The Program: INMEDI Partnerships for Children

Web Site: www.inmed.org

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The Mission:
INMEDI Partnerships for Children is an international 501(c)(3) nonprofit organization, operating in Brazil, Peru, South Africa, Caribbean, the United States and dedicated to strengthening the ability of families and communities to support the development of healthy, educated children who have increased opportunities for the future. The goal of the INMEDI’s Healthy Babies program is to improve maternal and child health in the Ucayali, Peru.

The Location:
Ucayali, one of Peru’s 25 regions, is home to 468,922 people (2002). Agriculture, the region’s largest industry, has become its virtue and vice. Peru is the world’s second largest grower of the coca leaf, and though it began as a legitimate commodity, today, most leaves are cultivated for illegal markets. Due to poor infrastructure, terrorists, and drug trafficking, the people of Ucayali cannot travel as safely as its products. Located in the Amazon jungle, Ucayali is one of the most isolated regions in Peru. Pucallpa, the capital of Ucayali, is a frontier community, equipped with electricity but lacking paved streets and sewer systems in many areas, that dates from the early colonial era (1534) but remained isolated until 1945, when the Lima-Pucallpa highway was completed. Pucallpa can be reached by air and by 3,000-ton vessels from Iquitos, downstream on the Amazon River. Travel and communication between the Ucayali’s communities stymie their health and safety; some communities are more than 12 hours from the area’s two hospitals, and local health posts do not have phones.
The History:
Ancient Peru was home to several indigenous groups but was dominated by the Incan empire, which controlled the region until 1533 when Spanish conquistadors, led by Francisco Pizarro, captured the Inca emperor Atahualpa. Peru remained a Viceroyalty of Spain until they declared their independence in 1821, completely defeating the Spanish in 1824. Through the 1980s, the republic saw periods of peaceful democracy and political tension between the military and elite. The 1990 election of President Alberto Fujimori began a phase of economic progress and guerilla control. However, due to an economic slump and reliance on authoritarian policy to manage insurgencies, Fujimori lost the 2000 election to Alejandro Toledo Manrique, Peru’s first democratically elected Native American president. In 2006, Alan Garcia Perez, who was president from 1985 to 1990, was reelected and has overseen strong macroeconomic growth.

Peru Fast Facts:
Capital: Lima
Area: 1,285,216 sq km (496,225 sq miles)
Population: 22,968,000 (2005)
Currency: 1 nuevo sol = .34 USD
Religions: Roman Catholic 86.2%, Protestant 5.2%
Ethnic Groups: Quechua 47.0%; Mestizo 32.0%; European 12.0%; Aymara 5.0%
Languages: Spanish (85%), Quechus (both official); Aymara
Population below poverty line: 44.5%
Climate: varies from tropical in east to dry desert in west; temperate to frigid in Andes
International Organizations: UN, OAS, Andean Community, Non-Aligned Movement, WTO

INMED’s History
Since 1986, INMED has worked in more than 100 countries to improve child health, to build foundations for children’s lifelong learning, to inspire community investment in children’s futures, and to create opportunities for children to reach their potentials. INMED has worked in Peru since 2003, beginning with the Centers for Excellence in Teacher Training, a USAID-sponsored program that helps primary school teachers educate students and boosts economic productivity by strengthening their reading instruction skills. INMED’s in-country affiliate, INMED Andes, formally began 2004. Currently, INMED has two major programs in Peru—Healthy Babies, and IAMusic—as well as a semiannual deworming campaign.
The Project:
Peru has one of the highest maternal mortality rates in Latin America (roughly 20 times higher than the United States rate). Thankfully, this rate has decreased as women in urban areas gained greater access to health care facilities, but women in rural communities still lack the care and education they need – trained professionals only attend 44% of rural deliveries. Therefore, Dining for Women is collaborating with INMED’s Peruvian project Healthy Babies: Improving Mother and Child Health in Ucayali, Peru. The Healthy Babies (in Spanish, Bebés Sanitos) program aims to reduce maternal and infant mortality by providing easily accessible emergency obstetrical and maternal health care in remote communities of the Peruvian Amazon. Dining for women is targeting the program’s first goal: increased knowledge and practice of maternal and newborn care seeking behavior.

Infant, Neonatal, and Maternal Mortality Statistics

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<thead>
<tr>
<th>Indicator</th>
<th>Peru</th>
<th>Project Ucayali</th>
<th>US Statistics</th>
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</thead>
<tbody>
<tr>
<td>Infant Mortality</td>
<td>33/1000</td>
<td>47/1000</td>
<td>6/1,000</td>
</tr>
<tr>
<td>Neonatal Mortality</td>
<td>23.45/1,000</td>
<td>25/1,000</td>
<td>6/1000</td>
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<tr>
<td>Maternal Mortality</td>
<td>185/100,000</td>
<td>261/100,000</td>
<td>13/100,000</td>
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<tr>
<td>Stunting (chronic malnutrition)</td>
<td>25.4%</td>
<td>34%</td>
<td>?</td>
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Most feel these statistics in Ucayali are significantly under reported.

Why DFW’s funding is vital to this project
Specifically, Dining for Women will fund personnel training, travel to Pucallpa, development and production materials, space, and supplies for workers wishing to educate and aid women in the Ucayali region. INMED says, “Your Dining for Women dollars will empower women to take charge of their own health and that of their children. They will provide community health workers with the knowledge, skills and tools they need to effectively save lives in their home communities. They will foster support networks. They will make a difference.”

Program’s Specific Objectives:
- 75% of pregnant women know three danger signs in pregnancy (Baseline: 45%)
- 45% of women recognize three newborn health danger signs (Baseline: 2%)
- 70% of women breast feed within one hour of birth (Baseline: 52%)
- 60% of women have a complete birth plan (Baseline: 21%)
- 50% of women have adequate hand washing practice (Baseline: 10%)
- 75% of women have at least six prenatal visits (Baseline: 63%)
- 70% of local micro-networks have a breast feeding support group (Baseline: 0%)

How INMED measures progress
INMED is working actively with the Ministry of Health at the regional and national levels to improve data collection and management and to advocate for maternal and neonatal health issues. These outcomes will be evaluated by review of municipal records, program training records, direct supervision and observation.

Financial Profile of the organization
Program Expenses 95.2%
Administrative Expenses 4.6%
Fundraising Expenses 0.1%
Goal of DFW gift: $15,550

Sources


www.inmed.org

Alternate map.