

WINGS GUATEMALA

It all begins with reproductive rights



OUR MISSION

WINGS provides quality reproductive health education and services to underserved, primarily rural Guatemalan youth, women, and men.

WINGS envisions a future where all Guatemalans thrive and are able to fully exercise their sexual and reproductive rights.

OUR VISION

WHY GUATEMALA?



THE AVERAGE
GUATEMALAN
WOMAN IS
PREGNANT FOR
1,080 DAYS
DURING HER
LIFETIME

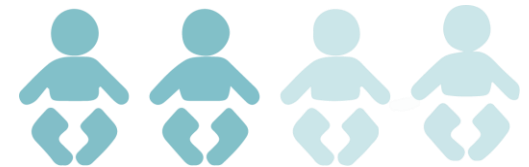


1 IN 3 INDIGENOUS WOMEN
HAVE NO ACCESS TO
REPRODUCTIVE HEALTH SERVICES



NEARLY **50%** OF CHILDREN
UNDER 5 ARE CHRONICALLY
MALNOURISHED

75% OF THE
INDIGENOUS
POPULATION LIVES
IN POVERTY



GUATEMALAN WOMEN HAVE AN
AVERAGE OF **3.1** CHILDREN, **3.7** IN
INDIGENOUS COMMUNITIES

EDUCATION

Women experience lower levels of education than men at nearly every level (between 15-49 years of age).

Source: ENSMI 2014-2015

Gender	No Education	Primary	Secondary	University
Men	9.6%	18.7%	9.1%	7.4%
Women	14.2%	17.3%	9.1%	6.4%

59.3% live under poverty level with income less than \$3.50 per day

Poverty is highest in indigenous populations where 80% are poor*

Source: ENCOVI 2015

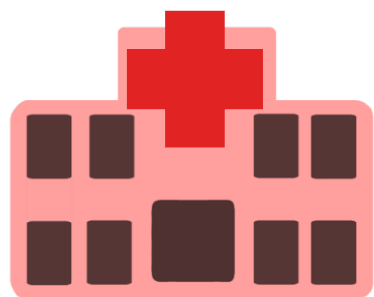
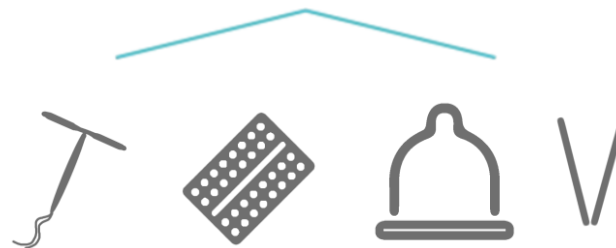
POVERTY

ACCESS/COVERAGE OF HEALTH SERVICES

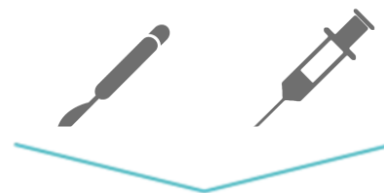
13 HEALTH WORKERS PER
10,000 GUATEMALANS
(23 RECOMMENDED BY WHO)



ONLY **51% OF WOMEN** BETWEEN
15-49 HAVE ACCESS TO PUBLIC FAMILY PLANNING
SERVICES



26% OF
POPULATION HAVE NO
BASIC HEALTH CARE
ACCESS WITHIN 5 KMS OF
HOME



19% OF BASIC DRUGS AND SUPPLIES ARE
NOT AVAILABLE IN NATIONAL HOSPITALS

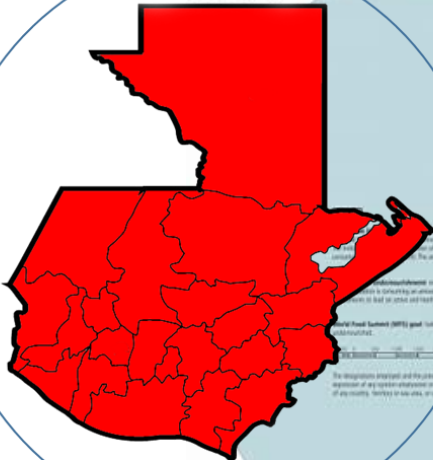
HUNGER



FAO Hunger Map 2015

Millennium Development Goal 1 and World Food Summit Hunger Targets

Produced by the FAO Systems Division
For additional information:
http://www.fao.org/hunger



The FAO Systems Division is pleased to present this map, which shows the progress of the world in achieving the Millennium Development Goal 1 target of halving the number of people who are undernourished. The map is based on the most recent data available, and it is important to note that the data for some countries is not yet available for 2014. The map also shows the progress of the world in achieving the World Food Summit target of halving the number of people who are undernourished by 2015. The map is a key tool for monitoring progress and for identifying areas where more action is needed.

ACHIEVEMENT OF THE MILLENNIUM DEVELOPMENT GOAL HUNGER TARGET FROM 1990-92 TO 2014-16

1 About 793 million people in the world still lack sufficient food for conducting an active and healthy life.

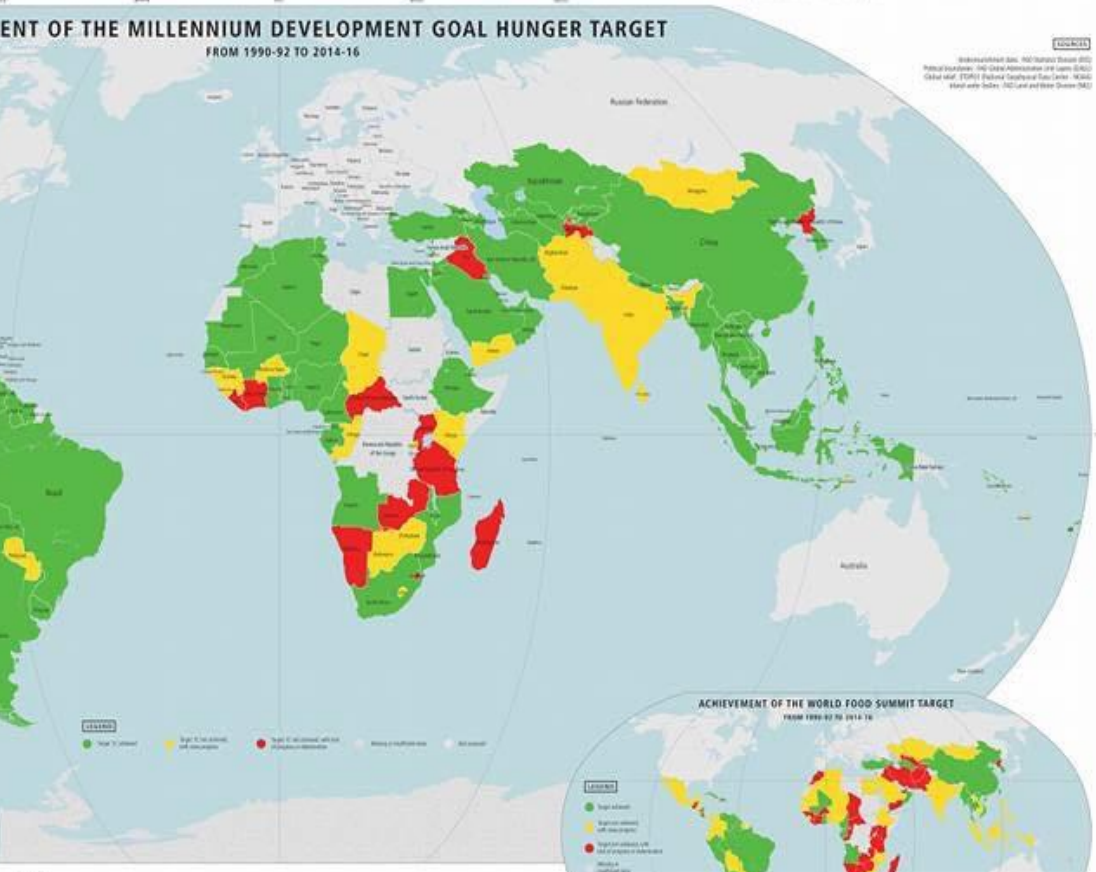
2 Yet progress has been made, even in the presence of significant population growth. Approximately 218 million fewer people suffer from undernourishment than 25 years ago and 169 million fewer than a decade ago.

3 The year 2015 marks the end of the monitoring period for the Millennium Development Goal target. Seventy-three out of 120 developing countries – more than half the countries monitored – have reached the MDG 1C hunger target of halving the proportion of the chronically undernourished.

4 In developing regions the target was almost achieved, with the share of undernourished having decreased during the monitoring period from 23.3 to 12.9 percent.

5 Some regions, such as Latin America, the east and south-eastern regions of Asia, the Caucasus and Central Asia, and the northern and western regions of Africa, have made fast progress. Progress was also recorded in southern Asia, Oceania, the Caribbean and southern and eastern Africa, but at too slow a pace to reach the MDG 1C target.

6 In many countries that have failed to reach the international hunger targets, natural and human-induced disasters or political instability have resulted in protracted crises, with increased vulnerability and food insecurity among large segments of the population.



NOTES

1. The latest global undernourishment estimates published in 2015 (2014) have been slightly revised due to a change in the underlying data of base countries. In particular:

- 1. Data substitution on agricultural production in Senegal provided by the Agency for Research in International Development (ARI) in 2015 is a revision of the previous per capita availability of cereals. Based on the updated data, new estimates of the prevalence of undernourishment and number of undernourished people for the periods from 2010 to 2014 are now available.
- 2. Estimates for food losses in the total food loss were revised, leading to a lower estimate.

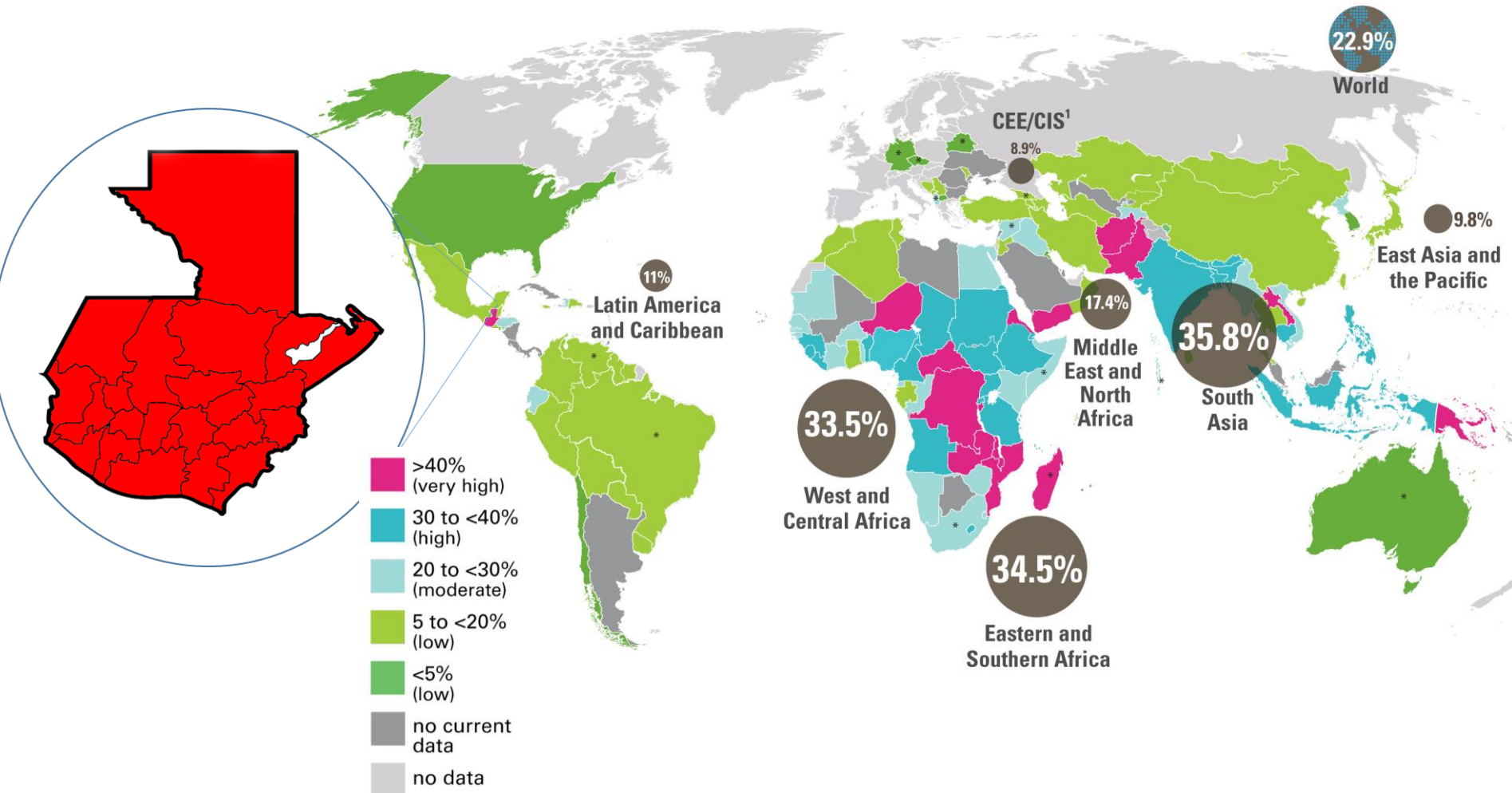
3. The national per capita availability of calories, based on the updated data, new estimates of the prevalence of undernourishment and the number of undernourished people were adjusted for 2015.

4. In a subset of these countries, estimates for the latest regional and global aggregates, as well as specific country groups, have also been updated.

5. These estimates do not change the overall assessment of the state of global food insecurity throughout 2015.

CHRONIC MALNUTRITION

PERCENTAGE OF CHILDREN UNDER 5



Source: UNICEF, WHO, World Bank Joint Child Malnutrition dataset, May 2017 update

FIRST SEXUAL INTERCOURSE / FIRST BIRTH

AVERAGE AGE OF FIRST SEXUAL INTERCOURSE

GIRLS
18



BOYS
17

21% OF GIRLS BETWEEN
15-19 HAVE BEEN PREGNANT



8% OF WOMEN AGED 15-24 HAD FIRST
INTERCOURSE BEFORE AGE 15



AVERAGE AGE OF
FIRST BIRTH

20

ADOLESCENT PREGNANCIES:*

94,027

IN 2022
AGED 10 TO 19

& RISING

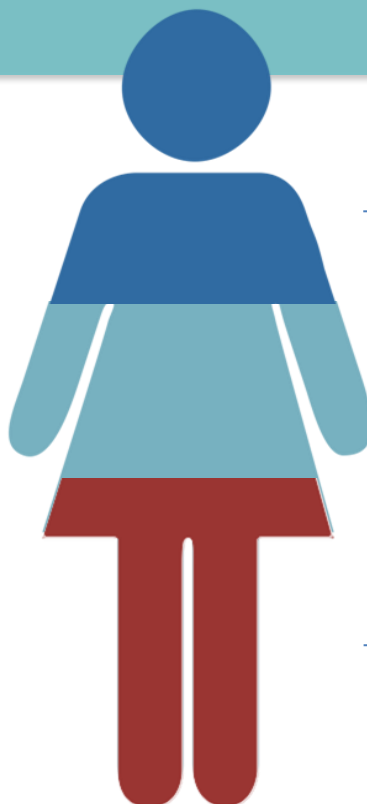


Source: ENSMI 2014-2015

*Source: CIPRODENI 2022

CONTRACEPTIVE USE

60.6% OF
WOMEN USE A
CONTRACEPTIVE
METHOD



39.4% OF WOMEN
ARE NOT USING A METHOD

48.9% OF WOMEN
USING A METHOD WHO USE A
MODERN FORM OF
CONTRACEPTION

Source: ENSMI 2014-2015

	Women using a contraceptive method	Women not using a contraceptive method
Indigenous	50.10%	49.90%
Non indigenous	67.80%	32.20%

WHAT DOES WINGS DO?

We believe that reproductive health is the first step in the fight against poverty, chronic malnutrition, maternal and infant deaths, and gender inequality.

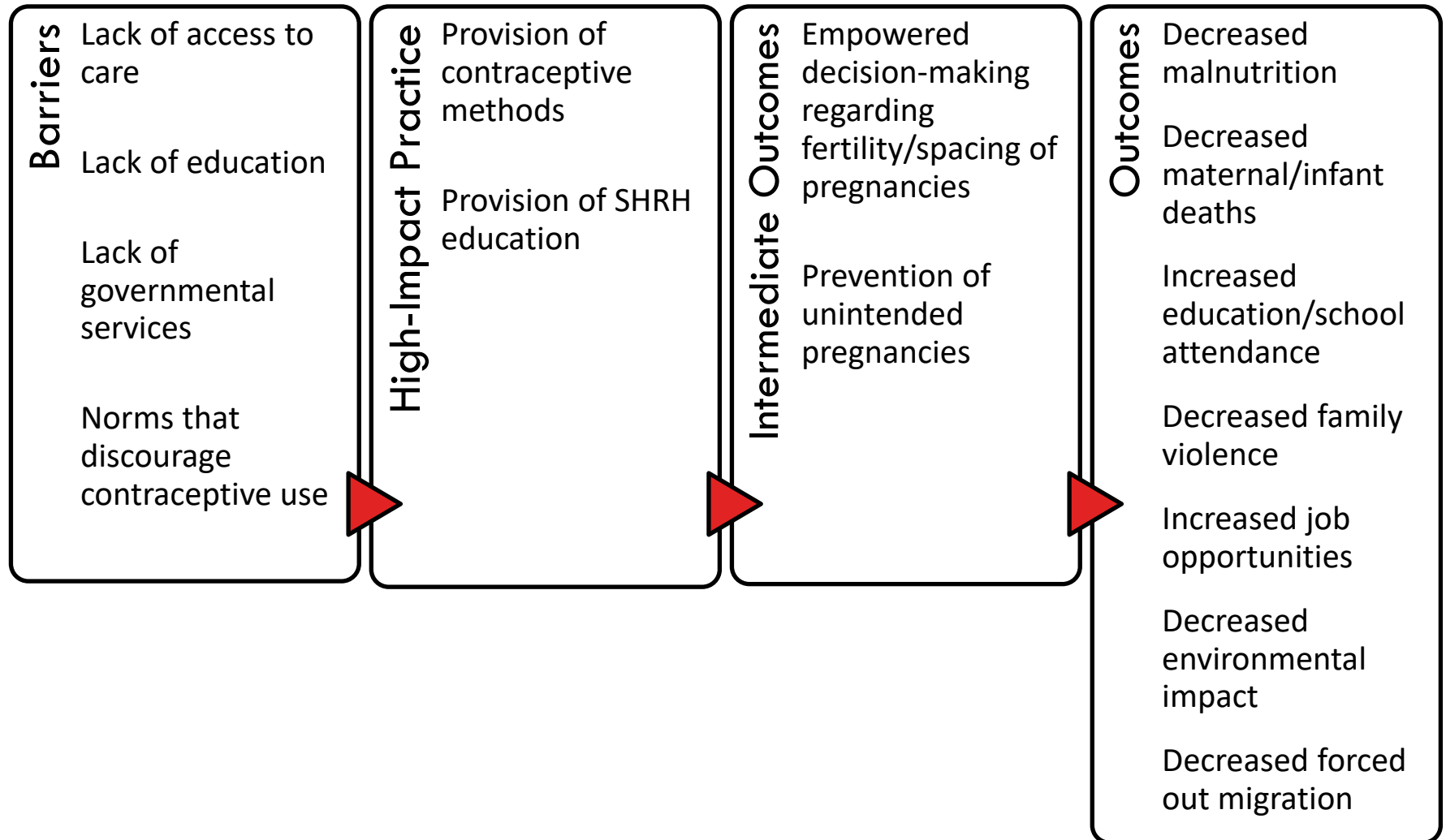
We provide training and services through youth leaders, local family planning promoters, mobile medical units, and stationary clinics.

RIGHTS-BASED CARE

Family Planning 2020 asserts that “rights-based family planning turns the focus to the rights of individuals and couples to decide freely and responsibly the number and spacing of children with quality sexual/reproductive health information and services to do so without facing discrimination or inequality.”

WINGS treats every client in a non-judgmental, non-coercive manner that provides ample education for each individual to make well-informed decisions.

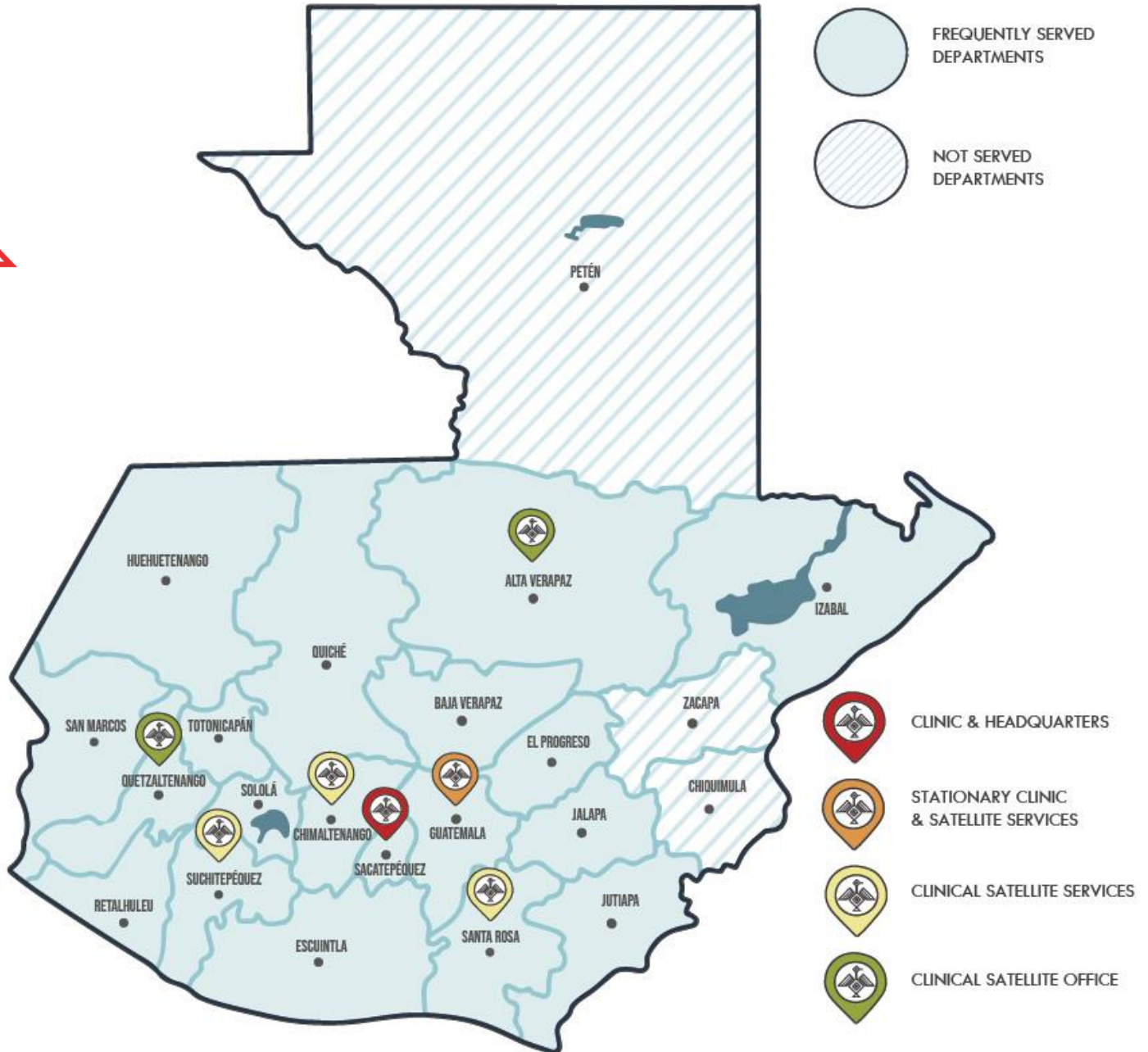
WINGS' THEORY OF CHANGE



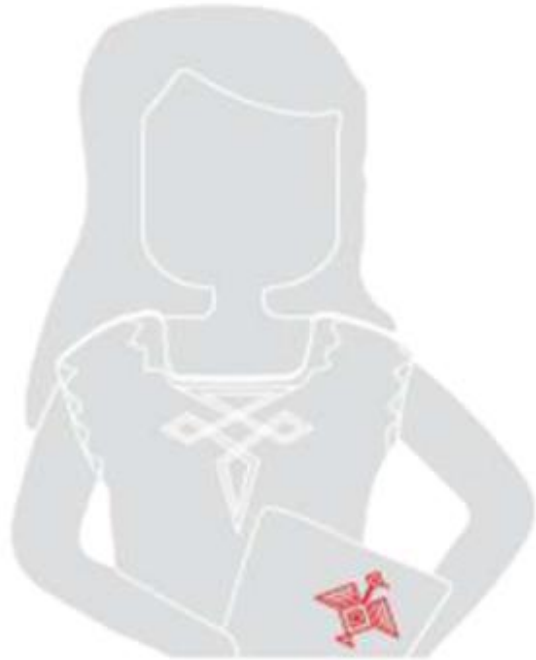


OUR PROGRAMS

WINGS 2023



VOLUNTEER PROMOTER NETWORK



27 VOLUNTEER HEALTH
PROMOTERS OFFER
CONTRACEPTIVE
COUNSELLING AND
SHORT-ACTING
CONTRACEPTIVE METHODS

STATIONARY & SATELLITE CLINICS



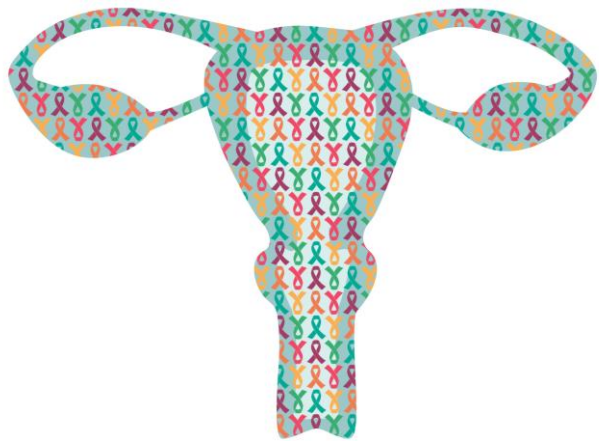
**OFFER RIGHTS-BASED
COUNSELLING,
CONTRACEPTIVE METHODS,
CERVICAL CANCER
SCREENING, & VOLUNTARY
SURGICAL CONTRACEPTION**

MOBILE UNITS



**OFFER LONG-ACTING
REVERSIBLE
CONTRACEPTIVE METHODS,
CERVICAL CANCER
SCREENING, & VOLUNTARY
SURGICAL CONTRACEPTION**

CERVICAL CANCER PREVENTION



CERVICAL CANCER IS THE LEADING CAUSE OF CANCER RELATED DEATH AMONG GUATEMALAN WOMEN.

WE PROVIDE RAPID SCREENING AND IMMEDIATE TREATMENT OF PRE-CANCEROUS CELLS USING VISUAL INSPECTION WITH ACETIC ACID (VIAA) AND THERMOCOAGULATION.

YOUTH PEER EDUCATION PROGRAM

**SEXUAL & REPRODUCTIVE
HEALTH EDUCATION TO YOUTH
AGES 13 TO 19**



**REACH YOUNG PEOPLE IN THEIR
COMMUNITIES
WITH EDUCATION AND REFERRALS**



OUR IMPACT SINCE 2001

358,228

youth, women, & men reached
through sexual and reproductive
health information and services

351,284

unintended pregnancies
prevented *

1,933

infant deaths and

119

maternal deaths prevented *

* estimated using the Marie Stopes International Impact 2 model

GET INVOLVED

WWW.WINGSGUATE.ORG



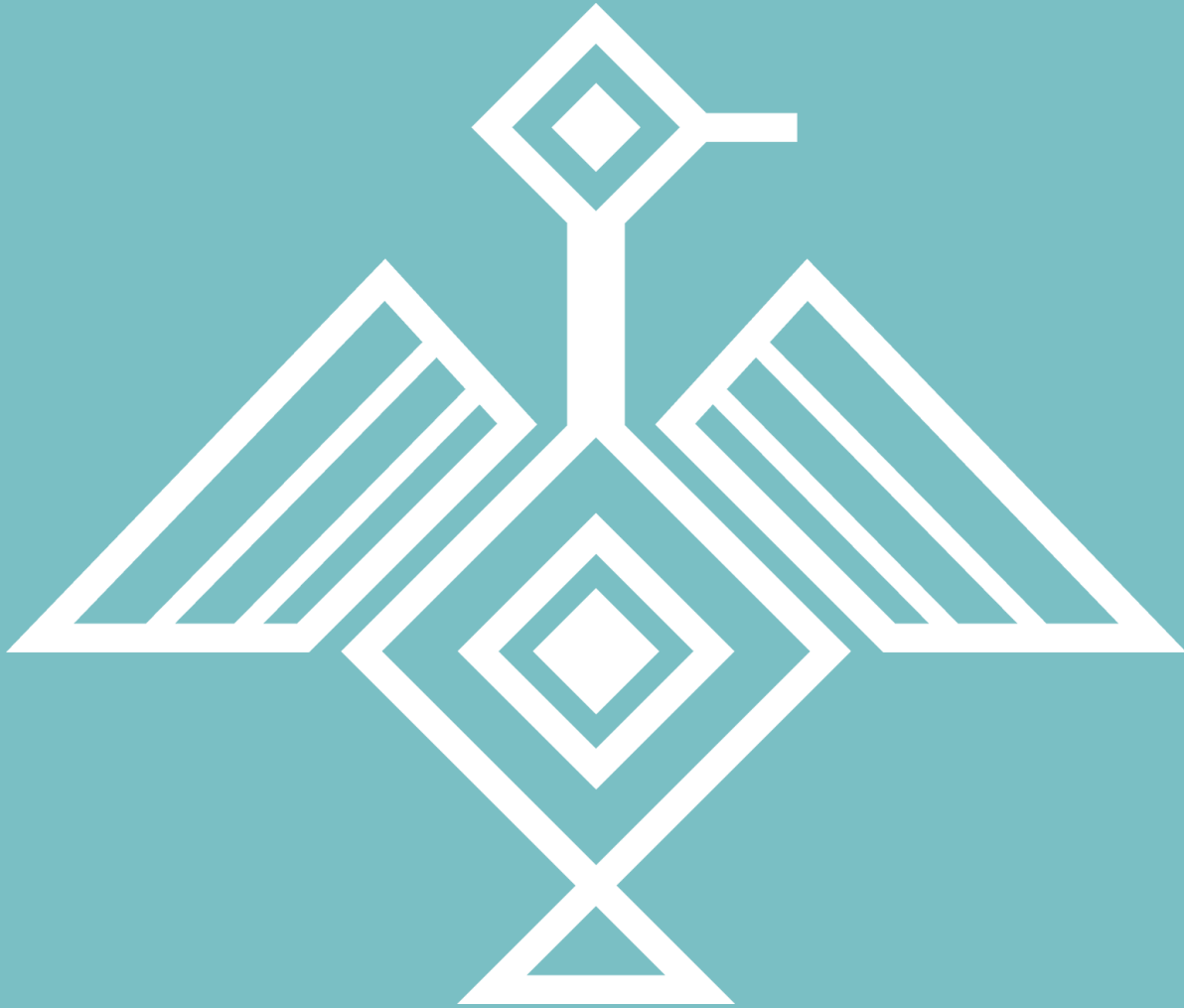
WINGS / Asociación Alas de Guatemala



WINGS Guatemala

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info@wingsguate.org



THANK YOU