

Women's Health & Women's Rights



Inter Pares Executive Director Rita Morbia (centre) with Likhaan staff and volunteers in Manila, the Philippines.

Controlling Their Own Bodies, Controlling Their Own Lives

Dindi was 15 years old when she accompanied her 13-year-old friend to a Manila hospital. Her friend was pregnant, scared, and hemorrhaging. She barely survived. This experience had a profound impact. Today, at age 21, Dindi is a passionate volunteer advocate for reproductive health and rights with Likhaan Center for Women's Health, Inter Pares' counterpart in the Philippines.

Gielda also volunteers with Likhaan. Almost 40, she married at 16 and has ten children. Gielda lived in Manila during the decade-long ban on contraception from 2000 to 2011. She loves her children, and at the same time speaks openly about how fundamentally

different her life and her children's lives would have been had she been able to control her fertility.

It is 2016, and yet 225 million women globally are unable to access safe and effective family planning. The reasons range from cost, to social stigma, to a lack of political power. Most of these women live in the poorest countries on the planet. Too many of them are adolescents who have had no access to comprehensive sexuality education or services. There are many places in the world where teaching girls – and boys – about their bodies is still deemed socially, politically, and/or religiously unacceptable. **PAGE 4 ▶**

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From Midwifery to National Healthcare, Step by Step

BY REBECCA WOLSAK, BURMA PROGRAM MANAGER

I pulled up a pink plastic chair and sat amongst the young women. Each from a different Karen village outside the town of Pa-An in Burma where we now sat, all looked to be about twenty and too shy to speak. I was a bit disappointed at their timidity, but their nervous giggles were understandable; they were only in their second week of training.

The Back Pack team and Mae Tao Clinic are members of a coalition that sees this midwife training as one step in the process towards effective coordination of services.

The women were studying to be auxiliary midwives in their communities. Instead of taking the low-quality government training, which doesn't equip students to deliver

babies or provide basic treatment, these women were being trained by our counterpart, the Back Pack Health Worker Team. Founded in 1998, the team provides primary healthcare and trainings in conflict-affected ethnic communities where there is little or no government care.

After a recent ceasefire made it easier and safer for them to travel in Karen State, the team initiated a joint auxiliary midwife training project with one of Pa-An's larger

NGOs and the local State government. It has not been simple: the ceasefire has not always been respected, the area is highly militarized, and the national peace process has barely begun. Healthcare is so centralized that even decisions on hiring and firing of hospital staff are made in Burma's capital.

After four months of studying theory, the trainees spend three months gaining practical experience with another Inter Pares counterpart, Mae Tao Clinic. With an average of eight babies born every day, the clinic provides the trainees with unparalleled experience.

The Back Pack team and Mae Tao Clinic are members of a coalition that is working towards national decentralized healthcare with a holistic, public healthcare approach. They see this midwife training as one step in the process towards effective coordination of services.

By chance, several months after our laughter-filled chat in Pa-An, I saw many of these women interning in Mae Tao Clinic. Again we were unable to have a fulsome conversation. But this time, it was because they were ducking between maternity ward beds with an air of confidence and compassion, checking in on the rows of new and expecting mothers. It was a beautiful sight. 

A mother and her newborn at Mae Tao Clinic (left) and auxiliary midwives in training attend anatomy classes (right).



PHOTOS: ALYSE PULLIAM (LEFT) AND REBECCA WOLSAK (RIGHT)



Women (including DEMUS director Maria Ysabel Cedano, centre) form a human chain in front of the office of the public prosecutor responsible for the case of forced sterilizations.

Forced Sterilizations in Peru: Never again


Mamérita Mestanza hadn't reached her 34th birthday when she died from complications resulting from tubal ligation surgery. A mother of seven in rural Peru, Mamérita had received numerous visits from health officials, who told her that she and women like her with more than five children risked fines or jail sentences unless they consented to being sterilized. In reality, no such penalties existed. No one explained to Mamérita the consequences of the surgery or the risks involved. Nor was she provided the medical attention her family repeatedly sought following the operation, when Mamérita developed a serious infection.

Mamérita Mestanza's story is far from unique. Between 1995 and 2000, under the pretext of combating rural poverty, the government of Alberto Fujimori sterilized an estimated 300,000 women and 20,000 men. Many were poor and illiterate Indigenous women and men who were coerced or tricked into surgery under threat of prosecution or by withholding medication or food subsidies. Public health officials were given quotas, and to meet their targets they frequently sterilized women without their knowledge or consent during routine pregnancy check-ups or following childbirth.

Inter Pares' counterpart DEMUS has been

at the forefront of the struggle to expose the truth of what happened and to hold the Peruvian state accountable. Working with other Peruvian organizations, DEMUS took Mamérita's case to the Inter-American Court on Human Rights in 1999. Eventually, Peru acknowledged responsibility, and agreed to reparations for Mamérita's family. This landmark case paved the way for an initial group of 2,074 women to come forward with their own stories, demanding justice.

Following growing public pressure, nurtured in part by an effective public campaign by DEMUS, the Peruvian government announced in December 2015 the establishment of a national registry for persons affected by forced sterilizations.

Throughout 2016, Inter Pares' partners in Peru are working to ensure that the public is aware of this registry, and to help victims complete the registration. The forced sterilizations program of the Fujimori government represents one of the darkest chapters of Peru's history, and every effort must be made to ensure that such crimes are never repeated. 

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Inter Pares is a feminist organization. We believe that women should be able to decide if and when to have children; that they should be able to bear children safely; and that access to appropriate and relevant information and services on reproductive health and sexuality are key to women's and girls' health.

Inter Pares and Likhaan thus welcome the new expansion in the Government of Canada's focus on maternal, newborn and child health (MNCH) to include reproductive and sexual health and rights. This change recognizes that women are not just mothers or potential mothers, and that control over one's body is integral to living to one's full potential.

In this context, Inter Pares recently signed an agreement for \$2.6 million over four years with the Government of Canada to work in

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collaboration with Likhaan. This program will support the establishment of four reproductive health clinics in the Philippines, where women in Manila's impoverished urban areas, as well as in typhoon-affected Eastern Samar, will be able to access safe and affordable healthcare.

Components of the program include family planning, pre- and post-natal care, access to high-quality birthing facilities with skilled birth attendants, and emergency obstetric care.

Another key pillar of the program is community health promotion related to




PHOTOS: ALFREDO MELGARI/LIKHAAN

Top: Gielda and Dindi.

Bottom: April, another Likhaan volunteer, and Gielda.

women's and girls' reproductive and sexual health. The program will also help families register for the national health insurance program, PhilHealth, so that they can access services at no charge. Likhaan's clinics will go through a process of becoming accredited by PhilHealth so that by the end of the program, they will be independently funded by their own government.

Inter Pares is proud to support Likhaan's work of improving reproductive health and fostering women's autonomy and empowerment in the Philippines – work that will ultimately change women's lives. 

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With the support of thousands of Canadians, Inter Pares works in Canada and around the world with social change organizations who share the analysis that poverty and injustice are caused by inequalities within and among nations, and who are working to promote peace, and social and economic justice in their communities and societies.

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