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| • Title: | The Northeast Amazon Ethno-medicine Program |
| • Institution: | Medical Mission and the Amazon Conservation Team |
| • Country: | Suriname |
| • Level: | Community |
| • Duration: | 4 years |
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The Kwamalasamutu village comprised of 1074 Trio indigenous peoples is located in the deep southwest region of Suriname and was until recently far removed from western influence. In the Trio community, sexual activity starts at an early age and the median age for girls who have their first child is 16 years. Early teen pregnancy poses a risk to maternal and infant healthy by increasing chances of maternal and infant mortality. With a historical separation from western influence and a strong belief in shamanism, modern prenatal care has been nonexistent and present health entities have been unable to address illnesses and complicated deliveries that may be deadly for the mother or child.

To address the need for modern prenatal care while respecting the shamanist traditions of the Trio indigenous peoples, the Medical Mission and the Amazon Conservation Team have collaborated to provide a medical clinic that works in partnership with the traditional Kwamalasamutu clinic Katamüimë Ēpipakoro. The government funded Medical Mission clinic was strategically placed next to the traditional clinic and Indigenous Health Care Workshops were utilized to facilitate the collaboration between the two clinics. During this workshop led by shamans, Medical Mission health workers and Amazon Conservation Team members, OBGYNs and primary care practitioners were taught about traditional health practices, important medicinal plants and indigenous concepts of health and illness. The workshops simultaneously educated traditional healers about basic primary care issues and preventive health practices.

The adoption of the Northeast Amazon Ethno-medicine model that retains tribal peoples' medical self sufficiency and promotes their traditional medicine system while providing advanced western care has proven effective in delivering maternal care to pregnant women and mothers in Kwamalasamutu. Shamans and Medical Mission health staff frequently visit each other's clinic for consultation on cases, and mutual referrals between clinics are made. Clinic attendance data suggest an extensive and comparable use of both clinics by villagers. Additionally, the mutual referral system, information exchange and coordination of treatment protocol between the clinics ensure cost effectiveness of maternal care in Kwamalasamutu.