



IMPROVING HEALTH OUTCOMES *for* INDIGENOUS MOTHERS *and* CHILDREN *in* GUATEMALA

THE CHALLENGE

In Guatemala's Western Highlands, Indigenous women are dying from preventable pregnancy complications at alarming rates—they are 30% more likely to die during pregnancy or childbirth than non-Indigenous women. The reasons are complex: poverty, cultural and linguistic barriers, discrimination, and severely limited access to quality healthcare. Indigenous women are nearly four times more likely to rely solely on traditional midwives, or comadronas, than to seek care in the public health system. And when women do reach health facilities, they frequently encounter inadequate supplies, lack of privacy, and providers unprepared to deliver culturally appropriate care, making them less likely to return.

THE RESPONSE

With funding from a private foundation, MSH leads the Healthy Mothers and Babies in Guatemala project alongside three partners: PIES de Occidente, the Observatory of Sexual and Reproductive Health (OSAR), and Vivamos Mejor. Working in rural, primarily Indigenous areas across four departments in

Guatemala's Western Highlands, the project, known locally as Utz' Na'n in the Indigenous Mam and K'iche' languages, collaborates closely with the Ministry of Public Health and Social Assistance (MSPAS) at national and local levels, and directly with communities and traditional midwifery associations.

The project focuses on four interconnected goals: increasing early antenatal care (ANC) access and follow-through, integrating maternal and child nutrition—with a focus on the critical first 1,000 days from conception to age two—improving the quality and cultural relevance of care in Indigenous communities, and strengthening health policies to ensure all mothers and babies in Guatemala have sustainable access to quality, lifesaving care.

THE APPROACH

Utz' Na'n uses an integrated approach that blends policy advocacy, technical assistance, and community mobilization. The project aims to meet Indigenous women and their communities where they are, honoring traditional practices while strengthening connections to life-saving care.

MANAGEMENT SCIENCES FOR HEALTH (MSH) is implementing the Utz' Na'n project to improve health outcomes for indigenous mothers and babies in the departments of Quetzaltenango, San Marcos, Sololá, and Totonicapán in Guatemala's Western Highlands. Since 2019, MSH has partnered with the Ministry of Public Health and Social Assistance, local organizations, and communities to expand access to quality, culturally relevant care. Building on this foundation, the project is expanding its geographic reach and thematic scope—deepening work in nutrition, postnatal care, and child health while seeking to embed these approaches into Guatemala's health system—to help even more mothers and babies thrive.

Group ANC

By working directly with comadronas and facility-based health workers to address barriers to care, the project aims to help more women start care in their first trimester and complete at least four visits throughout their pregnancies. Utz' Na'n introduced an innovative group ANC model that brings together pregnant women, comadronas, and health providers. The model creates safe spaces for dialogue, peer support, and education on key topics to keep women healthy during pregnancy, childbirth, and postpartum.

The First 1,000 Days

Complementing group ANC, the project has introduced Healthy Mothers Groups, a strategy that extends support into the postnatal period as part of the comprehensive 1,000-day approach with a particular focus on preventing malnutrition. Mothers gain knowledge on topics like breastfeeding, nutrition, healthy homes, family planning, and mental health while strengthening community connections.

Community Mobilization

Recognizing their trusted role as community leaders, the project strengthens comadronas' connections to health facilities, helping them refer pregnant women for facility-based care when needed. Through participatory community dialogues, Utz' Na'n also engages pregnant women, families, local leaders, and health providers to identify and solve barriers to care together.

THE IMPACT

In July 2024, Utz' Na'n conducted an evaluation to assess progress from 2021-2024 and inform the project's expansion as it scales to reach even more mothers and babies in Guatemala. The findings demonstrate that when healthcare systems honor traditional practices while strengthening clinical quality, Indigenous women respond—increasingly seeking care and reporting high satisfaction with the services they receive.

The project's success to date centers on affirming comadronas' critical role as bridges between communities and the formal health system. They not only provide essential emotional accompaniment and personalized care for Indigenous pregnant women but also motivate women to seek facility-based guidance and support when needed, contributing significantly to their well-being.

Furthermore, through the group ANC model, women—especially first-time mothers—gain vital knowledge about danger signs and when to seek help, with most reporting they feel more prepared and confident in caring for themselves and their babies. The model proved so effective that MSPAS incorporated group ANC into national reproductive health standards for 2023-2028.

Systemic Improvements for Sustainable Change

Beyond the group ANC model, Utz' Na'n is strengthening quality across Guatemala's maternal health system through systematic improvements and capacity building. Working with health facilities across the four departments, the project trained health providers on clinical topics including detecting malnutrition and interpreting laboratory results. The project also developed a quality measurement system to assess compliance with ANC standards and guide continuous improvement, with health facilities showing dramatic improvements in their quality scores.

The project's approaches are extending beyond its direct implementation. Specialized care pathways developed for pregnant adolescents are now being replicated in districts outside the project scope. The project has also strengthened MSPAS teams' capacity to monitor reproductive health budgets and expenditures, helping ensure resources reach the communities that need them most. Together, these improvements are creating the conditions for lasting change—embedding culturally relevant, high-quality maternal and child care into Guatemala's health system.

KEY RESULTS



4,000+

comadronas engaged across four departments



14,900+

women participated in group ANC (as of October 2025)



13,000+

referrals made by comadronas to health facilities (2023-2025)



350+

health providers trained on clinical topics and quality improvement



110

health providers trained in specialized care for pregnant adolescents



250%

increase in group ANC participation (in first five months)

OCTOBER 2025