



FINAL REPORT FIRST PHASE

Fast and Fair: Technical strategy for CARE's support to
COVID-19 vaccine delivery in Guatemala

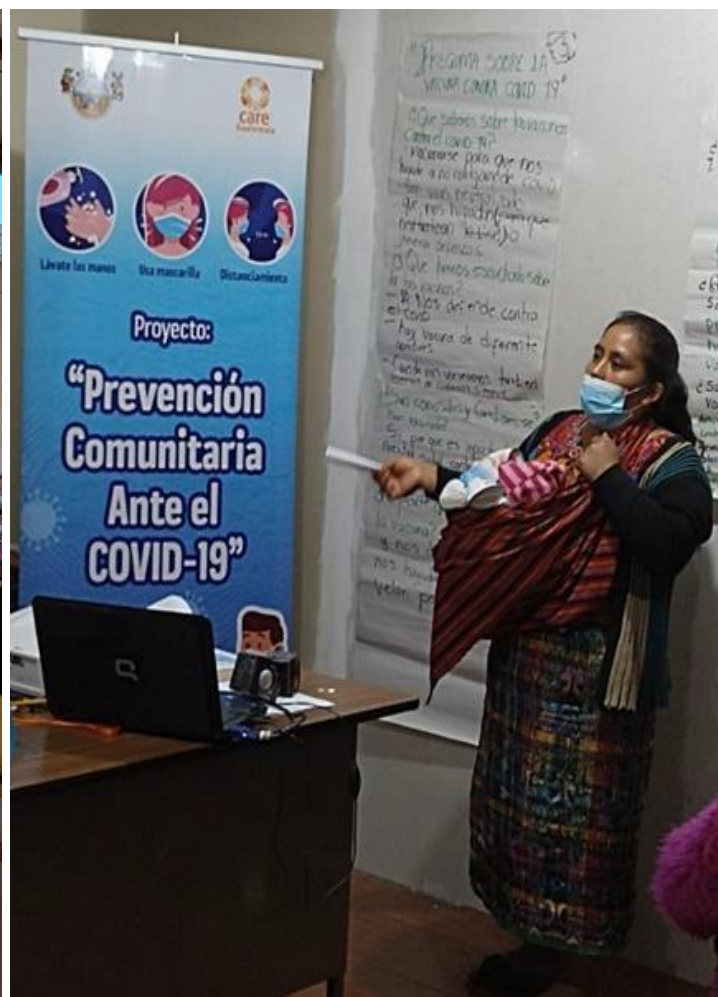


Photo: Midwives participating in the training workshop on the promotion of vaccination against COVID-19 in San José Poaquil, Chimaltenango.

March 2022, Guatemala.

General Description

Name of the Project:	Fast and Fair - Technical strategy for CARE's support of the delivery of COVID-19 vaccine in Guatemala
Project Location	6 communities in San José Poaquil, Chimaltenango, Guatemala
Project implementation period	september 2021 - august 2022
Population served	Direct: 1,210 people Indirect: 5,590 people
Budget Amount	USD\$ 30,000.00
Execution as of April 31, 2022	USD\$ 30,000.00 (100%)
Partner Organization	Association of Community Health Services -ASECSA-.
Donor	Vaccine Pooled Fund - CARE USA
Contact information	Lilian Lopez/Rogelia Soto (lilian.lopez@care.org/rogelia.soto@care.org)

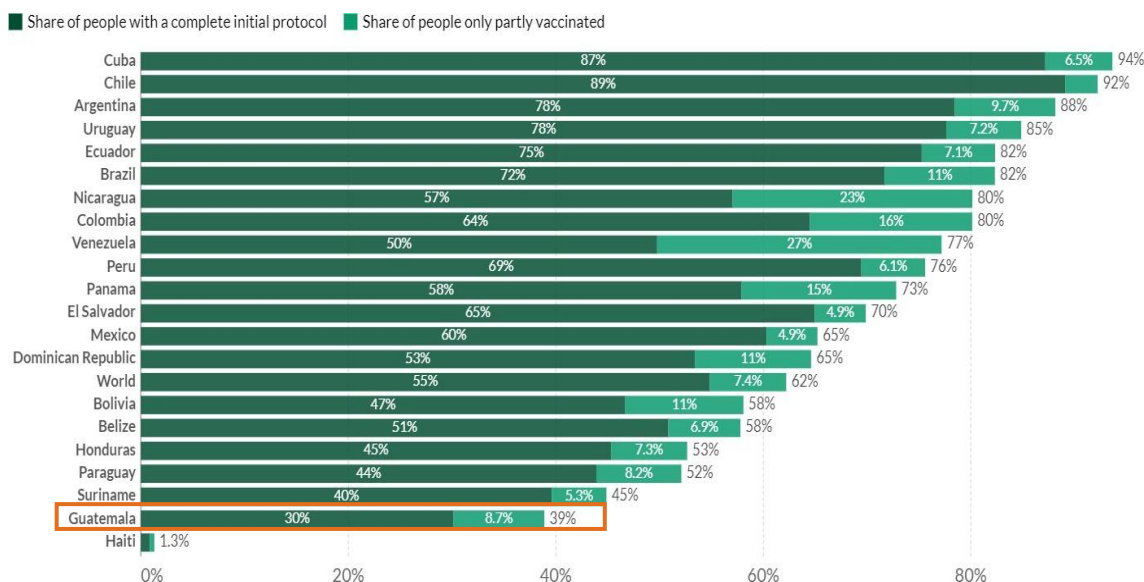
I. Project execution summary.

The COVID-19 pandemic has impacted the economy, political and social conditions in all countries of the world, however, countries with a high economy have reached almost 100% of their population vaccinated, on the other hand developing countries such as Guatemala report statistical records show that only 36% have a complete scheme. It is widely known that as long as there are unvaccinated countries, new variants of SARS-CoV-2 will continue to develop, which will make it difficult to end the pandemic, it is therefore essential to ensure that the vaccine reaches all countries and all people quickly and safely, without discrimination.

Guatemala is part of the COVAX mechanism in the self-financed country modality. The total number of doses administered against COVID-19 until March 31, 2022 is 16.7 million. Of this total, 54% corresponds to persons vaccinated with the first dose, 36.1% to persons with a complete vaccination schedule and the remaining 5% to those who acquired a booster dose after complete vaccination. The estimated population of Guatemala for those eligible to be vaccinated (12 years and older) is approximately 13 million people; this means that less than 50% of the eligible population has been immunized with the full schedule, making Guatemala the country with the lowest vaccination rate in Central America and the second lowest in Latin America, only ahead of Haiti (Figure 1).

A confluence of factors has led Guatemala to have such a low vaccination rate; the global restriction in vaccine supply, national regulations and logistical and budgetary obstacles have resulted in the difficulty in acquiring vaccines. Likewise, state health institutions have encountered much resistance, disinterest and distrust from the population regarding vaccination, especially in imminently rural departments and with a mostly indigenous population, which can be easily explained by the lack of information and promotion campaigns on vaccination, the possible side effects and above all in a culturally and linguistically relevant language, available/accessible in all platforms and media [banners, radio spots, television media and social networks].

Percentage of people vaccinated against COVID-19 in Latin America, as of March 31, 2022.



Source: Our world in data, 2022.

Particularly in the municipality of San José Poaquil [project intervention municipality] in the department of Chimaltenango, it has a total population of 33,454 people, 70% of whom belong to the indigenous people. The data on virus infection has had a high rate of positive cases of COVID-19 with a cumulative incidence of 1113.4 cases per 100,000 inhabitants and before the project intervention, only 14% of the population had a complete vaccination schedule (two doses), according to the records of the Ministry of Public Health and Social Assistance¹.

The project was implemented by CARE in association with the Association of Community Health Services - ASECSA - a non-governmental, non-profit association comprising a network of 58 community health organizations. ASECSA's member programs include community clinics and hospitals; associations of health promoters; midwives; cooperatives; traditional therapists; farmers; and health pastoralists. ASECSA's work has an impact, especially on the rural-indigenous and ladino poor population with little access to health services.

The first phase of the project aimed to strengthen and create institutional conditions and alliances with institutions that work on health issues at the community level, with the objective of strengthening COVID-19 community prevention by accompanying and supporting local actors at the community level, developing mass information and vaccination promotion actions; Likewise, facilitate conditions for the training of community health personnel (midwives and health promoters) for mild and moderate cases, and coordination with the local Health Center through the implementation of culturally relevant talks for the population of pregnant women.

¹ <https://tablerocovid.mspas.gob.gt/>

II. Results Phase I: Creation of institutional conditions and alliances for integrated health work

1. PROTECT AND EMPOWER

1.1. Strengthening CARE Guatemala's technical capacity to implement the Integrated Health Strategy by hiring a health specialist.

With the integration of personnel specialized in health issues [a Project Coordinator for Access to Integral Health], the capacities of the CARE Guatemala Country Office and the Identity and Rights of Girls, Youth, Indigenous and Mestizo Women Program have been technically strengthened for the implementation of the Integral Health Strategy, for which the following actions were developed:

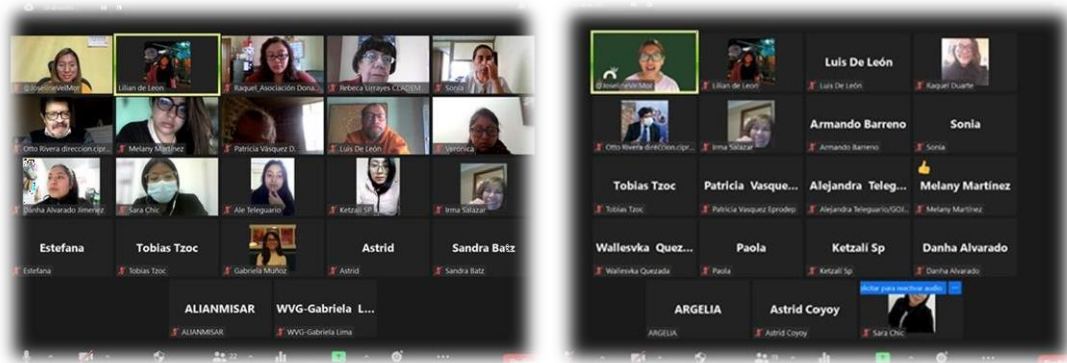
- a. *Coordinate and implement the Comprehensive Health Strategy:* As of March 2022, 24 meetings have been participated in at the institutional level of CARE Guatemala and with five health sector actors such as: the Association of Community Health Services, National Roundtable for the Rights of Girls and Adolescents -Mesa Niña- (image 2), National Movement of Midwives Nim Alaxik, Girls not Brides², Representatives of the Fast and Fair Initiative of Latin America (Honduras, Ecuador and Guatemala), in the framework of implementation of the Health Strategy, attention to the requirements and health needs of girls/adolescents, young and adult women [as an institutional priority].

Theoretical and methodological tools have also been developed, such as the Rapid Gender Analysis (RGA) [currently under revision], which compiles information from primary and secondary sources on the context and health conditions of Guatemala, and whose information guides the Country Office's intervention to respond to the health priorities of women and girls.

CARE Guatemala's Health Strategy has also been designed [currently under review], based on the experience of the Identity and Rights program, mainly in relation to the work with women and girls in the area of sexual and reproductive health and the prevention of gender violence. Likewise, the program has worked on the prevention of COVID-19 and the promotion of vaccination against SARS-COV-2 through communication and training strategies for key actors at the community level.

² *Girls Not Brides* is a diverse network of civil society organizations working to address child, early and forced marriages and unions around the world.

Meetings with national institutions participating in the Mesa Niña, year 2022.



Source: Mesa Niña, 2022.

- b. Develop operational plans and follow-up roadmap:** Programmatic instruments have been designed and implemented, such as operational plans and follow-up and evaluation roadmaps for the implementation of actions related to the strategy and health issues at the Program/Country Office level in contexts of violence and health emergencies. The plans that have currently been developed are: Action Plan for the implementation of Medical Days for Women Survivors of Violence, and Proposal for Equipment and Adaptation of Medical Clinics specialized in the care of Women Survivors of Violence.

These proposals were made within the framework of the implementation of the *Transfórmate - Mujeres libres de Violencia* Project, to be implemented in the Comprehensive Support Centers for Women Survivors of Violence (CAIMUS) and thus respond to the scarce primary health care available to women survivors of violence and women with limited economic resources or access to health services.

Image 3. Proposed Action Plan for Medical Conferences and Adequacy and Equipment of Medical Clinic



Source: CARE Guatemala, 2022.

- c. Establish and coordinate alliances and synergies with health organizations:** Considering the actors identified through the mapping process, 10 key actors were prioritized to establish possible alliances and partnerships at the level of organizations and individual or collective public health actors in the country, to promote joint actions to support and strengthen health care interventions at the community level for indigenous and mestizo women and girls.

There have been contacts with public health and integral health institutions, as well as with other actors involved in health issues, such as associations of midwives, health promoters, universities and governmental and non-governmental institutions. Meetings have been held with the Observatory of Sexual and Reproductive Health (OSAR), the Association of Community Health Services (ASECSA), the Institute of Inclusive Health (ISIS), the National Movement of Midwives Nim Alaxik, the Association of Community Development Cakchiquel (ADECCA), the Universidad del Valle de Guatemala (UVG), the Asociación de Estudios y Proyectos de Esfuerzo Popular (EPRODEP), among others, that have shown interest in addressing the health needs of the population and that are aligned with the objectives and areas of work of CARE Guatemala.

CARE and ISIS meeting for the upcoming implementation of the COVID-19 vaccination project.



Source: Care Guatemala, 2022.

- d. Participate in webinars, meetings and working and advocacy roundtables related to health:** Active participation in webinars [meetings held monthly] related to health, mainly ^{CANVAS³} health and its implementation at country level, presenting information relevant to the progress of the application in the Guatemalan population, the evaluation of the spread of the virus and the actions that have been developed within the framework of the project, such as the monthly meetings of the Fast and Fair initiative in the LAC region (image 5).

Likewise, the participation in advocacy spaces and working groups, such as the National Roundtable for the Rights of Girls and Adolescents -Mesa Niña-, the

³ CANVAS refers to CARE's annual planning.

National Roundtable for Comprehensive Sexuality Education and Girls not Brides (image 6), to position the rights and demands of girls/adolescents related to sexual and reproductive rights and comprehensive sexuality education at the national and regional levels. Support was provided for the rethinking of operational plans and actions to consolidate alliances at the regional level.

Image 5. Presentations made to CARE LAC on the Fast and Fair initiative.



Source: Table Niña 2022

Image 6. Girls not Brides and Girls not Brides workshop.



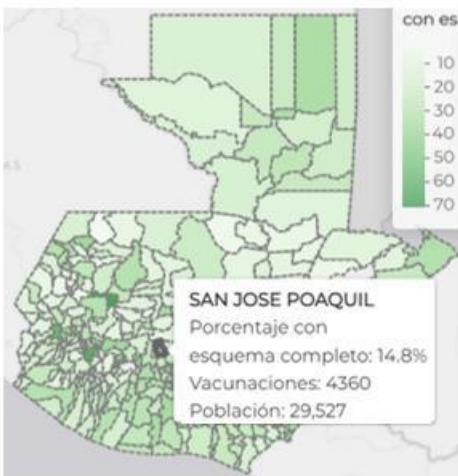
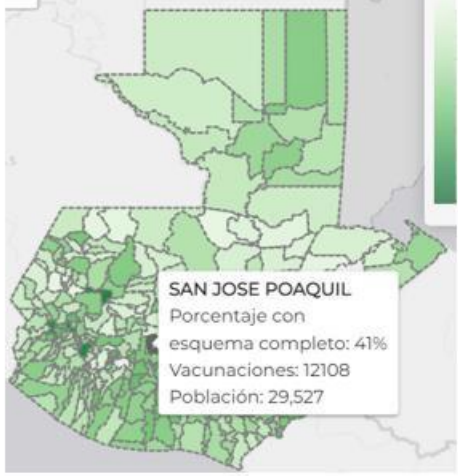
Source: Table Niña 2022

1.2. Strengthening community primary care in a Mayan territory - Implementation of the "Community Prevention of COVID-19" Project in San José Poaquil, Chimaltenango.

In order to strengthen the information and awareness mechanisms on the application of the vaccine against COVID-19 and to increase the coverage and vaccination rates against COVID-19 in the population of San José Poaquil, Chimaltenango, the partnership with the Association of Community Health Services -ASECSA-, an organization with more than 40 years of experience in promoting the right to community health, comprehensive through training, capacity building, reconstitution of ancestral practices, accompaniment, counseling and defense of the right to health and the right to health, organization with more than 40 years of experience in the promotion of the right to community health, integral through training, capacity building, reconstitution of ancestral practices, accompaniment, counseling and the defense of the right to health and life, the joint implementation of the project of *Community Prevention against COVID-19* was achieved.

The project actions were implemented during the months of December 2021 to February 2022 in the municipality of San José Poaquil, Chimaltenango, whose population projection for the year 2022 is 33,932 people; however, the eligible population to be vaccinated (over 18 years of age) is 29,527 ^{people4}. Prior to the implementation of this project, the municipality had a high rate of SARS-CoV-2 infection and only 14.8% of the population had a complete vaccination schedule (2 doses) against COVID-19 and after the implementation of the project, a complete vaccination schedule (2 doses) rate of 41% was reported, with a total increase of 26.2% (Table 1).

Tabla 1. Cuadro comparativo del total de personas vacunadas con esquema completo en San José Poaquil, meses noviembre 2021 y marzo 2022.

Período	Noviembre 2021	Marzo 2022
Población total vacunada con esquema completo	4,360	12,108
Porcentaje	14.8%	41%
Mapa de porcentaje de vacunados del municipio		

Fuente: Datos Tablero COVID-19, MSPAS, 2022.

The main intervention was developed in the community prevention of COVID-19, the training of community health personnel (midwives and health promoters) for the care of mild and moderate cases [of contagion] through the delivery of culturally relevant talks to patients of the San José Poaquil Health Center and the sensitization and awareness of the population at the municipal and community level regarding the importance of vaccination through radio spots and the perifoneo (public address system). The objectives established in the project were achieved, implementing an intervention logic from the strategic, municipal and community levels, with the following actions:

⁴ <https://www.ine.gob.gt/ine/proyecciones/>

a. **Promotion and awareness-raising actions with cultural relevance on COVID-19 prevention and vaccination measures.**

With the objective of promoting and sensitizing the population of San José Poaquil from an ethnic, linguistic and cultural relevance about the importance of continuing with prevention measures, as well as promoting vaccination against COVID-19:

✓ **Sensitization of pregnant patients at the Health Center on the importance of vaccination against COVID-19.**

Global and national statistics show that COVID-19 presents a more serious risk in pregnant women and this has resulted in an increase in the mortality rate due to the virus in this population. Likewise, as a result of the confirmation of the safety of vaccines against COVID-19 in pregnant women and the consequent increase in their vaccination, it has become evident that there is an inversely proportional relationship between the decrease in morbidity and mortality due to COVID-19 in pregnancy and the increase in vaccination.

In Guatemala, mainly in the rural context and with indigenous population, vaccination in general and in pregnant women specifically, has proved to be a challenge for health authorities. According to data from the Ministry of Public Health and Social Assistance (MSPAS) as of December 2021, only four out of every ten pregnant women had been vaccinated against COVID-19 and of the four, only three had a complete schedule (two doses). For this reason, the project prioritized pregnant women as the target population to be sensitized and informed regarding their vaccination.

In reference to this situation, **five informative and awareness-raising talks were given to 85 pregnant women** from different communities of San José Poaquil, all belonging to the Kaqchikel population group, ranging from 16 to 40 years of age, and **10 men**, partners of the pregnant women, also participated in these talks. These talks took place at the Health Center of the municipal capital, where the women were attended as patients and were receiving their respective prenatal care.

In the first talk, it became evident that the number of pregnant women who had a complete vaccination schedule was below 40% (of the 14 women present at the event), and the reasons given by these women for their reluctance to be vaccinated were mostly due to the high level of misinformation and beliefs regarding the components and side effects of the COVID-19 vaccines. In the subsequent discussions, we

efforts to address myths and beliefs about vaccines were intensified, and consequently during the last talks it became evident that vaccination of pregnant women has increased, since during the last survey conducted at the San José Poaquil Health Center, **80%** of pregnant Kaqchikel women who attended their prenatal care appointment were actively immunized with a complete vaccination schedule against COVID-19 (see Annex I).

Talk to pregnant patients about vaccination against COVID-19, San José Poaquil Health Center, February 2022.



Source: CAREA Guatemala, 2022.

b. Capacity building of community health personnel on case management and community-based COVID-19 vaccination.

The public health system in Guatemala should cover approximately 70% of the country's total population; however, despite the efforts and continuous strategies, it is estimated that approximately 30% of this 70% of the population does not have access to the public health system. This coverage deficit is located in a high percentage of the indigenous population and in rural areas, and those contexts of poverty and extreme poverty. It is precisely in these contexts where ancestral natural medicine and traditional therapists assume the responsibility of providing relief to the health ailments of this population.

Midwives and community health promoters are widely recognized and respected in the communities, especially by the indigenous and rural population; and therefore, it is important that these actors are one of the key axes to contain and treat COVID-19 in the community. Likewise, it is essential that the strategy of acceptance and trust towards the vaccine is first focused on community leaders, traditional therapists and leadership figures in the community; since they, as social actors, influence the decisions and acceptance of proposals and initiatives at the community level.

Under the project, primary care was strengthened at the community level through the promotion and sensitization with ethnic and cultural relevance on the

COVID-19 prevention measures, mainly vaccination, and thus generate information and awareness about the impact of the pandemic and how to establish immediate care mechanisms or reduce the risks of infection at the community and national level, so training was developed where 30 health promoters and midwives from San José Poaquil participated and acquired knowledge for the prevention of infection and how to promote the application of vaccination against COVID-19 from the development of health work at the community level.

✓ **Training of health promoters on care, prevention and vaccination of COVID-19 from the community**

Health promoters are empirically trained health workers (they acquire their knowledge in specific training processes on health aspects in organizational spaces or social projects focused on health) who work in communities, orienting their action towards reducing the precariousness of health care and primary health care in the country.

Four training **workshops** were facilitated where **15 health promoters** (9 women and 6 men) from the various communities and villages of San José Poaquil were trained. The methodology applied allowed participation, socialization of experiences and knowledge of the promoters on the care of people in the communities, group discussions and plenary sessions with questions about mild and moderate symptoms that could be treated at the community level, as well as medicinal plants that could be treated at the community level, as well as medicinal plants that could be used for treatment and the importance of the application of vaccination against COVID-19, using audiovisual material [a series of videos] that explain and inform about COVID and the vaccine, resolving doubts, myths, and finally producing a positive, progressive and continuous modification with respect to the possible negative perceptions of health promoters regarding vaccination against COVID-19. Participants indicated interest in being able to replicate what they had learned in their communities, especially with those who were reluctant to access vaccines, and informative material was given to the training participants (see Annex II).

Image 8. Training workshops for health promoters of San José Poaquil



Source: CAREA Guatemala, 2022.

✓ Training of midwives on community-based care, prevention and vaccination of COVID-19

Midwives are part of the traditional therapists recognized at the community level, however, it is important to recognize that they are more than midwives; their natural mission is not only the care of pregnancies and births, but also the restoration of health in any case of illness. They are considered as an authority and as the doctor/physician in the community and many times, in the absence of state/official health personnel, they assume health responsibilities especially in the sexual and reproductive health care of indigenous and mestizo women.

Three training **workshops** were held to strengthen the knowledge of **15** Kaqchikel indigenous **midwives** from the various communities and villages of San José Poaquil. The training workshops oriented the midwives on the management and treatment of mild and moderate symptoms of COVID-19, the use of medicinal plants in the treatment, as well as the importance of vaccinating the population, the different types of vaccines that exist, safety in pregnancy, possible side effects and addressing widespread beliefs and myths.

At the end of the training and information workshops, the midwives indicated that they were interested in replicating what they had learned with their patients and in their respective communities, thus achieving greater openness and acceptance with respect to the application of the vaccine against COVID-19 (see Annex III).

Image 9. Training workshops for midwives in San José Poaquil



Source: CAREA Guatemala, 2022.

2. MOBILIZE

2.1. Communication campaign to inform communities about COVID-19 preventive measures and the safety, efficacy, value and availability of vaccines based on community needs.

Communication actions and campaigns were developed and implemented for the mass dissemination of Covid-19 preventive actions/measures, and to raise awareness about the safety, efficacy, value and availability of vaccines. Audience segmentation was achieved according to the analysis of the campaign's reach to the target population and clear information about the vaccine was provided, ensuring that the integration of platforms for community reflection and feedback was an integral part of the entire demand creation process.

- a. **National Level:** Starting in October 2021, an official communication campaign was launched at the national level to

Through animated videos in three different Mayan languages: K'iche', Kaqchikel and Mam, it is also available in Spanish and in order to be inclusive, it has also been translated into sign language. The dissemination channels have been massive platforms, such as community radio, which has been the main channel of dissemination of the campaign, however, videos have been distributed through Facebook (in Mayan and Spanish languages) and WhatsApp.



The impact of the content and acceptance of the videos on social networks is evidenced in the statistical records of Facebook, with the report of a direct reach to approximately **742 thousand** people monthly, with an average of **4.5 million** indirect interactions and **5.3** million direct and indirect reactions.

(<https://fb.watch/aCGB7W8aFM/>)

Table 2. Fast and Fair, Facebook/Instagram graphic campaign statistics.



Facebook / Instagram: SBCC Guatemala

15 sept 2021 - 13 oct 2021

In the live view, select Region, Age or Gender to filter all fields by these metrics

REACH KPIs

Reach

742,3 m

Frequency

7,1

Impressions

5,3 M

Engagements

4,5 M

"CONVERSION" KPIs

VCR

0,04 %

Engaged %

612,63 %

Share Rate %

0,004 %

COST (Q) KPIs

Amount spent

62.352

CPM

11,8

CPC (all)

90,89

PERFORMANCE BY AD

Ad name	Reach	Freq	Impressions	Video Views	Average Watch Time	VCR	Post reactions	Comments	Shares	% Engaged	Spend (Q)	CPM	CPC (all)
Video_Prevention_Q'eqchi_52s	42.492	7,5	318.513	266.454	00:00:00	0,00 %	7	0	9	627,11 %	\$3.800	\$11,93	84,44
Video_Prevention_Mam_52s	133.471	4,8	638.537	548.968	00:00:00	0,00 %	9	1	6	411,32 %	\$7.587	\$11,88	122,37
Video_Prevention_K'icke_52s	148.519	4,5	661.625	562.456	00:00:00	0,00 %	6	0	5	378,72 %	\$7.558	\$11,42	94,48
Video_Prevention_Kaqchikel_52s	353.219	3,8	1.357.253	1.182.593	00:00:00	0,00 %	11	0	6	334,81 %	\$16.069	\$11,84	129,59
Video_Prevention_3-Generations_52s	597.631	3,8	2.289.419	1.986.823	00:00:00	0,00 %	19	0	7	332,46 %	\$27.337	\$11,94	72,90
Total	742.273	7,1	5.265.347	4.547.294	00:00:00	0,00 %	52	1	33	612,63 %	\$62.352	\$11,84	90,89

Source: Facebook/Instagram 2021

b. Local Level:

Within the framework of the implementation of the *Community Prevention of COVID-19* project, three fundamental actions were carried out regarding the need to inform communities about the preventive measures of COVID-19 and the safety, efficacy, value and availability of vaccines according to the needs of the community:

- ✓ **Printing and distribution of informational material on prevention, care and vaccination against COVID-19**

The population's reservation and distrust regarding vaccination against COVID-19 arose even before the vaccines entered Guatemala. The vaccination plan elaborated by the government did not contemplate mass dissemination mechanisms as a main axis, which should have been addressed before the vaccine was distributed for its application in the general population.

Initially, official information about vaccination from the government was scarce, in Spanish and directed towards urban contexts; this generated misinformation about vaccines in the indigenous population, in rural locations and in conditions of poverty. Due to the scarce access to safe and official media, information about the vaccine was distorted and provided by people outside the health system and with access to unfiltered social networks where false and altered news and unreliable anti-vaccine testimonies circulated.

Once the government's strategy included available information about the vaccine in all the Mayan [majority], Garifuna and Xinca languages spoken in the country, the disapproval of the vaccine has been slowly decreasing, however, it is necessary to redouble efforts to reverse the effect that misinformation has had on national vaccination rates against COVID.

To reinforce the provision of accurate and safe information to the community population, informative material on prevention, care, treatment and vaccination against COVID-19, prepared by ASECSA with the approval of the Ministry of Public Health and Social Assistance, was reviewed, edited and adapted (see Annexes IV and ^{v5}).

The topics covered in the graphic materials were:

- Community-based COVID-19 prevention and treatment
- COVID-19 and vaccination
- Medicinal plants and COVID-19

A total of **9,900 copies** corresponding to two manuals and three posters (annexes 1-4) were printed and distributed to:

Table 3. Distribution by type of graphic material and location

MATERIAL	LUGARES DE DISTRIBUCIÓN DEL MATERIAL			TOTAL
	Centro y puestos de salud	Promotores de salud y comadronas	Organización nacional de Comadronas ⁷	
Manuales sobre "Prevenir y tratar el Coronavirus desde la Comunidad"	300	1,200	500	2,000
Manuales sobre "COVID-19 y la vacunación"	400	1,500	500	2,400
Afiche sobre la "Prevención de COVID-19"	1,000	1,200	800	3,000
Afiche sobre "Vacunación de COVID-19"	750	750	500	2,000
Afiche sobre "Plantas medicinales y el COVID-19"	250	250	0	500
TOTAL	2,700	4,900	2,300	9,900

Source: CAREA Guatemala/ ASECSA

Image 10. Distribution of graphic material to midwives and health promoters



Source: CARE Guatemala.

Source: CAREA Guatemala/ ASECSA

⁵ <https://drive.google.com/drive/folders/1TGuqJW58m4xVvZicPBXL8Zi8emq4wkFn>

✓ **Promotion of vaccination against COVID-19 in radio and television spots at the community level.**

The communication actions carried out at the local level include vaccination promotion and awareness campaigns by means of a radio spot and a television spot.

- **Radio spot**

An awareness campaign was successfully developed for community prevention of COVID-19 through vaccination, through radio spots in Spanish and Kaqchikel (in the variant of San José Poaquil) in **2 local radios**: "Estéreo Libertad" and "Estéreo Motagua", both stations have coverage throughout the municipality of San José Poaquil.

Spot one: *The COVID-19 vaccine reduces the severity, duration and viral load of people who become infected, that is why it is important that we go to get vaccinated, that way we protect ourselves, the family, the community and especially pregnant women. Remember if you are between 12 to 17 years old you must be accompanied by your father, mother or responsible.*

Spot two: *Have you not yet been vaccinated against COVID-19? You can now get vaccinated against COVID-19, remember that the vaccine helps our body to develop defenses that can protect you and reduce the risk of infection.*

Overall, the message was broadcast 9 times a day for three months, with a total of **810 repetitions** during the project's execution period, reaching a population of approximately 4,500 Poaquileños (see in the audiovisual ^{folder6}).

- **TV spot**

The TV spot was recorded in both Spanish and Kaqchikel (in the variant of San José Poaquil) and was broadcasted through the **local cable channel** "MAYA VISIÓN" which has coverage in 14 communities of the municipality (Paneya, Chuacay, Paniwasiwan, Hacienda Vieja, Xepalama, Patoquer, Paley, Caserío Centro, La Garucha, Chiquisaya, Panimasiguan, Cabecera San José Poaquil, Xejayub and Los Pinos).

There were 50 broadcasts per month for three months, with a total of **150 repetitions** during the project's execution period, reaching a population of approximately 2,400 people (see in the audiovisuals ^{folder7}).

⁶ https://drive.google.com/drive/folders/1lInUT_4P1ig_r9i35znAe2ZZN5IRibI

⁷ <https://drive.google.com/drive/folders/1lfdvVoTxEFSRyJqh04l87F5WyRmPSeP->

Image 11. TV spot promoting vaccination against COVID-19.



Source: CARE Guatemala, 2022.

- ✓ Prevention of COVID-19 and promotion of vaccination through mobile actions in the communities.

Messages for prevention and promotion of vaccination against COVID-19 were developed in Spanish and Kaqchikel (in the variant of San José Poaquil), which were transmitted through **loudspeakers in the** project coverage area on strategic days with high population influx, such as on market days, around parks and busy streets.

Eighteen campaigns to raise awareness and promote vaccination against COVID-19 were carried out during three months in the main streets of **6 communities**: Hacienda Vieja, Paley, Patoquer, Panimacac, Chimixayá and Xepalamá; which evidenced the lowest vaccination rate in the municipality. The population reached was approximately 400 people in urban and rural areas.

Perifoneo of messages promoting vaccination against COVID-19.



Source: CARE Guatemala, 2022.

2.2. Experience exchange between health promoters and midwives

In the final phase of the implementation of the *Fast and Fair* initiative in Guatemala, an event was held to share the experience and knowledge acquired in the training and sensitization processes that trained the midwives and health promoters who participated in the development of the project.

The methodology implemented in the exchange allowed the development of a series of actions that reinforced the knowledge acquired in the training process that the participants received during the execution of the project, as well as feedback from the participants regarding the topics and activities carried out within the framework of the project and the promotion and awareness actions for the prevention against COVID-19.

a. Reinforcement of topics addressed in the training process for midwives and health promoters through a playful methodology.

With a playful technique developed through a lottery game adapted to the context of COVID-19, whose contents were illustrations of symptoms, personal protection elements and elements for the treatment of viruses from traditional Mayan medicine. This exercise reinforced the knowledge acquired in the three trainings received by the midwives and health promoters regarding the topics addressed in the project: signs and symptoms of COVID-19; personal protection and prevention measures, including vaccination; and the treatment of COVID-19 with medicinal elements used by traditional Mayan therapists.





b. Feedback, messages and opinions of midwives and health promoters who participated in the project's training activities through recreational activities

In order to gather the opinions [opinions and messages] of the health promoters and midwives on the training contents, through an activity called *The spider web* [making a spider web with wool], this facilitated the interaction of the participants whose thread of conversation was to share their experience of participation in this process with respect to the training and sensitization activities of those who participated during the execution of the project, In the conversation process, they were also able to express their opinions and feelings about what they learned and assimilated in the training, the challenges they faced in the exercise of their work in the context of the pandemic, opportunities that they believe can be taken into account for future projects involving the issue of COVID-19, vaccination and traditional therapists.

As a health promoter, our work was complicated by the quarantine restrictions, curfew and the risk of contagion that we suffered, but I was able to do my job with my patients, I wore my mask and antibacterial gel to protect myself, sometimes I had to go out with my baby on my back, but thank God we never got infected [Promoter participating in the project].

We, the midwives, our work is undervalued, and in the middle of the pandemic we were not allowed to attend our patients, they told us that we should send the women to the hospital and the pregnant women did not want to go to the hospital for fear of the virus, we had to attend them even though we knew that they could take away our licenses for a year if we did not obey what they told us at the Health Center [Midwife participating in the project].



- c. **Distribution of promotional materials with prevention messages against COVID-19 to midwives and health promoters who participated in the project's training and awareness-raising activities.**

Promotional thermos flasks with the CARE logo were distributed to midwives and health promoters, randomly including the following messages regarding COVID-19 prevention measures: "Vaccination against COVID-19 saves lives, get vaccinated too!"; "Let's prevent contagion... let's keep social distance", "Let's prevent contagion... let's use the mask correctly"; and "Your health is in your hands... wash them with soap and water". These promotional items are a constant reminder of the topics focused on in the trainings, as well as positioning CARE as a reliable and strategic ally for community health work and collaborative work with traditional therapists.



d. Life stories, testimonials and experiences of midwives and health promoters who participated in the project's training activities.

Video documentation of stories, testimonials and life experiences of a midwife, a health promoter and a health promoter was made, so that they could express in their own words and in their mother tongue, the work they do in their communities as traditional therapists and actively promoting health to the inhabitants, as well as their challenges, challenges and the ways in which the project has had a positive impact on them and how they can continue to strengthen the capacities of these social actors in health, as well as the spaces for meeting and advocacy.



III. Intervention strategy (Activities)

The implementation and development of the Fast and Fair strategy: Technical strategy for CARE's support to the delivery of the COVID-19 vaccine in Guatemala, has required a logistical and coordination preparation from CARE Guatemala, first to strengthen the technical capacities of the organization in order to implement the Comprehensive Health Strategy of the country office; and also for the implementation of the project "Community Prevention against COVID-19" in partnership with ASECSA.

The main activities carried out during the implementation of the Fast and Fair strategy were as follows:

- a. Induction, training and preparation of the Health Specialist:** For an adequate implementation of CARE Guatemala's Health Strategy and the achievement of the project's objectives, results and indicators, as well as the integration of CARE International's approaches and the care of the participants in each stage of the project, induction and accompaniment was provided to the Project Coordinator for Integral Health Access [Health Specialist in the framework of the project] in programmatic and financial aspects.

from the Country Office and the Identity Program for the implementation of CARE Guatemala's Health Strategy and the project development framework.

- b. **Exchange meetings with health actors and organizations:** In order to establish strategic alliances, we participated in 6 exchange meetings with 14 actors in 4 different organizations and instances that work and address the different issues of integral health, community health and sexual and reproductive health; in order to identify needs, opportunities and possibilities for joint intervention within the framework of CARE Guatemala's Health Strategy or a specific project.
- c. **Meetings to plan advocacy and intervention actions with the Roundtable in favor of Girls:** Monthly participation in regular and special meetings, as well as in the different advocacy and communication actions for the positioning and demands of girls/adolescents related to their sexual and reproductive rights. CARE Guatemala has represented CARE Guatemala in the Roundtable in favor of Girls, whose participation is integrating the leading team of the Roundtable forming the Executive Secretariat since August 2019.
- d. **Design, editing and preparation of graphic and communication material for prevention of contagion and promotion of vaccination against COVID-19:** an objective campaign with greater reach/coverage was developed, the informative contents of COVID-19 prevention and importance of the vaccine were contextualized to the particularities and characteristics of the Guatemalan population in linguistic and cultural aspects and using alternative media with a wider audience at municipal and community level. For whom the messages disseminated through social networks [with more than half a million reproductions⁸] and local television media [cable channels] with videos, local radios and perifoneo with informative spots, this allowed informing and raising awareness among the population effectively and in their language, since the messages were translated into Mayan languages with majority speakers [Kaqchikel, K'iche' and Mam].

The graphic materials on prevention, care, treatment and vaccination against COVID- 19, were coupled to a popular language, mediated and illustrated to the context of the population for better understanding and assimilation, mediation of content by the target population, for the distribution was done through institutions and key actors at the local level such as the Health Center, Midwives [midwives] and Health Promoters, thus achieving a dissemination of material at the community level of information regarding vaccination, as well as demystification of the process and its results; This resulted in a significant increase in the vaccination rate in the municipality of San José Poaquil, Chimaltenango [particularly].

- e. **Coordination meetings with ASECSA:** in the process of implementation of the project's actions carried out in association with the Association of Community Health Services - ASECSA-, as a mechanism to ensure compliance with the objectives,

⁸ <https://www.facebook.com/CareGuatemala/videos/3185327315031720>

The programmatic and financial support was provided through six meetings [five virtual and one face-to-face], in which the importance of integrating the gender, participation and indigenous peoples' rights approaches in each of the training process methodologies and actions for the promotion and dissemination of information related to the prevention of COVID-19 and promotion of vaccination against the virus was addressed.

This coordination made it possible to establish communication channels with ASECSA's technical team, local organizations and stakeholders, in order to carry out a synergic and organized work for the benefit of the population at all levels [national, municipal and community] on the prevention of virus infection, as well as on the importance of vaccination.

f. Supervision, monitoring and evaluation visits of the project's intervention activities:

In follow-up to the project's actions and activities developed with the participants, three field visits were made to the municipal capital of San José Poaquil, where ASECSA as implementing partner executed the *Community Prevention project before the COVID-19*. Through the participant observation technique, it was possible to measure the development of the methodology in awareness talks about vaccination for pregnant women in the Health Center, as well as a training to health promoters and a training to midwives; as it allowed the participation and intervention of the participants in the processes, sharing experiences [in the case of the pregnant women attended in the Health Center] and valuation of the socialized knowledge [in the case of the Health Promoters]:

I got the vaccine before I was pregnant, it is important that we get the vaccine, I had slight discomfort and pain, but with exercise it went away later... [Pregnant woman receiving care at the San José Poaquil Health Center].



It is important to know how to prevent COVID-19 and the medicines we can use to cure ourselves, [this] information has facilitated this training process [that we are receiving]... [Health promoter participating in training process]... [Health promoter participating in training process]....



The strategic accompaniment in the intervention area of the project allowed for interaction with the participants, thus getting to know their interests, challenges and community beliefs regarding COVID-19 and vaccination issues, allowing for a timely and focused approach to the most common concerns and opinions, and providing an opportunity for the expression and clarification of any doubts or comments regarding these issues.

IV. Indirect and indirect population

Beneficiaries	Direct		Indirect		Total	
	Proposals	Reached	Proposals	Reached	Proposals	Reached
1. Midwives			50 patients	50 patients		
2. Promoters			50 patients	50 patients		
3. Patients of health center		95	5 members family	5 members family		475
4. People who listen to campaign information radio spots and commercials television	900		5 family members	5 family members	4,500	4,500
5. Scope of messages in speaker						
Totals	1,080	1,225	5,370	5,650	6,450	6,875

Beneficiaries	Direct population reached		
	Women	Men	Total
Midwives		0	

Promoters			
Health center patients			
People listening to the campaign information spot radio and television spots			900
Message reach in speaker			
TOTAL	729	496	1,225

V. Successes, Challenges and Lessons Learned

a. Success

- ✓ The partnership with a community-based organization such as ASECSA with experience in community health and local recognition was strategic to carry out joint work in the communities of San José Poaquil. ASECSA involved the local Health Center, as well as organizations whose base of operations is in this municipality (ADECCA), as this ensures acceptance and involvement on the part of community actors and leaders and therefore, the community in general.
- ✓ The rapprochement with organizations of traditional therapists, such as the National Movement of Midwives, has allowed these organizations to recognize CARE Guatemala as an ally to vindicate the figure and rights of traditional therapists and the indigenous health system as a fundamental part of the national health system.
- ✓ The implementation of a communication and information campaign on the vaccine in Mayan languages, in a language contextualized to the population coverage of the project and the use of alternative means of communication [community radio, perifoneo, local television channels and social networks] allowed to reach a better coverage and population at the municipal and community level of San José Poaquil and in social networks at the national level, allowing better access to the information.
- ✓ The training processes developed with health personnel [Health Promoters and Midwives] recognized at the community level on COVID-19 and the vaccine against Covid-19, allowed the socialization with key actors in primary health care at the community level on the symptomatology of COVID-19 and the effectiveness of the vaccine against the virus, information that will be disseminated to patients, created conditions of direct interaction with people, which allowed greater confidence, acceptance and above all awareness of the need and importance of the vaccine.
- ✓ The project promoted continuous and sustained vaccination against COVID-19 in San José Poaquil, achieving a 26.2% increase in the vaccination rate in this municipality during the three months of project implementation (according to official data from the Ministry of Public Health and Social Assistance).

- ✓ Health promoters and midwives were trained on the proper treatment of COVID-19, the use of medicinal plants in mild and moderate cases, the importance of vaccination against COVID-19, and addressing beliefs, myths and misconceptions about the side effects, sequelae and reactions of vaccines.
- ✓ ASECSA's bilingual staff (Spanish-Kaqchikel) facilitated the work and interaction with the indigenous communities, since it was essential that the topics and key messages be addressed in their native language, for greater comfort and understanding, and as a form of respect for their identity and customs.

b. Challenges

- ✓ Guatemala continues to be the country with the lowest vaccination rate in Central America and the second to last in the Latin American region, and the main reasons are the reluctance and distrust of the population in general, but with emphasis on the indigenous population and in rural contexts.
- ✓ Nationwide infections continue to increase, in part due to the considerable decline and in some cases complete disappearance of the implementation of restrictive and protective measures by the government and the general population to curb and prevent COVID-19 infections.
- ✓ Continue with these actions to strengthen health servers at the community level, since it has been demonstrated the enormous potential of a community space to promote health care, especially among sectors of the population that normally do not attend or do not have ideal access to primary health care services. These efforts open an avenue for the creation of new educational and awareness-raising spaces.

c. Lessons learned

- ✓ The application of COVID-19 prevention protocols in an appropriate and responsible manner prevented the occurrence of incidents of contamination and spread of the virus among the participants in the field activities.
- ✓ The partnership with social health organizations at the local level [Centro de Salud de San José Poaquil, ASECSA and ADECCA] is strategic for the implementation of training processes on COVID-19 and primary care and mild cases, as well as dissemination mechanisms on the importance of the vaccine and its effects on people.
- ✓ The use of alternative means of communication such as social networks, local radio stations, local television channels and perifoneo, for the dissemination of COVID-19 prevention mechanisms and the importance of the vaccine against COVID-19, allowed for better coverage and population outreach in their local language.
- ✓ The editing and approval of audiovisual and written material must be more agile to achieve the printing or dissemination of this, therefore, these processes must be the first to be planned due to the long process that is needed to be executed.

VI. Voices of participants

- **María Pichiya: (midwife)** "Grateful to the institutions for having given her the opportunity to be better prepared for the COVID-19 issue, she believes it is very important given the lack of concrete information on the pandemic, and urges that follow-up be given to strengthen all the midwives in the municipality," she said.
- **Juliana Samol: (midwife)** "She thanks all of us who were in the intervention of the training process for giving their time and to the donors who supported the process, as it was a strength for her in her knowledge and she learned a lot about the pandemic and the vaccine, as well as knowing the respiratory system," she said.
- **Orlando Chuta: (health promoter)** "For his part, he is grateful and pleased with everything he has learned during these 4 workshops, for him it is important these topics on COVID-19, because this virus is here to stay and we must be prepared to prevent infection in our communities.
- **Santiago Chutá: (Promoter and President of ADECCA)** "As president of ADECCA, he thanks ASECSA and CARE for the support provided to the institution with the training of midwives and health promoters, despite the precariousness and lack of concrete information from the health authorities, midwives and promoters in the communities have faced the pandemic from their knowledge and ancestral practices, a practice that from generation to generation has been transcending treating people for their illnesses.

Thank you video of two fellow health promoters: Everilda Oxi and Elvia ^{Luc9}.

⁹ <https://1drv.ms/u/s!Ajk30M0tlfJpg0Tb60mPTHPhbesv?e=0ndXqf>



VII. Annexes

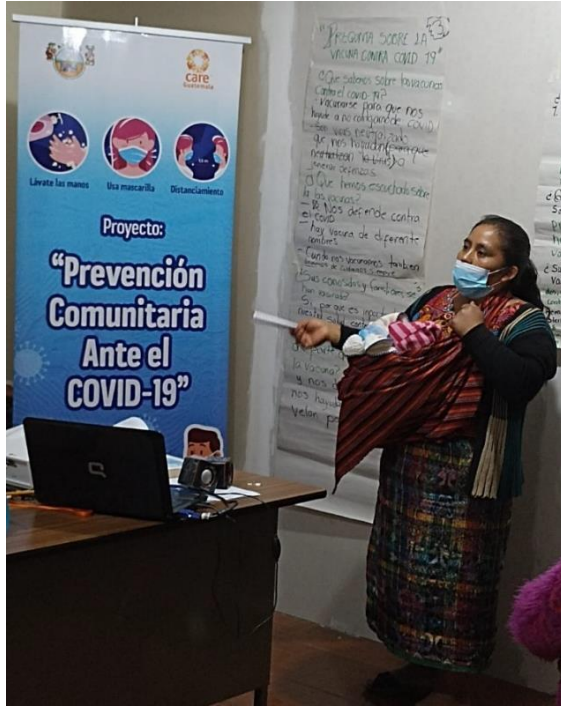
- Annex I - Photographs of talks given to pregnant patients at the Health Center



- Annex II - Photographs of the training of health promoters



- Annex III - Photographs of the midwife training sessions




- Annex IV - Delivery of informative graphic material on prevention, care and vaccination against COVID-19



- Annex V - Information graphic material on prevention, care and vaccination against COVID-19

COVID-19 Y LA VACUNACIÓN




¿Qué tipos de vacunas se están administrando?

- ASTRAZENECA/OXFORD (Inglaterra)
- MODERNA (Estados Unidos)
- SPUTNIK V (Rusia)
- PFIZER / BIONTECH (Alemania y Estados Unidos)

¿Cuáles son los beneficios del vacuna?

- Evita que enfermemos gravemente si nos contagiamos.
- Disminuye la posibilidad de contagio.




¿Cuáles son los efectos secundarios de la vacuna?

*Depende de cada cuerpo, los efectos pueden ser distintos:

- Dolor, hinchazón, enrojecimiento en el lugar de la inyección.
- Dolor de cabeza, en las articulaciones y/o muscular.
- Escalofríos, fiebre, náuseas.

¡Para proteger a nuestra familia y nuestra comunidad, debemos vacunarnos!



PREVENCIÓN COVID-19



¿Cómo Prevenimos el contagio del Covid-19?

- Lavado de manos permanentemente con agua y jabón.
- Distanciamiento Social.
- Uso de mascarilla.
- Cuando estornude cúbrase la boca y la nariz con el codo doblado.

¿Cuáles son los síntomas del covid-19?

- Fiebre.
- Tos seca.
- Dificultad para respirar.
- Dolor o congestión nasal.
- Dolor de Garganta.
- Diarrea.



Si presenta síntomas leves puede ser tratado en casa y en la comunidad como cualquier catarro. Pero necesita tomar medidas de prevención para evitar transmitir la enfermedad.

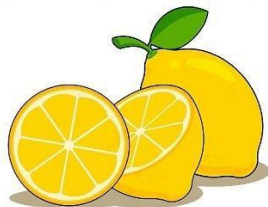
Si los síntomas son graves es necesario ir al servicio de salud más cercano para que le hagan el examen y si es necesario se le traslada al hospital.



GOBIERNO de
GUATEMALA

MINISTERIO DE
SALUD PÚBLICA
Y ASISTENCIA
SOCIAL

PLANTAS MEDICINALES Y EL COVID-19



Plantas para el alivio de la Tos

LIMÓN:

- Se puede tomar como té o bebida, mejor si es endulzado con miel, o puede hervir un limón entero junto con la cáscara.

TOMILLO:

- Prepare un té y añada dos cucharadas soperas de tomillo seco en una taza de agua caliente. Deje reposar 10 minutos antes, colar y beber. Lo puede hacer 3 veces al día.

JENGIBRE:

- Con un trozo de jengibre prepare un té, en una taza de agua y tómelolo 3 veces al día.

Plantas para el alivio de la gripe

TÉ DE LIMÓN:

- Cocer las hojas o el tallo blanco. Se puede preparar una taza 3 veces al día.

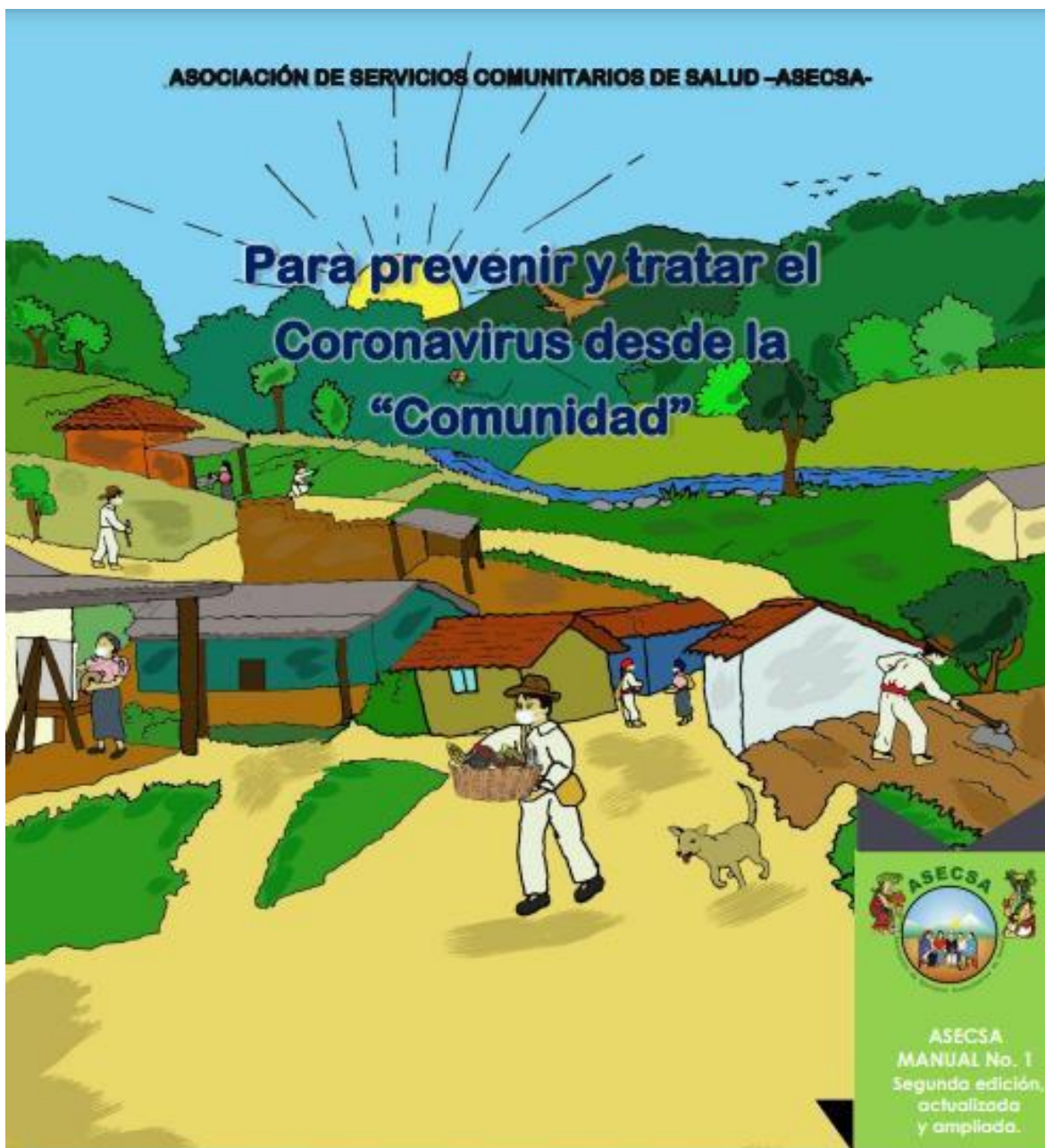
TÉ DE SALVIA:

- Colocar unas hojas de salvia en una taza de agua hirviendo, se reposan 10 minutos y se toma, puede endulzarlo con miel. Se pueden tomar 3 tazas al día.

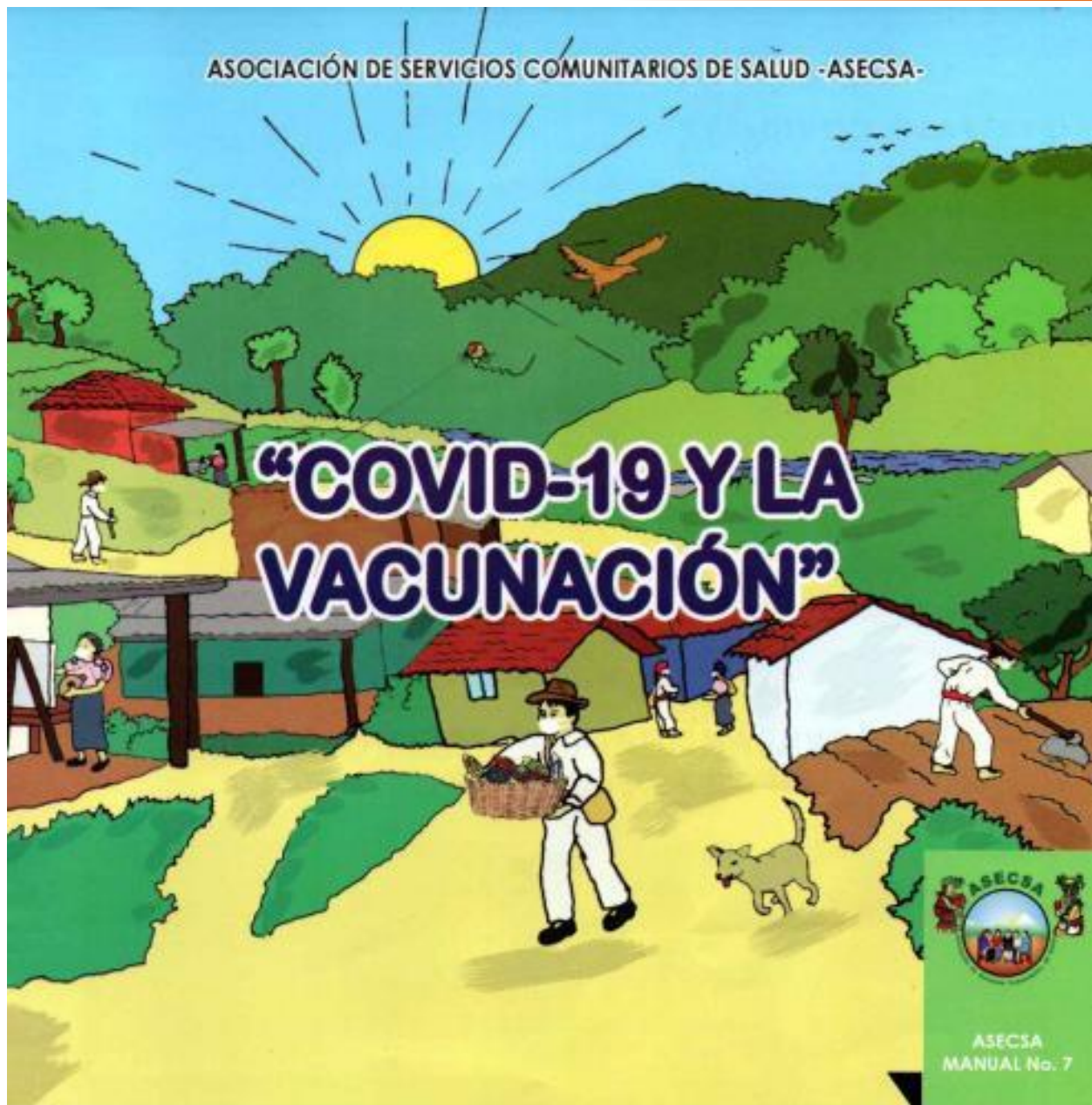


Si los síntomas son graves es necesario ir al servicio de salud más cercano para que le hagan el examen y si es necesario se le traslada al hospital.

MANUALS



Compartimos este material para informar sobre el Coronavirus, de manera sencilla y entendible en las comunidades, con un enfoque de prevención y promoción de la salud. Es una enfermedad nueva que no conocemos, pero tendremos que convivir con ella. Inicialmente traerá muchos problemas a nivel familiar, comunitario, pueblos y países; pero también lecciones como lo dijeron recientemente nuestras abuelas y abuelos ante el nuevo B'aqtun: la necesidad de una nueva era de paz y armonía entre la humanidad, con la madre naturaleza, el cosmos y nuestro entorno.



Compartimos este material de manera sencilla y entendible sobre la VACUNACIÓN. La Vacuna es la forma más efectiva para prevenir Covid-19 y evitar muertes. La vacuna es una sustancia pequeñísima del mismo virus que al ingresar a nuestro cuerpo crea defensas naturales. Ayuda a la convivencia entre nuestro cuerpo y el virus. Cada cuerpo reacciona diferente a la vacuna, la mayoría no sentirá ningún síntoma. Hay muchos mitos sobre la vacuna que debemos analizar antes de hacerles caso.