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Introduction

Welcome

This handbook recognizes unique challenges and opportunities for those traveling to, or working in, Honduras with Shoulder to Shoulder, Inc. (STS) or any other entity. It will provide you with valuable information on the remarkable partnership between STS (or Hombro a Hombro in Spanish) and the Honduran people. This information recognizes the incredible value of your time and talent as you share in ongoing work within STS. We hope you feel invested and able to serve as a future ambassador of STS.

STS is a Non-Governmental Organization (NGO) that connects volunteers with work in rural Honduras. STS began in 1900 at the University of Cincinnati, Department of Family Medicine from the vision of the then Residency Director, Dr. Jeff Heck.

Currently the health division of the organization is contracted by the Honduran government to provide care to over 69,000 residents of Intibucá. Volunteers witness and contribute to Honduras’ approach to development, education, and healthcare. To learn more about STS and the government’s contract, please refer to the section below under “Honduras Ministry of Health Contract”.

Special thanks to Dr. Andrew Bazemore (past Director of The American Academy of Family Physicians Robert Graham Center), Dr. Christie O’Dea (past Global Health Director at TCH/UC FMP), Kate Clitheroe (MPH, past StS Director of Programs & Research), Paul and Laura Manship (General Directors of StS) and Mariela Rodriguez (MSW, past Communications Coordinator) who have all contributed to the publication and subsequent editions of this handbook.

Our Philosophy of Global Development Volunteering

Developing countries typically enjoy a regular stream of energetic and talented health care professionals and committed volunteers willing to serve poor communities. U.S. institutions and other volunteer health groups often bring with them eager medical students, residents, nursing students, and allied health students for one to two weeks of medical service. Or undergraduate and recent graduates eager to serve our community for short or long term.

Despite the talent, good will, and donated resources, short-term efforts rarely result in significant, sustainable improvement in the health status of poor communities. The reasons are complex, but sustainable development requires long-term relationships that short-term visits of small groups cannot achieve.

Our goal is to form dynamic, synergetic, interactive networks among U.S., Honduran, and international organizations, the local and national Honduran government, and the people to improve the well-being of residents living in poor, rural communities in Honduras.
Long-term, sustainable relationships lay foundations for continuous care, health and promotion education, public health improvement, economic development, agricultural development, education improvement, and generate community involvement and input. This broader, comprehensive, and generative vision of sustainable, community growth is consistent with Honduran Ministry of Health and Honduran Ministry of Education priorities.

The local presence of StS provides volunteers and service trips with the foundation for these long-term, sustainable relationships. StS creates and sustains effective partnerships between health care professionals, education specialists, community development experts, and committed individuals and groups from the U.S. and around the world. In turn, these partnerships, and the dedicated services they offer, have established successful, sustainable missions in health, education, and development for the people in Honduran communities where StS serves. StS links goodwill, competency, and generosity with the hopes, needs, and will of poor, rural Hondurans toward the improvement of the health, education and well-being for everyone. These efforts inspire health care professionals, education professionals, and others to live and work in underserved communities, achieving an enhanced level of cultural competency.

**About Honduras**

**History** Part of Spain’s vast empire in the New World, Honduras became an independent nation in 1821. With that independence came a series of military regimes. Honduras did not see a freely elected civilian government until 1982. During the 1980s, Honduras proved a haven for anti-Sandinista contras fighting the Marxist Nicaraguan Government and an ally to Salvadoran Government forces fighting against leftist guerrillas. The area of southern Intibucá, along the El Salvador border, was the site of two UN refugee camps (one in Colomoncagua and another smaller camp in San Antonio.) The country was devastated by Hurricane Mitch in 1998, which killed about 5,600 people and caused approximately $2 billion in damage. During the COVID pandemic in 2020, the country was hit by tropical storm Iota and Hurricane Eta within 2 weeks of each other causing once more displacement and devastation resulting in $15 million in losses and 100 deaths.
Demographic Profile Honduras is one of the poorest countries in Latin America, often considered the second poorest Latin American country after Haiti. It has ranked high in terms of violence and murder rates. It is important to note, however, that most violence and murders take place in the major cities and are directly related to drug and gang violence. Tourists are rarely, if ever, targeted and STS has many measures in place to avoid all high-risk situations (see Safety Information).

Honduras' population growth rate has slowed since the 1990s, but it remains high at 1.5% annually. The birth rate averages approximately three children per woman and more among rural, indigenous, and poor women. Consequently, Honduras' young adult population - ages 15 to 29 - is projected to continue growing rapidly for the next three decades and then stabilize or slowly shrink. Population growth and limited job prospects outside of agriculture will continue to drive emigration.

Economy The economy has continued to grow slowly, but the distribution of wealth remains very polarized with average wages remaining low. Economic growth in the last few years has averaged 7% a year, one of the highest rates in Latin America. Yet, this has not translated to higher household income as 50% of the population remains below the poverty line and the per capita income is one of the lowest in the region. It is estimated that there are more than 3.1 million people who are unemployed, the rate of unemployment standing at 34%. Remittances mainly from the United States represent about a fifth of GDP.

Poverty rates are higher among rural and indigenous people and in the south, west, and along the eastern border than in the north and central areas where most of Honduras' industries and infrastructure are concentrated. The increased productivity needed to break Honduras' persistent high poverty rate depends, in part, on further improvements in educational attainment. Although primary-school enrollment is near 100%, educational quality is poor, the drop-out rate and grade repetition remain high, and teacher and school accountability are low.

Basic Statistics
(CIA World Factbook; 2023 estimates unless otherwise noted)

<table>
<thead>
<tr>
<th>Population</th>
<th>9,571,352 [2023 est.]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age Structure</td>
<td></td>
</tr>
<tr>
<td>0-14 years:</td>
<td>27.92% (male 1,352,581/female 1,319,338)</td>
</tr>
<tr>
<td>15-64 years:</td>
<td>66.18% (male 3,050,008/female 3,283,949)</td>
</tr>
<tr>
<td>65 years and over:</td>
<td>5.91% (male 249,241/female 316,235)</td>
</tr>
<tr>
<td></td>
<td>[2023 est.]</td>
</tr>
</tbody>
</table>
### Median Ages

<table>
<thead>
<tr>
<th></th>
<th>total: 24.4 years</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>male: 23.5 years</td>
</tr>
<tr>
<td></td>
<td>female: 25.2 years [2020 est.]</td>
</tr>
</tbody>
</table>

### Population Growth Rate

1.16% [2023 est.]

### Birth Rate

17.64 births/1,000 population [2023 est.]

### Death Rate

4.69 deaths/1,000 population [2023 est.]

### Net Migration Rate

-1.32 migrant(s)/1,000 population [2023 est.]

### Urbanization

- **urban population:** 60.2% of total population [2023]
- **rate of urbanization:** 2.48% annual rate of change [2020-25 est.]

### Capital

1.568 million TEGUCIGALPA

### Sex Ratio

- **at birth:** 1.03 male(s)/female
- **0-14 years:** 1.03 male(s)/female
- **15-64 years:** 0.93 male(s)/female
- **65 years and over:** 0.79 male(s)/female
- **total population:** 0.95 male(s)/female [2023 est.]

### Literacy

- **definition:** age 15 and over can read and write
- **total population:** 88.5%
- **male:** 88.2%
- **female:** 88.7% (2019)

### Child Labor

- **Definition:** children ages 5-14 working
- **Population (%):** 168,348 (9.0%)

### Health Conditions

Health statistics are not completely reliable for Honduras; nonetheless, the following information illustrates the health and socioeconomic challenges in Honduras. Country-level statistics often hide the poor conditions of regions like Intibucá.

(CIA World Factbook; 2023 estimates unless otherwise noted)

<table>
<thead>
<tr>
<th>Health Expenditures</th>
<th>9% of GDP (2020)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physician Density</td>
<td>0.5 physicians/1,000 population (2020)</td>
</tr>
<tr>
<td>Hospital Bed Density</td>
<td>0.6 beds/1,000 population (2017)</td>
</tr>
<tr>
<td>Life Expectancy at Birth</td>
<td><strong>total population:</strong> 75.43 years</td>
</tr>
<tr>
<td></td>
<td><strong>male:</strong> 71.91 years</td>
</tr>
<tr>
<td></td>
<td><strong>female:</strong> 79.06 years [2023 est.]</td>
</tr>
<tr>
<td>Major Infectious Diseases</td>
<td><strong>degree of risk:</strong> high (2023)</td>
</tr>
<tr>
<td></td>
<td><strong>Food or waterborne diseases:</strong> bacterial diarrhea, hepatitis A, and typhoid fever</td>
</tr>
<tr>
<td></td>
<td><strong>Vector Borne diseases:</strong> dengue fever</td>
</tr>
<tr>
<td>Average Number of Births per Woman</td>
<td><strong>Total:</strong> 2.4 (2021)</td>
</tr>
<tr>
<td></td>
<td>Source: World Bank</td>
</tr>
</tbody>
</table>
Adolescents (age 15-19) with Children or Pregnant | Total: 24% (2012)  
Source: World Bank

Married Women Demanding Family Planning | Total: 76% (2012)  
Source: World Bank

Births Attended by Professionals | Total: 94% (2019)  
Source: World Bank

Neonatal Mortality (<1 month) | Total: 10 deaths/1000 live births (2021)  
Source: World Bank

Infant Mortality (<1 year) | Total: 14.77 deaths/1000 live births

Child Mortality (<5 years) | Total: 17 deaths/1000 births (2021)  
Source: World Bank

Maternal Mortality | Total: 72 deaths/100,000 live births (2020 est.)

Stunting (height for age, children <5) | Total: 18.7% (2019)  
Source: World Bank

Anemia (children 6 to 59 months) | Total: 26% (2019)  
Source: World Bank

Overweight | Females: 4.5% (2019)  
Males: 4.4% (2019)  
Source: World Bank

Obesity | Total: 21.4% (2016)

Before Travel

The Checklist

As a visitor, you are responsible for completing the following Checklist before departure to Honduras. The Visitor Application and the Waiver of Liability are forms that must be completed before traveling to Honduras with Shoulder to Shoulder.

- Complete the Visitor Application
- Review the Visitor Policies
- Sign the Waiver of Liability
- Pay your Brigade Fee as specified by your Brigade Leader
- Review the Unofficial Honduras Packing List
- Contact Laura Manship with any questions you may have: laura@shouldertoshoulder.org

This list and materials can also be accessed on our Brigade Registration Page.

Health Considerations

These are suggestions/recommendations. Additionally, we recommend a visit to a physician. For health-related preparations specific to Honduras, please visit www.cdc.gov.

*Routine Vaccinations (adults only):

- Tetanus/Diphtheria/Pertussis: Adequate primary series + one dose of Tdap every 10 years
- Measles/Mumps/Rubella: Indicated for those born in 1957 or later (1970 or later in...
Canada) without history of disease or of 2 adequate doses of live vaccine at any time during their life. Many countries recommend that adults need to have had only 1 countable dose at any time during their life.

- **Pneumococcal**: All adults over 65 and those with chronic disease or compromising conditions.
- **Varicella**: Consider 2 doses for long-term travelers with no history of the disease.

*Vaccinations for Travelers into Honduras (Intibucá region):*

- **Hepatitis A** is recommended for all travelers.
- **Typhoid** is recommended for all travelers, especially those traveling to rural areas.
- **Hepatitis B** is recommended for health care workers, those on prolonged stays or frequent short stays, and adventure travelers.
- **Influenza** is recommended for all travelers. Flu is transmitted year-round in the tropics and all travelers are at increased risk.

**COVID-19** There is no longer proof of vaccine, or a negative test required upon entry. However, COVID-19 continues to be present in our communities. Past brigade members have contracted covid in Honduras please take adequate precaution.

*Other Health Considerations:*

- **Traveler’s Diarrhea**: High risk throughout the country even at deluxe accommodations. Tap water is unsuitable for drinking. **Drink only bottled or boiled water. Eat only hot food in restaurants. Avoid uncooked vegetables and fruits.** All visitors should bring antibiotics for traveler’s diarrhea, such as ciprofloxacin, rifaximin, azithromycin, or other floxin. In addition, it is wise to bring an antidiarrheal, such as loperamide, to be taken along with antibiotics.
- **Insect Precautions**: Although the risk of malaria is very low in Intibucá, there is a small risk of Dengue Fever in the area. Dengue Fever is a viral illness transmitted by the daytime biting of *Aedes aegypti*. Mosquito transmitted illnesses also include Zika and Chikungunya. Therefore, insect precautions, including the use of insect repellent with DEET (30-50%) are necessary.
- **Malaria**: Risk exists throughout the year in some areas; however, there is a very **low risk** of malaria in Intibucá. Prophylaxis medication is not necessary.
- **Leishmaniasis (cutaneous)**: transmitted by sandflies, is widespread in rural areas. Recommend insect precautions.
- **Chagas’ disease**: occurs in rural areas; risk to travelers is unknown but is thought to be negligible. Avoid overnight stays in houses constructed of mud, adobe brick, or palm thatch. Avoid blood transfusions not assuredly screened for Chagas’ disease.
Safety Information

While Honduras has been featured in the news as a country with substantial turmoil and violence, it is important to recognize that most issues are associated with drug and gang violence. Foreign visitors are typically not targeted nor at high risk. We work hard to avoid all high-risk situations including but not limited to avoiding dangerous locations, public transportation, and spending excess time in the large cities. Additionally, our sites are located in a safer part of the country.

Since our beginnings in 1990 we have never had a violent incident involving a visitor. This is due in large part to the tranquility of Intibucá and to our safety requirements. Still, we remain vigilant with our staff, visitors, and volunteers. Visitors are housed safely in main clinics, affiliate clinics or in community sites.

Service teams and visitors, supervised by team leaders and StS staff, stay in secure hotels when traveling to and from their local site. All visitors are registered with the U.S. Department of State during their travel in Honduras. Service teams receive evacuation insurance if necessary. Long-term visitors may purchase insurance.

STS remains committed to fostering individual development in a safe environment. Intibucá provides an excellent volunteer and learning environment with communities that are in great need of quality medical, education, and other services.

*Arrival and Departure from Country*

✔ Our visitors will fly into the airport in either Comayagua (previously Tegucigalpa) or San Pedro Sula.
  o Tegucigalpa may still come up in search engines, but they are automatically re-routed to Comayagua which has an airport code of XPL (check your ticket to review airport codes)

✔ As of March 2023, Honduras customs is now asking travelers to complete your declaration forms up to 5 days before arrival and before departure online through their website [HERE](#) and download the QR code to present in the airport.

✔ After clearing customs, travelers will be met by a StS staff member responsible for in-country travel. Private transportation from the airport is provided to all travelers.

✔ Keep your bag tags upon check-in to present upon airport exit! This is done to prevent theft

✔ Any issues (e.g., lost luggage) should be directed to your StS staff escort for resolution.

✔ Travelers generally receive overnight accommodation while enroute to Intibucá.

✔ Travel after dark is not recommended.

✔ In general, the rural communities of Intibucá are safe for travel. It is recommended that visitors always travel in pairs and do not leave their sites after dark.

*Armed Security*

While traveling in Honduras you may notice armed security outside of banks, pharmacies and other stores. Please do not be alarmed, as of now we have never seen this security use their weapon (and we
hope to never hear of anything either). Typically, this security will ask you to store your backpack in lockers outside, briefly inspect your purse, ask you to scan your person with a metal detector wand or simply open the door for you. This security is privately hired, many locals rumor that their weapons don’t even have ammunition and are just to discourage any crime – **whether this is true or not is uncertain**. We ask that you conduct yourself in a professional and courteous manner and you will not have to interact with them more than necessary.

*Police Cooperation*

STS works closely with the police force throughout Intibucá and would be informed of specific risks to our visitors. The police work with local town committees, schools, community leaders, and NGOs to communicate the latest local issues and how they are addressing criminal activity. Police report that the overwhelming percentage of violence is due to alcohol, long standing family feuds, and domestic violence. Police have intensified their efforts to reduce these acts, with particular attention paid to domestic violence and alcohol-related events.

*Military Presence*

While seeing the military is not common in most U.S. communities, due to our proximity to the El Salvador border, there is presence in some of our Frontera communities tasked in watching over cross-over activity for safety. They may also do routine stops along the La Esperanza-Camasca highway, primarily at night, to monitor traveler’s activity and destinations, helping to reduce illicit activities. Do not be alarmed, our StS staff are accustomed to this and will represent you.

*Consular Information & State Department Updates*

**U.S. Department of State Website:**

[STOS Honduras Information Page](https://honduras.usembassy.gov/)

**Smart Traveler Enrollment Program:**

[STEP program](https://travel.state.gov/content/travel/en/traveler-resources/step-program.html)

¡Shoulder to Shoulder will register every visitor in the program before arrival!

**Tegucigalpa U.S. Embassy Information:**

Address: Avenida La Paz in Tegucigalpa, Honduras

Telephone: +(504) 2236-9320 or +(504) 2238-5114

For information on services for U.S. citizens, please ask for ext. 4400

*Please note that all services require an appointment*

Emergency/After Hours: +(504) 2238-5114 ext. 4100

Email: usahonduras@state.gov monitored Mon-Fri from 7:30am-4:00pm

Fax: 011-504-2238-4357

Website: [https://hn.usembassy.gov/](https://hn.usembassy.gov/)

**San Pedro Sula Consulate Information:**
Address: Banco Atlántida Building (across from Central Park), 11th Floor, San Pedro Sula, Honduras
Telephone: +504-2558-1580
Limited Hours and Services: Monday-Thursday 12:00 to 4:00 p.m.
*Please note that all services require an appointment*

**Packing - ARSA and Medicines**

Packing light and packing items you are willing to leave in Honduras will reduce some of the onus of travel. Please visit our suggested [Unofficial Honduras Packing List](#) on our website. Lost luggage is infrequent, but the distance between the airport and where you are staying is between four and six hours, so try to carry essentials for a day or two in your carry-on. **When you check your luggage in the United States, make sure to keep the tag copy to present them in Honduras to exit with the right bags.**

On June 5, 2023, the US Embassy in Honduras released an alert for medical brigades in relation to "[Increase in Confiscation of Medical Supplies](#)". Shoulder to Shoulder had also released a message to brigade leaders in April of 2023 regarding this issue and the new process to deal with ARSA, which can be read on the [Medications and ARSA Process for Brigades](#) page.

For those carrying medicines and supplies for the brigade, please talk to your brigade leader about the most recent update with ARSA (the Sanitation Regulation Agency) as our previously used “customs letters” no longer have validity when going through customs.

**Suggested Reading**

Reading can enhance your experience. The following are a few suggested readings on Global Health, Volunteering Abroad, and Honduras:

*Global Health:*

✔ Farmer, P. *Reimagining Global Health: An Introduction*. 2013
✔ Jacobsen, K. *Introduction to Global Health*. 2013
✔ Skolnik, R. *Global Health 101 (Essential Public Health)*. 2011
✔ Jong, E., Sanford, C. *The Travel and Tropical Medicine Manual, 4e*. 2008

*Volunteering Abroad:*

✔ Lupton, R., *Toxic Charity: How Churches and Charities Hurt those they Help, and how to Reverse it*.
✔ Werner, D., *Where There is No Doctor*. 2013

*Honduras:*

✔ Benjamin, M., *Don’t Be Afraid, Gringo.* The history of a Honduran woman in the 1980s who organized campesinos to advocate for national land reform in Honduras.

✔ Danner, M., *The Massacre at El Mozote.* The story of a massacre during the Salvadoran war in El Mozote, a small village within StS’s service area.


**On-the-Ground in Honduras**

**Brigade Ground Rules (for Teams or Individual Volunteers):**

1. **Water Conservation** is extremely important. Water is a finite, precious resource, and overuse may mean that others go without water. Therefore, the following techniques are important:
   a. Army showers / Bucket showers: Someone will explain logistics
   b. Do not flush toilet paper! Or the pipes may get clogged.
2. **Water and Food Safety** The cooks who work for StS are specially trained to prepare food safely so anything that they put on the table is safe. The water that comes out of the tap is not safe. You may drink bottled water or from a designated water jug.
3. **Internet** is limited (when available in clinics and hotels), and overuse will cause a shutdown of the system. You may, or may not, have access to the internet. Please limit your use to checking mail. Do NOT stream videos, movies, live games or check websites that use many pictures or stream videos. Some restaurants will also have Wi-fi to share.
4. **Phone Service** We are seeing more and more visitors with phone plans that provide mobile and internet service in Honduras, allowing them to send and receive messages to family and friends. However, service can be limited to location and time due to outages and reception.
5. **Quiet Time** You will be guests of our Honduran communities. We should be respectful of this. Please respect the general quiet time after 10 pm.
6. **Alcohol & Drugs** No alcohol or non-prescription illegal drugs are allowed. Long-term volunteers are expected to behave sensibly and sensitively to cultural norms.
7. **Laundry** There is often an opportunity to have your laundry done for a small cost. Ask the brigade coordinator about the specifics.
8. **Working with Translators** It is important to recognize the power and importance of the translators. Make sure to ask them to translate word for word in both directions. Try to speak at least a few words of greeting in Spanish to start the encounter as a way of creating
rapport. Remember to speak with the person for whom the conversation is intended, not the translator, using short sentences and simple words.

9. **Running Activity** If you choose to go out running in the evening or early morning, do so with caution as there are often dogs who may come out running after you. Dogs tend to be more aggressive when there is less sunlight. To avoid getting bitten, carry a few small rocks with you to throw at them or a small branch.

10. **Exploring** Always let someone know if you plan to go out alone, especially after dark. Try to go with someone else. If you are unsure about safety in the area, ask the StS brigade staff.

**Camasca Volunteer Ground Rules:**
During your stay at the volunteer house or with a family it is important to keep in mind several things

1) **Water Conservation** is extremely important. Water is a finite, precious resource, and overuse may mean that others go without water. Although some houses appear to have running water, it is usually a water tank that is filled every other day only at certain hours. Therefore, if the tank runs out of water beforehand, you will need buckets of water. Take care by:
   a. Taking bucket showers when no running water is available
   b. Close all water when not in use (brushing teeth or dishes), report leaks ASAP
   c. Finally, do not flush toilet paper! Or the pipes will get clogged.

2) **Water and Food Safety** The water that comes out of the tap is not safe. You may drink bottled water or water from a designated water jug. The water filter at the volunteer house is often slower with heavy use, help fill it up whenever you see it needs more water.

3) **Internet** is limited, and overuse will cause a shutdown of the system. When this happens, please limit your use and be mindful of your streaming – NO online gaming. There are often community outages as well. Keep these things in mind. Some restaurants will also have Wi-fi.

4) **Phone Service** We are seeing more and more visitors with phone plans that provide mobile and internet service in Honduras, allowing them to send and receive messages to family and friends. However, service can be limited to location and time due to outages and reception.

5) **Quiet Time** You will be guests of our Honduran communities. Be respectful of this; general quiet times are after 10 pm. No parties, unless approved by StS and the landlord beforehand.

6) **Alcohol & Drugs** Non-prescription, recreation drugs are against the law. Alcohol and cigarette use is not common and is often controversial. Be mindful of who you are around when doing so. Long-term volunteers are expected to behave sensibly and sensitively to cultural norms.

7) **Laundry** There is often an opportunity to have your laundry done for a small cost. Ask StS staff about who can help you with laundry.

8) **House Rules** Upon your arrival you will receive additional orientation from StS staff including working at the bilingual school.

9) **Running Activity** If you choose to go out running in the evening or early morning, do so with...
caution as there are often dogs who may come out running after you. Dogs tend to be more aggressive when there is less sunlight. To avoid getting bitten, carry a few small rocks with you to throw at them or a small branch.

10) **Exploring** Always let someone know if you plan to go out alone, especially after dark. Try to go with someone else. If you are unsure about safety in the area, ask the StS brigade staff.

**Contact Information**

*Please feel free to email us with any questions or to arrange a phone call.*

- Laura Manship, Executive Director ([laura@shouldertoshooulder.org](mailto:laura@shouldertoshooulder.org); 413-275-4587)
- Gustavo Meza, Brigade Coordinator ([mezag10@yahoo.com](mailto:mezag10@yahoo.com); +504-9698-4537)
- Minsis Ramos, Assistant Director ([minsis@shouldertoshooulder.org](mailto:minsis@shouldertoshooulder.org); +504-8761-7937)

- Visit our [Main Website](http://www.shouldertoshooulder.org) to learn more about the organization at [www.shouldertoshooulder.org](http://www.shouldertoshooulder.org)
  - [Main Brigade page](http://www.shouldertoshooulder.org)
  - [Registration Page](http://www.shouldertoshooulder.org)
  - [Long-term volunteering](http://www.shouldertoshooulder.org)

**Online Resources**

- CDC: [www.cdc.gov/globalhealth/countries/honduras/](http://www.cdc.gov/globalhealth/countries/honduras/)
- PAHO: [https://www.paho.org/es/honduras](https://www.paho.org/es/honduras)

**About Shoulder to Shoulder**

**Introduction**

Shoulder to Shoulder (StS) is a private, non-profit 501(c)(3), non-governmental organization formed in Cincinnati, Ohio in 1996. It began providing the first health care services in southwestern Intibucá in 1991, five years prior to its official incorporation. Hombro a Hombro (HaH), a Honduran, grassroots community-based, non-profit NGO was founded in 1996.

StS now focuses more on our education, nutrition and brigade services connecting the Honduran community with donors and volunteers in the U.S. HaH now focuses more on being a third-party servicer of government clinics and healthcare. Yet, StS and HaH work in tandem, achieving a single mission to implement and operate equitably accessible, sustainable services - together with our communities. Together we seek to address the needs and uplift the isolated communities in the Southwestern Intibucá region.

**Services and Achievements of StS and HaH:**

1. **Ongoing medical and dental care to 69,000 residents**
2. Ongoing international service opportunities
3. Nutrition and Public Health Services
4. Scholarships for young people to attend High School / College
5. Youth and Community Development Programs
6. The first public, bilingual school in Honduras
7. A developing bilingual secondary education mission
8. Providing offline educational content and technology to 60+ schools in Intibuca
9. Volunteer/Internship opportunities

StS and HaH depend on its philosophy of working shoulder to shoulder. We have developed a robust network of donors and partners who are committed to the health, education and well-being of people threatened by cyclical poverty. Our partnerships are not limited to the United States. We work shoulder to shoulder with the Honduran Ministry of Health and Ministry of Education, municipal governments, local civic and religious organizations, and Hondurans of goodwill and commitment. Over 4000 visitors from the US and other foreign countries have visited us to share in our mission.

History

Arriving in the small, isolated, rural village of Santa Lucia in 1990, Dr. Jeff Heck of the University of Cincinnati was jarred to confront the overwhelming consequences of sustained, systemic poverty. Practically impassable dirt roads brought him to a place where there was no electricity, no running or potable water, and no health care. Meeting the immediate needs was the first, triage response. The sustained response, by way of the creation of a federation of medical professionals, associations, and universities, became Shoulder to Shoulder. Other sites of care were established in the rural, isolated area. Because of Shoulder to Shoulder’s enduring commitment, and the commitment of others who have joined their shoulder to ours, much has improved over thirty-plus years. But even in the midst of great progress, the health care, dental care, public health, development, education, and other needs in this area remain high due to limited allocation of resources from the central government.

In 2012, Shoulder to Shoulder founded the Good Shepherd Bilingual School in Camasca, Intibucá. In 2014, under a historic agreement, the school became the only public, bilingual school in Honduras by way of a unique partnership between the Honduran Ministry of Education, the local Mayors’ Association, and Shoulder to Shoulder. We hope that this mission in education will transform the education system of Southern Intibucá and provide further opportunity for individuals and families to move out of oppressive, systematic poverty and enjoy developmental justice.

Today, a sustainable system of health care delivery is firmly established in Southern Intibucá. Shoulder to Shoulder is committed to the support and supplement the system of health care
delivery. But our success has afforded us the opportunity for further discernment of StS’s ongoing mission. Shoulder to Shoulder has always recognized and responded to the lack of quality education and its negative impact on sustainable development. We have supported programs and projects to enable young people to have the opportunities that a quality education can create. Still, until 2016 our efforts in education were not clearly defined or systematically organized. Education and development are the new frontier for Shoulder to Shoulder and has since had many new developments and ventures. For more information visit our CREE, StS’s education mission, website at www.cree.hn

All of our continued endeavors continue to follow a model of partnership: with the Ministry of Education, local government and associations, and the individuals and families that seek the establishment of just systems of development. It is a model of partnerships with donors who express their belief in StS’s vision with generosity. Finally, it is a model of partnership that includes the commitment of professionals and volunteers who will offer their time and talent on the ground in service and relationships.

Shoulder to Shoulder has accomplished much, and much more is yet to be accomplished. All our success is based upon a simple principle: the building of just relationships of mutual dignity generates systems of sustainable care and well-being. As you are reading this, you are already a part of this Shoulder to Shoulder experience. We thank you for the generous response of your heart.

**Honduras Ministry of Health Contract**

*More information about our clinics can be found at shouldertoshoulder.org under “Healthcare”*

In 2008, Shoulder to Shoulder, Inc. (StS) signed a contract with the Honduras Ministry of Health to provide basic health services to 36,000 people in Intibucá. In April of 2015, the contract was extended to cover 2 additional municipalities (7 in total), a total coverage area of over 69,000 people.

Under the current contract (“convenio”), StS/Hombro a Hombro operates 15 primary care clinics staffed with a doctor and nurse, and 3 Child and Maternal Health clinics and birthing centers. This contract finances doctors, health professionals, and administrative staff. It provides medication and supplies, health education and promotion in remote areas, and continuing education of personnel. The “convenio” agreement, supported and supplemented by medical service trips and capital investment in infrastructure, has established a sustainable system of health care delivery where no health care existed twenty-five years ago.

Medical service teams enjoy a unique opportunity to participate in the health system of the area. There
are opportunities to participate in health fairs, community clean up days, provision of care at StS-managed health centers, participation in census taking activities, and evaluation of programs. We highly value collaboration but partnering is never easy. It requires commitment, understanding, and flexibility. Medical service teams work within an existing health network. Patience is a necessity.

The blog article, Culture and Convenio, published on our website gives a fuller appreciation of how our Convenio agreement works (https://www.shouldertoshoulder.org/culture-and-convenio/). The following is an excerpt:

"The inauguration ceremony of Shoulder to Shoulder’s new Convenio agreement with the Honduran Ministry of Health [took place] on Tuesday, April 28th in Camasca. This was an amazing occurrence. Overnight, Shoulder to Shoulder has literally doubled its responsibility in providing health care. Camasca and Colomoncagua are now included in our system, stretching our coverage south of Yamaranguila to the El Salvador border, from 37,000 persons to 69,000 persons. Two major clinics, one in Camasca and one in Colomoncagua, a birthing center in Camasca, and three satellite clinics in Colomoncagua have been assumed in Shoulder to Shoulder’s health system… This is a phenomenal expansion. Shoulder to Shoulder is now essentially the exclusive provider of health care in the Frontera of Intibucá…

Convenio, not easily translated into English, is derived from Latin and means to come together. The word Covenant is a derivation. Covenant is much more than a contract. A covenant implies not only the commitment of a task or property, but the willingness to give oneself over. This means challenge and personal transformation. It involves risk, it is difficult, and most of us will avoid this level of commitment. When divergent cultures are involved, it is wrenching. Why would anyone enter into a covenant relationship? Because it is the only way to effect substantive and meaningful change. New convenios found in honest cultural exchange await as we journey shoulder to shoulder."

Our Clinics

Santa Lucia and Concepción clinics provide primary medical care, labor and delivery care, health education and community resources to the neediest. The clinics have exam rooms, emergency rooms, and laboratory and radiology services. Honduran physicians and nurses provide care to thousands of patients each year in the various sites at which Hombro a Hombro provides care.

STS supports two private dental clinics in Concepción and Santa Lucia. The clinics provide emergency, preventative, and restorative dentistry. A school-based prevention program provides ongoing care to ten elementary schools in nearby communities.

Santa Lucia clinic has a large, attached dormitory for visiting service teams with capacity to house up to 40 individuals. Apartments provide living space for the Honduran based staff. Concepcion clinic features space for up to 20 professionals. Staff in Concepción have living quarters adjacent to the main clinic building.

StS and academic affiliates operate clinics in the towns of Pinares (the poorest municipality in Honduras), Guachipilincito, Camasca, Santa Lucia and Colomoncagua. The affiliate residency programs send medical teams one to three times per year. Hombro a Hombro provides medical and
ancillary personnel throughout the year.

Those who travel to Intibucá to offer their expertise are important to the ongoing work of STS. Of equal importance are the dedicated personnel who live and work in this rural area, providing continuous medical, dental, nursing and public health care 24/7.

Our Bilingual School and Camasca Volunteers

The Good Shepherd Bilingual School is also known in Camasca by the *Escuela Bilingue Lenca Fronteriza*. We have grades Pre-K to 6th classrooms. Unusual to most Honduran schools, each grade has their own teacher and classroom. It is more typical in Honduran schools to see low enrollment of two or three grades that will become a joint classroom with a shared teacher catering to multiple academic levels. This inevitably affects the type of attention that can be given to students and involves a lot of independent learning. The Ministry of Education struggles to have enough teachers in schools, enough students enrolled in school and a budget to prove learning essentials. For this reason, we partner shoulder-to-shoulder with our parent association to pay for additional teachers as a temporary solution to government limitations. Together we continue to advocate for more staff with the central education department in the hopes of having a complete school staff.

Our bilingual school is always seeking motivated young professionals to help our students with their English. Simply hearing you speak English and using the correct pronunciation of words is a huge advantage and is not something they often get to experience. You will likely be assigned to 1 classroom in which you will help with activities and support the students. You will not be expected to create your own lessons. Every volunteer has their own experiences and interests that they bring down to Camasca which can be integrated into your time at our school. We have had past volunteers do sports tournaments, ballet and singing classes, reading and library initiatives and more. The StS assistant director will provide you with a more detailed orientation and guidance on the extent of your service at the bilingual school once in Camasca.

You can receive breakfast, a corn drink and lunch at the school for free or you can choose to eat elsewhere in town. Our volunteer house has a kitchen where you can also cook meals. The parent association will provide you with a small stipend for food and other essentials. There are several small “corner grocery stores” in town and along the main Camasca road where you can purchase a small variety of fruits and vegetables, milk, meats, bread, eggs, cereal, oatmeal, cookies, chips and more. There is often more available than you see, so don’t be afraid to ask. Personal care items can also be found at stores in town, there is a big store with a lot of variety next to the police station and town hall. You will receive a tour of town and always feel free to ask StS staff for help if you are looking for something specific.
Other Shoulder to Shoulder Programs

More information about our programs can be found at our website www.shouldertoshoulder.org

The Scholarship Project allows 160+ young people to finish high school. Schooling was compulsory only to the sixth grade up until 1996, and beyond this, parents must pay for subsequent school fees, uniforms, books and materials. Many children need to work on the farm or in the home. Scholastically qualified students remain in school, which ultimately can mean a better job/future for them and their families.

RETIRED IN 2020 Chispuditos Shoulder to Shoulder partnered with the Mathile Institute for the Advancement of Human Nutrition to provide children between the ages of six months to five years to receive the nutritional supplement Chispuditos. The COVID-19 pandemic caused the project to be retired due to border shut-downs. Subsequent donations of Chispuditos have been donated sporadically.

Hens Hatching Hope: Un Huevo Cada Dia Our continued commitment to our region’s children and their nutrition – our Executive Director Laura Manship researched started a new nutrition project to battle malnutrition in children 2 years of age and under in 2020. Eggs have been shown to be a cost-effective solution to fighting malnutrition in developing countries. But the delivery of eggs is a challenge. Therefore, our project supports one woman in each community who has the desire to raise chickens and eggs. In Honduras, children 2 years of age and below are supposed to be brought to their local Health Center for a monthly weight/height checkup. Mothers who come to these appointments will be given a ticket to receive 30 free eggs.

Centro Regional de Excelencia en Educacion (CREE) Project Along with the inauguration of our public bilingual school in Camasca began our interest and involvement to help improve the education that students receive. In 2016 we began CREE as an overarching education project focusing on offline education content for classroom use, technology use in classrooms, increased STEAM opportunities and more. To find out more details please visit our CREE website www.cree.hn to read and explore the most current projects our team is working on.
After Your Visit
We sincerely hope that your experience with StS in Honduras has been as fulfilling and meaningful for you as it undoubtedly was for the people you served. We appreciate your generous commitment to service.

You are encouraged to send us any photographs in Honduras, stories and publications made with your university. With your permission these will be used for communications with our supporters via our blogs and website.

Send all reports, stories and photos to Laura Manship: laura@shouldertoshoulder.org

Staying Involved
We also encourage you to stay involved with Shoulder to Shoulder:

✔ Visit our website for regular updates and information at: www.shouldertoshoulder.org
✔ Submit stories and photos about your experience at laura@shouldertoshoulder.org
✔ “Like” us on Facebook
✔ Share your experience with friends and family and encourage them to learn more about us.
✔ Subscribe to our newsletter at StS Newsletter
✔ Make a small donation to support the organization HERE
✔ Commit to a long-term volunteer opportunity, find more information HERE
✔ For more long-term involvement, inquire about joining the advisory board.