

AIRGRAM

DEPARTMENT OF STATE

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FROM - CARACAS

SUBJECT - PROP - Population/Family Planning Programs

Proj. #?

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I. Summary Introductory Description

a) A number of circumstances have contributed to the slowness with which the GOV has given recognition to its population growth rate. Chief among them is the belief that its great natural resources and still large empty spaces to be populated and developed will solve the problem. Venezuela's GNP increased 3.6% in 1967, however, its population growth rate of 3.5% gives it a net per capita GNP increase of 0.1%, one of the lowest in Latin America.

While it is recognized that a population policy should be part of the total phenomenon of socio-economic development, the unprecedented population growth rate in Venezuela calls for a special recognition of the problem of population expansion and the need this imposes on the GOV to recognize this crisis in all its dimensions and make plans to meet it. While the GOV is fully aware of its growth rate, it has given no real evidence of concern for the brake this will put on its economic development. This problem has, instead, become the concern, mainly, of the private sector.

b) AID/V's target is to assist the three agencies now making a very real demonstration of the extent of the problem through their action and program development activities. It will also continue to make available third-country and U.S. training to personnel qualified to work in this field, as well as further seminars and workshops in Venezuela itself.

c) The gradually awakening interest and concern on the part of many Venezuelan individuals and agencies in the problem is an encouraging devel-

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opment but their monetary contributions are too limited at this time to further the necessary demonstration and services called for. Funding in the initial stages is therefore needed for the three main programs now developing in Venezuela and which will be described below.

II. Setting and Environment

The GOV has no announced population policy and it can be assumed that none will be forthcoming in this election year. An indirect recognition of the problem resulted in the creation in 1964 of a Population Division in the Ministry of Health. This Division is at a third operating level within the government, having little backing at administrative levels. As a result, the Population Division's limited budget provides only for a small staff. This has handicapped the director of this Division since he has no operating funds and must look to other agencies to implement programs in national, state and municipal hospitals and public health centers. Since none of the foregoing institutions, many of them dependent on the Ministry of Health, have any budget for population programs, the development of family planning services must, for the time being, look mainly to private agencies funded by international institutions.

Even though there is a general awareness of the problem at all government levels, there is no indication at this time that, as with other national problems, it has been the subject of national concern or planning. As noted above, the country's rich natural resources and great stretches of uninhabited and undeveloped land, much of it not presently arable, has created a psychological conditioning among many that forces them to claim that their pressing need is for a greatly expanded population. While the Ministry of Development's Divisions of Census and Statistics are making many studies which bear on population, such as housing needs, migratory movements, the labor market, and recently an analysis of fertility patterns in metropolitan Caracas, there is no announced indication that these and continuing future studies are to be used as a basis upon which to establish a population policy, despite the fact that some of the officials in these Divisions unofficially state that they believe this to be so. There is a general recognition that the extreme right and extreme left are opposed to any form of family planning. Claims are made by the extreme right that Venezuela needs a larger population for development purposes. The left's opposition has a political orientation. For reasons best known to themselves, these extremes, among whom are found men of competence and knowledge, choose to ignore the present and pressingly serious growth rate. While such opposition to family planning has not coalesced around any leader or spokesman, it has swayed some opinions and at CORDIPLAN there are, at this national planning commission, some who oppose family planning although the director has openly referred to his country's large growth rate as a serious problem and he gave his approval of AID/V's support for a private sector agency interested in problems of population and family. Despite some of the foregoing negative attitudes, it is known both in and out of government circles that the Ministry of Health's Population Division has given approval to the family planning programs now being developed in national, state and municipal hospitals and Ministry of Health centers by private agencies and municipal hospitals. There has been no outcry against these activities.

The Catholic Church should not be included among those of the extreme right who oppose family planning. The Church has a favorable attitude toward what it describes as "responsible parenthood" and considers that this is a matter between the individual and his confessor. The Church is, however, deeply concerned over the continuing increase in induced abortions, illegitimacy and the number of abandoned children. Unless there is overt propaganda in favor of family planning, it is believed that there will be no open opposition from the Church, despite what some isolated priests may say on the subject. Up to the present there has been considerable press coverage of the population problem in Venezuela, almost all of it favorable to action programs. The Church was not figured largely in any of this press coverage, and there has been no open opposition from the Church hierarchy.

Venezuela's population growth rate has a bearing on how some of the following factors will touch upon its socio-economic development.

1. Population at present 9,400,000.
2. Population growth rate at present 3.5%.
3. Mortality rate 7 to 9%.
4. Illegitimacy 53% (delayed registrations affect this statistic. It is conceivably higher).
5. 67,600 women will reach the child bearing age during 1969.
6. 45.5% of the population is under 15 years of age.
7. 55.6% of the population is under 20 years of age.
8. In 1936 65.3% of the population was rural and 34.7% urban.
In 1967 27.6% of the population was rural and 72.4% urban.
9. Over 100,000 young people enter the labor market yearly.
The majority is unskilled.
10. The high population growth rate has reduced Venezuela's per capita economic growth rate to 0.1% in 1967.
11. In 1966 Maternity Hospital Concepción Palacios in Caracas delivered over 39,268 live births. In the same period it admitted 10,236 women suffering the after-effects of abortions.
12. 65% of pre-school children suffer nutritional deficiencies.
45% of pregnant mothers suffer nutritional deficiencies.
13. There is a deficit of an estimated 800,000 housing units.
35 to 40% live in improvised housing in Caracas.
14. Average years of education is 2.6 years.

III. Strategy

USAID/V proposes to assist three well-identified agencies working on the problem of population and family and continue to make training available to qualified workers in the field and sponsor seminars, workshops, and audio-visual aids.

- 35 a) Maternidad Concepción Palacios, the world's second largest maternity hospital, is a municipal institution.
- 35 b) La Asociación Venezolana de Planificación Familiar (The Venezuelan Family Planning Association, hereinafter referred to as VFPA) is a private organization.
- 35 c) Centro Venezolano de Población y Familia (Venezuelan Center of Population and Family, hereinafter referred to as CEVEPOF) is an organization in the private sector, working closely with Catholic University.
- d) Ministry of Health and Welfare's Population Division.
- e) Training grants will be made available for qualified personnel in the family planning field to the U.S. and third countries.
- f) Seminars, workshops and other supportive services, such as audio-visual aids will be made available.

The successful development of the above-noted programs are all long-range and subject to variables and vicissitudes such as political, social and cultural upheavals and alterations, religious interference or intransigence, and economic retardation. However, it must be assumed that the socio-economic development of Venezuela will suffer none of the above cited postponements and that an effective development of the programs above-listed will contribute directly to an advantageous socio-economic growth in all areas of life thereby insuring the political stability necessary to development and continuing friendly relations with the U.S.

IV. Planned Targets, Results and Outputs, and Course of Action

- a) Maternidad Concepción Palacios, a municipal hospital established in 1939 and now affiliated with Central University in Caracas, has 697 beds, 120 attending physicians, 44 residents, 24 fellows, and 770 nurses. In 1966 there were 56,720 admissions, 39,268 deliveries and 10,236 admissions for incomplete abortions.

In August 1963 with the help of a modest grant from IPPF, working space within the hospital, laboratory and x-ray services, a small family planning service was initiated. In January 1965 the Ministry of Health and Welfare's Population Division collaborated with this program by contributing the services of one part-time gynecologist. A grant from Population Council in 1966 of \$ 62,000 for a two year study of the effectiveness of offering contraceptive advice during the postpartum period expanded the service to 7 doctors and two nurses. The effectiveness of this program, which has to date given service to nearly 13,000 women, has been recognized by the City Council which acknowledged the necessity of these services and has taken over, as of January 1968, the salaries of 7 physicians and two nurses.

Increasing demands are placed upon this program, not only by the increasing patient load, but by its training activities. These activities include training for doctors, nurses, social workers and aides for the latter two. All medical students from the two medical schools in Caracas and interns and residents of the hospital receive lectures and observation sessions in family planning. Student nurses, during their rotation through Maternidad Concepción Palacios receive a similar training. In addition, the staff of this program is increasingly called upon for lectures, clinic tours, and as participants in seminars and post-graduate refresher courses at hospitals and regional medical meetings.

To insure the future training aspects of this program on a country-wide basis, the Ford Foundation made a grant of \$47,000 to cover these costs for a two year period. However, as this service becomes better known the need for more staff and equipment is made increasingly apparent. Population Council through a new grant of \$24,885 for 1 social worker, 6 assistant social workers, 1 nurse, 1 secretary, 2 clerks and 1 messenger will continue its postpartum program for one more year. It is evident, however, because of the growing sophistication of the program that additional professionally trained personnel are needed in order to bring about an official recognition of the magnitude of the problem.

At the time that the Population Council made its original grant for the postpartum program, it also made a grant of \$15,800 for a cancer detection program and has made an additional grant this year in the amount of \$16,000. The Family Planning Program in this hospital had made an outstanding demonstration of its capabilities in this field. In a two and a half year period this program has discovered one third as many cases as the hospital proper had in a five year period. In 1964-65 the Ministry of Health undertook a Cancer Detection Campaign. While it is true that many of the women who had to submit to a cytological examination did so in order to obtain working permits, it is equally true that this campaign disclosed only 15,000 cases in comparison to the hospital's Family Planning Program which in one year discovered 8,000 cases in the women passing through its service. There is a growing need for additional cytological laboratory technicians and up-to-date equipment for this program not only because of the increasing patient load, but because of the follow-up examinations which have to be made of patients who come in for their six month or one year follow-up. In January 1968, for example, there were 449 new patients and 1,830 follow-up cases for all of whom a cytological examination had to be made.

To date, because of USAID budgetary restrictions, very little assistance has been given to this program, even though its development has been closely followed and good and cordial working relations with the staff have been established. Some audio-visual aids have been given, and a second copy of the film "Aborto" was provided as the first one was worn out from constant use. A statistical classification of over 6,000 patients was made in collaboration with CEVEPOF and Catholic University Andrés Bello thus bringing about the sought after coordination between population programs so necessary to overall planning and strategy.

At the OAS Meeting on Population Policies in Relation to Development in Latin America in September 1967, such experts in the field as Dr. John D. Cutler, Professor of International Health, Director of the Population

Division of the Graduate School of Public Health of the University of Pittsburgh and Dr. Philip Hauser, Director and Professor of Sociology, Population Research and Training Center of Chicago Inventory, University of Chicago, were enthusiastic about this project since, they stated, such statistical classification, basic to research in population, has been notably lacking. USAID/V has given third-country training to this program's medical and para-medical personnel.

Grant
USAID/V proposes to assist this program with \$35,000 for calendar year 1968 and first six months of 1969 to enable this program to employ professional personnel such as a psychologist, another nurse, a cytology technician, modern equipment for cancer detection, assistance to the professional library, and a small supplementary fee for the doctors who are earning less than physicians in other family planning centers.

- b) The Venezuelan Family Planning Association was organized in July 1966 and created and registered as a legal entity in December of the same year. It has an Executive Board of nine members and a founding membership of 33. The President of the Board is one of the country's outstanding gynecologists and on the staff of Maternidad Concepción Palacios. All the other members of the Board are medical men with the exception of one economist and one demographer.

Because of organizational and administrative delays the Association did not initiate its activities until the middle of 1967. It is now functioning full time with a highly respected, well trained and efficient medical Executive Director and one secretary. It plans to name a medical supervisor soon. The enterprising and dedicated treasurer as well as the executive director are active and increasingly successful in getting donations from influential individuals and institutions whom they are convincing of the urgency of the population problem in Venezuela. The responses, despite many appeals by other agencies to those same individuals and institutions, are increasingly gratifying, so much so that the VFPA is able to cover its not inconsequential central administrative budget and make small donations for social work staff to three family planning centers operating in metropolitan Caracas and two in the interior, organized prior to the time the VFPA initiated its activities. These five family planning services were organized by the director of the Ministry's Population Division who has now devoted himself to other activities and has left the promotional and organizational work of new family planning centers to VFPA.

The VFPA activities for 1968 are divided into two steps. Step A includes those programs in family planning centers already functioning or initiated in January 1968. These programs include 12 centers of which 5 are in metropolitan Caracas. Three of these programs are in hospital Family Planning Centers; one a small municipal institution in a heavily populated underprivileged section of metropolitan Caracas; the other two are in Ministry of Health hospitals, one in Maracaibo, the second largest city, another one in the interior. Another interior-located center was organized by local initiative following motivation given by the executive director of VFPA.

Two centers have been established in Ministry of Health Maternal Child Health Centers, one in a densely populated district of Caracas and another in the interior. A seventh center was set up in a Social Security health center, also in the interior. It is estimated, since a reporting system has not yet been well established, that the centers set up by VFPA give services to an estimated 700 new women monthly. Five centers set up prior to VFPA's initiation of activities receive small subsidies, as stated above.

It has not been possible to approach the Social Security Administration about its interest in initiating family planning services throughout its installations as that organization has been deeply embroiled in jurisdictional and operational problems for many months now.

VFPA's executive director also devotes much time to lectures, symposiums and motivational work to many and diversified groups increasingly interested in family planning. Both he and the treasurer, as already noted, devote much time to educational activities with individuals and organizations. Both men are capable and effective and the activities of the VFPA are expanding rapidly. The treasurer, a businessman and manufacturer, gives untold hours to the association. He financed his own trip to the International IPPF Conference in Chile and to the Michigan Seminar in November 1967.

The above Step A for 1968 will be partially financed by AID/V's grant of \$60,000. The balance, \$63,143.81 will be financed by VFPA.

Step B for 1968 includes three types of activities: (a) new centers in metropolitan Caracas; (b) rural programs, and (c) increased help to the Ministry of Health's Population Division whose limited budget is restricted to salaries for a small staff with no funds for program development. More specifically, VFPA has entered into an agreement with the Ministry of Health to set up additional family planning services, where necessary, in metropolitan Caracas bringing the total for family planning services in Ministry of Health centers in this area to ten, which are considered adequate for the time being. It is estimated that there are enough doctors with training in family planning techniques to staff these additional centers, and additional ones will be trained during the year at Maternidad Concepción Palacios' training courses.

The rural programs as now planned will be closely related to the national universities. The one in the University of Los Andes in Mérida, for example, will be carried out in collaboration with the Escuelas Radiofónicas (Radio Schools) organized and supported by the Archbishop of Mérida to carry education to the masses. VFPA's executive director has already reached an agreement with the Archbishop on how this delicate message will be conveyed to the listeners. The other three rural programs will be sponsored and organized around the activities of the medical schools of the Universities of Carabobo, Oriente and Zulia.

VFPA wishes to continue its collaboration and limited contribution to the Ministry of Health's Population Division to enable it to further its already initiated limited activities.

Up to the present USAID/V has furnished VFPA with some visual aids and given

third-country training to some of the medical personnel in the centers it has been instrumental in establishing.

USAID/V requests funding in the amount of \$138,000 for calendar year of 1968 and first six months of 1969. This sum, in addition to the \$60,000 grant given earlier for which a program agreement has been signed between USAID/V and VFPA, constitutes the first financial aid given to this agency by USAID/V.

- c) CEVEPOF, an organization in the private sector, was formally organized in 1965, although it has been in the formative stages for one or two years prior to this date. It initiated its activities with the course given by CELAP in July 1966. It has a board of 6 of which Dr. Aristides Calvani is the Chairman, a man of much prestige not only nationally but internationally. He is among the recognized leaders of the Christian Democratic movement in Venezuela and one of the first Venezuelans to perceive the seriousness of the population and family problem in his country. He is identified with the Catholic Church and Catholic activities, but his outlook is liberal and broad within acceptable limits. CEVEPOF's founding groups and members are all professional people, and, with very few exceptions, broad and liberal in their attitudes toward family planning. Since it represents the more liberal and outgoing Catholic group it is essential to the success of family planning in Venezuela that the Catholic point of view be taken into consideration and drawn into cooperative activities with other action groups in population and family planning.

One of CEVEPOF's stated policies is, through research, action and evaluation of the latter, to be in a position to recommend to whatever government is in power, on the basis of the above, the attitude and actions it should hopefully undertake in relation to a population and family program. It avoids the term "population policy" as few if any governments have decreed population policies, such so-called "policies" being rather the spirit than the letter of a law, since, as above stated, few such laws are found on the books of any government.

CEVEPOF during the calendar year of 1968 plans to initiate the following activities if funding is made available:

- 1) A program development activity which will use as a basis the earlier statistical classification made of 6,000 women who had received family planning services at Maternidad Concepción Palacios. This development activity will study the attitude of 1,000 of these women toward family planning. It will also follow up drop-outs and the women who failed to return to the family planning services after indicating their interest during the postpartum period in order, among other factors, to gauge the motivational methods employed. It will also study the abortion problem.

This program development activity, like the earlier one, will be carried out in close collaboration with Maternity Concepción Palacios' Family Planning Program and Catholic University. The students from the Department of Social Sciences of Catholic University will do the interviewing. It is anticipated that the interest thus awakened in the problems communicated to them will, if not make converts of them to family planning,

incite at the least their sympathy and intellectual interest in the socio-economic problems presented by such families. After the last study some students elected to write their theses on some aspect of the problem of population and family.

2) Quarterly seminars on Population and Family, two in Caracas and two in cities in the interior. The seminars will be designed to draw their attendance from university students and professors and from the personnel already engaged in family planning activities.

3) A six month study project of the attitudes relative to procreation and family planning of the 50 individuals employed by the Instituto Venezolano de Investigación Científica (Venezuelan Institute for Scientific Investigation, hereinafter referred to as IVIC) ranging from scientists studying and carrying on research in genetics, physics, organic chemistry, marine biology, to janitors, gardeners, secretaries, clerks, chauffeurs, etc., a highly varied and significant sampling.

Following the above study IVIC will look to some agency such as VFPA, IPPF, etc., to initiate and fund a family planning clinic at the Institute, a plant a short way out of Caracas, self-contained in its activities and location. In addition to offering all the now-known contraceptive methods, the clinic will also try to bring about what it refers to as "promoción humana", human betterment through marriage counseling, home-making, individual counseling, etc.

4) Within a reasonable length of time after the above family planning clinic has been functioning, CEVEPOF will undertake an evaluation of the results. CEVEPOF believes that such a pilot project, which will take at least a year and a half to two years, will give it some basis on which to initiate conversations with the government relative to what it has learned about population and family in relation to family planning in Venezuela since it accepts the thesis that family planning must accommodate itself to the country's values.

5) A fifth project will be an information program relative to the different aspects and problems of population and family.

USAID/V in FY 1967 made the following contributions to CEVEPOF:

- i) A Program Development Activity for a statistical analysis of 6,000 women receiving services at Maternidad Concepción Palacios. This activity was carried out in collaboration with Maternidad and Catholic University Andrés Bello, thus bringing about some of the co-operation so necessary for the development of a sound population program in the future.
- ii) A seminar for 35 priests which was outstanding in the very liberal approach and attitudes taken not only by the lecturers but by the priests themselves.

It was unofficially agreed upon among the latter that this was a problem between the individual and his priest, and that the opinion of the physician should be taken into consideration.

- iii) A social psychologist and sociologist were sent to the University of Chicago summer course in 1967. The director of CEVEPOF received invitation travel orders to attend IPPF's International Conference in Chile. He also had a five week's travel grant to the U.S., where he visited and conferred at length with large numbers of individuals and agencies in Washington, New York, Boston and Chicago, and attended the Michigan Seminar. Two sociologists attended Dr. Bogue's two week's seminar in Colombia. Audio-visual aids have been supplied.

CEVEPOF has made substantial contribution of personnel, office space and equipment to the above joint undertakings. While the statistical classification study was underway, the Electronic Center at Catholic University, one of the best in the country, contributed most of the services asked since only the most nominal contribution was made for this highly technical and costly service.

A close and cordial working relationship has been established with all members of this institution.

USAID/V proposes to assist this program with \$75,000 for the calendar year 1968 and the first six months of 1969 to enable it to initiate, and in some instances terminate, some of the above-noted programs.

- d) The Ministry of Health and Welfare established a Population Division in 1964. This Division is at a line rather than at an administrative level and has had, to date, indifferent backing from Ministry administrative levels. Its limited budget makes provision for a small staff of three doctors, one sociologist and a secretary. One of the three doctors, a gynecologist, is a part-time employee and has been assigned to work with the Maternidad Concepción Palacios' Family Planning Program.

While the director of this Division is well informed about family planning and has had the opportunity to attend several international conferences, he lacks administrative experience and competence. Personality problems have also created difficulties in his working relationship with other individuals and agencies. All of this has handicapped the leadership he should be offering to family planning in Venezuela.

USAID/V has made audio-visual aids and published material available to this Division, and will continue to do so in the future.

- e) USAID/V plans to continue third-country and U.S. training and observation for medical, para-medical and other professional and technical personnel working in family planning and allied fields.

Last fiscal year a total of 21 professional people received third-country and U.S. training and observation in the following countries :

8 to Mexico, 6 to Colombia, 4 to the IPPF International Conference in Chile, 3 to the U.S. One nurse financed by a private organization was processed through the USAID Training Office.

USAID/V proposes \$12,000 for continuing training for the following 18 months.

- f) USAID/V would like to supplement, with seminars, lectures or workshops, some of the activities of the above listed programs. Last year USAID/V assisted CEVEPOF, through a Project Agreement, to organize and bring to a successful conclusion the seminar for priests and their relationship to family planning.

USAID/V proposes \$5,000 for continuing programs in this sector.

V. Recommendation

The Country Team considers it counterproductive for any publicity to be given to USAID/V's support and collaboration with the above-cited programs.

VI. Contributions

USAID/V - FY 1968

U.S. Direct Hire	\$ 31,000
Participants	12,000
Seminars, audio-visual aids, etc.	5,000
Other costs for 18 month period:	
Maternidad Concepción Palacios	\$ 35,000
VFPA	178,000
CEVEPOF	<u>75,000</u>
Sub-total	<u>248,000</u>
GRAND TOTAL	<u>\$296,000</u>

Venezuelan contributions (18 months period)

Maternidad Concepción Palacios	\$ 84,000
Venezuelan Family Planning Association	80,000
Venezuelan Center for Population and Family	<u>13,200</u>
	<u>\$177,200</u>

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