

# LET'S MAKE HISTORY, BY TELLING OUR STORIES

2021 EDITION







# INTRODUCTION

They say that stories shape the world.

"Let's Make History by Telling Our Stories" was an invitation issued by the Pan American Health Organization, the Florida International University Global Health Consortium, and ReAct Latin America to communities in Latin America and the Caribbean, asking them to tell their stories related to infection prevention, use of antimicrobials, and antimicrobial resistance (AMR).

Launched in 2021, the purpose of this invitation was to hear what is happening at the community level with respect to AMR and learn about the ingenious initiatives implemented to address problems in connection with the One Health concept and human solidarity.

We are grateful to all the people from seven different Latin American countries who responded and sent us their stories, particularly Diana Andrade, Hugo Noboa, and Hans Labra, whose stories about the importance of natural childbirth, health promotion, and protection of a Mapuche river were selected. Their stories are the seed.

... the seed to recognize that AMR is found in everyday life and among ordinary people; the seed with the potential to bear fruit in terms of having a better understanding of the problems and the new actions being taken; the seed to learn how to contain and mitigate one of the main threats to global health, from the heart of the community.

We would also like to thank the jury members for their sensitivity in the selection process: Denisse Vásquez Guevara, University of Cuenca (Ecuador); Luis Pablo Méndez, to Medicines Network (Guatemala); Darío Montenegro, Argentine Federation of General Medicine; and Juan Pedro Alonso, Institute of Clinical Health Effectiveness (Argentina).

In one of the novels by the Chilean author Marcela Serrano, one of her characters recalls: "There is an old myth that says that telling stories can cure illness and save lives; without stories, we would still be living in the past. Take my hand, Camila, come with me and I'll tell you one."

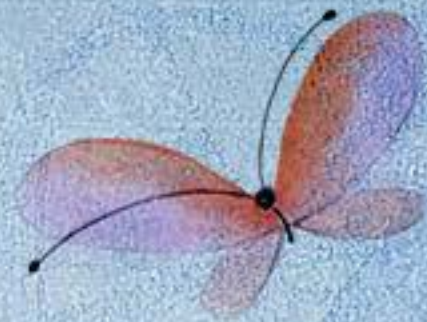
These stories heal. Everyone is invited to read and tell them to others so that they can achieve their purpose.

We will hear and tell more stories in 2022.



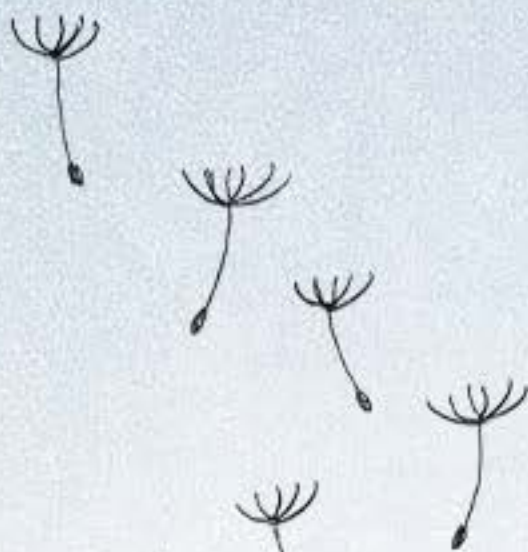
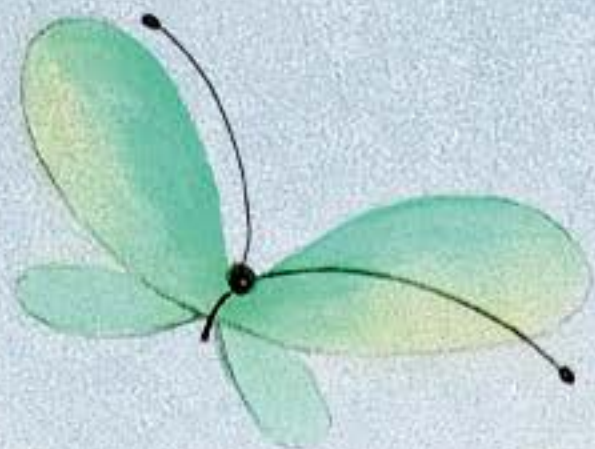


LET'S MAKE HISTORY,  
BY TELLING OUR STORIES  
2021



# MY LABOR, YOUR FIRST CONTACT WITH FRIENDLY BACTERIA

Diana Geoconda Andrade Rodas



**It all** began in the body of a new mother who carried in her womb the most cherished of her dreams: a longing named Martina.

The uncertainty of the first months of pregnancy made the wait last for what seemed like forever, until on November 12, 2015, you, dear Martina, decided to begin your journey into this world.

I must confess that I harbored a fear of the unknown process of natural childbirth, because of how often my friends and even colleagues had rejected this procedure due to the risk of maternal depression, as well as media propaganda that makes us believe that natural childbirth is a painful, heartbreaking, lonely experience. It was precisely this "culture of fear" that momentarily made me waver in my decision. However, it was my conviction that the friendly bacteria and saprophytes in my vaginal canal would colonize your skin, your airway, and your digestive tract, that made me hold fast to what I felt was most important. I was willing to give you everything in my power, dear Martina, so that your immune system and the rest of your organs would function properly.

The microbiome, a trending topic in the medical field, is a set of friendly bacteria and the respective genetic material that we normally have throughout our body, which helps regulate our metabolism and prevent the development of various diseases.



We could compare it to a rich and diverse jungle, as the researcher Dulcenombre Gómez Garre of the San Carlos Clinical Hospital in Madrid tells us; yes, a jungle that has a transcendent effect on the environment inhabiting us, enriching the variety of organisms in our bodies. Its absence would make relevant parts of us fail to function properly, so much so that human behaviors such as self-medication and cesarean deliveries have turned this jungle into a monoculture, leading to the onset of multiple metabolic, neurodegenerative, cardiovascular, neoplastic, and allergic diseases.

That's why I ultimately made the decision to bring you into this world by natural childbirth. After 48 hours of coaxing you to come out of your precious biological cradle, on November 14, 2015, you opened your eyes to the light for the first time. There you were, all puffy, pink, wet, and full of all those friendly bacteria that allowed your biological system to fit into with this world and that until now had prolifically prevented the onset of multiple diseases that might be harbored in your little body. It was a tough 48 hours, but every second was worth it, knowing that you would be in better condition to healthfully adapt to this world.



Gazing at your tender little body snuggled up on my belly, trembling and wet with love while you gave your first cry and the umbilical cord was still beating, was the most wonderful feeling I have felt. I was so enraptured that the professionals who attended us during the delivery gave us a moment alone so that you and I would have an intimate space with room for only deep and true love. And as I watched you, it only took a few minutes for you to start looking for your source of nourishment, that golden liquid loaded with friendly bacteria that flowed drop by drop from my breasts to your inexperienced and delicate lips.

It has been five years since that I made that decision and I have to say my choice has proven to be the right one, because in general you have been a very healthy girl; you've only taken antibiotics twice in your life, you've never been hospitalized for any reason, and you enjoy enviable health. You are a happy and balanced child, just like your microbiome!

There is no better way to thank these sweet and selfless friends called bacteria than by sharing our experience!



**Diana Geoconda Andrade Rodas.** Medical practitioner specialized in Family and Community Medicine. Master in Health Research. She currently works as a Medical Specialty Scholarship recipient. She has worked as a Research Assistant at ReAct Latin America, resident physician at the Unidad Renal del Austro (UNI-REAS) [Austro renal unit], and resident in surgery at the José Carrasco Arteaga Hospital.





LET'S MAKE HISTORY,  
BY TELLING OUR STORIES  
2021

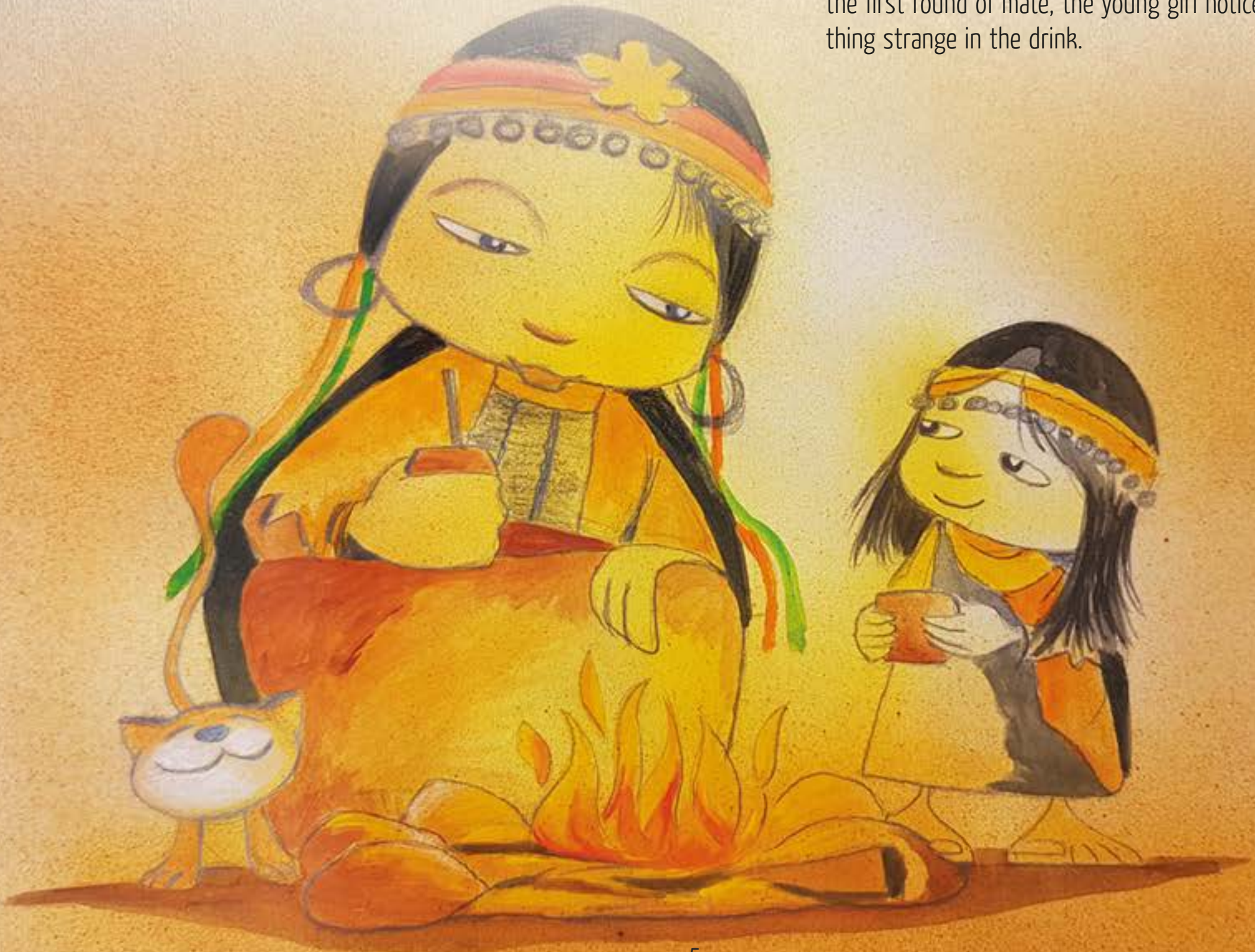
# KALFUMALEN AND THE SPIRIT OF THE CHESQUE RIVER

Hans Labra Bassa

**The** Chesque Alto box canyon is located west of Ruka pillán (Villarrica volcano) and is one of the few remaining stands of native forest. A couple of decades ago a fish farm was set up there that began to pollute the river water with large quantities of toxins and antibiotics. And then, everything changed.

Chesque means "paternal grandfather" in the Mapuzungun language, and, according to the Mapuche worldview, what happened was that fish farming broke the balance and hurt the spirit of the river (ngenko).

When her grandmother sat down next to the wood stove, one of the cats jumped up and curled up between her legs. During the first round of mate, the young girl noticed something strange in the drink.





—Your mate is salty, ñaña— Kalfumalén said to her grandmother, handing the cup of mate back to her.

—What do you mean, my child? If I boil the water first and let it cool a little...— She did not finish the sentence because she was interrupted by her granddaughter.

—But ñaña... you mustn't get water from the river, you know it's polluted. "Remember that ever since the fish farm came, not even the animals will drink water from it and if one of them does, it dies"— she said looking at her grandmother sternly.

What Kalfumalén said was one of the stories that her grandmother had personally told her, like the one about a little calf that she had to bury with great effort one day, or about the neighbors who had either lost animals or gotten sick. That's why she imitated her with a rare mixture of sarcasm and helplessness.

—In summer the springs dry up and what the municipality brings me is barely enough for my plants and my dogs and cats— said the old woman in resignation. —What would I do without my little animals? That's why I don't give them water, from the river no, no, no!— she said, petting her cat, adding —well, and if I have to give it to them, I boil it and cool it down for them.

Because of the pollution, the municipality has been distributing 500 liters of water per family per week for years, but after watering the garden and giving some to the animals, not to mention personal hygiene, the old woman and the rest of the people do not have enough water and must draw it from the river, still believing that boiling will make it safe.

Kalfumalén has seen her grandmother's health worsen over the years and wants to help her, but she doesn't know what to do. The old woman refills the mate cup with hot water. She offers it to her granddaughter, who sorrowfully drinks the salty mate, purely out of love for her ñaña. After drinking it, she hands it back without saying a word, while thinking... can a human get

rich at the expense of harming the environment and people's health?

—The damage that the fish farmers have done to the ÑukeMapu is inhuman— her grandmother said, as if reading her thoughts.

Kalfumalén looks her in the eye, but the old woman's gaze is lost in the cup of mate, her wrinkled hands and tired face reflecting the pain of a generation who saw how the salmon farm destroyed nature.

—They are not people!— the old woman exclaimed.

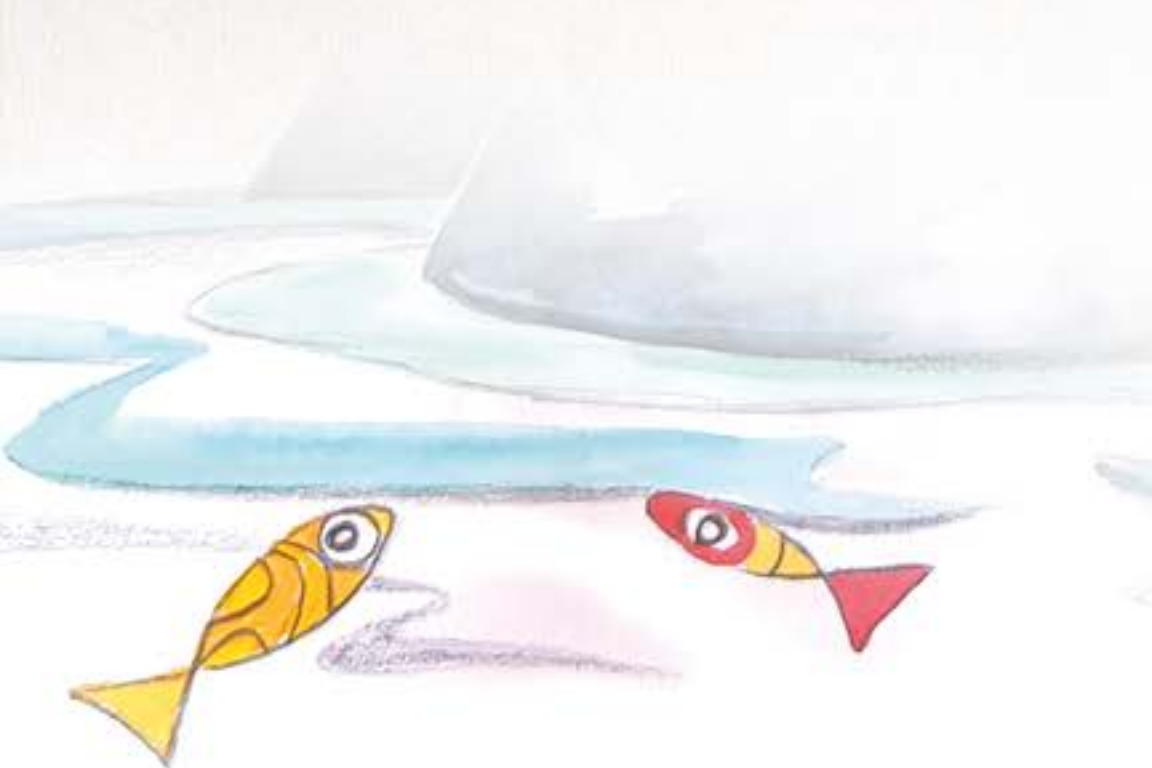
They remained silent. Another round of salty mate. All of a sudden, the grandmother cheered up because she remembered something and told Kalfumalén that she found out that the surrounding communities had organized and were preparing a lawsuit against the fish farm. This sparked a ray of hope in her granddaughter. A meeting would be held that afternoon at the operation's head office. Kalfumalén was excited and decided to go.

As she left the house, her grandmother stopped her, kissed her on the forehead and gave her a smile. Kalfumalén was happy, motivated, and hopeful as she walked. When it was her turn to introduce herself, she said that although she had no formal education or technical knowledge, she would help in any way she could. It was at that moment, thanks to the research that the people in the area had done, that she understood the real reasons why the mate tasted salty and why her grandmother was getting sicker with each passing day. She also saw all the work being done by the communities to demonstrate how their rights were being violated and she understood, among other things, that this fish farm was actually a laboratory.

When the meeting was over, she ran back to her grandmother's house to tell her what the communities had discovered. The company was involved in the production of juvenile fish and smolt, and the maturation of salmonid broodstock. In other words, it was artificially fertilizing "eggs", which were actually small fish that were then transferred to pools where they were fed until they reach the juvenile stage, and then matured until they reached their adult stage by adding large amounts of sodium chloride to the water.

—That's the problem, ñaña! Don't you see? They are 'anadromous' fish, that's why the mate is so salty— Kalfumalén said with such certainty that her grandmother looked at her in amazement and great joy.

—Oh, my child, I don't understand any of that— slamented the old woman —but I'm glad that you're joining the people who are





protecting the river, as I'm too old for that.

—Look, ñaña, what happens is that...— Kalfumalén spoke, patiently and calmly explaining it to her as she would to a young child; but her grandmother, despite giving her full attention, did not hear with voice with her ears, but with her heart, understanding the feeling behind her granddaughter's words. Her granddaughter's voice carried her back to the river, through the places of her childhood, to those magical years when there was no pollution and the people went down to the river to bathe or fetch water, where they met as a community and happily shared the pools along the banks of the river, something that the new generations could not enjoy. Her own son went to live in the city and, since her husband had died years ago. She was alone, although her granddaughter visited her from time to time. It was a blessing to be with her granddaughter, who she looked at in amazement as her voice transported her back through her memories.

Kalfumalén explained that anadromous fish are fish that are born in fresh water at the headwaters of the river basins and then swim downstream to the sea and mature in salt water, and later go back up the rivers to reproduce in fresh water.

—You see, ñaña? The fish farm is breaking the natural cycle of the fish— The communities discovered that the fish farm used a method to avoid having to take the fish to maturation cages located in the sea, which means they are applying large quantities of salt in the pools to mature the salmon. By adding applying tons of sodium chloride each day, the fish that previously had to be trucked to the coasts and fjords in the south for maturation are kept in "salted" pools at the headwaters of the river, which produces significant profits for the industry in terms of savings in transportation and infrastructure costs. This unnatural technique then started to be used by several salmon-producing countries worldwide, and is now referred to as "land-based smolt maturation," "post-smolt production," or "recirculating aquaculture systems," known throughout the world as "RAS."

Her grandmother had fallen asleep listening to her voice and was already falling out of her chair, so she wanted to lie down and happily let herself be led by her granddaughter to her bed. The idea that they were putting salt in the water made the young girl feel completely helpless because of all the environmental harm and the damage to people's health, but her concern went beyond that.

—Don't the fish get sick?— Kalfumalén asked at the meeting.

—Of course, lamien, very much so— replied a peñi —and to prevent high mortality rates the industry uses huge amounts of



antibiotics.

Kalfumalén imagined the trapped, overcrowded and sick fish that were forcibly kept alive by antibiotics. Her heart tightened at the thought of everything that was happening to the water. At the meeting, they analyzed how fish farming began in Mapuche territory as an artisanal endeavor, but then illegally expanded its operations, growing by 3,000% without any authorizations or permits, and without anyone being able to stop it.

—It grew by three thousand percent?— Kalfumalén asked in shock, as if she were trying to get someone to correct her if she was wrong. But she was not.

—That's right, it grew at the same rate as the demand for

---

\* Resolución de Calificación Ambiental (RCA).





salmon worldwide— replied a neighbor —but in a totally illegal way and at the expense of the environment, leaving us with no water, even though the river continues to flow.

—And the authorities haven't done anything?— Kalfumalén asked.

—They dismissed all our complaints and gave environmental approval for fish farming— answered another neighbor.

They explained that although government agencies are the ones that should prevent unscrupulous businesses from setting up polluting industries, those agencies are controlled by politicians. In other words, those who make the decisions are not scientists or professionals with a vocation, but partisan politicians put there to promote the development and growth of private economies.

—And development and private growth threaten nature and human rights, especially the rights of indigenous peoples— said a leader of one of the Mapuche communities.

There was a full moon that night. After putting her grandmother to bed, Kalfumalén went down to sit by the river to listen to its sounds. She felt sad, and wanted to promise the ngenko that she would protect it and do everything she could to prevent them from continuing to pollute the river. However, fish farming operations increase in summer, and they discharge waste at night; the water, even in the dim light of the moon, turned cloudy and smelly.

Kalfumalén began to cry and apologized to the river for the wickedness of those who polluted it. She looked at the full moon and took refuge in it, in its immense and luminous calm. In the morning she got up early when it was still dark and went out to get water upstream of the fish farm. She wanted to serve some mate made with clean water to her grandmother and surprise her. When the old woman came into the kitchen, Kalfumalén was already back and waiting for her with the table set.



—Kumeantu, ñañita— she said smiling and gesturing her to sit down. The old woman looked radiant and her gray hair was loose, which gave her a luminous aura and wrapped her in a holiness that she had never seen before, which reminded the girl of the full moon she had taken refuge in the night before. The old woman drank the mate that her granddaughter served her and enjoyed it without saying a word. Kalfumalén noticed some crystalline tears running down her wrinkled cheeks and cried silently, but they were no longer of tears of sorrow, but of joy.

—Chaltumai, my child, your mate is delicious. I enjoyed it very much, as it reminded me of the kind I used to drink with my husband so very many years ago.

The old woman stood up, walked over to her granddaughter and kissed her on the forehead as usual, then walked to the door and left, saying "I am going out to join those who are protecting the river." Kalfumalén watched her as she walked toward the water and it seemed like she was not even limping. Suddenly, an unexpected mist appeared and enveloped the radiant old woman, so that Kalfumalén could not see where she had gone.

Frightened, she ran towards the river, but could not find her. Her footprints had vanished right before reaching the water. In the vegetation, the thick mist drew human forms, including ones she thought she recognized as not only her grandmother, but her grandfather too, her beloved chesque. At the same time, she thought she heard a voice in the sound of the water that said: "beware the yanaconas who have sold themselves." Then a premonition came over her; she ran back home and went straight to her grandmother's room. The cold, lifeless body of her beloved grandmother was still in bed, surrounded by her dogs and cats.

Kalfumalén then understood that her grandmother's spirit had said goodbye to her and that she had joined the ngenko. She tenderly kissed her on the forehead, went to get some hot water and mate, and sat next to her in silence to drink it, free of any salt or antibiotics. Only the sound of the river could be heard in the distance. Her grandmother had joined the telluric forces of nature and would fight by their side so that the environmental trial against the Chesque Alto fish farm would be ruled in favor of ÑukeMapu.

## GLOSSARY

- **Kalfumalén:** kalfu - blue; malen - girl or woman; blue girl (in the Mapuche worldview "kalfumalén" is not a proper name, but a female protector spirit, similar to an angel).
- **Chesque:** maternal grandfather.
- **Rukapillán:** Ruka - house; Pillán - great spirit; where the great spirit dwells.
- **Mapuzungun:** Mapu - earth; zungun - speech or language; the language spoken on earth.
- **Mapuche:** Mapu - earth; Che - people; the people of the earth.
- **Ngenko:** Ngen - owner, guardian spirit; Ko - water; spirit of the water.
- **Ñaña, ñañita:** grandmother, old woman, elderly lady.
- **ÑukeMapu:** Ñuke - mother; Mapu - earth; Mother Earth.
- **Cachai:** see, understand.
- **Lamien:** Sister.
- **Peñi:** Brother.
- **Kumeantu:** Kumey - well; Antu - Sun; Good morning.
- **Chaltumai:** Thank you very much.
- **Yanaconas:** indigenous people of any ethnic group, including the Mapuche, who sell to or work for the extractive system, attacking their own people and Mother Earth. (Yanacona is the name given by the ancient Araucanians who for centuries resisted the "friendly Indians" who arrived with the Spaniards to invade the southern lands; these indigenous people were recruited from among the Abyayala populations that they had already defeated).



**Hans Cristian Labra Bassa.** Chilean of Mapuche origin. Studied Professional Graphic Design at INACAP. Repair and construction of lutes, harps, and guitars. He is currently a music worker, street musician, and percussionist for Antu kai Mawen, and has published two books "LLUVIA DE SOL, La Memoria del Canto" 2007; and "PAZ UNIVERSAL, El Derecho de la Humanidad a un Buen Vivir" in 2021. He is an artisan, works in silversmithing and silkscreen printing. Environmental activist.

**Note:** On 25/08/2021 the Final Judgment of the THIRD ENVIRONMENTAL COURT OF VALDIVIA was issued, which partially accepted the claims against the Chesque Alto fish farm and the National Director of SEA, HERNÁN BRÜCHER VALENZUELA, who did not duly consider citizen and community comments opposing the project presented in 2016 by the owner of the fish farm, GERMAN MALIG LANTZ.

For the legal notice about the judgment: <https://bit.ly/Chesque>

For more information about post-smolt production: <https://bit.ly/3LnDYmN>





LET'S MAKE HISTORY,  
BY TELLING OUR STORIES  
2021

# MARGARITA, HEALTH PROMOTER

**Hugo Noboa**

**My** name is Margarita, born in Esmeraldas. When I was a child my parents moved from the town where we lived, initially to Quito and then to the parish of La Esperanza in the Pedro Moncayo canton. That's where I grew up, fell in love, and married the man who today is my husband, Fernando.

He is a good man, very understanding. At first he was upset when I went to health meetings, saying I was wasting time instead of dedicating myself to housework, but now Fernando is my biggest supporter in my work as a health promoter. I do it without pay, simply because of my desire to help other







people and my commitment to this town that welcomed my family with so much love. I didn't go to college but did graduate from high school.

When I had my first child, I was barely 18 years old. I was totally inexperienced, didn't know how to breastfeed, and thought I was doing everything wrong. My son was very skinny. My mother tried to help me, but I still couldn't feed him. I decided to go to the parish health subcenter, but that didn't help much either. To make matters worse, my son was often sick, especially with colds and the flu. It was distressing to see him like that, since he was so small and fragile. One time I went to see a doctor in a nearby town who prescribed an antibiotic to give to my son, Cephalosporin, I think.

Everything felt like a disaster. My son didn't gain weight, got sick, and couldn't breastfeed well. The whole thing came to a head when I started working for a few hours on a flower plantation to bring in some money. During that time my son was left in the care of a friend of my mother's, because my parents were also working and could not take care of him.

One day, Etelvina, a quite young and very hardworking woman who was dearly loved in the parish, visited some of us mothers who were waiting at the health subcenter. She was part of the Cantonal Health Council of Pedro Moncayo and was responsible for some of the community health activities in our parish, which she did as a volunteer.

Etelvina told us that a doctor was coming from Quito



—“She knows a lot about breastfeeding”— she told us —“and how to help mothers do it successfully”. —“Who wants to go?”— she asked. She told us that she herself would find someone to help us with transportation. At first we had misgivings, but then became more convinced as Etelvina spoke, so four of us decided to go. We agreed to meet early the next day at the entrance to the church.

I arrived on time with my son. I had a hard time convincing my husband to let me go, and he initially said no, saying it was a waste of time. But since Etelvina was his aunt and he respected her, he finally agreed.

Only two mothers went to the appointment. The other two were probably not allowed to go. We took the inter-parish bus to the Tabacundo Health Center. There were other women we did not know, from different parishes. Most were from Tabacundo and the surrounding area.

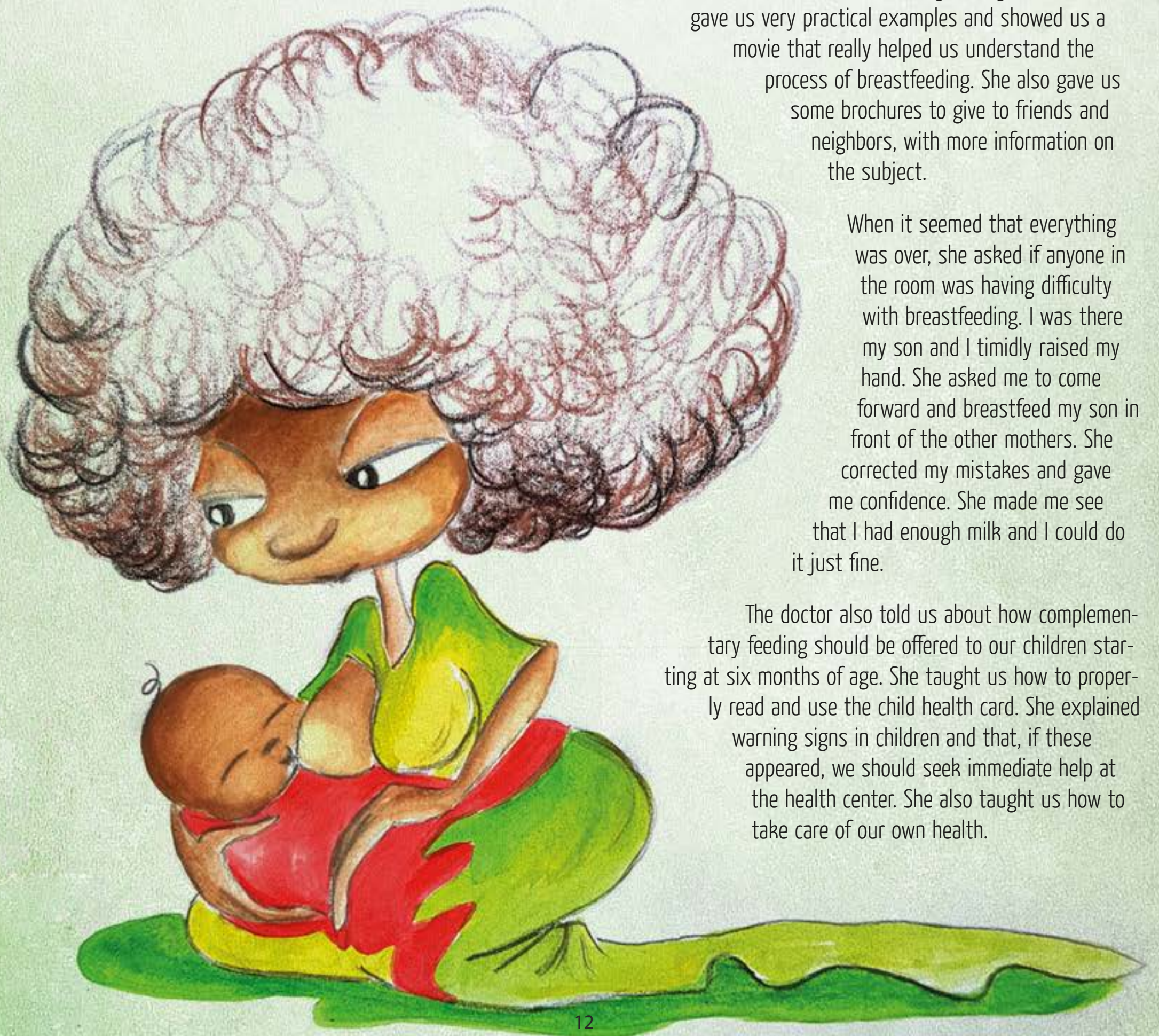
Etelvina did everything possible to make Rosa and me feel comfortable, the two mothers who had come from La Esperanza. When she introduced us to everyone, she said that we were “two beautiful flowers that came on behalf of the parish.” Everyone laughed.

The talk with the doctor from Quito was very good; she really put us at ease. She told us about the importance of breastfeeding as an exclusive diet until 6 months of age and if possible, to keep doing it for up to age 2. She also told us that it is crucial during the first thousand days of life, because it gives children all the protection they need to prevent diseases in the future. Breastfeeding transfers many bacteria that are beneficial to health and strengthen the baby’s immune system. I was a little surprised because I did not expect bacteria to be so important and even thought that all bacteria caused disease, but the doctor explained that this was not necessarily the case: we all have bacteria in our body that have vital functions, such

as the assimilation of nutrients and good digestion. She gave us very practical examples and showed us a movie that really helped us understand the process of breastfeeding. She also gave us some brochures to give to friends and neighbors, with more information on the subject.

When it seemed that everything was over, she asked if anyone in the room was having difficulty with breastfeeding. I was there my son and I timidly raised my hand. She asked me to come forward and breastfeed my son in front of the other mothers. She corrected my mistakes and gave me confidence. She made me see that I had enough milk and I could do it just fine.

The doctor also told us about how complementary feeding should be offered to our children starting at six months of age. She taught us how to properly read and use the child health card. She explained warning signs in children and that, if these appeared, we should seek immediate help at the health center. She also taught us how to take care of our own health.







¡Who would have thought that after that experience I would be able to breastfeed my son so well! The doctor told me to throw away the bottles I was using, and stop using the canned milk I had bought. A few days later my son started to gain weight and got sick less often.

At the second talk, a month later, I was more enthusiastic. This time, the talk was about "diarrheal diseases, respiratory infections, and proper use of antibiotics". My husband was much more supportive. I remember that the same pediatrician who had spoken to us before about breastfeeding told us about the danger of abusing antibiotics, which unfortunately are sometimes prescribed indiscriminately by some doctors or pharmacy staff, or by neighbors or relatives. At that talk, I learned that antibiotics are also used to raise livestock.

The doctor told us that the use of antibiotics is justified in only certain cases of diarrheal diseases and acute respiratory infections, and that it must always be the right antibiotic, in the right amount, and in the proper form.

What I am telling you happened many years ago. I am now a more mature mother and have three children, two boys and a girl. Juanito, the oldest, is 9 years old. I had no problem with breastfeeding or feeding the other two children. They have grown up healthy.

I know how to responsibly use certain medications, not just antibiotics. And what little I know, I try to share with other people, especially women. When they tell me that I am "a health promoter", I laugh and tell them not really, that I am

just a neighbor concerned about the health of others, especially children.

The mothers we work with are generally well aware of family and community practices for taking care of their children's health, but often find it difficult to follow them entirely

When a conference was held in Quito in 2015 (the 5th "Matilde Hidalgo" Congress for Health and Life), a delegation of mothers from Pedro Moncayo attended. We thought we would be able to tell others about our experience, which is much more than what I have told you today. Unfortunately, there was no session on "community health work" or "child health." So we took advantage of the "social participation" session to talk about our experience, although not as much as we would have liked. We learned many new things at that conference. We are always willing to share our knowledge and experience.

Today, the Cantonal Health Council of Pedro Moncayo no longer exists, despite helping us so much. I don't know why. But many of us mothers who were educated through that experience continue to be concerned and we help as much as we can with people's health, especially women and children. The neighbors tell us that we are health promoters and we are very proud of that.

Here are some tips and guidelines for everyone:

### **KEY PRACTICES FOR FAMILY AND COMMUNITY CARE OF CHILDREN'S HEALTH**

#### **For physical growth and development:**

- Breastfeed infants exclusively for at least four months, and up to six, if possible
- Starting around 6 months of age, give children freshly prepared nutrient-dense foods, while continuing to breastfeed until age 2 or older.
- Provide children with sufficient amounts of micronutrients (especially vitamin A and iron) found in fruits, fresh vegetables, and other foods. Add supplements if indicated by a doctor.
- Promote the child's mental and social development by responding to his or her need for attention; stimulate the child with conversation, games, and other appropriate physical and emotional interactions.

#### **For disease prevention:**

- Ensure that children receive the full schedule of vaccines (tuberculosis, pentavalent, polio, and measles) before their first



birthday.

- Safely dispose of feces (including children's); wash your hands with soap and water after defecation and before preparing food and feeding children.
- In areas where malaria is endemic, make sure that children sleep under insecticide-treated mosquito nets. This is advisable when people travel to or from the coast or the Amazon.

#### For appropriate home care:

- Continue to feed and offer fluids, especially breast milk, to children when they are sick..
- Give sick children the appropriate home treatment for infections.
- Do not let just anyone prescribe antibiotics. Use them only when recommended by a doctor.
- Take appropriate steps to prevent injuries and accidents involving children.
- Do not mistreat, abuse, or neglect children, and take the appropriate measures should this occur. If necessary, seek help.
- Actively involve men in the care of their children and in matters related to the family's reproductive health, such as the use of contraceptive methods.



#### When to seek care:

- Recognize when sick children need treatment outside the home and take them to the appropriate health care practitioners.
- Be aware of danger signs. In general, for all children under the age of 5: when they cannot drink or breastfeed, vomit everything they swallow, have seizures, are very weak or unconscious. For children under 2 months of age, there are other danger signs, such as rapid and difficult breathing, whimpering, bulging of the fontanelle (soft spot on an infant's head), redness around the navel, pustules on the body, high fever, etc.
- Follow the recommendations given by health personnel regarding treatment, follow-up, and referral.
- Ensure that every pregnant woman goes in for the recommended prenatal visits and receives doses of the tetanus toxoid vaccine, and that she has family and community support to seek appropriate care, especially at the time of delivery, as well as during postpartum and breastfeeding.

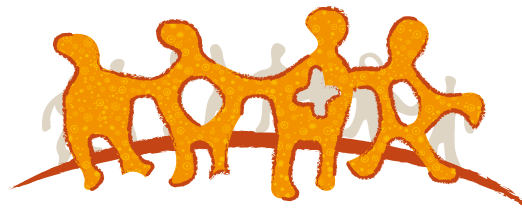


**Hugo Noboa.** Health practitioner and human rights activist. Member of Fundación Salud Ambiente y Desarrollo [Health Environment and Development Foundation], Plataforma por la Salud y la Vida del Ecuador [Health and Life Platform of Ecuador] and Asociación Latinoamericana de Medicina Social [Latin American Association of Social Medicine].

This is a fictional story, and some names of people and places have been omitted or changed. However, it is a story based on conversations with health professionals and workers from a health center in Quito and the Tabacundo Health Center, as well as with members of the Cantonal Health Council of Pedro Moncayo. The events occurred around 2006 and after.

Family and community practices that are key to the survival and healthy growth of children is a WHO and UNICEF proposal adopted by Ecuador when it implemented the IMCI (Integrated Management of Childhood Illness) strategy in the 1990s and 2000s.





# LET'S MAKE HISTORY, BY TELLING OUR STORIES

In one of the novels by the Chilean author Marcela Serrano, one of her characters recalls: "There is an old myth that says that telling stories can cure illness and save lives; without stories, we would still be living in the past. Take my hand, Camila, come with me and I'll tell you one."

These stories heal. Everyone is invited to read and tell them to others so that they can achieve their purpose.



DISCLAIMER: The organizing institutions value the knowledge, experiences and contexts reflected in each story, and the dialogue they elicit. However, the opinions expressed therein are not necessarily consistent with the official position of the Pan American Health Organization, the Global Health Consortium at Florida International University, and ReAct Latin America on the issues addressed.

Let's make history by telling our stories. 2021 edition. ReAct Latin America, Action on Antibiotic Resistance. Phone: +593 (7) 288 9543. Email: [info@reactlat.org](mailto:info@reactlat.org). Website: [www.reactlat.org](http://www.reactlat.org). Pan American Health Organization. Telephone: +1 (202) 974-3000 Email: [amrhq@paho.org](mailto:amrhq@paho.org). Website: <https://www.paho.org/en>. Global Health Consortium, Florida International University. Phone: +1 (305) 348 7159. Email: [ghc@fiu.edu](mailto:ghc@fiu.edu). Website: <https://ghc.fiu.edu/>. Coordinating team: Nathalie El Omeiri, Conié Reynoso, Juan Andrés Chuchuca, Kléver Calle Heras. Collaboration: Dr. Patricia Granja, Natalia Déleg. Editing: Jennifer Monsalve Sandoval. Illustrations: Vilma Vargas (cover), Juancho Vinueza. Design and Layout: El Gato Cuenca, Ecuador 2022.