

LATIN AMERICA / THE CARIBBEAN

Adolescent pregnancy, a public health problem

HONDURAS

Jennifer Ávila in San Pedro Sula

Adolescent mothers are victims of violence, abandonment and misinformation

Lack of sex and reproductive education in schools leads to a considerable incidence of adolescent pregnancy.

Suyapa is a young 20 year old woman with two daughters. At barely 15 she had her first pregnancy. “Many of my friends and schoolmates got pregnant that year. Many of them have a very hard time because they are alone and it is difficult to have children,” says Suyapa who was born in Honduras, one of the worst countries to be a woman, according to Save the Children, international organization for the protection of children rights.

Honduras is in second place, after Bolivia, with the highest rate of teen pregnancy in Latin America. In this small Central American country, 28 percent of all pregnancies are of adolescent mothers; however, in the northern area of the country, the rate is higher than the national average, at 30 percent to 35 percent. Meanwhile, 19 adolescents give birth each day in the University Hospital in Tegucigalpa.

Doctor Luis Sánchez, a gynecologist at the Leonardo Martínez Hospital — located in San Pedro Sula and considered the most important health center for the care of women and children in the northwestern area of the country — assures that this is a public health problem, and says that the conditions in which these pregnant girls arrive are increasingly precarious due to sexually



Honduras is in second place, after Bolivia, with the highest rate of teen pregnancy in Latin America. / UNAH

transmitted diseases, misinformation and abandonment by the men who got them pregnant.

“The risk for a single woman is higher, and being an adolescent brings a social, personal and health risk because simply for being young, the birth could be by surgical means. Also, many of them arrive with medical conditions like condyloma or the human papilloma virus, which if not treated can develop into cervical cancer in women. We have had young patients suffering from pre-eclampsia, sexually transmitted genital infections like gonorrhea, chlamydia, and trichomoniasis,” said Sánchez.

“They are normally patients who come along with their mothers or aunts if they are under 14. The people bringing

them are close relatives; the partners are usually absent because, in many cases, they are afraid to be denounced to the prosecutor's office for rape," the specialist added.

According to the United Nations Population Fund (UNFPA) the maternal mortality in Latin America and the Caribbean is among the top three causes of death in adolescents between 15 and 19. In adolescents younger than 15, the risk of death by pregnancy related causes is up to three times that of women between 20 and 29.

Suyapa tells in tears that she cannot imagine get ahead with her daughters without the support from her parents, since the men who got her pregnant abandoned her.

"The father of my first daughter would accompany me to the hospital and everything was nice, but I didn't like living in his parents' house and things changed. Then he left for the United States and I never heard back from him and he never sent money to help with the baby. After that, I met another guy and got pregnant, although I was getting the birth control shots, and he also left for the United States and he also doesn't take on the responsibility. I don't know what would have come of us without the support from my parents; many of my friends are alone in this, and it is hard," she says.

Without opportunities

In Honduras, the phenomenon called "ni-ni" (ni trabaja ni estudia, "neither-nor") is alarming. According to the UNFPA, around 600,000 young people don't have the opportunities to study or work, which is another risk factor for adolescents.

Added to this is the general climate of violence that has forced thousands of people to flee from Honduras. In its annual 2016-2017 report, Amnesty International pointed out that "women, migrants, internally displaced persons and human rights defenders — specially lesbian, gay, bisexual, transgender and intersexual persons (LGBTI) — were particularly prone to suffer violence. The weakness of the criminal justice system contributed to the impunity climate."

The Organization for Youth Empowerment (OYE), in El Progreso, Yoro, a city in the north of Honduras where Suyapa lives, is implementing a Project called CREA (Creating Safe Spaces) in which they put priority in training on sexual and reproductive education subjects, with young people, as early pregnancy is a growing problem in the country.

Claudia Pavón, the coordinator of the project says that one of the critical problems is misinformation and the lack of implementation of an education plan in schools and academies in the cities to prevent teen pregnancy, sexually transmitted infections and gender violence.

"There is a policy in Honduras, a decree consisting in that a reproductive health guide must be implemented in schools, 'Taking care of my health and my life', but they go unused. We have worked with teachers and they were not aware of it; they didn't know how to use it," she says. "The subjects of highest interest are: pregnancy, methods, sexually transmitted infections; and the misinformation on these subjects is clear, this is the reason why we see the high incidence of pregnancies, it is the lack of information."

Pavón is referring to the National Policy for the

Accelerated Reduction of Maternal and Child Mortality (RAMNI). In the beginning of 2017, various sectors, including the Catholic and Evangelical churches, said that the guides are not adequate and instead of preventing, they encourage children and young people to experiment sexual activity at an early age. This policy, as well as the implementation of the guides has found itself in constant controversy since its approval.

The material content is not designed to be handled by students; instead, it is to be taught by teachers regarding how to conduct the class by means of games, talks and student groups. According to the Ministry of Education, 23,000 teachers have already been trained to use this material.

At the moment this organization along with the health and education authorities and other youth organizations, are looking to come up with a municipal policy for the prevention of adolescent pregnancies by mandating that schools implement the use of the sex education guides. They are also putting more emphasis on masculinities education because a critical problem is the violent relationships in which these pregnancies occur.

Suyapa claims that she was not a victim of violence by her partners; however, their abandonment has confined her to dedicate all her time to caring for her little girls and to look for temporary work to help with the household expenses. At 20 years old, Suyapa has not made it past the eighth grade in school.

"Those patients who are alone arrive with limited economic resources; they drop out of school, limit their capacity to find a job, and get frustrated for not reaching their short and long term goals. This is the condition in which we receive these patients, afraid, frustrated, with pathologies; this is what we have to deal with. It is up to us, the specialist doctors, to deal with them, not anymore as medium risk patients, but as high risk patients. Some of them are referred to the social work psychologist; they do the follow-up on these patients until the end of the pregnancy or until the post-partum," explains Sánchez.

Although abandonment of the home is penalized with between 8 to 10 years in prison, or other preventive measures, in Honduras, Suyapa has not filed charges against the fathers of her daughters.

Unsafe abortions

The UNFPA calculates the number of annual unsafe abortions in adolescents between 15 and 19 years old in Latin America to reach 670,000. Abortion is completely criminalized in Honduras.

Recently, with the discussion of a new Penal Code, feminist and women organizations opened the debate for the decriminalization of abortion in three circumstances: rape, illness of the mother and fetal impairment. Still, the reform was not approved.

According to the Violence Observatory of the National Autonomous University of Honduras (UNAH), there are around 3,000 reports of sexual violence each year.

In the Leonardo Martínez Hospital, personnel from the Prosecutors Office are watchful for pregnant adolescents who arrive, in order to facilitate their pressing charges for

rape or other type of sexual crime to those who impregnated them. However, Sánchez says that there are not many charges filed, despite the fact that the pregnancy of a girl under 14 years old is considered special rape or statutory rape.

“The youngest girl we have had here was 12. We automatically consider that to be statutory rape if the young girl is under 14 years old; if she is older we many times realize that it was rape by a relative or whoever and we notify the country authorities,” he explains.

Sánchez adds that adolescents with incomplete abortions have started to come in this year.

“Since April we have had adolescents with deferred or incomplete abortions, exposed to have it spontaneously or we do not know if they have been induced, but we do receive patients in those conditions,” he explains, stressing that this is a health problem that needs to be looked into, especially in the northern areas of Honduras which is where most of these cases are taking place. □

PERU

Magali Zevallos in Lima

Teen pregnancy figures have not reduced in 25 years

Lack of comprehensive sex education and nonexistent prevention campaigns are the leading cause for an increased incidence of pregnancies in girls 11 to 15.

There is a persistent prevalence of adolescent pregnancy in Peru. The indicators have not lowered for 25 years now; on the contrary, there has been a 2.1 percent increase observed, going from 12.5 percent in 2011 to 14.6 percent in 2014, according to figures from the National Institute of Statistics and Informatics (INEI). The estimation is that at the moment there are 207,800 adolescents of 15 to 19 years old who are mothers or are going through a first pregnancy.

“There is no comprehensive approach to public policies in order to reverse the indicators; the assigned budget is insufficient by all means. To begin with, there is no specific budget assigned for the reduction of teen pregnancy; we are putting at risk the development of thousands of Peruvian women in the country,” says to *Latinamerica Press* Rossina Guerrero, Director of Political Advocacy of the Center for the Promotion and Defense of Sexual and Reproductive Rights (Promsex).

The study conducted by Doctor Luis Távora, “Impact of Pregnancy on the Health of Adolescent Women in Peru,” published in 2015, warns that this prevalence is observed with big differences by education level, geographical environment (urban and rural) and by poverty quintiles, despite different strategies having been applied to face this problem — since 2013 the Peruvian state has had a multi-sectoral plan for the prevention of teen pregnancy (2013-



Teen pregnancy is the cause for why 25 percent of adolescent girls drop out of school. / proycontra.com.pe

2021), and since last year the Ministry of Health has had a Technical Norm of Family Planning that establishes that there is now no minimum age to have access to contraceptive methods — and all establishments are obligated to provide comprehensive family planning services when an adolescent so requests it.

Guerrero says that unfortunately, this plan has not led to the progress and protection of adolescent girls. Teen pregnancy is the second cause for school drop out in the country: 25 percent; in other words, more than a million adolescents end up outside of the education system; and later the teen mothers have to work in low-paid jobs to be able to support their children, something that condemns them to poverty.

One of the biggest problems identified by the experts is that the state is only looking at the problem from a health standpoint. Távora stresses that the handling of this issue by

the state has been unisectoral and not cross-sectoral, while Irene Del Mastro, who has a Master in Gender Studies from the University of Wisconsin, Madison, points out to *Latinamerica Press* that the problem not only boils down to access to health and contraceptive methods.

“The approach taken by the state has not solved a thing,” says Del Mastro. “For 25 years now the figures have been the same; in 25 years they have oscillated between 12 percent and 14 percent, that is to say, there has been no change at all.”

Conservatism on the attack

Childbearing starts earlier and earlier in the country. Each day 15 girls of between 11 and 15 years old become mothers; this according to the National Registry of Identification and Civil Status (RENIEC), with a higher incidence in the Peruvian jungle: 40 percent average.

In his study, Távara warns that there is little political will coming from the Ministry of Education to implement sex education at all levels of education.

For Del Mastro, “the root problem is that there is no comprehensive sex education in the country. Education is one of the main pillars needed to reverse this structural problem; and if the focus on sex education does get implemented in the education curriculum, we will not see the results in 20 years,” adding that control of sexuality exists in schools and homes. “We don’t talk to young people about sex; we don’t see sex between young people as something natural for a matter of conservatism.”

“There is a need to provide sex education,” says Guerrero. “More than just learning about contraceptive methods, an education coming from the school is necessary so that all students can talk with teachers about these issues and they can also talk to their parents. Adolescents are starting their sexual activity without preventing an unwanted pregnancy or a sexually transmitted disease, which is also a serious problem.”

To the lack of comprehensive sex education, experts add that there is now a lot of pressure coming from religious groups that want to impose a non secular policy on sexuality and reproduction which is not respectful of rights.

Organizations such as Promsex, Study for the Defense of Women’s Rights (DEMUS), and the Center of Peruvian Women Flora Tristán have denounced repeatedly that there are political forces in Congress, with a strong influence from the Catholic and Evangelist Churches, that have been imposing an agenda that could influence the public policies, such as are the access to sexual health and reproductive services, comprehensive sex education and the prevention of sexual violence.

“There are constant attacks by anti-rights groups in the country against the implementation of public policies that would make a positive impact when it comes to preventing and lowering teen pregnancies. The Congress cannot interfere in public policy. If we do not become aware of the impact that pressure from these religious groups can have, we are going to end up with higher indicators than what we have now,” Guerrero warns.

Sexual violence

Another alarming figure is that Peru occupies the first place in Latin America as the country where more sexual violence cases are reported. Each year the Public Ministry receives approximately 1,500 complaints from Peruvian women. According to statistics from DEMUS, 75 percent of reported rape cases are of underage girls.

According to data from the Peruvian National Police, on a daily basis five girls between the ages of 10 and 14 become mothers as a result of a rape.

“Although there are no statistics on how many young girls may have wanted to have an abortion, there is the matter of a lack of reproductive justice in Peru. Our country has a class-based and elitist society, because there is no access to safe abortion, and this is a way to condemn poor women to reproductive consequences that they have no possibility to revert,” says Del Mastro.

The study “Impact of Pregnancy on the Health of Adolescent Women in Peru” states that teen pregnancy is considered one of public health problems that are more prevalent and of most importance that affect Peruvian women in three facets: physical, mental and social.

For Guerrero, the country has an enormous challenge ahead that must be taken on in a cross-sectoral manner, and working closely with the ministries of Women, Education, Health and Labor.

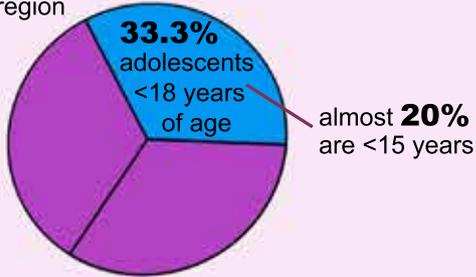
“We must really strengthen our public systems and strengthen the state as guarantors of rights, and this implies better education and better health services. Health operators have many preconceived prejudices regarding the rights that adolescents have to gain access to family planning methods. In order to assert the fulfillment of rights, resources are needed, budget is needed,” she says. □

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— Rossina Guerrero, Director of Political Advocacy, Promsex

Latin America and the Caribbean is the region with the highest adolescent fertility in the world, after Sub Saharian Africa.

Of total pregnancies in the region 2014



1 out of **3** girls becomes a mother before the age of 20

Every day **11** girls and adolescent women are sexually assaulted.

Of this figure, **5** girls between 10 and 14 years becomes mother. 2015



Percentage of women aged 20-24 giving birth before a specific age 2013

Country	Before age 18	Before age 15
Nicaragua	28	4
Honduras	26	3
Dominican Rep.	25	3
Guatemala	24	3
El Salvador	24	2
Ecuador	21	2
Bolivia	20	2
Colombia	20	2
Brazil	16	2
Guyana	16	2
Haiti	15	2
Peru	14	1

26% of births in 2010-2015 occurred among adolescent women and girls

Adolescent birth rate

74 births per 1,000 women aged 15 to 19 years 2009-2014



Prevalence of adolescent pregnancy 2008-2014

Costa Rica



49% indigenous girls

10% non-indigenous girls

Panama



17% indigenous girls

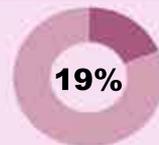
10% non-indigenous girls

Adolescent birth rate per 1,000 women aged 15-19 2006-2015

Countries with higher rate	Rate
Bolivia	116
Honduras	101
Venezuela	95
Nicaragua	92

Countries with lower rate	Rate
Puerto Rico	36
Chile	52
Cuba	53
Costa Rica	61

Marriage in adolescents



women aged 15-19 years are married or in union 2014

Women aged 20 to 49 years who were married before age 18

10% in the upper income quintile

38% in the lowest income quintile

Risk of maternal death Latin America

4 times higher in adolescents under 16 than in women between 20 and 29 years



Unsafe abortion rate

25 per 1,000 girls 15-19 years

670,000 unsafe abortions to girls 15-19

Teen pregnancy prevention is imperative

Teen pregnancy puts in evidence an economic, territorial and gender inequality.

For Uruguay's Vice Minister of Public Health, Cristina Lustemberg, teen pregnancy in the Southern Cone is just "the tip of the iceberg" of other inequalities affecting this South American region.

During the presentation of the Regional Strategic Framework for the Prevention and Reduction of Non-Intentional Teen Pregnancy — commitment subscribed to in Asunción on June 6, by Argentina, Brazil, Chile, Paraguay and Uruguay —, Lustemberg explained that "teen pregnancy puts in evidence the inequality, not only economic, but also territorial, gender or power, that affect the most vulnerable populations."

Pregnancy in girls 10 to 14 years old, known as "forced teen pregnancy," must become a priority in prevention policies, the Vice-Minister stated.

"Pregnancy in these girls has a higher morbidity and mortality rate, and weakens their socio-emotional development, especially when 100 percent of these cases are linked to sexual abuse and exploitation, to gender inequality, and the power to choose a relationship," she said.

With 21,000 teen pregnancies each year, Brazil is the country in the Southern Cone that records the highest number of these cases, followed by Argentina (3,000), Chile (900), Paraguay (674) and Uruguay (180).

The head of the Ministry of Health and Social Welfare (MSP) of Paraguay, Antonio Barrios, said that 2 of each 3 pregnancies in his country are of adolescents between 15 and 19 years old, while two childbirths are recorded everyday in girls between 10 and 14, whose pregnancies are taken to be the consequence of sexual abuse.

"The high adolescent fertility rates in the Southern Cone countries, particularly in girls of between 10 and 14, compel us to combine and strengthen efforts, working energetically, based on scientific evidence, to reduce and prevent non-intentional teen pregnancy," said Barrios.

Pregnancy in young and adolescent girls multiply by five the risk of dying during the pregnancy, childbirth or postpartum, insisted Barrios; and in general, this implies dropping out of school and abandoning their life

projects. Added to this is the fact that an early pregnancy perpetuates the cycle of poverty and violence that directly affects the young girl or adolescent, and carries with it a devastating effect on their overall health and that of the newborn.

Barrios highlighted that 80 percent of children of adolescent mothers run the risk of being born with problems, or dying, as well as the mother.

Preventing a second early pregnancy

According to the United Nations Population Fund (UNFPA), the adolescent fertility rate of the Southern Cone is 73.2 per 1,000. Two of each three births of adolescent mothers between 15 and 19 years old in Latin America and the Caribbean occur in Southern Cone countries.

Alma Virginia Camacho, regional advisor on Sexual and Reproductive Health of UNFPA, said that the objective of the initiative is to give a comprehensive solution to this problem, and to strengthen public policies and the legal framework directed at preventing and reducing adolescent pregnancy.

"These are figures that pain us and call us to action," said Camacho. "This strategic framework has been a collective construction process that has taken two years of work. It reflects the political compromise and the leadership of the five Southern Cone countries when dealing with a challenging and complex subject. This includes cost-effective interventions to prevent and reduce adolescent pregnancies coming from an integrated and multi-sectoral approach: access to long term contraceptives for adolescents, a comprehensive education and guarantees provided to affected children and adolescents."

"I am positive that the implementation of this strategic framework to accelerate the reduction of teen pregnancy will soon bear fruit. We are in the right track doing what has to be done, moving forward with will, decisiveness, knowledge, and above all with the commitment of political authorities and society," she added.

In Paraguay, health authorities announced on June 7 a plan to provide sub-dermal contraceptive implants to adolescent women to prevent a second pregnancy. This contraceptive method, to be implemented since August, "is one more option available among the alternatives that

women have access to; counseling and this method, or another one if they choose, will be offered,” explained Jorge Sosa, director of Sexual and Reproductive Health of the MSP.

In the case of adolescents, the implant will be inserted with their consent. “Here we have to see what is best for an adolescent, especially if she is a mother. We all know

that we have to give her the opportunity to have access to safe methods that prevent a second obstetric event,” said Sosa. “This pregnancy carries with it a component of difficulties. First, the insertion into the system and more so, if she has already had a baby, a second pregnancy is a very difficult commitment. This is why we have to do everything possible to prevent a second pregnancy.” □

COLOMBIA

Susan Abad in Bogotá

A halfway achievement in adolescent pregnancy reduction

Although there are fewer pregnancies in adolescents aged between 15 and 19, an increase is observed in girls under 14.

The official statistics revealing that, although by a slight margin, the number of adolescent pregnancies dropped in Colombia for the first time in 20 years, at the same time set off alarms because of the increase in the number of pregnancies in girls aged under 15, with pregnancies even in girls as young as 13.

The survey taken in Colombia that measures the adolescent pregnancy phenomenon every five years is the National Demographic and Health Survey (ENDS), developed by the Health Ministry. For the most recent one, in 2015, interviews were conducted with 38,718 women in reproductive age, between 13 and 49 years old, and 35,783 men between the ages of 13 and 59.

When the survey was first conducted in 1990, 12.8 percent of adolescent girls in the country between 15 and 19 years old either were mothers at the time or were pregnant. In 1995 the figure, in the same age range, increased to 17.4 percent; reaching 19.1 percent in 2000 and 20.5 percent in 2005. However, a slight 1 percent decrease was reported in 2010 bringing the figure down to 19.5 percent and it is in 2015 when the most drastic reduction of 2.1 percent took place, with the figure dropping to 17.4 percent.

The Education Ministry estimates that there are 150,000 annual births to mothers aged 15 to 19; 6,500 births to girls younger than 14, and it places the median age at which young teens have their first sexual intercourse at between 14 and 15 years old.

However, despite the encouraging results coming from ENDS 2015, the differences seen in the educational



Adolescent pregnancy prevention campaigns are more effective when including young teens. / ICBF

level are still worrisome. At the time of the last survey, 5.4 percent of pregnant girls only had primary education, while 2.9 percent had secondary education and 2.6 percent attended higher education. Fits to mention that pregnancy is the second reason, behind the lack of money, for why women between 13 and 24 years of age abandon their studies.

Likewise, income is determinant in the teen pregnancy phenomenon. While in the poorest level 5.3 percent of girls got pregnant for the first time, in the higher economic level the figure was 2.4 percent and in the highest it was 1.2 percent. The geographical location also makes a difference: 14.6 percent of young girls between 13 and 19 who live in rural areas were pregnant; while this was only true for 8.4 percent of girls in urban areas.

“I believe in my future”

But, how were these results reached? Information was a determining factor; 95.9 percent of those girls

surveyed aged 13 and 14 in ENDS 2015 said they had received information on sexuality, as did 97.2 percent of adolescent girls between 15 and 19 years old.

Diva Moreno, of the Direction of Promotion and Prevention of Reproductive Health in Adolescents of the Health Ministry, explains to *Latinamerica Press* that “since 2005, when it was learned that one in five young girls under 19 was pregnant, we started working with new strategies. The first thing we did was to acknowledge that the problem is not exclusive to the adolescent, but that it has multiple variants: proximate determinants, individual factors, intermediate variables and distal factors. Services with specialized treatment for adolescents were progressively adapted to the 33 departments of the country, where the cases were not disclosed nor were judgment passed. This has contributed firstly, to bring the problem to light and for the National Economic and Social Policy Council (COMPES), in its rule 147 of 2012, to force 14 of the country to comply with the “guidelines for the development of a strategy for teen pregnancy prevention and the promotion of life projects for children, adolescents and young teens, aged between 6 and 19 years old.”

However, “the campaigns did not bear fruit at the beginning, mainly because they were a series of talks by adults, and from adults to young people, giving them information about the risks from engaging in sexual activity, such as pregnancies and sexually transmitted diseases,” says to *Latinamerica Press* Doctor Juan Carlos Vargas, scientific advisor of Profamilia, a non-profit private institution specialized in sexual and reproductive rights.

“Once the campaigns changed and started including young people themselves as the generators of knowledge, the panorama changed,” he says.

The most representative campaign was the one conducted in the period 2015-2016 between the state, through the Colombian Institute of Family Welfare (ICBF) and Profamilia called “I Believe in my Future,” that had as a motto “Instead of pregnancy, my dreams”; so that young people can see themselves at 20, at 25, or at 30 years old, on how a pregnancy can interrupt their dreams and life plans.

Pregnancies in girls under 14

In 2013, the Education Ministry developed a tool to combat violence in the classroom, establish a roadmap for pregnancy prevention and reinforce sexual education. President Juan Manuel Santos signed a law giving more coverage to the reproductive rights plan: the National System of School Coexistence and Training for the Exercise of Human Rights, Sexual Education and Prevention.

But the biggest concern and one that is not mentioned by the media, is pregnancy in young girls under 14.

The statistics show that 11.8 percent of women 19 or under who participated in the survey in 2005 had

had their first sexual intercourse before the age of 15. In 2010 the number was 13.8 percent and in 2015 the number went to 15.5 percent. In boys, the latest figure was 30 percent.

This is very serious, taking into account that a pregnancy in a girl under 14 is a crime when the father is of legal age, which is generally the case.

“While we understand this critical issue; it is difficult to determine precisely its magnitude, because a younger population has been included in the latest versions of the survey, and we don’t have a way to compare it to earlier years,” Vargas reflects.

Meanwhile, Lina Herrera, expert in teen pregnancy prevention of the ICBF tells *Latinamerica Press* that, without leaving aside the early pregnancy strategies it is necessary to reinforce the prevention of subsequent pregnancies.

“The evidence tells us that three out of five cases of girls who have had a child before reaching 18 years, have another child within two years,” she says. “This is why we work to strengthen their life plans, trying to get them back to school.” □

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