Project Summary

Community Health and Social Change: The HOGASA Project in Honduras

Background

Honduras is a poor country, and poverty is especially prevalent in rural areas, where more than half the population resides. There, 75 percent live below the poverty line and are unable to meet basic needs, such as decent housing, clean water and primary education. A lack of access to quality health services creates a precarious situation for entire communities. For women and girls, the situation is even more dangerous. The risk of dying in pregnancy or childbirth is 108 out of 100,000, with half of all deaths occurring in the postpartum period, primarily due to hemorrhaging. Overall, only 55 percent of women in Honduras give birth in a healthcare facility, and this figure is much lower in rural areas.

While the country strives to overcome poverty through development programming – such as promoting education and overall access to health care – Honduras has few resources to meet the unique sexual and reproductive health needs of young people. Of the 7.5 million people who live in Honduras, 25 percent are between the ages of 10 and 19. The health status of adolescents in Honduras is not acceptable; the country averages 137 births per 1,000 teens, and one of every five young women has had a child by the age of 19. Sexual health problems among adolescents can be attributed to a number of factors, including the initiation of sexual activity at a very early age; the lack of adequate sex education; and limited information and services to prevent pregnancies and sexually transmitted infections for youth.

Thus, to meet the need for a broad and comprehensive strategy to reduce maternal mortality and morbidity, as well as poor adolescent sexual health, CARE Honduras expanded their government funded community-based health project, HOGASA, to address deeply entrenched social and cultural norms that were inhibiting positive social and behavior change for improved health, particularly for poor women and girls.

**Hogares Gestores de Atención en Salud (HOGASA)** was initiated in 1996 as a community-based and household health management project in 21 municipalities in three departments of western Honduras – Lempira, Intibucá and La Paz.

Strategy

Through broad collaboration with the Ministry of Health and other local partners, HOGASA has contributed to significant decreases in maternal and infant death and improved management of healthcare resources in western Honduras. Yet despite these results, serious hurdles remain that negatively influence sexual, reproductive and maternal health (SRMH). Thus, CARE has sought to enhance HOGASA programming by implementing a number of activities aimed at improving knowledge, access and use of SRMH services. To do so, CARE identified three factors that perpetuate poor sexual and reproductive health in the communities of western Honduras: decreased attention to family planning, low male engagement, and lack of adolescent reproductive health services.

**Access:** Build a network of health volunteers to provide SRMH services, and help communities address social norms and traditions that play a role in impeding access of women and adolescents to those services.
Use: Create “Women’s Circles” where women learn about and discuss family planning, maternal health services, and emergency obstetric care, thereby increasing utilization of these services.

Knowledge: Provide training to health volunteers and providers on family planning counseling, cultural competencies, and working with young people.

The central component of HOGASA’s strategy is to provide ongoing support to Health Volunteers Network (HVN) to mobilize health services, including: emergency response to danger signs before, during and after pregnancy; family planning information; and case management for adolescents. The HVN works together with community organizations, such as local water committees and parent associations, to improve efficiency in the development, coordination and implementation of project activities, maximize the use of resources, and increase transparency. As such, the HVNs are important community allies in promoting more equitable relations between men and women, parents and their adolescent children, and providers and adolescents seeking health services.

In conjunction with local and national organizations, HOGASA has implemented “Women’s Circles,” which provide an opportunity for pregnant women to increase their knowledge of prenatal and emergency obstetric services; make plans for delivery, learn about the benefits of family planning; and discuss the risks of pregnancy and childbirth. Women’s Circles have been created in all three departments, resulting in an increase in deliveries in health facilities, as well as in the use of family planning methods and emergency obstetric services. The circles also serve as peer support groups where social pressures and gender dynamics in the household can be discussed in a safe space.

Integrated into conversations around SRMH are efforts to challenge common assumptions and attitudes towards gender roles, fertility and family planning. Specifically, HOGASA is encouraging greater communication between couples and between parents and children on reproductive rights and responsibilities; promoting self-esteem and leadership among youth to avoid pressure, especially from peers; and helping communities to address the role that social norms and traditions play in promoting and sustaining gender inequality, violence and poor sexual health among adolescents, especially girls.

Conclusion

By remaining committed to the communities in western Honduras, CARE has the confidence and breadth of programming experience needed to increase family planning and engage men, women and adolescents in the reproductive health and security of their communities. With ongoing support, HOGASA will continue to address the underlying causes of maternal mortality and poor adolescent sexual and reproductive health – including social norms that diminish the value of women and girls – thereby improving overall health in the neediest communities.