October 2009 Newsletter

Maternity Waiting Homes - Houses of Hope

*INMED helps to open first of six maternity houses for expectant mothers in Peru*

![First Casa de Espera awaiting interior finishing](image1)

Although when translated literally, *Casa de Espera* means "waiting house," for many pregnant women of Amazon jungle communities the phrase takes on far larger meaning.

Many times between life and death.

"House of hope," an alternate translation, is perhaps the more appropriate of the two, noted Linda Pfeiffer, president and chief executive officer of INMED Partnerships for Children.

Too many expectant mothers have little to no access to health care. Where health care facilities do exist in the rugged country, they are often too far for women whose only mode of transportation is a boat with a small portable 2-cycle engine on the river, sometimes taking up to 12 hours to reach the closest health care facility.

As part of its *Healthy Babies* program in Peru, INMED has been working with local municipalities and health ministries to build maternity waiting houses near health facilities throughout the country’s Ucayali Region.

The maternity waiting houses will allow expectant mothers and their families to reside there in the last stages of their pregnancies or during a high-risk pregnancy to ensure they are close to obstetrical care. Residents will also be encouraged to attend education sessions on basic infant care and nutrition.

Although most maternal deaths are preventable, a woman dies in pregnancy or childbirth every minute of every day, resulting in more than 500,000 lives unnecessarily lost every year. The overwhelming majority of these deaths occur in rural regions of low-income countries, including Peru.

"In labor and childbirth, minutes can mean the difference between a bright, healthy future and a future clouded by disability and health complications, or even no future at all," Pfeiffer said. "Increased access to emergency obstetrical care is a key component of our *Healthy Babies* program, and the *Casas de Espera* are instrumental to that goal."

There is no cost to the families to stay in the houses; however, residents will be expected to help with cooking and cleaning. Overall maintenance of the houses will be provided voluntarily by members of the community. Many of these volunteers have previously opened their homes to pregnant women who arrive as strangers but are welcomed as neighbors in need.

The first waiting house is nearing completion at the Monte de los Olivos Health Post/Delivery Center in the Aguaytia district of Ucayali. With contributions from the community, including land and labor, the shell of the outpost has been completed. A recent donation of $2,000 from the Dominion Woman’s Club (*see accompanying article*) will help finish the building, which Pfeiffer said she hopes will be done by the end of the year.

Ultimately, with INMED’s help, the local Ministry of Health plans to construct six houses in the region. Each house can serve between two to six women depending on how many family members are staying with each of them. It is anticipated that each woman would stay an average of one week at the house. Each house costs roughly $10,000 to build, including donations of land, materials and labor.

*Healthy Babies*, funded since 2006 by the U.S. Agency for International Development, works with families, community...
members, government agencies and health care providers to better care for women during pregnancies, including developing birth plans, improving record keeping, and recognizing dangers that might threaten expectant moms and their unborn children.

Other efforts to improve access to health care facilities are ongoing, noted Fernando Perez, INMED’s country director for Peru. Plans include establishing an emergency transportation system on the Amazon River, but those discussions are in their infancy.

“There has always been a tremendous sense of community here,” Perez said. “We had our own people giving up space in their homes to help these mothers. However, people will now know that this house is a place that indeed does provide hope to women and their families.”

**Without Hesitation, Virginia Women’s Club Fills $2,000 Need for Maternity House**

Initially, the main article that accompanies this one reported that $2,000 was still needed to complete the first of six maternity waiting houses being built in an Amazon region of Peru.

Nearly as soon as a draft of that article was shared with INMED partner, the Dominion Woman’s Club in northern Virginia, the article as it was written became outdated.

Within days of reading the story but not without careful review, club members swiftly approved a gift for the entire amount that will go toward completing the interior of the building, including the installation of a floor, beds and a kitchen area. The entire house is expected to be complete before year’s end.

The DWC is a chapter of the General Federation of Women’s Clubs, one of the world’s largest and oldest nonpartisan, nondenominational, women’s volunteer service organizations, founded in 1890 and chartered by the 56th United States Congress in 1901.

"I have to say that reading the article and looking at photos depicting the many challenges that many families endure who will benefit from the houses really caused my eyes to well up,” said Nanette McKeel Petrella, DWC’s founder and chair of the club’s international committee. “Our members are moved to know how special it will be to be a part of these future new babies and their families.”

In addition to the construction money, the club will also be donating handmade sweaters and blankets for the newborns.

“Imagine the difference these women are making in these babies’ lives—some 3,500 miles away, no less,” INMED President and CEO Linda Pfeiffer said. “Now that truly is moving considering the lives that will be saved as a result.”

See also the [Dominion Woman’s Club donation](#).

**Life Brings Good Things to South African School**

*GE volunteers plant school garden; GE Foundation follows with grant to train and build needed kitchen for 1,600 students*

INMED Partnerships for Children is expanding its partnership with the GE Foundation and launching a partnership with GE South Africa to help to bring nutritious lunches to children in need in by bringing a mobile kitchen and training to one particularly needy school.

And in the nick of time, too, for this South African school is getting ready with its first harvests from a newly established garden planted with the help of GE volunteers.

The garden was established earlier this year to serve both as a source of nutritional foods for the school’s 1,600 students and as a living classroom for students to learn about nutrition.

Although students, most of them poor, of the Bonwelong Primary School in the Ivory Park community of Johannesburg are entitled to receive a daily meal through the government school feeding program, menus do not often follow standardized guidelines for nutritional content or portion sizes.

It doesn’t help that the school lacks a sufficient kitchen to prepare and store foods for its students, relying on a nearby church kitchen and a single stove. The new kitchen, slated to open by mid-October, will include a double sink, working and storage surfaces, a hot water tap, a three-burner gas stove, refrigerator, electric plugs and mounted drying racks.

“Through this project, Bonwelong school’s vulnerable students will receive nutritionally enhanced lunches utilizing produce from the school garden, helping to improve their educational outcomes by reducing hunger, improving their nutritional status, and providing an incentive for regular attendance,” said Ethel Zulu, INMED’s South Africa director.

The GE Foundation grant will also incorporate INMED’s nutrition curriculum under its Healthy Futures South Africa program in the school to educate students, teachers and school food workers in the areas of nutrition, cooking, food safety, hygiene and gardening.
Although Bonwelong school had established its own garden through a separate project with the GE Trust, GE representatives in South Africa approached INMED to help with the kitchen and the curriculum because of its previous success, said Thami Mbele, GE’s Regional Executive for Southern Africa.

“We are pleased to be part of this initiative which will help many children at Bonwelong perform even better in their education,” said Mbele.

**Growth Continues for Healthy Futures South Africa**

**Tiger Brands grant marks program’s second expansion in a month**

INMED Partnerships for Children’s Healthy Futures South Africa program is expanding for the second time in less than a month, thanks to a new corporate funding partner, Tiger Brands.

With a $63,000 grant from Tiger Brands (equivalent to 500,000 rand in South African currency), the Healthy Futures program will expand into the Limpopo Province at the northernmost point of South Africa, an area that INMED South Africa Program Director Ethel Zulu describes as economically depressed, with a high rate of malnutrition and poor school attendance.

Students in Limpopo eagerly await the launch of their school garden.

“Among the children who do attend school, many arrive hungry, and for most, their only significant meal of the day is the food they receive through the school lunch program,” she added. “Healthy foods are not only important for their nutrition, but also an incentive for them to be in school.”

Often, Zulu said, school lunches lack the nutritional value students need, and though there is an agricultural base in the area, many of the local subsistence farmers lack farming and business training to sustain food security and economic development.

The four schools selected for the program are: Napo Primary near Mediba Village; Malopang Primary near Jupiter Village; Rantsho Primary near Diana Village, and Matuma Combined near Bellingsgate Village. The schools were selected by King Mashashane of the tribal group of the same name in the Limpopo Province, based on those with the most need as part of his determination to improve resources to adequately feed the children.

According to Tiger Brands Corporate Social Investment Manager, Boni Dlamini-Makola, growing vegetables and herbs in community and school gardens has been shown to develop communities, reduce malnutrition, improve the environment and generate income. The Healthy Futures program, she explained, addresses those concerns through a multi-faceted approach including (A) nutritional education in the schools and using school gardens as both a laboratory for educators and students and as a source for healthy foods, (B) encouraging families to start their own gardens for homegrown produce as well as an income source, and (C) gaining the support of local governments and businesses to support greater garden development.

The program started in 2006 in the Orange Farm township of Gauteng Province, on the outskirts of Johannesburg, reducing hunger among school children by increasing the availability of nutritious produce through school gardens and delivering nutrition education for teachers, school food workers and families.

“We have established a solid program model that has gained community ownership and has demonstrated a commitment among local governments, schools, families and their children to sustain the program long after we, INMED, leave,” Pfeiffer said. “We are excited to partner with Tiger Brands to bring the program to even more children.”

**About Tiger Brands:**

Tiger Brands is a highly diversified company operating largely in the food, home and personal care industries. The company has manufacturing units throughout South Africa, internationally and in emerging markets.

The group’s corporate social investment vehicle, Unite Against Hunger (UAH) is a Section 21 Company, registered as a Public Benefit Organization (PBO), which allows the organization to accept support from external organizations and to channel this support to those in need of assistance. UAH is dependent upon a variety of sources for funding, including an annual CSI contribution of 1% of post-tax profits from Tiger Brands.

Other beneficiaries include the African Children Feeding Scheme (Gauteng and Western Cape), Heartbeat (nationally), Olive Leaf Foundation, which operates in five provinces, St. Clement Home Based Care (Kwazulu Natal) and the Nelson Mandela Metropolitan University in Port Elizabeth. Tiger Brands’ Unite Against Hunger initiative is feeding over 100,000 people on a daily basis. Unite Against Hunger is continually extending its network to more rural parts of South Africa.

**Transformations: Clients Overcome Difficult Times; a Void Filled for a Case Manager**

When Coralis Fernandez discovered that what brought her the greatest satisfaction was helping families overcome their struggles, it didn’t take long for her to change careers.
She used to be an attorney in Venezuela practicing family law and then a manager for real estate firms, first in Florida for over a decade and then in Virginia where she moved with her husband about two years ago.

But something was missing.

She usually filled this void by volunteering at her churches in Florida and Virginia, working with low-income families to help them overcome their struggles any way she could. Sometimes, simply talking and listening to them was enough, but on other occasions she could do more, like connecting families to specific services that they needed.

Witnessing, and in some cases sharing, the experience of overcoming tremendous challenges with families, presented an overriding joy in her life.

Still, it wasn’t always enough for Fernandez, at least not until one of her church friends mentioned INMED Partnerships for Children and its mission of helping children and their families. The friend told Fernandez about an open position at INMED that would allow her to help families directly.

With little hesitation and at the age of 56, Fernandez changed careers again. Yet, she continues to volunteer at her church in Loudoun County, Va., home of INMED’s international headquarters.

“I decided to make a change because I like this kind of work,” Fernandez said.

Having joined INMED about a year and a half ago, first as a center service coordinator and today as an educational group facilitator and family support worker, Fernandez has seen her share of families suffering.

“When you help someone who is in a crisis and they can solve their problems, that’s a great satisfaction, especially when they are isolated at first but then come together as a group to support one another. You see them begin to enjoy life again, and nothing can take the place of that,” she said.

Whether working with families because of domestic violence, job loss, a lack of education – or with teenage moms, she has also seen families overcome those struggles and regain independence by learning new skills and where else they can get help.

Seeking help is a critical first step that can be difficult for many, a quality along with perseverance that Fernandez admires. For instance, there is the teen-age mom – a "very young girl" – who has repeatedly but unsuccessfully attempted to get into school. She finally came to INMED for help and "did not give up until she was accepted," Fernandez said.

“I have no doubt she is going to accomplish her goals,” she added.

Just as Fernandez has accomplished her own.

**Focusing on Best Babies**

**INMED LA case manager helps teen moms exceed expectations**

Franklin Jr.’s mother watched with one eye on him and another on her guests as the two year old, his long, curly black hair crowning a joyful and spirited smile, sprinted back and forth between his ball and SpongeBob on TV.

Sitting on the couch in her Lynwood apartment, Bianca is at the ready for her son to run into her arms to periodically hide from the strangers. She gives him a kiss on the head, asks him to go watch more of SpongeBob, and without skipping a beat resumes talking about her experience of being a teenage mom.

Today, things are much different for Bianca than they were two years ago when, at the age of 16, she fought with others, became pregnant and dropped out of high school. Ultimately, she returned and graduated from high school, and the simple fact that she is now surrounded by college applications and health care insurance forms sheds more than hints to just how far she has come in those two years.

“I want to have a good life and give him everything he needs,” Bianca says, glancing over at the toddler. She then admits that few of her recent accomplishments, such as getting her driver’s license after three attempts or being placed on the waiting list at an area college, would have been possible without the help of her mom or other people such as Emily Flores, a case manager with INMED Partnerships for Children in Los Angeles.
As she often has for Bianca and other teen moms, Flores goes beyond merely explaining the forms that need to be filled out but dotingly commands that the work be finished.

A case manager with INMED Partnerships for Children in Los Angeles, Flores has worked with teen moms or expecting teens for nearly 11 years, the last five of which have been through a program administered by the South LA Best Babies Collaborative, a network of local medical and social service providers working to promote healthier pregnancies, birth outcomes and care for women who previously experienced an adverse birth outcome, all in high-risk communities.

In her years with INMED’s MotherNet LA program, Flores has worked with roughly 200 teen moms, nearly half of whom suffer from domestic violence, sexual abuse or addiction. Getting calls in the middle of the night or during the weekends, attending court sessions or navigating the Department of Children and Family Services are not uncommon to Flores’ life. Best Babies addresses these issues through support and group sessions for domestic violence and chemical dependency while also focusing on childhood development, nutrition, breastfeeding and care for chronic health issues such as diabetes and asthma.

The work can take its emotional toll, but Flores says watching the young mothers secure independence from dangerous relationships or even from public aid is enough incentive to persevere. Most of the teens she works with do complete the two-year program, having earned their high school diploma or equivalent, enrolling in college, and avoiding a second pregnancy until they are more secure and ready.

“When I see the outcomes, when I see them doing things on their own without having to have their hands held, when I see them getting involved in college, when I know they are doing what they can to give their children the best life possible, that’s my reward,” Flores says.

According to the Los Angeles County Department of Public Health, the 2007 birth rate to girls ages 15 to 19 was 74 per 1,000 females in the county’s Service Planning Area 6, one of eight zones used by the department to monitor public health issues. SPA 6 runs south from the I-10 to Compton and Paramount and is considered among the more depressed zones in the county.

In comparison, the national teen birth rate was 41.9 per 1,000.

Teenage pregnancy and childbirth are ongoing public concerns, says the U.S. Centers for Disease Control and Prevention, and are the focus of considerable public policy debate. Babies born to teenage mothers are at elevated risk of poor birth outcomes, including higher rates of low birth weight, preterm birth and death in infancy. The limited educational, social, and financial resources available to teenage mothers add to their higher risk profile. A recent study found that the public costs of teenage childbearing in the United States are about $9.1 billion annually, as the CDC’s National Center for Health Statistics reported in its Jan. 7, 2009 publication, National Vital Statistics Reports.

A large focus of the Best Babies Collaborative, Flores said, is to counsel clients on preventing repeat pregnancies. While research shows that nearly one in five teenagers in the United States who experiences a premarital pregnancy will become pregnant again within one year, and that more than 31 percent of these mothers will have a repeat pregnancy during their teen years, the same cannot be said for Flores’ clients.

In 2008, for example, none of the 30 clients Flores worked with had become pregnant within two years of their last pregnancy. Other successes that year include:

- 100 percent of pregnant women and teens received adequate or better prenatal care from the time they enrolled in MotherNet program, compared to about 12 percent of women in SPA 6 who received late or no prenatal care in 2007,
- 100 percent of children from 0 to 17 years old had health coverage and a medical home, compared to about 20 percent of children in SPA 6 who have difficulty accessing medical care, the highest rate in Los Angeles County, as well as 9.7 percent who are uninsured,
- 100 percent of children remained up to date on their immunizations, compared to 80 percent of children countywide who have completed the recommended series of immunizations for their ages.

Bianca, with Flores nearby, admits she had no idea of the many responsibilities expected of a new mother when she first met Flores at a Cal-Safe school in Compton, administered by the California Department of Education for expecting or parenting students. Bianca graduated from the high school equivalency program last October.

“Any time I needed something I would call her, and I could call her for anything. She was always there,” Bianca said. “She would tell me what to do because I was not always sure. Sometimes I was like, ‘I really don’t want to do this.’ But she would make sure that I did because it was in my and Franklin’s best interest.”

Parental tasks such as getting her son immunized or enrolling him in a health insurance plan were things Bianca said she was unaware of having to do, or how to do, before she and Flores met. At that time, too, she admits, she was “just squeaking by” in the Cal-Safe program.

All that changed when Flores entered her life. As a result, her dreams of becoming a nurse or a law enforcement officer are turning into reality, step by step. And today, she is sharing her experiences with other teen moms in the Cal-Safe program under Flores’ tutelage.

“Having Franklin really made me focus, but I couldn’t have done it without her,” Bianca said as she and Flores returned their
attention to the college admission forms. "I’m excited to start school."

About INMED Partnerships for Children

Since 1986, INMED Partnerships for Children has worked around the world to prevent irreversible harm to children, whether through disease, neglect or lack of education or opportunity, helping them develop the skills they need to succeed and empowering them and their communities to create hope and opportunity for themselves and generations to come.

For more information or to submit questions and comments, please contact Director of Development Mary-Lynne Lasco at contact@inmed.org.