



HEALING HEARTS HERALD

SPRING 2008

SPECIAL EDITION: **Guatemala Village Health Program Update**

Ruth Humbert, RN has now been working in Guatemala for 4½ years. Her village health clinics have evolved into a multi-faceted village health program. Outreach International and HMA partnered to work in two specific villages utilizing the Participatory Human Development Process (PHDP) to create sustainable good. In March 2008 HMA staff traveled to Guatemala to see first-hand the trained nurses in action and the community projects.

VILLAGE HEALTH CLINICS

Health Clinics are held in 11 communities. The nursing student and Ruth conduct the clinics in their home village and larger communities will have several nurses. Ruth has a clinic in a village just 10 minutes from her house but usually the villages are 1½-2 hours by truck. The villages are mostly in the Chimaltenango province north of San Martin in the mountains. A small fee is collected from the patients and the village health promoter checks patients in. If the individual is very poor and can not pay the fee, it is waived. Approx. 10 health clinics are held a month seeing approx. 200 patients. Referrals are made for surgery, MD follow-up, tests and services not provided. Unlike other health clinics provided in many remote communities, Ruth dispenses medications instead of a prescription that requires money and transportation to fill.



Nurse Pedro Pineda clarifying a patient's concerns.



Nurse Jose Trinis examining a patient.

NURSING STUDENTS

Ruth received funding from an individual in California who wanted to support village health promoters to attend nursing school in Antigua. Although 10 students received training, 8 are currently in the program and 5 are doing very well. We observed Jose and Pedro seeing patients during a village clinic and they had good listening, assessing, diagnosing, and communication skills. The book *Where There is No Doctor* is used as a resource for the nursing students. They will be ready to conduct their own clinics after we supply them with a backpack, medicines, and supplies.

Women Choose Projects Using PHDP

Last spring Ruth and the women from Caquixajay began to gather and openly discuss their concerns. Quickly the number grew to 43 women. The issue that rose to the top of the list was poor living conditions caused by open cooking fires, no latrines, and houses made of sticks, cornstalks, cardboard, plastic bags, and crumbling clay bricks.

Ruth realized that the nursing students needed to know more about this process where villagers come together to solve community problems. Outreach International was conducting PHDP training in Nicaragua in September 2007 and funding was secured to send all the nurses. Upon their return, 3 nurses began utilizing the process in Caquixajay. The 43 women were divided into three groups with a nurse as facilitator. Last fall each group organized themselves and visited all 43 homes to evaluate stoves, latrines, and house structure.



They categorized the needs as urgent, intermediate or replace at some point. Two of the groups quickly prioritized the replacement list but one group all wanted to be first to receive a stove, latrine and house. On the third day after help from all 3 nurses, they too prioritized their list.



Since HMA had funds designated for stoves, work began on investigating which kind of stove best met their needs. The Onil stove was OK, but replacement parts are a problem. A man working for another

organization listened to the women's concerns and needs and designed the "chapina" stove. The women received a demonstration of this stove and the group wanted a month to test the "chapina". March 1, 2008 three stoves were installed for women in each of the groups to cook and trial the stove. They also made a presentation to HMA to receive stove funding. These are the features of the "chapina stove they listed:

- Uses less wood (uses five 2" sticks 12 " long to cook beans for 3 hr)
- Will save trees, better for environment
- Eliminates smoke in house(they recognized that the soot on walls was also in their lungs)
- Would reduce sickness in their children
- Would be safer for children, reducing burns
- Cooks faster and more efficiently
- Larger cooking surface and added work space



Funds were forwarded to purchase 43 stoves. Training of village foremen will begin and they will ensure each stove is constructed properly. Each family will have to pay a small amount for the required stove pipe and concrete blocks. The very poor will be able to pay half the amount and be given sweat equity credit for stoves they help install.

The stove is moveable so it can relocate with a family. It is large enough to cook water, beans and tortillas at the same time. Wood consumption is approx. half of other stoves.

The presence of these stoves in the homes will be noted on the health records in the village to assess immediate and long-term health benefits. An evaluation of the stoves will also be conducted to measure utilization and follow-up on any concerns.

To hear the Caquixajay women explain why they want these stoves go to Guatemala Village Health Program at www.HMACofChrist.org



Project Consultant to Assist Ruth in Communities

Recently Amilcar has been hired to assist Ruth with the community projects of stoves and other initiatives. Amilcar was previously employed by another NGO, non-governmental organization, in Guatemala where he led building latrines in villages. Prior to that job, he worked in accounting for a local hospital.

Amilcar and three partners developed the chapina stove that Ruth is using in Caquixajay. Amilcar will be supervising the training and evaluation process of the stoves as well as other community projects.

His keen understanding and knowledge working with communities will be a great asset for Ruth and the Village Health Program.

Spring Cleaning?

HMA is soliciting items for on-line auctions. A skeleton skull recently was removed from the closet, dusted off and found a new home with an on-line bidder!! Are there items in your house collecting dust that could support HMA's work?

Please contact John Smith to discuss your items. 816-228-9585 or 2thsmith@sbcglobal.net.

Bylaw Changes Approved

Ballots to approve Bylaw changes were recently sent out to members current on their dues. An overwhelming positive response was received. There were a few suggestions that will be reviewed by the board and possible action taken.

An annual report was also included with the ballot. If you did not receive these, you are not current on your membership. Please return the enclosed envelope with your dues and the bylaws will be forwarded with your receipt.

Please note that the **Spring meeting will be an general membership meeting each year** whether during conference or an off-conference year. All are welcome to attend.

CONTRIBUTION AND/ OR MEMBERSHIP FORM

Information may be taken over the phone by calling 1-816-833-1000 ext 1262 Mon., Thurs., or Friday

Name _____ Phone _____ Occupation _____

Address _____

Email _____ Signature _____

Level of Membership: \$ _____ Member (\$25-\$99) \$ _____ Sponsor (\$100-\$249) \$ _____ Patron (\$250 & up)

Additional Contributions: \$ _____ Where most needed \$ _____ Guatemala Village Health Program
 \$ _____ Mission Health Teams \$ _____ Domestic Health Programs

Payment Method: _____ Check Mail to: Health Ministries Assoc. 1001 W. Walnut Independence, Mo 64050
 _____ VISA _____ MasterCard # _____ Exp. Date _____ Amt. _____

Pledge amount: \$ _____ monthly, \$ _____ quarterly. Will make by check _____, Make by credit card _____

HMA MISSION

To promote health care to the underserved and those in need.
 To advance health education enabling self directed care.
 To promote wellness of body, mind, and spirit.
 To network with others to advance health care.

HMA VISION

To increase sustainable health and wellness by providing services and ministries that express our Christian commitment and promote peace.

If you want to assist the work in Guatemala- Please contact Paula at 816/833-1000 ext 1262 or Outreach International at 816/833-0883

Check out our Website at www.HMACofChrist.org

“Health Ministries Association of Community of Christ (HMA) is a Good Samaritan health professional organization. Our projects increase the quality of life for individuals and families locally and internationally by encouraging a healthy body, mind and spirit.”

UP-COMING EVENTS

HMA Board of Directors Meeting – April 19, 2008 **Sat.** 2-4 PM Aud. North Conference Room 5th floor
This is an open membership meeting!!!

HMA Social Event @ New Theatre Restaurant- April 19, 2008 7:30 PM Overland Park, KS

HMA Board of Directors Meeting – July 26, 2008 **Sat.** 2-4 PM Aud. North Conference Room 5th floor

Health Ministries Benefit Horse Show- August 16, 2008 Lone Star Ranch Kansas City, MO
For more information contact Dawn McCoun Hatfield 816-304-4339

Health Team to Honduras – October 2008 led by Ron Edwards, MD edwardsronaldj@gmail.com

Health & Spirituality Workshop- November 7-8, 2008 at Temple Independence, MO
Summer 2008 HMA Newsletter will have full details and registration form.

Support from Other Organizations Expand HMA/OI Guatemala Program

TRANSPORTATION GRANT

Ruth has received a truck and salary for a driver from Miracles in Action, a not-for-profit organization in Florida. Last year the use of a pick-up truck to travel to the villages was provided from a grant from Miracles in Action and this year the grant was renewed for the truck, driver, and maintenance but also includes fuel costs. Marlon was hired as the driver and is being trained to assist with vision examinations and village program promotion.

WOMEN'S HEALTH SERVICES

Family planning, PAP smears, educational materials, and other services are offered to Ruth's villages by the WINGS organization, a not-for-profit in Colorado. Ruth has been connected with this organization for several years. Besides their services, they are a great resource for Ruth within Guatemala for contacts and information. One connection that has been very beneficial is with American Airlines. Ruth is able to take back to Guatemala up to nine suitcases (50 pounds each) when she returns from the US. Although this is a temporary arrangement and is not a guarantee, it has allowed transport of large quantities of supplies and medicines for village health clinics.



MIRACLES IN ACTION FUNDS ECOFILTERS

Miracles in Action is funding a filtration system for household drinking water. The unit is a modified five gallon bucket with a low spout to obtain water.

Water is poured into a terra cotta pot that has been treated with an anti-bacterial and set in the top of the bucket. After the water has filtered through the terra cotta, it is safe to drink. The cost is \$35.

The process takes about three hours to pass through the terra cotta. Every three months the pot needs to be cleaned of the sediment build-up and ecofilter is replaced every three years.

OLD TIRES MAKE GREAT GARDENS

HMA works with Peace Corp employees in Guatemala to encourage tire gardens and promote healthy eating habits. The Peace Corp worker has introduced the tire gardens to 105 families in villages which have approximately six tire gardens each. The gardens were started May 2007 in villages where Ruth has clinics and will be expanded to Caquixajay and Tioxya communities utilizing PHDP.



Weekly Ruth gathers old tires in the back of the pick-up and carries them up the mountain to families for gardens. The men have been shown how to cut the tire and turn it inside out. They will use a mesh bag and sticks to cover the bottom before filling with dirt and planting radishes, onions, peppers, celery, carrots, lettuce, beets and other vegetables and herbs.

Many families have to carry water or only receive piped in water two days a week. The tire gardens use only one gallon of water two times a week during the dry season to produce healthy vegetables for the families' use.

Old tires are in abundance with the rough terrain. They are also an environmental problem since many are left on the side of the road or left with standing water where mosquitoes can breed.

Pedro Pineda Implements PHDP in His Own Village to Help Community

Pedro Pineda was one of the first students selected by their community to receive formal nursing training. Pedro was already the Village Health Promoter for Tierra Colorado and at 42 years old, he was well respected in his village.

Eighteen months ago Pedro attended an Outreach International training in El Salvador. As with many of us, we need to hear the PHDP message more than once. Last September when he attended a second OI training in Nicaragua and saw their program in action, it was evident to Dennis and Lorna Labayen from Outreach International that Pedro understood the process.

Within a month he had organized a meeting in Tierra Colorado with a group of ten families that owned a swampy piece of land. The land was unusable and full of mosquitoes. It collected run-off from the surrounding mountains but it also had a natural spring. The group decided to investigate whether the pond could support fish. The water tested proper temperature and PH for tilapia. Contacts were made with individuals who had expertise in tilapia farming.



In December the men began cleaning the weeds and bulrushes from the 100 meter X 70 meter “lagoon”. By March eight men had worked 73 eight-hour days using a floating platform to extend the edges of the pond. There is still a lot of cleaning to be done since the lagoon will eventually be 2-3 acres. The men used a rock and string to ascertain the depth of the spring and have not yet located the bottom.

The lagoon plan includes a guard-house to protect the property, separate tanks for male and female fish as well as concrete tanks for baby and intermediate size fish. They would like the property to be a park that could be used by the whole community for relaxation. They anticipate that the pond will support 1000 fish and can harvest mature fish twice a year. Although the fish would be sold, the group does plan to provide fish to the community as an additional protein source wanting no one to go hungry.

The group plans to visit other tilapia farms for ideas and advice and will be contracting with an expert for specific guidance.

Although the families own the land, they do not have the financial resources to see the project through on their own. That is where HMA/ OI come into the picture. This type of community project is the kind of work that Miracles in Action funds. Ruth is writing the grant proposal for \$12,000 of project funding.



Constructing Fiberlit Houses

Many families live in houses that are simply made from discarded trash. Crooked posts or sticks with crumbling adobe brick or maybe cornstalks tied together to make walls are the most common house construction in the mountain villages. Inside the house the gaps in the walls may be covered with pieces of burlap, plastic, cardboard, or paper.

The nights can be cool so the inside may not be much different in temperature than outside. The women would like houses with concrete floors, solid walls, and tin roofs that do not leak.

Ruth and the village women are investigating types of house construction that are economical and sturdy.

This trial house has made of fiberlit material to assess simplicity of construction and durability.