

Discovering Inés: TCOM and Exploration of a Maya Family

by Max Kintner

Doña Inés is petite even by Indigenous Maya standards, standing no more than about five feet in the cheap plastic flats called *caïtes* that Mayan women wear throughout the Guatemalan Highlands. Despite the nine childbirths she has endured over the last 22 years, she has a slim build, with no hint of matronly spread. She is immaculate and dignified in her appearance, wearing striking Sunday-best *traje*, or indigenous dress, with an elegant hand-woven *huipil* blouse and wrap around knee-length *corte* dress in the very distinctive style of Chichicastenango. A simple but lovely thick silver necklace and pendant hang from her neck. She is clearly a little nervous, but is nonetheless composed as she arrives for the interview. She returns my smile, and offers her hand, which I shake in the barely-touching manner that is common to this culture. Along with my research collaborators, Manuela and Estuardo, we chit-chat for a few moments about the unusual lack of rain this year, and the ongoing peach harvest in the rural *canton*, or remote village, in which she lives, before inviting her to sit at the table in the waiting room of the clinic where we meet.

Doña Inés's Spanish fluency is limited, and my own fluency with the K'iche' Maya language is even more limited. So Manuela and Estuardo take over the interview, explaining to Doña Inés that for the next hour or so we will be asking her rather intimate questions about herself and other family members who live in her home, and that depending on her answers we might ask more detailed questions about one or more of her children. Manuela explains in K'iche' Maya that in the United States I am a social worker, and routinely use these series of questions with the families and children with whom I work. She further explains that Inés's participation in this interview will not have any effect, either positive or negative, on the scholarship that two of her adolescent children receive from the *Asociación Centromaya para la Educación, el Bienestar, y la Asistencia Rural (Acebar)*, with which Manuela, Estuardo and I work.

Doña Inés is informed that we are collecting this information from her and the mothers of other Acebar scholarship families to better understand the problems and needs of poor rural families in the municipality. She is told that all information she shares with us will be held in the strictest confidence, although "*Don Max*" (me) might tell her story to others without revealing her identity in hopes of increasing understanding about the lives of poor Guatemalans and hopefully promoting Acebar's education-promotion programs. Manuela tells her that whether she continues with the interview or not, she will be reimbursed the small sum of about US \$3.25 for the cost of round-trip *microbus* fare from her village to the town, but that there is no other compensation. When asked if she is still willing to proceed with the interview, Inés says yes, that it is a good thing to help others understand the problems of Chichicastenango, and she mashes her thumb on an inkpad and dabs it on the signature line of our permission/privacy form to indicate that she understands. With introductions and explanations finished, we begin with the administration of the assessment tool called, in English, the Family Advocacy and Support Tool (FAST).

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The FAST assessment is part of a growing battery of assessment tools included in the “Transformational Collaborative Outcome Management (TCOM) movement in mental health and social work. The FAST consists of a series of about 10 questions relating to the “family together,” followed by questions about every individual member of the immediate household. Questions about the family together seek to establish a general understanding of parental/caregiver cooperation and collaboration in the family endeavor, and the degree to which the family is stressed by internal conflicts, financial problems, safety issues, or residential instability. Questions about individual caregivers explore the capacity of adults in the home to provide for family needs, and the degree to which their particular strengths and weaknesses as parents and providers affect family functioning and stability. The sets of questions relating to each child being cared for by the family provide a snapshot view of the child’s or youth’s relationship with other family members, whether there are concerning issues about their physical, mental, or developmental health, and how they are doing in school. The last item on the FAST is a yet another section of about 10 questions that assess family strengths and needs related to the family’s ability to engage in constructive communication, recognition of and knowledge about needs and challenges faced by individual family-members or the entire family, and the caregivers’ levels of satisfaction with their own lives and the lives and progress of their children.

Individual questions on the FAST assessment are “coded” with a score of 0 to 3, with 0 representing an area of no concern, and 1 representing a suspicion or history of concern that indicates the need for “watchful waiting” for evidence that this area is still, or once again, a problem. Scores of 2 indicate a acute need that should be addressed as soon as possible, and a score of 3 indicates a crisis-level need that endangers the immediate stability or health of the family or specific members of the family. A similarly scored, more detailed assessment called the Child and Adolescent Assessment of Needs and Strengths (CANS) should be administered for every child/youth who is assigned an “actionable” score of 2 or 3 on the individual child sections of the FAST. With more specific information provided by the CANS, clinicians, caseworkers, and health treatment teams can first better target where remediation efforts and treatments should be directed, and with subsequent assessments can measure whether or how much progress has been made toward improving the well-being of the family or specific behaviors of a particular child.

Or at least that is the way it is used in social services-rich countries like the United States, where one version or another of the FAST and CANS are being used in every state, with many states moving toward wholesale adoption of the assessments as a way to rationalize (expand, justify, and economize) Medicaid-funded family services. In theory and in practice, that is, the FAST and CANS are integrally tied to provision of services that practitioners and policy-makers alike can understand and use to provide better care at the micro-level, and establish better and more efficient programs at the macro level.

But in service-starved countries and regions such as Guatemala, the benefit of using assessment tools like the FAST and CANS is less clear, since in most cases there are almost no resources to direct toward a family or youth, even with the direst of assessments with multiples scores of 3. To put it in other terms, all social workers in the US are frustrated by faulty service rules and systems that let families “fall through the cracks.” But in poor countries, there is no social service floor to have cracks, and no way to

assist families with crises related to physical or mental health, physical or sexual abuse, substance abuse, or poverty beyond the imagination of most US families.

So early in 2018, when I was encouraged to try taking TCOM tools I use in New York to the rural Guatemalan Maya population with which I have worked in various education, health-promotion, and micro-development for the last 25 years, my first response was “I’d love to!”, because I had already been thinking for several years that these tools would be a marvelous new way to do an anthropological exploration of Maya family life. Indeed, two years earlier I had talked with my collaborators, Manuela and Estuardo, the two *jefes* at ACEBAR, about the possibility of them assisting me with a pilot run of administering the CANS with some of the about 250 primary and secondary scholarship students supported by the *Asociación* each year. They were agreeable, but our overly-busy schedules and my limited vacation time to spend in Guatemala were enough of a barrier to discourage development of a research project that was not reinforced by a clear, practical goal.

Increased incentive to engage in such a study was provided by waves of emigration from Central America to the US, and a US governmental response that was and continues to be not merely cruel but unbelievably ineffective. Watching and reading reports about the immigrants reinforced my long-standing confidence that projects like that of Acebar to promote education and enhance the ability of local and national health systems to respond to mental health challenges are a critical element in slowing down the impulse of poor Guatemalans to come to the United States. And although I was still not sure what practical value collecting FAST and CANS data might have, the encouragement I received led me to submit a proposal to do a presentation on FAST and CANS use in Guatemala at the annual TCOM conference in October of 2018. The proposal was accepted, and in late July I arrived in Chichi to begin fieldwork for the project. After spending several days explaining and teaching the assessment technique to Manuela and Estuardo, I found myself sitting at the table of ACEBAR’s clinic waiting room having what turned out to be astonishingly frank and very moving conversations with Doña Inés and a dozen other parents about family life in impoverished rural Maya households.

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The FAST and CANS are not designed to be lists of survey-like questions, but rather successive clusters of talking points to guide a dialogue. When done correctly, the process is a highly conversational style of data collection that worked very well for all the families interviewed for this pilot study. So while Doña Inés initially sat with tightly clasped hands in her lap and her eyes darting anxiously from one to the other of us, her nervousness dissipated quickly as she saw that we were interested, sympathetic, and non-judgmental. Perhaps because of her already established trusting relationship with Manuela and Estuardo, after only a few minutes she appeared utterly unrestrained by the cultural timidity that characterizes many Maya women, and elaborated on her own family story with apparent easiness.

The first part of her story suggested that her family is, or should be, better off than many of their rural neighbors, because her husband, Tomás, is one of a small percentage of workers in her *cantón* fortunate

enough to have a steady and dependable “formal sector” job in the pueblo.¹ This provides the family with government health and retirement benefits that are not available to most *Maxeños*, as people from Chichicastenango refer to themselves. He also belongs to one of the pueblo’s *cofradías*, or folk Catholic religious brotherhoods, which carries with it a steep financial obligation, but also provides a rich network of informal social supports and considerable prestige within the community. Doña Inés describes him as reliable, but not too involved in day-to-day parenting. He does not drink often, but very much in the cultural norm of Indigenous Maya throughout the region, drinks to get drunk when he does. These occasions are often in the context of formal *cofradía* events, which traditionally consist of ceremonial rounds of rum shots. Doña Inés says he is not physically abusive to her or to any of the children, although when he is drunk he sometimes becomes angry, and she stays out of his way.

The oldest of Doña Inés’ children is a 22-year-old son who moved two years previously to the southern lowlands of Guatemala to find work. He returns home several times per year for holidays, and he talks to his parents on the telephone frequently. Her second child, Lorenzo, is about 20. He married the previous year, and currently lives with his wife and a young child in a room in the family home. This is a typical Guatemalan rural home, in which all rooms open onto a central family patio. Lorenzo and his wife share the family’s bathroom, kitchen, and *pila* – the large concrete washstand that is the home’s only source of water.

As I discover later in the interview, Lorenzo has played a critical role in a still-unfolding drama that endangers the entire family. But despite this, and despite what must be almost continuous face-to-face contact with his siblings and parents, Doña Inés appears not to consider him and his family as part of her own family unit. As she tells about her own life, it is as if her son and his family lived down the road, or even in another village, rather than in a room facing the family’s patio. She clearly is fond of him, but when asked at the beginning of the conversation about the people who live in her house, she does not include her son and his family even in the count of family members. During the entire interview she offers no information at all about her daughter-in-law, with whom she undoubtedly interacts on a daily basis, other than to answer “*si*” with a noncommittal shrug when asked if she has a good relationship with her.²

¹ Developing countries are impacted in various, mostly negative, ways by economies with large informal sector economies. Guatemala is worse than most other countries in this respect, with various sources ranking it as having one of the largest informal market shares of countries in the world. The citation linked here from a generally very credible source estimates that just over 80% of all non-agricultural wages are outside the formal sector. This source puts Guatemala at #20 on a global ranking of largest informal sectors, and a very close second to Honduras in the Latin American region. <https://www.indexmundi.com/facts/indicators/SL.ISV.IFRM.ZS/rankings>

² Over the course of multiple TCOM interviews with 11 families conducted for this pilot study, we found that in all cases the exclusion of grown children or adult siblings living in the home are generally conceived as “another family” even when residing in adjoining rooms of the same residence. This extends not only to family finances, but to shared childcare responsibilities and communal food preparation. Interviewees also reported significant conflicts between families sharing a single residence, and suggests that notions of “the importance of families” in Latin and/or Indigenous cultures should not be overly idealized as “cooperative projects,” and in some cases cannot be considered as a “strength” in terms of a positive informal support.

It is when Doña Inés begins talking about her third child, a 16-year-old daughter we will call Paulina, that the texture of the interview transforms from chatty and light-hearted conversation to a more emotional vein that is visibly stressful to Inés. Paulina, she tells us in Spanish, is “*una niña especial*,” using the preferred euphemism for “developmentally disabled girl.” Her ensuing description of Paulina leads me to imagine a significantly disabled MR child who is able to engage in some daily living activities, but needs constant vigilance to ensure her safety and well-being and to maintain basic hygiene with diet and toileting. Doña Inés says that Paulina requires much of her time and energy, and that whenever she has to be away from home to work in the market or attend to any family business, her next oldest child, 14-year-old daughter Cristina, is left to care not only for Paulina, but for four younger siblings who range in age from twelve down to two years old.

Doña Inés wipes away tears as she confesses that she is laden with guilt not only about foisting too much responsibility off on Cristina, but because she believes she bears a lot of responsibility for Paulina’s condition. She explains that Paulina’s was a very difficult childbirth, requiring her to be taken by ambulance from home – where the vast majority of rural *Maxeños* continue to be born with the assistance of local midwives – to the hospital about 45 minutes from Chichicastenango. After Paulina was born, the doctor came to her and told her that the baby should be taken to the children’s unit of Roosevelt Hospital, the huge national hospital complex in Guatemala City, some three hours away, for surgery to relieve cranial pressure from water in her head. Inés said the doctors told her that the surgery could kill her, but that if it wasn’t done she would suffer serious brain damage. Doña Inés said she refused to let the child be taken because she was afraid the baby would die, and at that time she couldn’t bear the thought of losing the child under any circumstances.

She paused for a moment, before quietly reflecting, “That’s the way I felt at that time,” implying that she now questions the decision she made that day.

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In social work contexts in the United States, it would be highly unusual to “code” a 14-year-old dependent child as a “caregiver” on the FAST, if for no other reason than it might tacitly validate exploitation of the youth by his or her parents for putting such a heavy burden of responsibility on the child. Meanwhile, it would be extremely rare not only to code such as a child as a “caregiver” on the FAST, but also to assign “actionable scores” that would indicate a CANS assessment be completed for that same youth, knowing from the outset that the CANS would also reveal “actionable” coding. But that is exactly what we decided to do for Cristina, because in further conversation with Inés it became clear that she leaves the other children in Cristina’s care about four days per week while she works in the market.

It was not a clear-cut decision for me to code Cristina as both caregiver and dependent child, since in my almost 30 years of fieldwork in various disciplines in Guatemala I have observed that adolescent youths younger than 14, especially girls, are routinely left in charge of a brood of younger siblings for hours or even whole days. As well, it is typical for even preadolescent girls to take on a role of primary caregiver for infant or toddler siblings. But Manuela and Estuardo, who in their social worker-like roles as Acebar

scholarship administrators have observed the family both at home and in the community, convinced me of the appropriateness of coding Cristina as both. Yes, they said, girls her age in other families are often over-burdened with child care responsibilities. But Cristina is charged not only with Paulina's care several full days per week while Inés is at work, but is the first line of authority and the primary provider for her younger siblings almost all the time, because when she is not working Inés expends most of her time and energy doting on Paulina.

My associates told me that this arrangement is problematic in various ways. Not surprisingly, given her age, Cristina doesn't project authority convincingly or wield it wisely with her younger siblings. Also, along with Paulina's frequent temper tantrums and continuous physical care needs, Cristina is constantly challenged with the demands and oppositional behaviors of the older of her younger brothers. These challenges make for a constant, disruptive, and exhausting level of sibling conflict that wears hard on Cristina, who exhibits symptoms of deep-seated stress and depression, including difficulty sleeping, loss of appetite, and lack of interest in socializing with youth her own age. She misses school frequently – which in this culture is not unusual at her age – and may not pass the year. Failing the year will technically make her ineligible to keep receiving a scholarship from Acebar, unless the committee for scholarship approval grants her a special exception. But her younger siblings are not receiving the direction they need, and even those in early primary grades also resist going to school. That is doubly problematic, since with this K'iche' Maya speaking population school is not only where children learn basic academic skills, but also is the only environment in which young children are exposed to Spanish. Without the ability to speak Spanish – the lingua franca of this very culturally diverse nation – children face even greater challenges as they grown into employment-eligible age at early adolescence.

Inés is quite aware of and very concerned about these issues. Indeed, she elaborates on them at depth, speaking an old-style of K'iche' of which I can understand very little. Manuela and Estuardo translate for me, telling me that she says she doesn't know what else she can do. She has no other social supports, and she and her husband have no choice but to work outside the home. Inés articulates clearly that it is not fair to the other children for her to give all her attention to Paulina. "But what can I do?" she asks, as she wipes away tears.

Manuela and Estuardo have grave expressions as they talk to her, and my own feeling is one of mournfulness as we reach this point in the conversation. Inés' situation as she has described it is serious beyond just about any family circumstance that I encounter in my social work in New York ... not because such situations don't occur in the States, but because there are always *some* governmental or community resource that parents and support workers can turn to. But in Guatemalan towns like Chichi, there are no resources ... except for the free labor of one's own children.

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In 2017, U.S. immigration officials deported 226,000 people. Among them was Inés' second son, Lorenzo. Like most Guatemalans, the decision for him to go north was not undertaken lightly. At the emotional level, it is understood from the outset that if migration is successful, these are very long term and likely even "forever" trips, with no return possible for many years, if ever. On the financial side,

meanwhile, these trips are formidably expensive, and have grown more so over the last few years. During a 2010 stint of field research, I was consistently told that coyotes charged about 45,000 Guatemalan quetzals – about US\$6,000. Since then cost has more than doubled, to Q95,000, or about \$13,000. For this sum, emigrants are promised two shots at safe delivery to a designated U.S. city. If the first attempt fails, a second is provided at no additional cost. If the second trip fails, the coyote's obligation is complete, and the would-be emigrant's investment is lost.

In my years in Guatemala I have known several people who were caught on the first try, but subsequently made it on the second try. And I have met many people who after spending some amount of time in the US were either deported or simply got tired of the struggle of living as an *indocumentado* and returned to Guatemala. But Lorenzo had extraordinarily bad luck: his coyote delivered him on the first attempt to an address in a city in Texas, but literally within hours ICE officers knocked on the door, took him into custody, and quickly sent him back to Guatemala. Lorenzo appealed to the coyote, but was told that the obligation was fulfilled, because Lorenzo had been delivered safely, and what happened to him after safe delivery was not the responsibility of the coyote.

Invariably, the high cost of a coyote is not an investment a young man or woman can raise on his or her own, but rather is an investment raised by the family. In rural areas like Chichicastenango, this almost always means a loan using family property as collateral. Such loans, usually made by local people of means who essentially function as unregulated mortgage lenders, can be worth the risk to families if the emigrant is successful and can send back remittances to the family. But when emigrants are unsuccessful, the family is left with a huge note and the threat of foreclosure on their property. This was the case with Inés and her family.

The significance of \$13,000 to her family is probably best understood by looking at how it compares to the family income. As noted above, her husband, Tomás, is fortunate enough to hold a full-time, permanent, formal sector job. His salary at this position is at least minimum wage, and perhaps a little more – meaning a salary of no more \$5,000 per year, and probably a few hundred less than that.³ Other sources of family income are nominal. Inés works in the market, but her income from that would be miniscule by US standards, and is very unlikely to exceed \$1,000 per year. The family property which was put up as collateral for the loan to finance Lorenzo's journey north is said to be 10 *cuerdas* – a unit of land that according to Wikipedia is about .9 acres, but in practice is highly variable and usually closer to half an acre or less – on which the family plants a small *milpa*, or plot of corn, along with some number of peach trees. Neither of these crops generate any net income or appreciably offset the family's food consumption costs. So in all probability, \$13,000 represents in the neighborhood of 2.5

³ Guatemalan minimum wage is variable by labor sectors and can run as little as about \$2,800 per year. Regular full-time employees for the government or business sectors include not only a higher monthly rate, but as of 2018 a required monthly bonus of about \$35. All formal sector wage earners are also paid two extra monthly paychecks each year, for a total of 14 months of salary. It should be noted, however, that estimates of the number of formal sector workers range only between 30% and 40% of all wage earners, and the vast majority of laborers earn less in the informal market. <https://www.publinews.gt/gt/noticias/2018/12/28/gobierno-mantiene-salario-minimo-2019.html>.

years' income for this family of six dependent children and two parents living on an income that simply does not allow for payment of a high-interest, short-term mortgage.

It's fair to wonder, I think, why a family like this one, which has a regular income and appears to be getting by, would risk everything on a chancy gamble like sending a 19-year-old son to the States. In trying to shed some light on this, let me first note that the stated purpose, allotted time, and tenor of the interview with Doña Inés did not promote full exploration of the family's finances. I believe, though, that even before Lorenzo went to the U.S. the family already had a pressing debt burden. I say this because in recent years many or most farm families have fallen prey to extortionate lenders – in Chichi often at the hands of the Mexican “Banco Azteco” – which offer extraordinarily easy credit to buy consumer items like TVs, or make very basic home improvements such as installing a bathroom or paving the family home's muddy central patio. Furthermore, other things said in the interview make it seem highly likely to me that loans were taken out to buy expensive medications for Paulina. Loans from Banco Azteco carry interest rates of 10% to 18% *per month*. Amounts of up to a few hundred dollars are usually unsecured signature loans, but collection methods are extremely aggressive, with intimidating collection agents visiting the home daily to threaten the families.

Whether or not Inés' family was being harassed or pressured by debt collectors, however, it's certain that basic survival is consistently a serious, traumatizing struggle. And while this family is considerably better off than some of the neighbors, family income cannot reliably cover even basic living expenses, much less costly seizure medications and other treatments for Paulina. Almost all families in these rural villages are riding a very thin line of solvency, unable to meet their own needs to the point that hunger is a real challenge – as made clear by a 60 percent-plus rate of growth stunting and chronic malnutrition that is as bad as that of any other region of the world.

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In the United States, child welfare systems are now almost universally “trauma-focused” in response to research since the mid-1980s that shows “adverse childhood experiences” (ACEs) have a dramatic and life-long impact on mental and physical health. In short, a massive amount of evidence now makes clear that children who suffer various ACEs, including abusive or neglectful treatment, exposure to violence, or disruptions in caregiving, are much more likely to suffer chronic health issues as children and adults, commonly presenting with mental health issues including clinical depression and higher suicide rates, substance abuse, and trauma related stress, attachment, affective, and mood disorders.⁴

The orthodoxy of ACEs as an evaluative tool in social work practice is made obvious by the inclusion of a list of possible ACEs in most currently used psychosocial assessments. As originally developed, the ACEs quiz had 10 questions. Other versions with more precise questions have developed, however, and the version used in the CANS adopted by the New York Department of Health (NYDOH)⁵ has a list of 18 fields

⁴ <https://www.samhsa.gov/capt/practicing-effective-prevention/prevention-behavioral-health/adverse-childhood-experiences>

⁵ https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/docs/cans_6_21.pdf, p.1.

that more precisely define and expand possible adverse and traumatic events. In my own practice working with foster children, with whom I have done hundreds of CANS using the NYDOH version, there is a very strong correlation between mental/behavioral health symptomologies that need treatment and high (4 or more) ACE scores.

I thought of this correlation as we talked with Doña Inés, moving past the initial FAST assessment and into a CANS assessment for Cristina. In later discussions with Manuela and Estuardo, who know Cristina quite well, I was told about behaviors that I felt certain would result in an MH diagnosis if she were examined by a qualified practitioner. After discussing the case at some length, however, we could come up with only two ACEs, for “emotional neglect” and “exploitation” related to her parents forcing her into a caregiver role so early in childhood.

At the time, I just shrugged it off as an anomaly as we moved on to other aspects of the assessment, and then on to other assessments. But as the week progressed and we did interviews with other mothers and families, we began to see a pattern of symptomologies, particularly depression and PTSD profiles, without the usual positive ACEs. However, it was only after all the assessments were done and I was back in New York and collating and analyzing my data that the consistent thread of MH profiles without ACEs really became clear, and I realized that what we were seeing was an epidemiology of “toxic stress” among this rural Maya population.

Over the course of the last few years the phenomenon of toxic stress has been covered by the popular press as well as by serious academics. Now, it is now widely accepted that chronic poverty itself is so stressful as to cause the same short and long-term negative outcomes as specific traumatic experiences. Indeed, some mental health and public health researchers and practitioners now consider poverty itself to be an ACE.⁶ While still controversial, some researchers are even pointing to evidence that children are affected not just by long-term deprivation and the stress of abject poverty, but genetically through transgenerational poverty-related inscriptions on the epigenomes of their impoverished parents and grandparents.⁷

Further research into these topics will likely reveal more empirical and increasingly useful information along these lines. But for now, the toxic stress of poverty provides one answer for why children in rural Mayan households present as trauma victims without specific adverse childhood experience to point to. Beyond that, however, the effects of toxic stress also go far to account for such high levels of despair and hopelessness that high-risk ventures such as betting farm and future on a one-shot success by an adolescent son making his way to, and finding lucrative work in, the United States.

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⁶ North Carolina Medical Journal. “Poverty as an Adverse Childhood Experience. Vol. 79, no. 2, pp. 124-26.
<http://www.ncmedicaljournal.com/content/79/2/124.full.pdf>

⁷ <https://www.nature.com/articles/s41467-018-05445-5#Fig1>

Underlying everything Doña Inés said about her family, and the behaviors of her individual children, and the problems she perceives in providing for what they need, was a clear foundation of debilitating anxiety and emotional exhaustion. Since I was relying on translation of the original K'iche' Maya and could not understand much of the dialogue I was hearing, I paid close attention to Doña Inés herself: her lovely and expensive huipil, her silver necklace, her careful grooming, her precise articulation and mannerisms, and her carefully controlled tenseness. What was clear to me, and was solidly confirmed later in conversations with Manuela and Estuardo, was that she is a proud woman who has throughout her life enjoyed a relatively high status among her rural neighbors; who prizes independence and self-reliance; and who now feels herself on the margins of a disaster that can crush all that she holds dear. Doña Inés' answers and demeanor while answering the questions on the FAST and the Caregiver Strengths and Needs section of the CANS made very clear that before she and Tomás put the farm in hock to fund Lorenzo's luckless trip north she was very aware of how the family's poverty was an insurmountable barrier to adequately caring for her children. This awareness of her inability to provide for the family made her willing to risk everything on what I now describe to my Spanish-speaking friends as "*la gran apuesta*" – the big gamble. Doña Inés knew the stakes and understood that if she and her family won the bet, she would likely never see her son again, but might be able to salvage the lives of the rest of her family. Equally, she knew that if she lost this gamble she would lose just about everything else, perhaps including the health and future of her other children.

But is migration really a reasonable strategy? Yes, if *la gran apuesta* is a winning gamble. Evidence of this is seen in Chichicastenango and throughout Guatemala in the form of many large new multi-story homes mushrooming from poor rural villages and towns. Some are lived in, but many are incomplete concrete block and cast concrete shells in various stages of completion that sit for months or years between short episodes of frantic construction. The homes are strangely incongruous with the typical nearby single-story humble adobe or concrete block houses, both in terms of their size and the curious and sometimes ludicrous ornate architecture that I have come to think of as Maya Rococo. These homes, built with remittances sent from the States, are monuments to the luck and commitment of some emigrants to finding work and sending money to the folks back home.⁸

But often the strategy does not work, and families are left with much less than they had, or with nothing at all. In which case it's not just land that is lost. For while forfeited property seldom has any real value in terms of producing income, it has a critical value in terms of providing lending collateral and a backstop for other financial disasters and, perhaps more importantly, undergirding a higher social status: a family with 10 *cuerdas* of non-income producing land may not have any higher income than their neighbors with no property, but they are inevitably in a historically-grounded higher social class and more respected by their neighbors.

⁸ The remittance-driven construction of new homes in Guatemala remains an under-researched phenomenon. I do not agree with the tone or content of much of the extant published material, although some reasonable and in my view correct research is available in articles like the one linked here. <https://books.google.com/books?id=0q9ACwAAQBAJ&pg=PT115&lpg=PT115&dq=homes+built+with+remesas+in+Guatemala&source=bl&ots=EHuK6e-rD9&sig=ACfU3U1vukj42SNfQmE8fLJSPx7aEtbqQ&hl=en&sa=X&ved=2ahUKEwjSruDlo47gAhWpmOAKHQwtBo8Q6AEwCnoECAIQAQ#v=onepage&q=homes%20built%20with%20remesas%20in%20Guatemala&f=false>

Nobody articulated this thought as we sat there with Doña Inés. We didn't have to, because we all understood very clearly that this family was on the verge not only of losing property, but also of losing a large measure of respectability and prestige within the community. And if there was anything that Doña Inés' poise and elegance said to us, it was that this was a woman who would not easily suffer a loss of status and respect along with losing the last, best hope to properly meet the needs of her children. The bottom line is that Doña Inés and Tomás were not driven to make *la gran apuesta* by pie-in-the-sky visions of a North America paved with streets of gold. Rather, they were driven by desperation resulting from poverty and utter lack of resources or opportunity to find a modicum of security or to meet the needs of their children, much less achieve any degree of upward mobility.

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One of the great questions I sought to answer when I embarked on this research was to establish "if" and "how" TCOM tools could be useful in the impoverished rural Maya culture and economy of Chichicastenango. The "if" part of the question was quickly apparent. In more than 20 years of doing anthropological research and working with social development projects with the Maya of Guatemala, I have never encountered a more effective and thorough methodology for relatively quickly extracting such intimate and, I think, subjectively honest views (from the point of view of the interviewee) of the inner dynamic of family life in such a short time. This level of usefulness is of incredible interest to anthropologists. The "how" of TCOM's usefulness to its natural historical cohort of psychological and social work practitioners, however, is still to be clarified, because the primary purpose of this methodology in the United States remains documentation of need and structuring of services in a context of multiple available services and treatment approaches.

To provide Guatemalans with the kind of U.S. style services for which the CANS and FAST were designed would require an economic and social development miracle that has eluded all but a very few "developing nations" over the course of the half century. To suggest that TCOM might result, or even significantly aid in such development is, at best, a forlorn hope. But because of the efficacy and heuristic utility of the FAST and CANS that we experienced in this short pilot project, I am confident that the instruments can be of value in this and other developing world contexts. In terms of the Acebar education projects with which I have been involved for the last 15 years in Chichicastenango, our plan is to use the FAST and CANS to accurately identify developmental and mental health problems in order to develop low-cost strategies to meet those challenges. My hope is the data we collect will leverage our continuous search for the relatively nominal funds needed to keep these projects alive.

Beyond those very modest short-term goals, however, I believe that merely the "anthropological" knowledge that TCOM tools and methodologies illuminate will be of great use in understanding the immigrant population in the United States. At present there is certainly a great need to clarify the needs of this population through having a better understanding of the range of mental health and social, as well as economic, challenges from which they are fleeing. Then, to the extent that refugees are given short or long-term asylum in the United States, bureaucracies and service providers ranging from Border Police to national and local welfare agencies need to understand the fact and nature of trauma-related disorders with which immigrants arrive.

To answer this need there are an increasing number of psychosocial and mental health diagnostic studies being done along the U.S. southern border, some of which purport to analyze “pre-migration trauma,” but which utilize data collected at the border rather than in the country of origin.⁹ Research actually done in countries whose populations provide a rich and continuous flow of emigrants is very rare, and our pilot experience clearly indicates that TCOM instruments offer a rich potential for better understanding the stressors that cause economic refugees to make *la gran apuesta*, to say very long or forever goodbyes to their families, and to set out on a very perilous and uncertain trip to live illegally in another country.

For these evaluative instruments and TCOM methodology to be truly useful in the cultural and socioeconomic context of towns like Chichicastenango, I believe the instruments themselves must be more closely tailored to better fit the subject population and popular cultural norms. This is by no means an insurmountable chore, and indeed, I am currently working on tweaking existing CANS and FAST to create a more culturally appropriate version of these instruments prior to my own next field trip in summer of 2019. In collaboration with Manuela and Estuardo we plan to further refine our research, examine data currently being collected as the 2019 school year begins, and bring a new level of mental health, educational, and family assistance to the highlands of Guatemala.

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⁹ See, for example, Pre-Migration Trauma and Mental Health Functioning Among Central American Migrants Arriving at the US Border: <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0168692>