in some communities. Further, VH is committed to connected with local traditional knowledge sources in agriculture and food storage. Often times, VH is able to help communities identify crops in their region that are not being used and share the benefits and potential use.

IV. Youth Enterprise Initiatives

Migration and unemployment are challenges across the country. VH's holistic approach includes economic empowerment of all community members, especially youth. VH has numerous training programs for young people to start businesses that also meet community needs. For instance, VH recently saw that the use of motorcycles in the communities where they work has increased in the last 4 years. While city centres are far and repairs and maintenance are inevitable, VH trained youth on how to repair motorcycles and helped them establish their local business/service. Another example is that VH's agricultural and food security program promotes grain storage. To address the need in the community, VH developed a training session for youth to build and sell the silos that are used for grain storage. The ultimate goal of the sessions is to ensure youth are able to earn while meeting the needs of the community, and if desired can save money for furthering their education. The development of training topics are innovative, but some of the current trainings include plantain chips production, bread production, sewing, honey production, cornmeal production, pulp production, silo construction for grain storage, painting, cellphone repair and motorcycle repair. These trainings are not limited to youth, but there is a strong emphasis from VH to develop youth engagement and economic opportunities.

V. Water and Sanitation

Water Boards and Health Boards work together to solve water and sanitation issues particular for each individual community. This can range from digging wells, storing water, running pipes, household water storage, creating latrines, and water treatment depending on the community. See notes below on the current challenges of access to water, shifts in rain water due to climate change, and the quality of potable water sources.

VI. Household Relationships and Division of Labour

VH has a strong emphasis on building stronger communities through exploring household and community relationships and the division of labour. Staff are highly skilled in working with community members to explore such themes with a strong emphasis to meet people where they are at. VH has many structured sessions and projects that support staff in this process. For instance, when VH starts work in a new community, early on they conduct a 'school for parents' where both parents attend to discuss household relationships and explore the division of labour. Initially these meetings are held monthly and then slowly become further apart as other training sessions begin. Another program that VH facilitates is the Siempre Viviras

program, which is a 19 week program that focuses on exploring household relationships and gives space to community members to redefine what their healthy balance looks like, while providing new skills, information, and knowledge on how to make those shifts. In this session, visual gender analysis tools are used to help explore current the division of labour, roles, and responsibilities. When exploring the transformational element of the VH program's, projects such as these build the long term sustainable change that we witnessed in many communities.

It is worth noting that everytime we discussed a scope outside of the current WNC funded project, we discovered that there are so many additional elements to VH's holistic approach. Therefore, this list should be read as a draft and not a final overview of the organizational approach. We encourage future visitors to continue to explore scopes outside of our funded projects to continuously grow our understanding.

Role of Monitors, Mother Guides, Health Committees and Health Centres:

The MCH initiative activities are implemented by different types of community volunteers in each community. Each position plays a distinct role in the implementation of the AIN-C and ES Sessions, and maintain different levels of communication with the nearest government Health Centre. **Monitors** are trained and certified by the Ministry in [AIN-C] and conduct the weighing sessions and have a strong relationship with the Health Centres. If required, Monitors will send mother and children to the HC for follow-up or provide best practices for addressing any health related concerns. **Mother Guides** are trained by developmental specialists from the Association "Arca de Esperanzas" of Tegucigalpa, and run the Early Stimulation Sessions in the community. Mother Guides and Monitors often work very closely and host sessions on the same day to increase participation. **Health Committee Members** are formed with the support of VH and lead work with the local health clinics to support healthy homes, vaccinations, community health emergencies and sanitation. This role is not the same at the Health Committee Members that was previously formed via regional government.

All three volunteer groups work closely with one another within a community. Monitors and Mother Guides often work together and host their sessions on the same day in order to increase participation. Often, both follow-up with families who are not participating in the sessions and provide encouragement and motivation to join, or discuss noted barriers with the VH regional team in order to problem solve and mitigate challenges. Over time, VH builds capacity and encourages the various volunteer groups to regularly collaborate and become advocates of health in their communities. In one community, this was recently done by creating a sectorial committee made up of a few representatives from each volunteer group from various neighbouring communities. The committee organizes

monthly meetings to hold space to discuss larger health related concerns, strategic plans, and leverage support for specific community needs.

Impact of Maternal and Child Health Project: AIN-C and ES Sessions

It is evident that the Maternal and Child Health Project has greatly impacted the health and wellbeing of children, mothers and families, and volunteers. The actual impact may be much greater than what is reported here and is beyond what can be captured in a short visit. This level of impact can be explored in future process or final project evaluations during or after the life of this project.

Children's health

The sessions have greatly impacts the health of children through decreasing barriers to access health care. Monthly monitoring sessions in the community, where weight and height are charted, have helped identify children who are underweight or have suddenly lost weight. Trained Monitors assist with follow-up to ensure the mother has the skills, resources, and knowledge to help facilitate the child's return to a normal weight. Monitors do this by connecting mothers to the Health Centre when needed, and providing health literacy talks and one-on-one support. Community members are proud to report that their children have adequate weight and growth (the exceptions are children with chronic health problems). Mothers reported that they now know it is important to monitor their child's growth regularly to make sure they are growing properly. They also report they now know how to improve their children's diet to help them grow.

The fact that weighing sessions take place in the community have helped engage mothers. In most communities almost all families with children under 5 attend the sessions regularly. This was not the case when mothers had to walk to the Health Centre for weighing due to the distance and long disruption in their day. Because the distance was often prohibitive they would only go the HC if it was an emergency which resulted in erratic records.

Similarly, the ES sessions have a significant impact on children. Various stakeholders stated that there are observable changes in children. Time after time, we heard that children are less timid and shy, and are more outgoing and engaged with other children and adults. Many mothers reflected on their experience of raising previous children and now children who attended sessions and noted that under 5 development occurred quicker for those who attended sessions- they walked faster, talked earlier on, and are overall more playful and engaged. The greatest change has been observed by school teachers in the community who see a clear difference between children who attend the sessions and those who do not. Teachers report noticing the difference in the children who have been part of the

stimulation process as they are better prepared and more advanced than the other children.

Increased levels of confidence amongst mothers

It is evident that the AIN-C and ES Sessions have had a positive impact on mothers and their level of confidence when it comes to parenting. Mothers felt they had gained the skills and understanding needed in order to adequately engage in their child's development. Specifically, mothers shared how the talks on nutrition, best practices for raising children with compassion, advice for children who are fussy eaters, and the importance of breastfeeding were valuable and in turn gave them more confidence when it came to their child's health. This was true not only for first time mothers, but also for mothers of multiple children who did not have access to such programs prior. Many mothers shared that they wish such programs were available in their community when they had their previous children.

Many Monitors who were added into the program after the initial training are mothers who regularly bring their children to the sessions. Mothers saw how critical the sessions were to the development of children in the community, including their own and when additional support was needed, say if a Monitor or Mother Guide needed to step down due to pregnancy or other reasons, other mothers were happy and proud to take on the role. Women's participation in the sessions gives them a pathway to become community leaders and the foundation of that transformation is their level of confidence in themselves and the project outcomes.

Strengthened intergenerational relationships in households and community

Through our conversations, it was clear that the sessions have strengthened intergenerational relationships between women both in the household and the community. On the household level, we met a number of teens of Monitors, Mother Guides, or Health Committee Members who are now have a volunteer role themselves, or shared they aspired to be one. Many of them had attended the meetings out of curiosity or to help their mother and when an available position became available they volunteered. Often, they shared that their mothers involvement inspired them to join because they see how important the work is. On a community level, we quickly saw the mentorship that takes place within the sessions between all participants, from children, mothers, to volunteers. Mothers ranged from 13 to their 30s, and volunteers ranged from mid-teens to elders. This is a space where intergenerational knowledge and connection is shared and celebrated. Elders take pride in the fact that youth are in the volunteer spaces, and youth take pride in the fact that they can take on such important roles.

We couldn't help but be distracted at one of the weighing sessions by three young children, 2 girls and one boy between the ages of 2-4, who were pretending to be monitors with their stuffed animals. They took turns weighing and measuring their stuffies before changing their diapers and playing with them. These meetings were clearly an important part of the children's life.

Space of connectedness, especially amongst women

The AIN-C and ES Sessions play a critical role in community wellbeing and connectedness, especially amongst women. Despite living in small communities most of the mothers admitted they didn't know the other mothers in the community. When asked if interactions amongst women has changed since the sessions, women often stated that prior to the sessions they would greet others in the community, but now feel they have more to share with one another. While many did not share if interactions and visits outside of the sessions have increased in informal spaces, they did note that the space to interact once a month meant they could be a part of each others lives and share their experiences with one another. This space not only facilitates the wellbeing of their children, but rather is a significant source of belonging. This is especially the case for new mothers, who likely moved from their childhood home to their husband's community. This space gives them an opportunity to build relationships with individuals outside of their husband's immediate family.

This sense of connectedness and belonging among women has many unexplored outcomes and impacts. The relationship between community belonging and mental health is well documented in the research literature and was a strong finding from the Maternal and Child Health mid-term evaluation in Nepal for this project. Level of connectedness and belonging can also be linked to long-term outcomes such as increased participation in community leadership. When people and communities have safe spaces to organize, prioritize, and connect based on their lived experience, there is a greater likelihood of establishing the roots of a collective vision. We saw this in El Lagoon, where community volunteers formed a sectoral committee that oversaw the development of their region, giving them a space to create a regional strategy and solidary.

Gender Equity and Empowerment:

VH has a strong organizational commitment to gender equity and empowerment. In order to ensure community development is equitable, there is a great deal of emphasis placed on understanding community dynamics, social norms, and access and control over resources. In order to fully understand the gendered component of VH's work, a greater understanding of their work outside of the current Maternal and Child Health project is required. Below are themes that we explored through this visit.

Involvement of men and other household members

In approximately 60% of our conversations we asked community members and volunteers how involved men were in the Maternal and Child Health project activities. Specifically, do men attend the sessions with or without their partner, do women share what they learn in the AIN-C and ES sessions with their partner, or do men engage with the stimulation exercises that mothers are given?

The majority of women stated that men do not attend the monthly sessions, but many women did share what they learned with their husband in the household. While most women shared that husbands participate in the stimulation activities at home, some shared that their husband's also accompany them to sessions from time to time and play an active role in their child's development. It is critical to note that when we look at the larger framework of VH's work, men are engaged in their children's health and wellbeing through their dominant role in agriculture. VH's agricultural training and crop diversification is heavily grounded in men who are grounded in the traditional division of labour, it is important to understand that VH pays great attention to household dynamics and are committed to creating change little by little. For instance, VH has a training session titled, *Siempre Vivares* where participants work through a 19 week long program that explores household dynamics, self-esteem, the importance of equity and exploring the division of labour within a household and community. This change will not happen overnight, or within a 5 year MCH project, but rather can happen over the course of the entire VH program of 8-10 years.

Leadership in the Community

The role of Mother Guides and Monitors are held predominately by women and it is evident that these roles play a critical part in health and well-being of children, mother's, and families. Further, such roles have the potential to shift women's participation in community leadership positions. Ultimately, the program activity of establishing the volunteer positions have created new leadership positions within the community that women are actively a part of. While social culture and stigma still exists and impacts their lived experiences, women are able to take such leadership positions that have no history of patriarchy attached to them. Women can determine the terms of their leadership and develop systems and structures that work for them, not necessarily adapt to systems and roles created by men. Therefore, such spaces of meeting and organizing have the potential to develop stronger personal leadership skills and include women in other community decision-making processes. VH already ensures that Mother Guides and Monitors are integrated and connected to existing health services in the community, including existing committees and in some communities actively take part in regional-level advocacy for the maintenance of government funded health services.

Gender policy and organizational practices

VH has an organizational gender policy and guidelines that were developed with research, outreach, and strategic organizational reflection. The majority of staff members are trained on exploring community division of labour, including gender. Activities that explore gendered division of labour, access and control to resources, and roles and responsibilities are conducted within community setting. One tool that was shared was reflecting on each hour of the day to explore division of labour and responsibilities with households. From this, VH learned that women often are the first to wake up, and compared to men have fragmented daily schedules that switch from one task to another, whereas men spend more time doing one chunk of work. Such understandings inform VH's work in all fields.

It is evident that there is a strong organizational commitment to ensure gender complexities are understood and mitigated in their programs. During a debrief with one of the regional teams, staff mentioned that they are aware that this project does not decrease the burden of responsibility placed on women, rather it increases their social responsibility on top of their reproductive and productive roles. However, staff are confident that in the long-run, through programs like *Siempre Viviras*, household division of labour will shift. VH invited WNC to share any resources that may increase their understanding of gender dynamics.

Key Challenges:

Access to Water and Climate Change

Access to water is a particular concern in the Valle District. It is in the "dry corridor" which runs through Central America and has been hit with recurring droughts over the past five years. Water resources in the soil are currently low and at the time of our visit the rains were three weeks behind schedule. There were concerns that the spring plantings would be lost and that there was a risk of famine. VH has been working with farmers to diversify their crop to include more drought resistant crops. Further, there is inequitable access and control over resources between commercial operations and local farmers. For instance, commercial agriculture of watermelon and sugar cane, both which are crops that demand high quantities of water, thrive in the Southern districts. Such corporations own the majority of water rights and wells. It was noted that some mining operations have polluted the water sources in the region.

Communities that VH works with have a varying needs for water. While some have worked together to dig wells that are closer to the communities (in one case it took three attempts to find water), others are still using wells that are far from homes resulting in the women spending anywhere from 20 to 40 minutes one way to collect water. Communities put restrictions on well water extraction in order to ensure the source is adequately replenished. In many communities, the quality of water was a significant concern. When asked which VH training was most significant to community members outside of the maternal and child health project, the majority cited the training on water treatment. It should be noted that not everyone who attends the treatment training treats their water. This is for cultural reasons and/or because of taste.

Migration: Local and International

Local and international migration has impacted various communities in Honduras, especially in the Valle District. While migration is deeply rooted in the historical injustice caused by international relations in many Central American countries, some push factors that were noted during our visits were climate change and the impact on agriculture, gang violence, mistrust and indifference towards the government, unemployment and the lack of economic opportunities in the community, particularly in the Valle District where many farms work as manual labourers to supplement their incomes.

In the Valle District we met many children who were staying with extended family members as their mother or father had left the country to try to find work. Some families in Honduras depend on remittances that family members send back, while other may not receive such support. There was a large number of single mothers raising their children while their partner left the country in search for employment. In such times, VH's work is critical in supporting community level development and structure.

Varied Program Acceptance Between Communities

One of the greatest challenges with a participatory capacity-building program is the time and resources that are needed to gain community buy-in. The process of trust building takes time and patience, and for that reason there is varied acceptability and buy-in in each community that VH works with. For instance, in Calaves Dos, where VH recently expanded its program to, there are challenges with community buy-in compared to other communities. The key supporter that invited VH into the community moved and the process of building trust and buy-in will take time. Whereas in other communities, where VH has worked for at least 3 years, the community trust and buy-in is strong. As a consequence, there is a great deal of pressure that is placed on Monitors and Mother Guides in communities where buy-in is low; volunteers take the lead in not only coordinating and hosting sessions, but also in promoting the VH approach. Currently, VH regional staff provide additional support to volunteers in this community and more details

will be shared in upcoming reports on how such challenges are mitigated. Ultimately, the level of community trust and buy-in increase the longer that VH is in a particular community. It should be noted that our visit did not explore in-depth the processes that are used to develop community buy-in in the first 3 years of VH's programs. This is an area that should be explored in future visits in order to learn about the participatory tools and methods that are used in the earlier stages of a program.

Teenage Pregnancy and Education

In some communities, teenage marriage and pregnancy are common. It is not uncommon for young adults to start families when they finish school. As the majority of community schools only go until grade 6, and in some cases grade 9, many adolescent girls become mothers quite young. When asked "How old were you when you had your first child?" In the Caveles Uno group meeting, 19 women self-reported ages between 13 and 27 with an average of 19. Similarly, in La Libertad, 17 women self-reported ages between 14 and 23 with an average of 16.9. VH staff believe that if education is available and girls are encouraged to attend, the rate of early marriage and pregnancy may drop.

VH staff shared that one of their upcoming priorities is to focus on projects that can help facilitate pursuing education beyond what is available on the community level. There are distance education programs, where students in a community collectively find a designated facilitator in the community (minimum requirement of a Bachelor's degree) for grade 10-12. We met a few students who participated in such a program. VH also provides funds to the Rural Bank to ensure students that wish to pursue such programs can apply for a 0% interest loan in order to pay for fees, facilitator fees, and books. VH is exploring a program to set up scholarships for youth who wish to complete further education.

Opportunities for the Future:

Vecinos Honduras identified a few opportunities that may be of interest for future projects or activities.

- 1. There was interest from all stakeholders to expand the MCH initiative to include pregnant women. Staff have been looking at how to include health training in the program and ensure that topics are relevant and applicable to women during their pregnancy. There are opportunities in the future to include discussions on the connection between, education, pregnancy and sexual health in the trainings, although it was noted that often times parents are resistant to providing such training to adolescent youth.
- 2. There are limited education options for students after grade 9. Continued Education is by correspondence and has a number of expenses, one of which is that someone

- must be hired monthly to meet with the students. Any education past grade 12 must be done away from the community and is often cost prohibitive. VH is looking at ways of helping with those costs and/or offering scholarships.
- 3. Vecinos Honduras in celebrating their 10 year anniversary in 2019. The organization will host various celebrations in the communities they work through the spring and summer, with a final celebration in Tegucigalpa in August. We have been invited to attend. If a representative cannot attend the celebration, WNC should explore organizing a celebration when the VH team is visiting in Oct 2019, with the possibility of a fundraiser event.

In-Depth Summaries from Community Conversations:

Sembrando Esperanzas (Sowing Hope) Program, Valle District (1 Day)

El Sobron: Child Under 5 (Family and Monitor)

Angel Castillo is looking after his granddaughter (under 5) with the support of the child's aunt, who is 11 years old. The child's mother immigrated to the USA. We also had the opportunity to speak with Ramon Rineda, who is a Monitor and also Angel's neighbour. Ramon shared that the sessions have significantly impacted the health and wellbeing of children. Angel's granddaughter was underweight and through regular weigh-ins and follow-up has been able to reach an adequate weight. Her progress has come with challenges; when she would visit her mother's paternal/maternal home (it was not clear if this was her paternal or maternal home) she would lose weight and slowly improve when back in El Sabron. Ramon has been an active volunteer in the community since 1984 and specifically with VH since 1994. He believes that it takes a community to create an environment of wellbeing for children and says it is important to build capacity and not dependency. A key part of his role as a Monitor is to visit families individually and continuously promote the importance of weighing and early stimulation.

One of the key challenges noted in this dialogue was the shortage of water and impacts of climate change. Angel and his neighbours were manually digging a well on Angel's property that was currently 10 meters deep; they were hopeful that in the next 2 meters there would be water based on the moistness of the rocks. The current potable water source is 0.5 hours away. All community members at this meeting noted that the rainy season is delayed every year, leaving the agricultural cycle unpredictable. Although VH has helped introduce crops that require less water and are optimal for dryer conditions in an effort to mitigate the impacts of climate change and increase food security, the situation worsens each year.



El Trapiche, Improved Home and Stove (Family and Monitor)

We met with Nery Mardonado and Annie, who are both Monitors in El Trapiche. They signed up to become a volunteer at a community-wide meeting that VH held to explain the project and ask if community members were interested to volunteer. Both noted that the sessions have impacted mothers; in the beginning mothers would not play with their children in the sessions, but overtime their level of interaction has changed. Children are always less timid and shy. Both noted that initially there was resistance from some men in the community who felt that the sessions were keeping women from their household tasks. However, overtime everyone sees the impact that the programs have on children and their resistance disappears. Children are more likely to socialize in their household settings and fathers can see those changes. Some fathers will accompany their wife to the sessions, especially those with more than 1 child. Both Monitors would like to also provide healthy snacks for the mother and children during the sessions as a way to promote healthy eating. Nora also keeps the medicine kit in her house. When asked if it disturbs her routine, she stated she is happy to provide support to anyone in the community even if it is at 10pm.

Everyone in this community is working on the Healthy Homes program and now have an improved stove. The construction of the stoves are a community effort, where approximately 7-9 women get together to build one stove per day. The impacts are significant: there is less smoke, decreased likelihood of respiratory illnesses, and less wood is required to cook the same meals. One individual noted that the one downside is that the stove can no longer be used to BBQ or grill corn, however felt that the improvements outweigh the downside.

El Picacho | Mother Guides, Monitors, and Health Committee Members

We sat down with 4 Mother Guides, 4 Monitors, and the regional VH staff to hear their experiences of the MCH Project in their region. We heard from different communities that the program has significantly impacted mother, children, and the volunteers. The program decreases barriers for mothers in regards to accessing critical information needed to monitor the development of their children. Mothers no longer have to walk to the HC and can regularly monitor their children's weight and have access to information, such as nutrition and feeding to implement change with support from Monitors. Children are less timid and shy, and are not only communicating more, but also asking more questions and engaging in the sessions. Volunteers also noted that their dialogue with school teachers is a reminder of the impact that the sessions have on children. Often, teachers notice significant developmental differences between children who have attended the sessions vs those who have not. The Monitors feel that their skill-sets have improved through the training, leaving them feeling more confident with a toolkit of techniques they can share to facilitate the wellbeing of children. Many Monitors shared that initially they thought the role was going to be too much work and were unsure if they would like it. However, many now take pride in their role.

The communities are prepared for when VH leaves and stated that they will continue the work afterwards especially because they already have the training and skill-set required. Many shared how critical VH's support was to their success and highlighted that they did not want VH to leave. The region has been able to work with VH to mitigate many challenges when launching the program including: resistance from mothers who thought the sessions were a waste of time; men who were resistance to participation; and helping community members prioritize the sessions vs other workloads. Volunteers also expressed the challenges of the water crisis in the region.

Volunteers expressed that the division of labour on the household level is critical to examine and highlighted that tasks are often based on definitions of masculinity; "Men drink water and need it for cleaning, but they will not carry it because they'll likely be labelled as not being manly enough."

Gauramas Program, Valle District (1 Day)

Malpaso | Child Under 5

Nora has been a Monitor for 2 months and has been taking her child to the AIN-C and ES Sessions for the past 4 years. Her motivation to join was to serve her community and ensure the support was still there when a Monitor had to leave their position due to a pregnancy. To her, weighing children and regularly monitoring their progress is critical to the child's wellbeing. She knows first hand as her child was under weight, and through support was able to facilitate her child's weight gain. Nora noted that the majority of families with children under the age of 5 attend the sessions regularly (12 out of 15 families). Nora's participation in the sessions has had an impact on her eldest daughter, who also wants to become a Monitor when she is older and accompanies her mother to as many sessions as she can. The sessions also have a significant impact on the children, mothers and volunteers.

Mothers feel more confident parenting by learning new techniques in the talks; children and mothers have stronger relationships and bonds; mothers have stronger bonds amongst each other; community leaders learn to be more present and develop their critical thinking skills and how to form their thoughts and opinions and express them in meetings; volunteers develop their facilitation and capacity-building skill set; and children are less timid/shy and more engaged

Nora also participates in various VH projects, such as Healthy Homes and water. One thing she has learned through her participation in various programs is process of prioritizing the development of her home. Nora stated, "there are so many things that we can do, but we can only do so much as once. I prioritized the interior of my home and my garden, and then built my stove next." Nora shared that her improved stove requires 2 logs whereas the previous one required 12 logs to prepare the same quantity of food per day. She also shared how her community organized to build a water system. Many families previously filled their water tanks from Nacaome through delivery services that cost ~ USD 15/tank. VH initiated the conversations and provided a cost comparison of what families were spending and how much they could save by building a system. The community's current priority is water treatment, and shifting the process from the household to the reservoir tanks.

El Rincon | Child Under 5

Sadie and her toddler have been attending the AIN-C and ES Sessions for the past 4 months. Sadie's child is known as the miracle baby in the community. He was born 6.2

weeks premature weighing only 2 pounds. After the emergency delivery, he went through two surgeries and months of follow-up in Tegucigalpa and Nacaome. As soon and this follow-ups concluded, Sadie started bringing him to the sessions. Sadie was 15 years old when she had her child and moved to the community of her husband after marriage. Her husband currently is in the USA under custody and waiting for deportation. Sadie's child is still underweight and is slowly making progress; in the last month he has gained 1 pound from masiqua cereal. Sadie stays for the talks after the sessions and feels closer to the other women in the community. The support network she gains through the sessions is critical for her. Her child started walking in the sessions and Sadie really appreciates how he has the opportunity to interact with other children. One noted challenge that Sadie expressed was that she does not have a natural source of milk to provide her child and struggles to obtain adequate quantities of milk to feed him.

Guanacastillo | Child Under 5

Selma is a mother who participates in various VH projects, including child nutrition sessions, agriculture, gardening, improved stoves and home environment, and sits on various committees that address community-wide wellbeing. She shared how many of her neighbours strongly resisted participating and said she was wasting her time, until they saw her garden and then would ask her for lemons and other produce. She would use that opportunity to encourage others to start their own gardens.

When VH started, there were no fruit trees in the region. Selma values the knowledge and training VH offers: "You don't think about these things until you have someone who comes in to help you think of all of these options that are available."

Overtime, Selma has also convinced the pastor, who also strongly resisted the program in the beginning, to start attending sessions. She is an incredible example of the level of change that can stem from training community members through capacity building models, where their involvement becomes the source of example and possibilities for others.

The change Selma sees in her community is significant. People have changed their behaviours around littering on public streets; the household mentality of families has changed; homes are organized to maintain optimal health for all; stoves have reduced respiratory illnesses; her family members get sick less; her food sources have shifted to home-grown than buying; food security is prioritized through projects such as building silos for grain storage; children's health and development is being monitored and supported; specific funds are available via Rural Bank to improve homes; and her own confidence has increased drastically.

"If this was me before my participation in VH, I would be in the room hiding from you and not have agreed to meet and participate in this discussion."

It was also noted in our conversation with Selma that a batch of government stoves were given out as gifts. In some communities they did not work at all and are used as tables instead. Currently, the government has a funded project that provides financial support to build improved stoves and training to do so. Although the stoves are more expensive compared to the VH model because more nonlocal materials are used, VH staff expressed that as long as families have the outcomes will be achieved regardless of which model or program a family chooses to participate in. The community is skeptical of government support based on false promises that have been made, such as encouraging farmers to grow sesame with the promise of purchasing the produce, but later never coming back to follow-up once it was planted and sent in a third party company who offered half of the original promised price.



El Lagoon, Meeting with Mother Guides, Monitors, and Health Committee Members

We met with representatives from 6 different neighboring communities, 3 Mother Guides, 5 Monitors, and 6 people who sat on various committees including the Health Committee and Water Committee. Throughout the duration of the meeting, there were approximate 23 female and 2 male of all ages from elders, adolescents, and a few children.

Impact and Participation:

Participants expressed that the MCH Initiative and VH's work in their communities has had significant impacts on health and wellbeing. Volunteers are involved in various VH initiatives. In one community, the Health Committee was currently working on a community-wide clean up initiative that strategically engaged school aged students, who not only helped with the clean up, but also were encouraged to think of behaviours they could change to ensure the community stayed clean. Water committee members noted that waterborne illnesses have decreased in communities after their work, however more efforts need to be made in specific communities that do not have treated potable water. Another community highlighted how the lack of water has impacted them; the community collectively dug 3 wells with the support of the government in order to find an adequate water supply. Further, medical kits have made an impact on some communities. One Monitor shared that sometimes the Health Centre nurse is out of medicine and she tells patients to come to the medical kit for supplies. Hosts of the medical kit collect a small fee for the medicine and use that to replenish the supplies. When asked if it is an added burden, this monitor replied, "Sometimes people come at 10:00 pm, I do not feel bad I know it is it important and I will help them."

Community Mapping:

One of the tools that the committee presented was their community mapping exercise. Volunteers work in partnership with community members to draw out a map of their community documenting important indicators such as location of households, water tanks, latrines, tin roof vs tile roof, chicken pens, farm, important public buildings, roads, water sources, the number of people in each household disaggregated by sex and age, households with children under 5, and which households are participating in VH programs. This map is updated on an annual basis and reviewed with the community. This tool is used in all VH programs and is a significant activity to not only document process, but for community members to be involved in the process and take ownership of their work.

The use of such participatory tools, that require extensive time highlight the foundation of VH's approach- **to build community capacity**.

Coordination: Sectoral Committee:

There is strong leadership capacity built across the region. Mother Guides, Monitors, Health Committee Members, and Water Committee Members created a sectorial committee for their region, where representatives if each committee from each community meet once a month. While the committee is still new (formed April 25th 2019), their goal is to create regional strategy, advocate for funds when needed, and find ways to ensure community volunteers are supported. This decision was made by the communities to ensure there is support in place when VH leaves the region. This structure is a key role in sustainability.

"When we organize together, we can achieve more for our communities."

It was evident that women in this region were empowered to actively participate in decision-making and community development. All women came to the meeting with notebooks and pens, collectively organized a slideshow presentation, and all women spoke with confidence, provided feedback and suggestions when ideas were shared, and genuinely were engaged in the space. Prior to the sectoral committee, community volunteers have worked together to organize, take initiative to defend their rights to development and basic rights. For instance, in 2017 the government proposed to shut down the Health Centre in El Rincon, which the community found out only when the doctor mentioned he would no longer to available in this Centre. The community volunteers organized and wrote letters to the Ministry to advocate for the Health Centre expressing how important it was for their health and wellbeing. Through their advocacy, the Centre remains open. This is a concrete example of how community volunteers, mostly women are able to create spaces that are critical in community wide decision-making processes and leadership. This is the result of long-term support in capacity building from VH.



Michael Newman Project (2 Days)

Caleves Uno | Mother Guide

Jessica Lagos has been a Mother Guide for 2 years, and is a mother of 3 children ages 7, 9, and 2. Then, there was 1 Mother Guide and 1 Monitor, and today there are 3 Mother Guides and 4 Monitors in the community (2 men, 2 female). Jessica also invited one of her friends who is a teacher in the community to join the program as a volunteer as well. She shared, "I don't like to call my role work, I really like it a lot. It's a part of being a part of the community." Her love for children inspired her to take on the role. For her, it is an opportunity to see how children develop and grow within her community. From her experience, the greatest impact is that children who participate in the ES sessions have transformed from being timid and shy to being outgoing and openly interacting within the

group setting. There are ~70 families in the region and ~40 families with children under 5 who participate in the program. On average ~30 mothers attend each meeting.

Jessica noted that many mothers have also gone from being shy and not interacting with the children while they played in the sessions to now being actively involved and more conversational. She expressed how initially many mothers initially did not understand the concepts and thought the Mother Guides were the teachers and they'd sit on the sides. Things have changed from then to now. Jessica is a trusted amongst women in the community who often come to her with various child health related questions.

Local teachers have noticed that students who participated in the ES sessions are more likely to learn to read faster than children who did not and are much less shy.

It was recommended that health literacy should start when women are pregnant to reinforce the importance of early stimulation and nutrition. In the current capacity of the project, pregnant women are not included in the scope. Jessica and other mentioned that they invite pregnant women into the session spaces, and at times they encourage pregnant women to talk to their babies and play music. More can be done in this area.



La Libertad | Monitors

This community of 4 monitors was a strong example of the intergenerational mentorship that takes place through such volunteer roles. A mother, daughter, and niece were all current Monitors. In the beginning of the program there were only 2 Monitors, but it was evident there was a need for more to ensure volunteers had manageable workloads. Inspired by the work of the their mother and other monitor in the region, the daughter and niece decided to join. They all expressed happiness in taking on the Monitor role and shared that everytime they see that children are within their normal weight they know they are doing their job. If a child is underweight, they support the mother by helping to explore their routines and see where they can possibly make improvements and provide support. There are families who still have to commute for up to 1 hour by walking, yet they still show up to every monthly check in and are usually the first to arrive.

The greatest impact noted is that the children are more outgoing and less timid and shy on a community-wide level. Further, there is a sense that overall sickness amongst children has decreased since mothers often implement health related advice that is given to them. Mothers are happy they do not have to take their children to the health centre as often, unless it is required, which is a 2 hour walk (5km). Further, the connectedness between mothers has increased since the program.

The younger monitors enjoyed the training and discussions on children's nutrition and are fascinated by the ways one can tell a child is malnourished. They also were interested in learning about how important the first meal for a child is and sharing all of this information with mothers. When asked if the younger monitors had a difficult time establishing trust with mothers, they stated that it wasn't that the mother's did not trust them or the advice they gave, but rather it took them time to feel confident in their own abilities. Yet, with the mentorship provided by the other 2 monitors and the ease of using the resources provided to Monitors, both are now comfortable giving advice to mothers. They feel this is their opportunity to prepare for when they are mothers.



Flores Dos | Monitor and Health Committee Member

This was a household of female health leaders and volunteers. The mother is the president of the Health Committee and her eldest daughter Jaime, who is 20 years old has been a monitor for 2 years. The mother has played an active role in the community as a previous Health Guardian, where her role was to visit and encourage pregnant women to follow-up and conduct regular check-ups with the Health Centre. When the opportunity to become a Monitor came up, Jaime's mother encouraged her to join.

Jamie previously worked in a Kindergarten class so the Monitor role was a natural fit for her skill-set and interests. The role has had an impact on her own confidence. She remembered feeling extremely shy and nervous when she was asked to conduct the baseline survey, where the Monitors visited every household with children under 5.

However, she quickly realized how important it was to build trust with mothers and the value of visiting mothers in their household to both learn and share. She feels that the mothers in the group are very interested in the talks and have a good relationship with one another; if one mother cannot join the session, they will share information with each other afterwards.

"As long as I live here, I will be a Monitor."

The Health Committee plays an active role in coordinating health improvement projects in the community. The group organizes community-wide clean up initiatives, where they partner with the local police department who helped transport the collected garbage, the local schools to educate and engage children in the importance of a healthy community environment, and local citizens who help with the clean up activities. The committee has also played a critical role in advocating to the government that a Health Centre be built in their community. While they were advised that no funding is currently available for such an initiative, they are committed to continuing their advocacy in the upcoming year.

Currently, the group is working with the nearest Health Centre nurse to coordinate a vaccination campaign in their community in order to decrease travel barriers. The committee encouraged families to pay 10 Lempiras each to pay for transporting the nurse to and from the community and any additional costs. Although some community members have resisted, the majority agree it is worth the small fee. The committee expressed that if they saw another way to get the same outcome of increasing vaccination rates, they would gladly accept it, however this is currently their best option. The committee has learned that community buy-in can be increased by building a stronger relationship with the health providers, who can share why such initiatives are important.

Jamie is also participating in an alternative education program to complete grade 12. The distance education model is overseen by someone in the community and VH gave funds to the Rural Bank so students could get a 0% interest loan in order to pay for books, tuition, and the fees for the local person that must be selected to oversee the progress as per the model requirements. Jamie plans to continue studying and aims to become a doctor.

Caveles Dos | 3 families with children under 5 | Monitor

In Caleves Dos, we visited 3 households that were extended family members; all families had children under the age of 5 and one mother was a Monitor. Two families had twins under the age of 5, and Gena (Monitor) had a child under the age of 1. Both mothers, Lorena and Nely expressed that the sessions were important to them because knowing the weight of their children was key to understanding their development. Both husbands also expressed the same and were actively participating in the stimulation homework that the

mothers brought home after sessions. Husbands expressed that the sessions are critical for the wellbeing of their families and they support their partner attending, but find it difficult to take time to attend as well. Favourite activities amongst participants were developing fine motor skills and walking exercises.

The sessions have had a strong impact on the children and mothers. Nely shared that her children are learning through play and have developed a relationship of learning and supporting each other; when one child is incorrect the other will correct them. Further, children learn to be present and focussing by engaging in the stimulation exercises. Mothers most enjoyed the talks on nutrition, learning ways to deal with fussy children (i.e. diversifying food options to engage children), hygiene, and general advice for raising children. Both mothers expressed they enjoy visiting with the other mothers during the sessions and felt they gained a great deal of knowledge in the sessions.

Mothers expressed that the children learn to be independent and learn how to identify safe spaces. Initially, children were shy and would not leave their mothers side and now they actively play and engage with one another.

There have been many challenges in engaging and encouraging community members to join the AIN-C and ES Sessions simply because VH is new to this community and cannot leverage its existing capacity built as seen in other communities. Mother Guides do not attend all sessions and some community members are skeptical if such sessions are needed, especially husbands. Even though Gena was appointed by leaders in the community when VH approached the community and there was buy-in, it has not translated to direct community participation.

Gena knows that her role is critical and sees the impact it has on children and mothers once they start engaging, and is proud when she sees healthy children in the community knowing her efforts contributed to their health, however struggles to mitigate and engage with community members who are resistant to the program. There are mothers who are extremely supportive of the program and community-wide buy-in will come with time, especially when shifting gendered roles in decision-making. There are currently 4 men in the community who do not let their partners participate in the program. It's important to note that VH provides support in the capacity building processes and outreach with the community.

Gena shared that a lot of her time is spent to ensure that mother's do not feel judged or criticized in the process, but rather feel this is a partnership to share information that could support their children's health.

Flores Dos | Early Stimulation Session

The AIN-C and Early Stimulation Sessions were held at the same time, as they usually are in this community. When we arrived, Monitors were in the midst of weighing children and Mother Guides were setting up for their ES Sessions. On average, sessions are usually 2.5 hours- 1 hour for AIN-C; 1 hour for ES; and 0.5 for talks. There were approximately 18 women, 17-20 kids and around 4 who were newborns. In total, there were 2 Monitors, 2 Mother Guides, and 2 who were both Mother Guides and Monitors. Sessions take place in two locations to ensure the location is convenient for all. There are 12 children at one location and 14 at the other and all children under 5 in the community except 2 are regularly attending.

The goal of the ES sessions are to empower mothers by introducing activities that they can then carry out as 'homework' until the next month. Children are split into three groups (0-1 years; 1-2 years; 2-5 years) and session modules are progressive and build on the previous. During our visit, the group activities included:

- **0-1 years old:** floor mat exercises to encourage movement; guided walking exercises for those oler
- **1-2 years old:** colouring; sensory toys and identifying the shapes; identifying body parts
- **2-3 years old:** introduction group song; stretches and mobility; colouring of shapes & identifying big from small; craft activity- Mother's Day card.

The impact has been significant. Mother's shared that their children are less timid and more open to communicating and interacting with others. Mother's also feel more confident knowing the weight of their children and learning new ways to maintain their wellbeing. The Mother in the community have a positive relationship with the Mother Guide and often expressed that she was great with children and practiced a great deal of patience, which positively impacts the children. For Margarita, her dream has always been to become a teacher and the Mother Guide position has given her an opportunity to fulfil that vision.

During the weighing session, we saw children incorporating the session activities into their informal play time. Children were conducting simulation exercises with their teddy bears and creating their own weigh station for their toys.

Many of the Mothers and volunteers have actively participated in various trainings hosted by VH, including agriculture, enterprise/business, healthy home environments, and water treatment. Specific training mentioned were developing a business for plantain chips, bread production, and honey. Further, it was noted that many youth in the region would like to continue their education and VH is exploring ways to support such initiatives beyond providing funds to the Rural Bank that students can then access via a 0% interest loan.



Caveles Uno | Mother Guides, Monitors, Mothers, Children

We sat with down 19 Mothers, 2 Monitors, and 5 Mother Guides, along with VH's regional staff to discuss their experiences with the MCH project. There were also approximately 18 children present at the meeting as well. Volunteers enthusiastically shared their experiences in the program with us. One Monitor who joined 8 months ago shared how the weighing and stimulation sessions are critical to the community, and the support and training the volunteers receive from VH helps them deliver a stronger program. Volunteers had different reasons for taking on the role. One Monitor shared that her motivation to join was the relationship with VH and her trust in the organization. Another Mother Guide shared that working with children is her calling and the role was a perfect fit.

- Monitor

Mothers

The group ranged from first time mothers with newborns to mothers of many children. All mothers expressed that the sessions have been helpful to learn more skills and ensure their children are developmentally on track. One mother shared that she joined the sessions when we son was 4 months old and prior to the sessions did not know that he was underweight. With support from the Monitor and Mother Guide and guidance on local nutritious foods for the child, he gained adequate weight. Another mother with a 7 month old shared a similar experience. Many mothers of multiple children have noted a difference in the way their previous child were raised compared to those in the sessions; children in the sessions have learned to walk faster, talk earlier, mother is more aware of the food the child is fed, and children are less shy and timid. It was clear from our conversation with mothers that this space is extremely important for building community-wide connections and relationships amongst women. Many women shared that prior to these sessions, they would only greet others with a hello or bye, but now often have conversations that are much deeper.

The sessions have also impacted older children, especially the children of Mother Guides and Monitors. Volunteers expressed that their children sometimes read through their books and do some of the exercises, whereas some are interested to become Monitors and Mother Guides as well. Often, elder children accompany their mothers to sessions. Mothers shared that their favourite activities to do with the children at home are singing (especially the *periquito* song that is sung in sessions), dancing, and one mother shared her daughter enjoys playing 'boys games' such as cars and balls and she encourages her and also plays along.

VH Staff Debriefs with Regional Teams: El Picacho, San Antonio Las Guarumas & Michael Newman Project:

- The impacts of climate change are lived experiences for communities in the Valle district. While VH works on long term programming, it was noted that in the upcoming years strong protocols may need to be developed for emergency situations related to food security, famine, and other impacts from the climate crisis.
- Immigration has greatly impacted the communities in the Valle District. We suggested that it would be helpful to see immigration data, if available in preparation for upcoming grants.
- It is evident that the sessions not only impact the health of children, but have significant impacts on mothers to build their skill-set and gain confidence, relationships with other mothers, and stronger relationships with their children.

- It was noted from staff and communities we visited that they would like to see pregnant women included in the sessions. Some modifications/additions may need to be made to the sessions to make it an inclusive space for pregnant women.
- Empowering youth around sexual health education and teenage pregnancy is challenging. Pregnancy is a taboo topic and although VH has hosted 'school for parents' where sexuality and how to talk to kids is a part of the training, parents are resistant to initiate these conversations with their children and would likely resist to VH hosting conversations with children around sexuality.
- Social determinants of health, such as gender need to be carefully approached in VH programs due to the holistic nature of their approach. Just because fathers are not in the sessions it does not mean they do not care about their child's development, which is often the unconscious conclusion that is made when we conduct analysis where we compare women to men. The division of labour on a household level for all members, and a father's role in agriculture and crop diversification that benefits their child must be examined closely. Since a lot of gendered work and training takes place outside of the MCH project, gendered conclusions should not be made without consideration of the other work being done in a given community. The Siempre Viveras training is a key component of gender and division of labour.
- Staff have noted that before trainings, women felt they had to do what their husbands said. Now, there is more financial freedom, time to build connections via volunteering, and feel more comfortable speaking up.
- Water is a way to build community capacity and trust quicker. It is a direct need of communities in the Valle district.
- VH acknowledges how important it is to have projects within a region and work upstream. If the water is being polluted upstream, and a community down stream is trying to tackle pollution their efforts will never be enough until communities upstream are also engaged.
- Water consumption is low in the Valle region; there are high rates of kidney disease.
- It is important to include other groups that need support in communities such as pregnant women, single mothers, elders, and youth/teenagers who are leaving the region for jobs/migration. There are some communities that do not have any children under 5 due to migration.
- The psychological impact of migration and the climate crisis are key to explore. Some households have single women with children whose husband left/migrated. Sometimes the husband sends money, sometimes they don't and other times they start entirely new families.
- Mentorship and relationship building with community members is a key component of VH's work. Capacity building is at the core of their approach and scope of new activities is usually assessed by, "will this increase community capacity?"
- The programs as a whole are grounded in transforming communities and examining inequity from an intersectional approach. The goal is to create healthier and unified

- relationships on the individual, household, and community level. Gender is a key inequity that is explored in the VH approach.
- Art is an important component for VH. Staff shared that it is a way of expressing and connecting with the lived realities in communities. Currently, in the Valle District, 9 young men are a part of a project that provides art classes. Participants spend time painting their natural environment, including water sources and agricultural practices. These paintings are then shared in public spaces and available to the community. This project is important to VH's approach because it builds ownership and community pride through the process of storytelling. VH wants to increase such initiatives.
- VH staff shared that a current organizational challenge is the documentation of their participatory approaches and methods. Although many NGOs struggle with documentation, it is a greater challenge in qualitative methodologies. VH includes participatory approaches to reporting such as storytelling through words or images when possible.

Appendix 1: Map of Honduras



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