



Turimiquire Foundation

Annual Report 2014

Our U.S.-based non-profit Foundation has served the low-income population of Sucre state in northeastern Venezuela since 1996. Based on more than 35 years of living and working in the impoverished regions of northeastern Venezuela, we have developed our three-step [Recipe for a Thriving Community](#) as a blueprint for action that guides our work in rural communities:

FIRST - Family Planning: Empowering women and families with the means to control their own fertility.

- ⇒ In 2014, we offered our services to more than **3,300** additional reproductive-age women and their families, delivering **5,346 Couple Years of Protection (CYPs)** - the metric by which USAID measures family planning achievement - to the low-income populations that we serve.
- ⇒ Calculating an average family of five, approximately 12,000 additional family members also benefited.
- ⇒ Cumulatively, from May 1997 through December 2014, we have delivered a total of **79,294 Couple Years of Protection** to low-income families seeking to control their fertility.
- ⇒ To achieve this, we have served over **35,000 rural and urban women** with birth control methods, including **4,154 tubal sterilizations**, the most popular method for mature women and their families here in Venezuela.
- ⇒ Since 1997, we have done this on an average budget of less than **\$50,000** a year dedicated to family planning and reproductive health. Our operating costs, at **\$9.96 per CYP** in 2014, are well below documented averages.
- ⇒ Venezuela has a large young population with one of the highest teenage pregnancy rates in Latin America and the Caribbean. Starting in 2003, we have offered a total of **2,543 Workshops in Sexual and Reproductive Health** to **48,779 participants**, primarily students and teenagers, averaging 200 presentations each year.
- ⇒ We are reaching younger women with reversible family planning. In the past, most rural women survived significant infant and maternal mortality and morbidity as well as economic adversity (often directly related to supporting large families), until they would finally seek the definitive method of surgical sterilization in their early to mid 30's. Now, in 2014, the average woman we serve is in her mid to late 20s with two children, taking control of her reproductive health and fertility with a variety of options much earlier in life.
- ⇒ Women relieved of the enormous burden of involuntary multiple fertility become outspoken examples for their extended families and neighbors, showcasing the improved quality of life accessible simply through controlling the size of their families.
- ⇒ As the *only* civil organization fulfilling this role in the eastern half of Venezuela, we have become the local and state-wide reference point for family planning services and reproductive health education.

SECOND - Education: Once families gain control of their fertility, they concentrate on giving their children the best possible future through schooling.

- ⇒ Our **Scholarship Program** for the *Vía Cumanacoa* community enables an average of **45 rural students** each year to continue their studies at local high schools. Over 450 students from semi-literate families have now attended high school with the help of our program. Previously, most students in this community abandoned their formal education at or before the sixth grade.
- ⇒ *Seventeen* of these high school scholars are now studying at the *college level* with ongoing Foundation support, a real precedent. And each year more students graduate from high school and continue to college.
- ⇒ Two of our rural college students have now graduated with *nursing degrees*, and one in food technology.
- ⇒ Three of our high school graduates run outlets out of their rural homes for our program of *subsidized school supplies* for remote primary and high school students.
- ⇒ Our *Brito-Barrancas Education Program* offers staffed library and computer facilities at a new site upriver – two hours walking distance from the nearest road—to support students at the new rural high school which has started up there, and help to maintain a government-sponsored satellite Internet connection.
- ⇒ We help support several local kinder and primary rural schools with school supplies in our area, and assist in their lunch programs.
- ⇒ Our rural high school and college students, as well as many low-income local students, regularly study at our urban *Computer Center* in Cumaná, which offers free *Internet* and other facilities for schoolwork.
- ⇒ Everyone agrees: **Education is the priority.**

THIRD - Community: Investing in people first!

Our programs develop community infrastructure in the remote road-less rural valley that we work and live in. We support projects in water delivery, electricity, public trail improvement, and agriculture, including the cultivation of promising tropical fruits. Our Education and Community Center encourages sports for youth, and also serves as a base for local commerce and town-related activities.

Our Finances in 2014

We work hard to accomplish a great deal on a small budget. *We do more with less:*

- ⇒ We spend very little on infrastructure and staffing. Instead, we ride "piggy-back" on existing public and private health infrastructure, adding specifically what is needed for them to deliver targeted services more effectively.
- ⇒ Donations, *social marketing*, and sliding scale fees for our medical services all help to cover our operating costs. Our services are offered at highly subsidized prices, and *no one is turned away* for not being able to pay. Most everyone can help with *something*, and a few need extra help from us.
- ⇒ We invest *minimally in public outreach*. Women and families proactively promote our services through word-of-mouth, and state public health facilities and private agencies now regularly refer clients to us.
- ⇒ Our goal is to improve the lives of as many low-income clients as we can. Our success drives demand. More people come to us for help than we can satisfy at our currently funded levels.
- ⇒ Our Officers and Board Members donate their services and receive no compensation of any kind.
- ⇒ *Fundación ServYr*, our non-profit organization in Venezuela, independently received **\$4,884** in patient co-pays and in-country support in 2014.
- ⇒ Administrative costs for 2014, including fundraising, were **5.6%** of our overall budget. Over **94 cents** of every dollar went directly into the field. Over the past fifteen years, an average of over **93%** of our budget has gone directly into the field.

In Venezuela, a little can go a long way. We appreciate the help that many of you give us, and hope that you'll continue to support us. *Thank you!*

The Turimiquire Foundation is a 501(c)(3) non-profit organization.

Donations are fully tax deductible.

Please contribute by check, payable to the Turimiquire Foundation, or online at

www.turimiquire.org/contribute/

Expenses		%	Income	
Administration:		5.6%	Donors \$5,000 and more	\$ 60,000
Office	\$ 3,556	4.8%	Family Trusts and Foundations	\$8000
Fund Raising	\$ 608	0.8%	Individual donations \$1000-\$5000	\$ 12,219
Programs:		94.4%	Individual donations less than \$1000	\$ 15,310
Field Staff	\$ 1,254	1.8%	Interest Income	\$88
Casa ServYr	\$ 810	1.1%	Total	\$ 95,617
Family Planning	\$ 55,749	75.1%	Most years our income does not quite cover our program expenses, but we find a way. Some years, like this one, we bring in more than we spend, and these occasional savings are what allow us to back cover the deficit years, and to respond to important new opportunities. <i>Donations in any amount help to sustain our work!</i>	
Health Education	\$ 941	1.3%		
Rural Education	\$ 5,595	7.5%		
Rural Development	\$ 4,566	6..2%		
Family Assistance	\$ 1,063	1.4%		
Total	\$ 74,247	100%		



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