

Building Resistencia

Chile's inequitable model of privatized healthcare has been replicated throughout Latin America. Now EPES turns this export model on its head by extending its community health approach to an impoverished Argentina.



"We always knew EPES would change the lives of people in the community. What we didn't realize was how much it would change our lives."

-Rev. Raúl Gleim

Community X-Ray

Residents of the Juan Bautista Alberdi district (pop. 8,000 in this city of 366,000) are poor and getting poorer as they try to survive in the uncertainty of Argentina's economic and political disarray.

Social organization is weak. Squalid government handouts and charity cannot mask the sense of abandonment. Three local churches feed hundreds daily, mostly children who arrive alone, dragging a dirty bowl and spoon.



For Monica Maldonado, the EPES trainer who is accompanying the *Unión y Salud* health team, poverty on this side of the Andes differs subtly from poverty on the other. Resistencia operates in "slow motion—and not only because of the heat," she notes. "People have lost faith in the possibility of becoming protagonists of their own lives."

Health promoters here diagnosed the district as suffering from lack of hygiene and excess of garbage, lice and skin diseases, teenage pregnancy, domestic violence/abuse, neoprene/alcohol use and crime. Access to health services is precarious, and medicine scarce.

Social torpor and economic stagnancy add to the urgency of collective action in public health. Nonetheless, people are avid for information and training, to see themselves reflected in others, to recognize common problems. This is a potent force.

"EPES has shown us that it is possible to change social conditions among the poorest of the poor," says Rev. Raúl Gleim. "Resistencia bears witness to this."

Building Resistencia

Resistencia, Chaco Province — The name of this city in northeastern Argentina rings with energetic self-determination, but apathy hangs heavy in its stifling heat and paralyzing poverty.

Over the past year, however, a hand outstretched across Andes is helping to empower shantytown women here to take charge of their lives and their health.

The women are health promoters trained by EPES (the Spanish acronym for Popular Education in Health), a project launched 21 years ago under the auspices of the Evangelical Lutheran Church in Chile.

Following months of intensive study, the new *Unión y Salud* team of two dozen women and one man is now imparting health and inspiration to family and neighbors in the otherwise down-trodden district of Juan Bautista Alberdi.

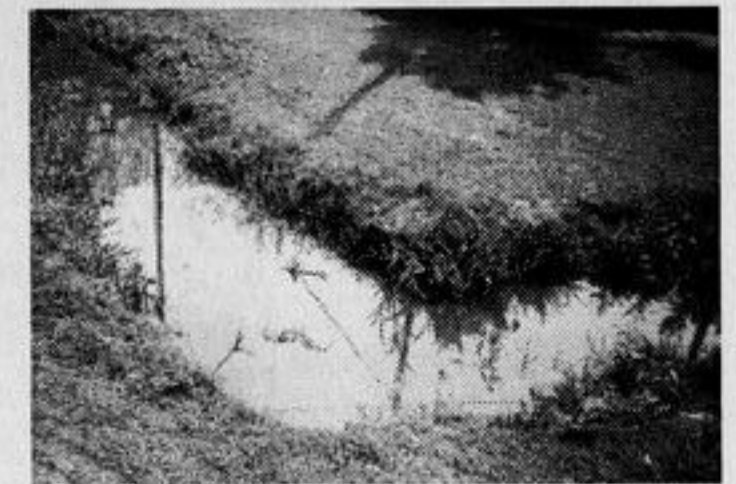
"It's a dose of hope, which is a luxury item in Argentina these days," says Alicia Larsen, a visitor from the Lutheran church community in Bariloche.

The EPES health promotion course "breaks with the cycle of clientelism and hand-outs that prevails in Argentina," says Rev. Raúl Gleim, whose María Magdalena mission hosts the sessions in its soup kitchen. "We don't give away freebies. But we do facilitate

education and tools for organization."

Gleim turned to EPES last year in search of a formula to strengthen community efforts to withstand Argentina's economic tailspin. "We're seeing solidarity at the individual level but we sorely lacked communal networks of support."

Forming neighborhood groups to promote the right to health in their communities is the heart of the EPES approach. Health monitors learn practical skills, including first aid for household accidents, use of medicinal herbs for common ailments, and recognizing the vital health signs of blood pressure, temperature, respiration and pulse. They discuss issues, like violence and sexuality, often silenced by taboo. Training in leadership is complemented with careful analysis of the factors affecting community well-being. The aim is to reinforce the participants' faith in the possibility of collective action to improve their own and others' lives.



Dirt poor: Hygiene is Public Health Problem N° 1

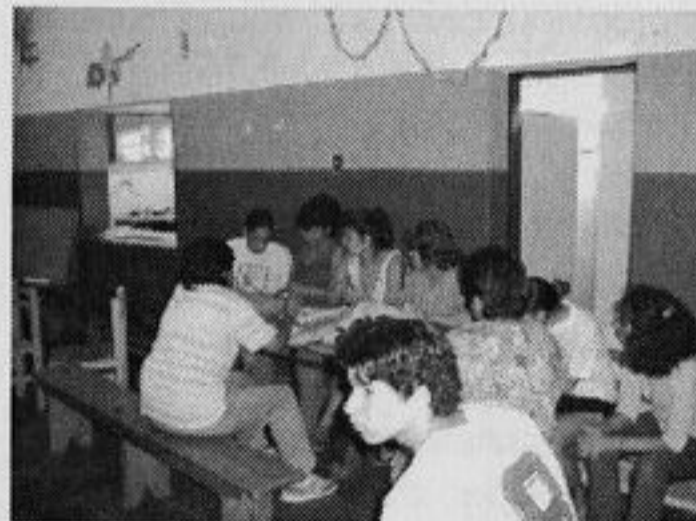
"Bit by bit and without hesitation, I began to take control of my own history."

"What a privilege to be among people who help us bring out the best in ourselves."

-Ofelia, social worker and participant



At the Health Fair:
Calling all neighbors!



Lutheran Church provides
classroom/lunchroom.



EPES Resistencia team

*Ofelia Molina (social worker),
Mónica Maldonado (health
educator), Dr. Lautaro López
(EPES Concepción), Rev. Raúl
Gleim. Not pictured: María
Eugenia Calvin (EPES Santiago) y
Fabián Rojas (social worker).*

*It wasn't hard to learn, to feel alive, to feel strong
and, along with EPES, value myself."*

-Cantata, Unión y Salud



House calls: Community check-up.



Assault on lice:
Combs and cuts for 100 kids.

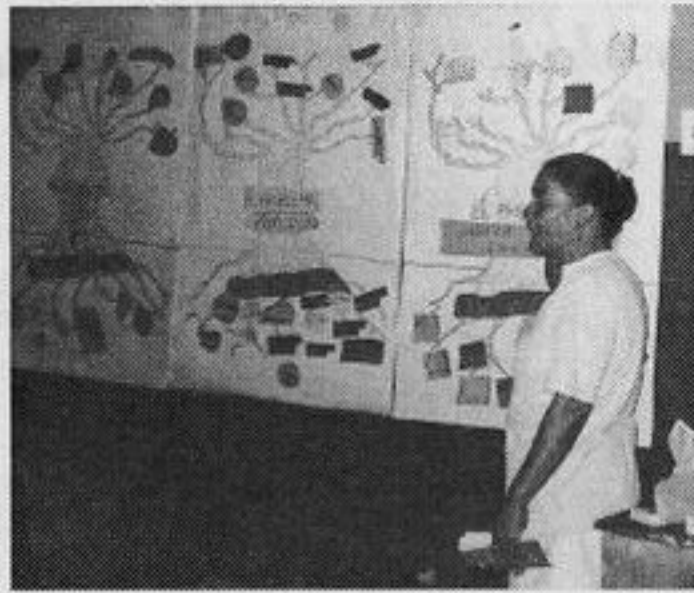


Graduation day:
Next step, planning and permanence.



Promoting
participation.

By strengthening community ties in one small corner of Argentina, EPES is also building a model for resource sharing and south/south cooperation that holds great promise for the Evangelical Lutheran Church in America, which funded the initiative. "The EPES experience in Resistencia shows how support given over the years can bear fruit that far exceeds original goals," says Rev. Raquel Rodriguez, Director of the ELCA Latin America/Caribbean Desk.



*The Diagnostic Tree:
Roots and consequences.*

EPES: Promoting Health and Hope

Educación Popular en Salud (EPES) was born in 1982 as a project of the Evangelical Lutheran Church in Chile and formed its first health promotion groups in the poor neighborhoods of Santiago and Concepción in the depths of the dictatorship.

Over the past two decades, EPES has grown from a small emergency-response team to an innovative force in championing health care for the poor through the training and organized participation of the people themselves.

EPES promotes a broad view of health that includes personal dignity and social and economic well-being, with an emphasis on confronting health problems by understanding the underlying conditions that cause them. Local residents (generally women) define community problems and are the main actors in the search for solutions.

The cornerstone of EPES' approach is to train teams of health promoters rather than individuals. Currently, 100 health promoters belonging to 12 permanent teams in five shantytowns tackle issues such as breast cancer, domestic violence, sexual and reproductive rights, women's sexual health, AIDS, teen sexuality, mental health, acute respiratory infections and environmental pollution.

Chile's return to elected rule and changing social trends prompted EPES to reexamine its educational and institutional models. As a result, in 2002, EPES left its home in the Lutheran church to become an independent foundation, while maintaining close links. In doing so, EPES also reaffirmed its commitment to the construction of long-term relationships.

The challenge ahead is to assure long-term financial support, because, in the words of one EPES supporter, "health promotion EPES-style is not just a project or an intervention, or even a strategy. It's a way of life."

Changing Lives

Education and teamwork have transformed the lives of these women, many of whom have little formal schooling and even less self-confidence. Everyone notices how Laura, mid-30s and the mother of six, bloomed in the respect she won at home when she learned to treat a fever. And how Elvira spoke comfortably in public for the first time, and has mastered a new language of assertiveness. Contact with other women helped Estela overcome her grief at the recent death of the eldest of her six children and face the world again.

These women's experiences of personal growth have not been lost on their children. Halfway into the EPES course, some 40 youths aged 11 to 20 formed their own health team —*Unión, Salud y Prevención*— to break the silence over AIDS, tackle drug use and lower the high incidence of teen pregnancy.

Even the muddy streets of Juan Bautista Alberdi are witness to "people power," as an empty lot becomes a plaza for neighborhood youths, walls sprout murals and a rubbish heap becomes a vegetable patch.

Careful Planning, Lively Learning

Meticulous planning and thousands of kilometers travelled have gone into this pilot project of long-distance



Health and fun: Youth group meets daily.

dialogue, beginning with the May 2002 visit to Resistencia by EPES social worker María Eugenia Calvin and trainer Mónica Maldonado to conduct a community diagnosis. Back in Chile, Dr. Lautaro López of EPES Concepción helped tailor the course to those findings. Returning to Resistencia, the duo conducted an introductory workshop on women's health issues to motivate local folks.

Maldonado then moved to Resistencia to give the 4-month preventive health course. Midway through, López came to monitor the monitors and hold an environmental health workshop. The María Magdalena mission provided meeting space and the support of Fabián Rojas and Ofelia Molina, two young social workers. Following graduation in December 2002, the Resistencia team came to Santiago for a weeklong evaluation of the process.

The year 2003 began with a three-month sojourn by Maldonado in Resistencia to help the *Unión y Salud* team plan and consolidate. Meanwhile, the Argentine social

workers will return to Chile for additional training by EPES. This steady exchange aims at cultivating in Resistencia the long-term, focused commitment that EPES has enjoyed for over 20 years with neighborhood groups in Santiago and Concepción.

"They call me the crazy Chilean who teaches by playing," says Maldonado, who trained with EPES as a health promoter back in 1984 and has since instructed many groups. "I'm a poor woman like them, but I bettered my quality of life by becoming motivated to create change." Her methodology is high-energy, with house-to-house visits, a communal delousing session, two health fairs and field trips, including a jaunt — a first for many — to the Paraná River, one hour away.

Beyond Borders

Crossing borders is not new for EPES, which has shared its methodology in

workshops and training seminars throughout Latin America. But its work in Resistencia is at another level of accompaniment. Expectations are high that this seed of hope and model of south-south solidarity will take root and spread throughout the region, just as the economic models corrupting the right to health into a commodity on the marketplace have spread.

Quietly, EPES is opening a path to that "other world" which the anti-globalization voices of Porto Alegre and elsewhere assure us is possible. In doing so, EPES is crossing new frontiers of commitment.

"EPES no longer belongs only to the Lutheran Church in Chile," stated Rev. Oscar Sanhueza, an EPES Board member, after the graduation ceremony for health promoters in Resistencia. "It is now the property of all who believe in the life of dignity, the life of plenty."



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