



Turimiquire Foundation

Annual Report 2008

A NON-PROFIT ORGANIZATION SUPPORTING HUMAN SERVICE AND ENVIRONMENTAL PROJECTS IN THE TURIMIQUIRE WATERSHED OF NORTHEASTERN VENEZUELA, WITH AN EMPHASIS ON FAMILY PLANNING AND EDUCATION.

RECIPE FOR A COMMUNITY

In this Annual Report, we present what we have learned as a Foundation after working for more than a decade in our developing world community. We discuss what really works when it comes to providing human services in areas of poverty, infrastructure constraints, and social/political instability. We offer this formula as a tactical roadmap that begins with the following core concepts:

Be there. Living with the people we serve, we are able to experience their problems first-hand and evolve our programs in response to the needs of our community. The programs we develop are the programs that the community wants. They tell us. We do not tell them.

Invest realistically in human capital. We help alleviate specific obstacles to *human* development, primarily a lack of access to the most basic medical and educational services, and to elementary infrastructure, that most of us in the developed world can scarcely imagine. Most newly empowered people rapidly take their own progress forward from there.

Use existing infrastructure. Integrate with the community, and make full use of the facilities that already exist.

Grow slowly and organically. On a shoestring budget, with a volunteer Board, volunteer Officers, and a handful of paid Venezuelan employees, the Foundation has built a replicable service delivery model that is changing thousands of lives. How? Discipline and focus. Every step we take *must* be calibrated to make optimal use of our limited resources. We have no choice. This has helped us to avoid some of the distortions and mistakes that can happen to any organization, even when they are sincerely trying to help.

Stay humble and local. We have all grown and learned together in this very human enterprise. This is not an exercise in imposing our own particular values or culture on anyone. It is about serving, and about sharing lives, dreams, and accomplishments in some pretty tough and demanding circumstances.

We feel very fortunate to be part of the growing global movement to dignify all human beings with the basic opportunities that those of us in the developed world so often take for granted. And **we thank you for your ongoing support!**

Steven Bloomstein



Here the Foundation organizes a medical day, bringing together the communities of the Rio Brito with the public health organizations that serve them. The State University is doing a study of local parasites, the Ministry of Health is offering vaccinations and family medicine, the State Children's Foundation is providing dental services for the children, and our **Fundación ServYr** is presenting family planning and reproductive health.

Our Recipe for Success in Developing Rural Communities:

First you invest in *human capital*, then you successfully invest in development. We have learned that most low-income families have their own internal “clock” for how and when they choose to utilize our services. Families typically use the Foundation in a three-step process that efficiently delivers maximum value to their own families and to the larger community. They have delineated our following *three step recipe* with their own choices and actions:

ONE. Stabilize the Family.

Women and their families begin by controlling their fertility with effective family planning.

With maternal and infant mortality much lower than it used to be, many low-income women survive repeated childbirth only to find themselves with eight or more children before the age of 30 and very few resources with which to handle this enormous project. Mature women clamor for tubal sterilizations, and younger women seek reversible family planning. We have evolved FOUR PILLARS of family planning over the years:

Reliable Family Planning Services

Our first efforts to provide family planning in our rural community quickly revealed an overwhelming unmet need that went well beyond our immediate neighborhood. In response, we expanded our family planning services to include nearby rural communities and low-income urban *barrios* in nearby towns. We now deliver birth control information and contraceptives through a network of public and private facilities to rural populations and to low income urban *barrios* in several counties.

A tale of two rural mothers: Left: Young Santa Salazar is 18 years old, holding her first malnourished child. Right: Pregnant Bertalina Bermudez is 38 years old with ten pregnancies, here holding her ninth living child. She had her first baby at 15 years old. The babies were hospitalized with health problems in this photo.



Reproductive Health Education

In Venezuela, many folk simply do not have adequate access to information regarding their reproductive health. Our workshops emphasize gender issues, puberty and adolescence, family planning, sexually transmitted infections and diseases, responsible sexuality, and reproductive health rights.

Here our doctors and sociologists have been invited to a national conference on sexology to present the results of 10 years in the field, and to receive an award for the Foundation’s work.



Attention to Adolescents

We have learned a great deal about the pernicious impact of premature pregnancy and sexually transmitted diseases on young people in the developing world. In the lower and middle income urban populations in our area, about 30% of all teenage girls become pregnant. In the countryside, the rate is much higher. For girls below 20 years of age, especially in the rural areas, these are often high-risk pregnancies in still immature bodies. Girls with multiple births in their teens, sometimes starting at 12 to 14 years old, have visibly diminished bone growth and generalized physical formation as calcium and other nutrients are pulled from the body to nourish the fetus. Teeth are especially vulnerable, and many young women have already lost many of their teeth. Births are often complicated, and poorly nourished babies suffer accordingly. This harsh reality is largely under-reported the world over, and can be significantly alleviated with reproductive health education and family planning specifically directed towards adolescents and young adults.



Luisa Esparragoza was 19 years old and hospitalized with a severe urinary tract infection in the 19th week of her fourth pregnancy when this photo was taken. She already had three living children.

Laparoscopic Surgery

Sterilization is the most popular method of contraception for mature women with established families. We now offer less invasive outpatient laparoscopic sterilizations, the only such low-income service in our rural state. Families come from afar, and everyone contributes what they can on a highly sliding scale. No one is turned away for lack of ability to pay. This has proven to be one of our most successful and well-attended programs over the years.

In our experience, the most empowering assistance that one can give to women and families in the developing world is to help them avoid unplanned pregnancies, and to space and limit their children as desired. Without first putting effective family planning solutions in place, efforts to address other important issues in the community, like education, poverty, hygiene, sustainable livelihood, etc., can be less fruitful than they should be.

(I) Family Planning (II) Literacy Education (III) Development

TWO. Focus on EDUCATION.

Once families have gained control of their fertility, they quickly concentrate on giving their children the best possible future, and they invariably choose schooling. The Foundation has developed a range of educational opportunities for the young people in our rural community. From pre-school through high school, we work to provide the resources, teaching assistance and infrastructure to expand and strengthen the public school system – especially in the remote rural areas where education has traditionally been least available. This is a process that takes time, generations. The future of the community depends on it. Again, the focus is on *human capital*: the teachers and the students.

Teacher Development

Finding dedicated teachers who are willing to work in remote areas is a major challenge. Our success has come from personally tutoring and developing teachers from within our rural community starting at an early age. A number of the children that we tutored and supported in their early education have become the certified adult teachers who are now spearheading our educational program with the full credibility of being successful examples from within their own community.

Native school-teacher Yumedis Rodriguez rides to work on her family's mule.



Student Scholarships

In 2003, our scholarship program for remote rural students

who wished to continue their studies in high school began with just six students. There are now over 40 students participating yearly. Children of this remote valley are graduating from high school, and several have even gone on to college with our support. Their largely illiterate parents, freed from the rigors of constant child-birth, are very supportive.

Marcela (left), our community center director, with Miguel, Jorgelina and Yorbi at their high school graduation. Jorgelina is currently enrolled at the state university.



THREE. Improve Rural INFRASTRUCTURE and DEVELOPMENT.

Once families are stabilized and have turned their attention to education, the younger generations in particular seek better public facilities and services to help pursue their new potential. These smaller, better educated families now need more opportunities in *sustainable livelihood* in order to materially improve their lives without joining the failed urban migration which has been so characteristic of these largely undeveloped areas.

Rural Community Center

The establishment of our **Brito-Barrancas Community Center** brings all of our educational and developmental programs together for the area's children, adolescents and adults, including a staffed library; a computer center with lessons; tutoring, cultural and recreational activities (classes in dance, theater, jewelry making, cooking, painting, carpentry etc.); periodic dental attention with the support of the Sucre State Children's Foundation; medical attention with the support of the State Health Department; and a transit storage and staging area for the valley's commerce.



College student Isabel supervising high school scholarship students who are filling out a questionnaire evaluating our programs and what more can be done at the Center.

Sustainable Development

We focus on development in the community by improving the pack animal

trails that are the only means of access for these remote populations, installing solar panels for rural electricity far from the grid, and gravity piped water systems that free the women from having to carry household water up from the river in buckets on their heads. Public composting toilets contribute both to rural hygiene and to fertilizer for agriculture. We have introduced new tree crops that both conserve the ecosystem and offer local sustenance and potential new markets, and we have worked with production techniques for cashews, the main homestead cash crop in this rural area. Carpentry classes using ecologically harvested fallen local wood exemplify the concept of **sustainable livelihood** for an enduring rural future. These are real examples of how **alternative energy, low impact utilities, and sustainable work play an important role in developing rural communities.**

Twelve Years of Real Results:

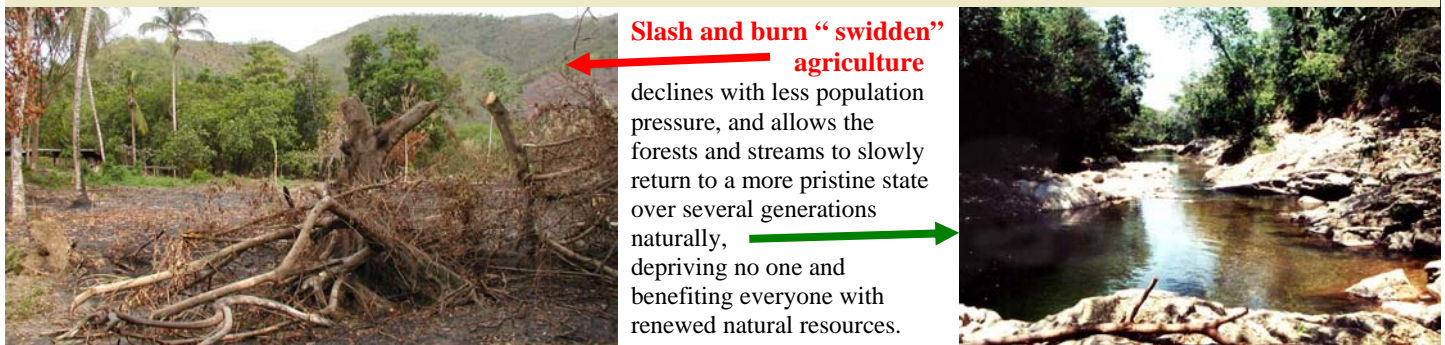
- ◆ There are **very few unplanned children anymore**. Large families are no longer the norm.
- ◆ With rare exceptions, **young women bear their children later**, and now have only two or at most three children by the time they are in their late twenties.
- ◆ **Infant and maternal mortality now rarely occur** – we have not had a local case in eight years.
- ◆ There is ever more **focus on education**, with many more students continuing on from the remote primary schoolhouse to attend nearby rural high schools. For the first time, every year, the children of the valley are actually **graduating from high school, and several are even attending university** - also with our support.

This completely voluntary and entirely documented transition has occurred in *less than one generation*, and shows how quickly and thoroughly people will respond to services that truly meet their needs.

The environment benefits right along with the human community.

As the population has stabilized, the impact on this once pristine river valley is noticeable. The upper valley is returning to lush tropical woods, wildlife is prospering, birds are more abundant, and the streams are running cleaner. As the younger generations bring less mouths to feed, the devastating effect of repeated slash-and-burn agriculture on the tropical forest is reduced, and the extensive secondary growth is finally re-growing. After perhaps 400 years of non-stop intense exploitation and diminishing returns, there is now less erosion and gradually more forestation in the valley.

A long natural healing process has potentially begun!



The kinds of local benefits that we describe here are entirely replicable.

Much of what we have learned and done is relevant and applicable in many parts of the developing world, and at low cost. Around 40% (or more) of all children worldwide have not been planned for, nor desired. When low-income women are empowered to have only the children that they really want to have, they will generally have fewer children. As growing human populations put ever more pressure on floundering social infrastructures and services in the extended developing world; as competition and conflict only grow for our earth's limited resources; as strongly expanding human populations in the tropics push ever more species towards extinction by destroying their habitats; as the climate warms in the face of increasing human development; is this not the right direction? What clearly benefits families and communities on a very individual and local level, can be critical in addressing larger social and environmental challenges globally. Our Foundation has been able to demonstrate on a modest scale that many of the solutions that we as a planet need are available and affordable, and that the often quoted expression **"think globally, act locally"** is exactly right!



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Please visit our web site at:
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Thank you to our network of partners in 2008

THE FOUNDATION COUNTS ON THE MATERIAL AND FINANCIAL ASSISTANCE OFFERED BY VARIOUS ORGANIZATIONS AND

Almacenadora Libertad EC, C.A. ▪ American Airlines ▪ Andrew Tobias & Charles Nolan ▪ Charles Merrill and the Merrill Family Charitable Foundation ▪ Direct Relief International ▪ Emily Zofnass Fund of the Boston Foundation ▪ Fundación Centro Cultural San Juan ▪ Fundación del Niño ▪ FundaSalud Estado/Municipio Sucre ▪ Grupo Medico Sucre Clinic, Cumaná ▪ Harry and Mollie Marcus Charitable Gift Fund ▪ Harvard Epworth United Methodist Church ▪ Office of the Governor of Sucre ▪ PlaFam, Caracas ▪ ProSalud Inter-Americana, Caracas ▪ Santa Rosa Clinic, Cumaná ▪ Universidad de Oriente ▪ Venezuelan Ministry of Education ▪ William B. O'Connor and the Mertz-Gilmore Foundation ▪ All of our individual donors ▪ Our board members ▪ The Venezuelan board members and medical, social services, educational and work staff of our sister Foundation, *Fundación ServYr*, and of *Casa Comunitaria Brito-Barrancas* ▪ Our many patients and clients who return our help in countless ways

Reproductive Health Achievements: 1997 - 2008

| Education | | Family Planning Services | | | | | | Tubal Sterilizations | | |
|-----------|--------------|--------------------------|--|---|---------------------------------------|-----------------------|----------------------------|------------------------|-----------------------|----------------------------|
| Workshops | Participants | Number of Women Served | Reproductive Health Care Consultations | Monthly Cycles of Birth Control Pills Distributed | Non-Hormonal Birth Control (IUDs etc) | Average Age of Client | Average Number of Children | Number of Women Served | Average Age of Client | Average Number of Children |
| 1462 | 32,329 | 20,650 | 69,048 | 55,601 | 4,918 | 23.9 | 2.2 | 2,686 | 28.8 | 4.0 |

Turimiquire Foundation Finance Report: 2008

| Expenses in 2008 | | | Income in 2008 | | |
|--------------------------------------|------------------|---------------|--|------------------|-------------|
| Office and Administration | \$ 4,318 | 5.0 % | Donations \$5000 + | \$ 47,000 | 54.3 % |
| Fund Raising | \$ 4,235 | 4.9 % | Donations under \$5000 | \$ 22,995 | 26.6 % |
| Administration Total | | 9.9 % | Foundations | \$ 13,000 | 15.0 % |
| Field Staff | \$ 4,728 | 5.0 % | Interest Income | \$ 3,556 | 4.1 % |
| <i>Casa ServYr</i> Foundation Center | \$ 1,032 | 1.2 % | TOTAL | \$ 86,551 | 100% |
| Family Planning Services | \$ 43,264 | 50.3 % | <p>Turimiquire Foundation is a 501(c)(3) non-profit organization. All contributions are tax deductible. Please help us to continue our work. Thank you.</p> | | |
| Reproductive Health Education | \$ 5,543 | 6.4 % | | | |
| Rural Education | \$ 2,825 | 3.3 % | | | |
| Casa Barrancas Community Center | \$ 17,064 | 19.8 % | | | |
| Family Assistance | \$ 852 | 1.0 % | | | |
| Rural Sustainable Development | \$ 2,557 | 3.0 % | | | |
| Programs Total | | 90.1 % | | | |
| TOTAL | \$ 85,967 | 100 % | | | |



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IN 2008, 90% OF ALL DOLLARS RECEIVED WENT DIRECTLY INTO OUR SERVICE PROGRAMS. THIS PAST YEAR, WE DEVOTED A SPECIAL AND ONE-TIME ADDITIONAL 5% OF OUR RESOURCES TOWARDS IMPROVING OUR ADMINISTRATIVE BASE AND VENEZUELAN SISTER ORGANIZATION FUNDACIÓN SERVYR <WWW.FUNDACIONSERVYR.ORG> IN VENEZUELA, AND TOWARDS CREATING A VIDEO <WWW.TURIMIQUIRE.ORG/ABOUT/MEDIA.SHTML> ABOUT OUR WORK. OVER THE LAST SEVEN YEARS, AN AVERAGE OF NEARLY 95% OF OUR BUDGET HAS GONE DIRECTLY INTO THE FIELD, AND THIS WILL CONTINUE TO BE OUR GOAL!

In 2008, *Fundación ServYr* independently received support in Venezuela towards our programs as well. The Sucre State Government helped to support our rural Casa Barrancas Community Center. Funds received in Venezuela were by law completely spent in the same calendar year.

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|---|--|---|---|
| Total Donations to <i>Fundación ServYr</i> in Venezuelan currency in 2008 was equivalent to: \$ 21,114 | Family Planning donations and co-pays: \$ 1,878 | Education; Sucre government, individual donations and fund raising activities: \$ 16,683 | Material and In-kind Donations: \$ 2,553 |
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