

## **Gender barriers and indigenous leadership in transparency and accountability activities: experiences from Guatemala**

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### **DRAFT-VERSION**

This brief case study describe the challenges and barriers that female indigenous people face when they aim to participate in the process of monitoring and evaluation public services and demanding accountability. It is known that indigenous population in general face many barriers to make their voice heard. However, female indigenous people face many more additional barriers-within their own communities and outside their communities. This case study describes how established female leaders navigated those barriers and the actions they are currently implementing to mentor younger female women with a potential for leadership.

#### **Identifying and tackling gender barriers to participation**

As part of our approach to working with grassroots organizations, CEGSS provide subsidies for food and transport to all participants in capacity building workshops. As an organization, we had to produce evidence that transport and food costs were barriers to participation so that our donor will agree to such subsidies (Flores and Sánchez 2010). These subsidies have been implementing as a main resource during training and capacity building activities. After several months of training, we noted that many female participants who were actively participating in their municipalities were not attending the regional training workshops, for which they had to travel from their communities to the provincial capital. After enquiring with other participants, we found that several of the female leaders had small children who would have had to come with them to the regional workshops. For some people, attending a regional workshop meant traveling for more than a day and staying overnight. The subsidy we were providing was for one individual, so female leaders who had one or several small children were precluded from attending because the subsidy would not cover the additional food and transport for their children.

CEGSS decided that this barrier affecting female leaders was not acceptable. As result, we created a differentiated subsidy for women who travel with children. Six years after this decision, 40% of all community defenders who are part of network of community defenders for the right to health (REDC-SALUD). It is not possible to say that the differentiated subsidy has directly contributed to this level of women participation. However, the subsidy helped to remove a barrier that was restricting women's leadership.

#### **Supporting the leadership development of young indigenous women**

The network of Community Defenders that CEGSS works with and supports consists of around 160 leaders and about 40% are women and girls over eighteen. Among the females, we noticed that while there were a few well-established middle-aged leaders the rest were young women that did not yet have the confidence and skills of the older leaders. The CEGSS team thought up a new initiative in which established female leaders would mentor and train young women. We shared the idea with one of the key women leaders of REDC-SALUD – María<sup>1</sup>, a middle-aged woman with over three decades of experience in grassroots organizing. María listened carefully to our idea and told us: 'I understand your aim and I agree it is very important for us, the experienced leaders, to support young women. However, I am already doing it'. María explained the following:

'There is no training at all. Young women wanting to become community leaders first need solidarity and accompaniment to survive the most difficult test. This occurs when her own family is unhappy about her attending many meetings with older females and men; when her own community is gossiping and mocking about her aspiration to learn why is there injustice and poverty in the community; gossiping because she wants to learn about the law, because she dares to speak in public; because she travels outside her community to talk to authorities, government officials and others'.

María went on to say that her role was to talk to the families of the young women, to explain to them the work of a female community leader in terms of their daughter (or wife) wanting to help her community. She also provides comfort and emotional support to young women when they felt down as result of community gossip and lack of family support. María said that she experienced this pressure herself when she started as a community leader:

'I did not have the solidarity or support of an older female leader to help me through, but I did survive that phase and became a leader recognized within and outside my community. Many young women that wanted to become leaders are not able to surpass this pressure'.

María also stated that training and similar activities may happen later. At this moment, young women need my solidarity, and the solidarity of many others.

About a year later, we noticed that the young female leaders that María took under her wing were more confident and assertive during the REDC-SALUD meetings. They were also more assertive and effective when engaging with authorities and implementing their roles as Community Defenders. Two of these young leaders have recently participated in an international exchange meeting in México.

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<sup>1</sup> María's name has been changed to preserve her anonymity. This text is a reconstruction of a conversation held in early 2018.

The experience that María implemented with young female leaders is now central to our understanding and approach to supporting the development of community leaders. Instead of a pre-defined training or capacity-building program, we promote exchanges in which leaders more experienced in a specific theme or skill are grouped with other leaders interested in learning about the theme or skill. Solidarity is central in the exchange and each group decides what they want to do and how.

## References

Flores, W., & I Gómez-Sánchez, (2010). ;La gobernanza en los Consejos Municipales de Desarrollo de Guatemala: Análisis de actores y relaciones de poder'. *Revista de Salud Pública*, 12, 138–150. Available at: <http://www.bdigital.unal.edu.co/33629/1/33506-124298-1-PB.pdf>

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