PD-AAR-221 39742

Manoff International Inc.

THE WEANING PROJECT

STAFF TRIP REPORT: PERU
April 8-26, 1985

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May 20, 1985

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THE WEANING PROJECT

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Executive Summary

This report details the staff site visit made to establish the mechanism for implementation of The Weaning Project in Peru. The site visit was three weeks in duration, and included the following activities: (1) attendance at UNICEF conference on breastfeeding promotion in Peru; (2) meetings with local organizations; (3) discussions with AID and the Ministry of Health; (4) elaboration of a project proposal; and (5) site visits to health centers in Lima and Cajamarca.

Formal discussions with AID and the Ministry of Health yielded the following decisions:

* The Weaning Project would be supported by the Department of Maternal and Child Health (MCH) through the Nutrition Amendment.

* Sra. Nelly Leon, Nutritionist, would be the official contact person for The Weaning Project within MCH.

* The Weaning Project would be implemented in the health regions of Lima (North Cone), Cajamarca, and either San Martin or Selva Central.

* Preliminary site visits would be made to the first two health regions (Lima and Cajamarca) to determine local interest and potential for cooperation.

* A brief project proposal and budget would be drawn up by The Weaning Project staff (Piwoz), the MCH contact person (N. Leon), and a representative of CINCA (Judith Reyes) to outline resource needs and a plan of action.

Progress in these activities is described in this report. A project proposal was drafted and will be distributed. The proposal will be presented to Dr. Farje, director of MCH, on May 6, 1985. Once the project has been approved, initial measures must be taken to prepare for community selection, field worker training, and the assessment activities. A description and timetable for these activities is included in the report. The next country visit is scheduled for late June/early July.

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Introduction

This report details the three week visit to establish the mechanism for implementation of The Weaning Project in Peru. The visit had five major objectives:

(1) to familiarize The Weaning Project staff with local organizations (governmental and non-governmental) that are involved in programs to improve the health and nutrition of weaning-aged children;

(2) to carry out interviews with key personnel from these organizations to determine the nature and extent of existing programs, and to identify the level of interest and potential for cooperation in The Weaning Project activities;

(3) to work with local counterparts (Ministry of Health, Department of Maternal and Child Health) in the development of a project proposal to describe in detail how the project will be implemented, including a detailed timetable of activities and a budget for financial and human resource needs;

(4) to visit sites identified by the Ministry as priority areas for participation in the The Weaning Project, for the purposes of determining local interest and the feasibility of implementing proposed activities;

(5) to present the project proposal and a report on the local site visits to the Director of the Department of Maternal and Child Health in order to secure formal approval for the project (its proposed activities and budgetary requests) and agree upon follow-up actions to be taken.

Only the fifth and final objective was not accomplished during the visit; the proposal will be presented on May 6, 1985 at a meeting between USAID (Ms. Joan La Rosa, Dr. C. Parillon) and Ministry of Health, Department of Maternal and Child Health representatives (Sra. Nelly Leon, Dr. H. Farje).

I. Activities

A. Attendance at UNICEF Conference: Breastfeeding Promotion in Peru

The purpose of this conference was to draw together a group of physicians, nutritionists, midwives, nurses and social scientists working in diverse regions of the country to:

o present statistics on the intiation and duration of breastfeeding in rural and urban areas;

o discuss the reasons for the early introduction of bottlefeeding (at 15 days) in Lima and other urban populations;

o develop a strategy for the national promotion of breastfeeding at the policy, professional and community levels.

Present at the conference were representatives of the following governmental and non-governmental organizations:

o The Ministry of Health - MCH, CINCA, DANA

o Local Universities - San Marcos, Cayetano Heredia

o Teaching Hospitals - Cayetano Heredia, Children's Hospital, Regional Hospitals of Arequipe and Chimbote

o International Organizations - USAID, UNICEF

o Other Groups - IIN, Peru-Mujer, National Association of Pediatricians.

The meeting was directed by UNICEF consultant Dr. Patricia Marin, a key organizer of Brazil's breastfeeding promotion campaign in Brazil. The meeting was structured so that presentations about various aspects of the Brazil program and existing projects in Peru were made in the morning; working groups met each afternoon to develop a national strategy paper.

There was a high level of concern displayed at the conference about the need to coordinate the activities of different groups in the health sector in both the training of professionals and auxilliaries, as well as in the community-level promotional activities. There was interest in both breastfeeding and weaning issues, since numerous local surveys indicated that the early introduction of bottlefeeding and complementary foods to the diet has played an important role in infant undernutrition.

An informal presentation of the Weaning Project was made at the conference. Participants spoke openly about the need for such work while offering realistic advice about some of the problem areas to expect in the field research, coordination, training and implementation stages of the project.

B. Meetings with Representatives of Local Organizations

Meetings were held throughout the course of the visit to:

o familiarize local institutions with the goals and objectives of The Weaning Project;

o gather relevant materials and advice from local experts with experience in nutrition and weaning-related projects;

o ascertain the level of interest in the project activities and the potential for inter-institutional cooperation.

o identify additional sources of information, human and institutional

resources that could be drawn upon for future project activities.

In Peru there exists a large pool of well-trained and experienced professionals with training in nutrition, public health, program planning and investigation. There are many non-governmental organizations as well as PVO's with long-standing commitment to community development work. Local sociologists and anthropologists have founded their own institutions to research community problems and to organize community projects. Many organizations work in Lima only; fewer groups are engaged in wider-coverage programs.

The availability of trained in-country personnel to carry out focus group discussions and qualitative research was not directly ascertained. Information was gathered on the curriculum used in the training of nutritionists and the different classes of personnel that staff local health centers. A complete listing of the organizations and personnel contacted, as well as the purpose of each visit is included in Appendix A.

C. Official Dicussions with AID and the Ministry of Health

A joint meeting was held between AID, Manoff International and the Ministry of Health to present the overall framework of the Weaning Project. During this meeting the four-country selection process was described, and a short explanation was given of the four project stages, the objectives, plans for implementation, and the continuous role of Manoff International in all stages of project activities.

Sra. Nelly Leon, nutritionist for the Department of Maternal and Child Health, Division of Child Health was appointed as the official project counterpart; she was asked to collaborate on the remaining

activities of the country visit. The director for the Department of Maternal and Child Health, Dr. H. Farje, requested the development of a pre-project proposal and budget that would be subject to his approval before additional project activities could commence.

In-depth discussions were held between Manoff International and the local counterpart to present the orientation of AID/Washington and the Weaning Project staff to the accomplishment of this work. These discussions were supplemented with spanish translations of key segments of the original project proposal. Assuring a complete understanding of the conceptual approach to be employed in all four countries, as well as the activities that comprise each stage of project activities, is a necessary prerequisite to guaranteeing consistency in the interpretation of and commitment to the project's goals. Considerable time and effort was dedicated to this task.

The following decisions were reached during the official discussions with AID and the Ministry of Health:

o in-country financing of the project would come from the Nutrition Amendment;

o in-country costs for the evaluation of the project would come from AID mission funds allocated to the evaluation of the entire Primary Health Care project;

o the project would be carried out in three distinct geographic areas (coastal, sierra, and selva) in the health regions of Lima/Cono Norte, Cajamarca, and San Martin, respectively;

o these regions would also be the focus for other activities supported by the Nutrition Amendment;

o preliminary site visits would be made immediately to at least two of the three regions to ascertain local interest in the project;

o coordination with local nutritionists in each health region would be emphasized;

o these nutritionists would be trained and would supervise local field activities;

o field workers for the assessment would be students in nutrition or social sciences (anthropology, psychology, sociology, social work) and they would be from the local health region;

o implementation of project strategies would be carried out through the local primary health care infrastructure (coordination with local community groups is desirable);

o all areas of investigation (assessment through evaluation) would be coordinated by Manoff International, the Division of Maternal and Child Health, and CINCA (Ministry of Health, Center for Investigation in Nutrition and Food Control);

o if project human resources were strained, The Weaning Project would initiate activities in two regions (Lima, Cajamarca), and would phase in the selva site as appropriate.

D. Elaboration of the Project Proposal

A meeting was held at CINCA to present The Weaning Project to its director and to secure approval for involving one of his staff members in the elaboration of the project proposal. This was an informal meeting; offical approval for CINCA's participation would have to come in the form of a letter of agreement from the Department of Maternal and Child Health.

Sra. Judith Reyes was appointed by CINCA's director, Dr. Ormachea, as the Weaning Project contact person in CINCA. The elaboration of the pre-project proposal was a joint effort by Maternal and Child Health, CINCA, and Manoff International. Copies of the pre-project proposal can be obtained from any of these groups.

E. Site Visits

1. Lima/Cono Norte

Site visits were arranged to three health centers in the Cono Norte that were suggested as representative of the centers in the region, and were proposed as possible sites for the project. The purpose of the visits was to become familiar with the population of the Cono Norte, its diversity and the types of services provided through the centers.

The centers visited were in the communities of Tupac Amaru, Piedra Liza, and Mexico. Each center differed significantly in staffing, size and appearance. The center in Tupac Amaru is very large and clean; it has a nutritionist on its staff. The community surrounding the health center is well-established; further up the mountainside are more recent migrants living in straw houses with no water or electricity. The health center nurse is currently carrying out a population census of this area.

The health center in Piedra Liza did not currently have a nutritionist on staff, but had requested one from the Minsitry of Health and expected her arrival in the near future. The population of Piedra Liza is quite different from that of Tupac Amaru. This population virtually clings to the hillside that overlooks the major road to Lima. The health center is at the base of the hill; it is believed that most of its services are delivered to those residing closer to the road, as well as to those living

on the other side of the road in another barrio.

The community of Mexico is very close to the Hospital Cayetano Heredia. No health professionals were present at the center at the time of the visit. The center is adjacent to a CARITAS food distribution facility, which had a large crowd waiting for focd commodities. The surrounding community did not appear to be very poor — the houses were well constructed and television antennae were abundant.

The communities selected for preliminary visits were chosen to demonstrate the tremendous variation in living conditions of the Cono Norte. Final community selection will probably include a larger representation of the very poor; the quality of housing will be a useful selection criterion.

2. Cajamarca

Travel to Cajamarca was arranged through Trujillo; the first leg of the trip was by air; the second (Trujillo to Cajamarca) was by land. The purpose of this arrangement was to see more of the region by road and to become familiar with the range of ecologic diversity in the area. The trip was made with Ms. Rita Fairbanks, the Westinghouse Regional Advisor for La Libertad (Trujillo), Cajamarca and San Martin. It is worhtwhile to note that flights to Cajamarca always go through Trujillo and are frequently cancelled.

The trip to Cajamarca by road takes approximately 4.5 hours under normal conditions. The road from Trujillo travels north through the coastal desert (La Libertad) and then heads inland to climb the Andean mountain chain (Cajamarca). In the lower mountains there are many

irrigated areas; higher up it is very dry and rugged.

For the most part, the populations by the road side are scattered. There are several larger population centers (Temblor, Chilete) and numerous clusters of houses along the way. This dispersion of population settlements is said to be characteristic of the region; these particular population groups, by virtue of their proximity to the roadside, however, are probably not representative of the living conditions of the region as a whole.

The city of Cajamarca (2800 meters) is situated in a valley basin that is extremely green and fertile. With a population of approximately 25,000, the city is a major center for the northern mountains; the area is famous for its cattle and dairy products. The city itself is extremely tranquil and pleasant; according to local residents the region has not experienced any terrorist activity — a problem that has spread throughout the southern sierra.

The city of Cajamarca is the seat for the health region, as well as for the hospital area of the same name. (There are only two hospital areas in the entire region - Cajamarca and Chota). Both Drs. Salustio Munoz of the health region, and Victor Noria of the Cajamarca hospital area were enthusiastic about the idea of coordinating The Weaning Project with their staff. Arrangements were made for visits to near-by health centers. A local counterpart for the field visits, Sra. Aida Malaver (chief nutritionist), was assigned.

The first visit made was to the town of Jesus, located about an hours drive south-east of Cajamarca along an unpaved road of good quality. (There are few paved roads in the department, and travelling times between

even nearby areas are great due to the mountainous terrain and generally poor road quality; the more distant health centers and posts are infrequently visited by regional office staff because of the great travelling times involved, the limited availability of vehicles from the health region, and the inadequate per diem offered to government workers for meals and other expenses). The town of Jesus, because of its close proximity, probably receives greater than average back-up and supervision from the regional center.

Informal conversations were held at the Jesus health post with the "tecnico sanitario"; information was solicited about weaning practices and nutrition of weaning aged children. The health post carries out monthly growth monitoring of children visiting the clinic. There is a government-run food distribution project (ONAA) operating within 2 blocks of the post; it includes some form of nutrition education.

The town of Jesus is also the home-base for an integrated rural development project directed by the National University of Cajamarca and financed indirectly by the German and, more recently, Canadian governments. The project includes small scale agricultural development (the provision of seeds for family gardens, the raising of rabbits), income generating activities (weaving, sale of produce and rabbits), and according to the social worker in charge, needs assistance in the form of nutrition education to complement the above activities and foster project nutrition goals.

The social worker, Lilia Vizeonde, has lived in Jesus for almost two years. She has been working at the community level, organizing women's

groups in the countryside, and has been the key coordinator of the all of the project's activities. The social worker knows all of the families in the surrounding towns of Chuco, Suecha, and Huaracila, and has developed a good rapport with them. She is in the process of starting activities in 2 new communities, Llimbe and Shidin; she has also experienced some, though limited, resentment from more isloated population groups.

The other field visit was made to the health center in San Marcos, which is known by all as being a well-run and extremely active health center. The town of San Marcos is about three hours by car; its altitude is slightly lower than that of Cajamarca (2500 meters) and its immediate population is under 5000. The "direct population" served by the center is about 10,000 — this primarily includes villages of under 500 inhabitants; according to health center statistics, approximately 2000 additional people live in the health center area, but within one to three days walk.

The proposed activities of The Weaning Project were discussed with the health center staff. The medical doctor normally in charge of the center, Dr. Alfonso Nino, was not present at the meeting. He is in Lima for a post-graduate course until mid-October. The health center staff in his absence is being directed by a doctor doing his rural internship. The health center staff does alot of cutreach work as part of their routine activities. They have carried out a complete census of the entire catchment area and have used this information to support an immunization campaign presently underway. There is a nutrition technician in the health center, and the newly arrived nurse was one of the local interviewers for ENNSA (the national nutrition survey, 1984).

In conclusion, the site visit to Cajamarca was very positive. A

letter will be sent by Dr. Munoz to Dr. Farje informing him of the region's interest in the project. A second site visit to select field workers and participating communities is anticipated for early July.

III. Wrap Up

The pre-project proposal was completed while the site visits to Lima and Cajamarca were being made. A presentation was prepared by Nelly Leon, but because Dr. Farje was out of town it was postponed for 10 days. Because Nelly fully supports the project and participated in every step and decision during proposal writing, it was agreed that the consultancy visit could finish before the re-scheduled presentation (May 6) of the document.

IV. Next Steps

1. Nelly will add some additional sections to the project proposal (the schedule of activities, example of sample sizes) before it is presented to Dr. Farje for his approval.
2. Once the proposal has been approved, a letter of agreement has to be drawn up and distributed to the participating Ministry of Health organizations. An agreement must be made between the Department of Maternal and Child Health and CINCA; the latter will have co-responsibility for the research activities.
3. Money for the project must be programmed from the Nutrition Amendment.
4. The paperwork must be started to insure that Ministry of Health employees (Nelly, Judith) will be able to travel in early July for the secondary site visits.
5. Available literature on weaning practices in Peru must be collected and revised. Washington staff have agreed to supply local counterparts with a

bibliography of materials available in the USA.

6. Letters of invitation to all of the organizations that will be represented on the project's steering committee must be drafted and sent (DANA, CARE, IIN, Cayetano Heredia, Universidad de San Marcos, the School of Public Health).

7. Contact must be made with local health regions to prepare them for the secondary site visits; selection critieria for the field workers must be communicated so that appropriate candidates can interviewed in early July.

V. Issues Encountered and Foreseen

1. **Letter of Agreement** — It is necessary that a letter of agreement be drawn up between MCH and CINCA as soon as possible so that work can begin on the project. There was some suggestion that DANA would also require a letter of agreement to be involved in the project, though it is undecided exactly what their role would be. It was suggested that CINCA be in charge of all research aspects of the project, with DANA possibly being involved in its implementation. The proposed division of labor between these two groups must be clarified as soon as possible, and letters of agreement drawn up accordingly.

2. **Contact with CINCA** — Since contact with CINCA up until this time has been restricted, it is difficult to proceed in operational planning. It is desirable that one person from CINCA be responsible for all research activities in the project to facilitate inter-agency communication. Lines of communication with CINCA must be quickly established and maintained.

3. **In-Country Costs** — Funds for in-country expenses are being provided by the Nutrition Amendment to the Primary Health Care Project. The amendment includes the funding of several types of activities; the project will

receive support from several of the categories listed in the amendment until June 30, 1986. This date approximates the beginning of the implementation stage of The Weaning Project. If the project progresses as scheduled, it is anticipated that US$100,000 will be spent within the life of the Nutrition Amendment for the assessment, strategy formulation, production and pre-testing of materials, and training for implementation.

If progress is slowed, due to the change in government or other causes, problems with strategy implementation may arise. It is likely that excess nutrition amendment funds can be pre-committed, to be spent after the June deadline. It has been suggested that counterpart funds be used to finance activities from July to December 31, 1986. The vast majority of expenses during this time will go toward travel and per diem for supervision and continuing education. These activities (to continue until June 30, 1987) are essential if the project is to proceed smoothely and effectively. Although Norma Parker has agreed to contribute $40,000 from mission funds to the project evaluation, it is unclear where the funds to cover program supervision and continuing education between January and June, 1987 will come from.

4. **Availability of Funds** — Initial steps must be carried out as soon as possible to insure that the money allotted to the project is available to be spent. Site visits are scheduled for early July; staff from MCH (Nelly) and CINCA must be free to travel (with per diem and air tickets) at this time.

5. **Steering Committee** — Letters inviting participation should specifically describe the qualifications of the person from each

institution who should serve on the committee. The committee must be interdisciplinary; the institutions recommended for inclusion have complementary areas of expertise (nutrition, research, community work, etc.) and efforts should be made to preserve this diversity. Committee members will be expected to donate no more that 3 hours every 5 months to project meetings. A meeting agenda will be mailed in advance to all participants.

6. **Selection of Field Workers** — Criteria for the selection of field workers was discussed but then omitted from the pre-project proposal. Each team of field workers, as discussed, should include persons trained in nutrition as well as those with experience in the social sciences. Additional criteria include willingness to travel and live in the field for an extended period, an interest in and understanding of qualitative data collection techniques, and a manner that is sympathetic to the situations under study.

7. **Supervision** — The successful implementation of the project requires continuous monitoring and supervision of field activities. Effective monitoring requires the freedom (and incentive) to travel when supervision is scheduled. This flexibility will be hindered at the local level in areas where vehicles are frequently broken down, gasoline is limited, and per diem for chauffers is already exhausted. The Weaning Project budget provides generously for the latter two categories of expenses (see Appendix B). Unfortunately, the purchase of project vehicles is beyond financial consideration.

The lack of a project vehicle will be especially problematic in Cajamarca, where distances and traveling times are great and transportation

workers analyze the information collected, and even fewer have used this data for the design of specific or problem-oriented programs. Many of the survey forms that were examined were poorly designed. The information collected was often vague and not easily analyzable. A possible side-benefit of the project may be in teaching nutritionists that surveys alone are not enough; training in the identification of information necessary to define a nutrition problem, and how this information can be used for the design of specific project activities, must be included.

10. **In-Country Staff** — It is recommended that the project hire someone to work in-country for the duration of the assessment, to coordinate activities and to insure the smoothe implementation of each procedure. This person must be fluent in Spanish, have field research experience, knowledge of nutrition, and be willing to travel extensively to all of the communities participating in the assessment. Salary will be paid from The Weaning Project/Washington budget; the local staff person must be hired before the field worker training sessions begin.

11. **Political Stability** — It appears that a second round of elections will not take place in June; the changeover in the government on July 28, however, is certain to slow-down project operations. The inauguration of a new government historically means a change in directing personnel — within the Ministry as well as at the regional level. Though the technical personnel are not expected to change, it is very important that activities are underway before the July 28 break. This is critical for momentum as well as for the purposes of minimizing possible losses of financial support and visibility. If activities are underway, new regional directors may be less likely to divert human resources away from The Weaning Project.

is limited. Even though the region is expected to receive an AID-purchased four-wheel-drive vehicle, there is also the fact that region staff, under government law, receive under US$5.00 per day in per diem allowance. This rarely covers costs and is known to be a dis-incentive to long distance travel. The problem is less critical in Lima, where supervisors can use some public transportation and return home for the evening. Supervisors interviewed in Lima, however, commented that they rarely got to the field because there was no transportation. The availability of local transportation in the selva is not known, but the conditions are probably similar to those of Cajamarca.

The Weaning Project budget has minimized dependence on regional vehicles by providing additional funds for local field worker travel in order to carry out the assessment, baseline survey, and evaluation. Suggestions are being sought for other ways to minimize the dis-incentive for supervisory travel.

8. **Cajamarca** — There are 6 nutritionists stationed in the regional health office in Cajamarca. During the site visit contact was made with only one of them. Two nutritionists work in the hospital doing clinical work; one, Martha Marquina, works in the Office of Education for Health and is in charge of the nutrition content of the educational materials designed by community participation specialist, Walter Lopez. Efforts must be made to encourage the participation of the other nutritionists in the region, especially those doing public health work.

9. **Training** — The carrying out of household censuses is a routine activity for many health center personnel. Unfortunately, few health

APPENDIX A

List of Meetings

USAID
Av. Espana 386
286-200

Joan La Rosa - to discuss all details of The Weaning Project
Norma Parker - to discuss the evaluation of The Weaning Project
Sarah Wheldon - to discuss PVO nutrition activities
Eliane Karp-Toledo - to discuss household food use study
Alan Davis - to discuss Weaning Project coordination with FFP activities

Westinghouse Health Systems
Santa Cruz 843
Miraflores
466850 456629 456779

John Gillespie - to discuss The Weaning Project, regional health advisor system
Marcio Thome - to discuss information systems
Rita Fairbanks - to discuss The Weaning Project in Cajamarca, San Martin

UNICEF
460695

Oscar Castillo - to discuss Weaning Project general activities
Patricia Marin - to discuss possible short-term TA in Brazil

Ministerio de Salud Direccion Materno-Infantil
243615

Dr. H. Farje - to discuss all aspects of The Weaning Project
Dr. V. Lara - to discuss general Weaning Project activities
Sra. Nelly Leon - counterpart; to discuss all aspects of The Weaning Project

CINCA
633833

Judith Reyes de Valencia - to discuss The Weaning Project proposal and operations
Dr. Ormachea - to discuss possible CINCA involvement and all Weaning Project activities
Dr. Collazos - to discuss possible CINCA involvement and all Weaning Project activities
Rosa Door - to discuss Weaning Project objectives, activities

Instituto de Investigaciones Nutricionales (IIN)
367558 369123

Hilary Creed de Kanashiro - to discuss Weaning Project activities, possible involvement in project Steering Committee
Jo Gilman - to discuss her anthropologic research on diarrhea, proposed research in jungle, possible candidates for The Weaning Project field coordinator
Guillermo Lopez de Romana - to discuss Weaning Project activities, IIN participation in Steering Committee
Ken Brown - same as above
Milagros Roja - to discuss field experience and comment on breastfeeding survey forms used in Lima research

Universidad Nacional de Peru-Cayetano Heredia
815395 815349

Maria Louisa Figueroa - to discuss all aspects of The Weaning Project and her possible involvement as supervisor for Lima, also her research in breastfeeding
Luis Caravedo Reyes - to discuss general activities of The Weaning Project

DANA

Olga Diaz - to discuss Weaning Project objectives, activities, project proposal
Sulma Vasquez - same as above

Peru-Mujer
Arica 755B
Miraflores
248540 234181

Margarita Segura - to discuss Peru-Mujer activities in general
Hugo Palomino - to discuss their FP education for illiterates project

OFASA
Av. Aramburu 229
San Isidro
458297 417746

Josefina Salas - to discuss The Weaning Project, now defunct OFASA nutrition school

CARITAS
Calle Unicron 492
Callao
278178

Dr. Paiva - to discuss CARITAS projects in Cajamarca, San Martin and The We.. ..ng Project

CARE
Los Laureles 485
San Isidro
400591 400589

Michael Alms - to discuss The Weaning Project, all CARE activities, steering committee
Lucy Borja - to discuss her work in the pueblos jovenes, the comedores, her workshop with women in these groups, The Weaning Project coordination

Asociacion Inter-Etnica de Desarrollo de la Selva Peruana

Lucho Peso - to discuss his impressions of Weaning Project activities in the jungle

Centro de Estudios y Promocion para la Mujer
Parque de la Reserva 865
247662

Estrella Picasso - to discuss her work with women street vendors in Lima

Grupo de Analisis - ENNSA

Miraray Benavente - to discuss The Weaning Project in general, ENNSA analysis and use of ENNSA data for The Weaning Project

Site Visit Contacts

Region de Lima Metropolitana - Area Hospitilaria No. 17

Tupac Amaru

Francisca Morales - nutricionista
Dr. I. Montalvano - medico, jefe

Piedra Liza

Dr. Rodriguez - medico, jefe

Region de Salud - Cajamarca

Dr. Salustio Munoz - jefe de la region
Dr. Victor Noria - jefe de la Area Hospitalaria, Cajamarca
Aida Malaver de Lopez - jefe nutricionista
Carmen Morales - asistente social de la region
Zoila V. Obandu - coordinadora del programa de la OPS y AID
Walter Lopez - educacion para la salud, experto de programas de participacion comunitaria

Puesto de Salud - Jesus

Julio Gaetan - sanitario
Lilia Vizeonde - asistente social, Proyecto de desarrollo rural integral de Jesus

Centro de Salud - San Marcos

Dr. Jose Linares - medico, jefe (temporary)
E. Catrinia Salazar - enfermera
Maria Amparo Fernandez Leiva - enfermera
Pilar Arias Abanto - tecnico en nutricion

APPENDIX B

Illustrative Detailed Budget

	Lima/Cajamarca	Lima/ Cajamarca/Selva
I. The Assessment		
	(US$)	
1.1 Site Selection	630	1,260
a. Travel (2 persons)	200	400
b. Per Diem (4 days/site)	280	560
c. Local transportation	150	300
1.2 Training — Lima	3,525	5,350
a. Travel (5 persons/site)	500	1,000
b. Per Diem (7 days/person)	1,225	2,450
c. Materials	1,300	1,400
d. Technical assistance (1 prs/mo)	500	500
1.3 The Investigation - 3 months	12,900	20,200
a. Fieldworker salary ($100/prs/mo; 4 prs/site)	2,400	3,600
b. Local transportation	2,500	5,000
c. Materials	7,000	10,000
d. Per Diem - Local supervisors (10 days/mo)	400	700
e. Per Diem - Chauffer	600	900
1.4 Supervision (central team from Lima)	1,650	3,300
a. Travel (3 visits/2 persons)	600	1,200
b. Per Diem (5 days/visit)	1,050	2,100
Phase I Total:	18,705	30,110

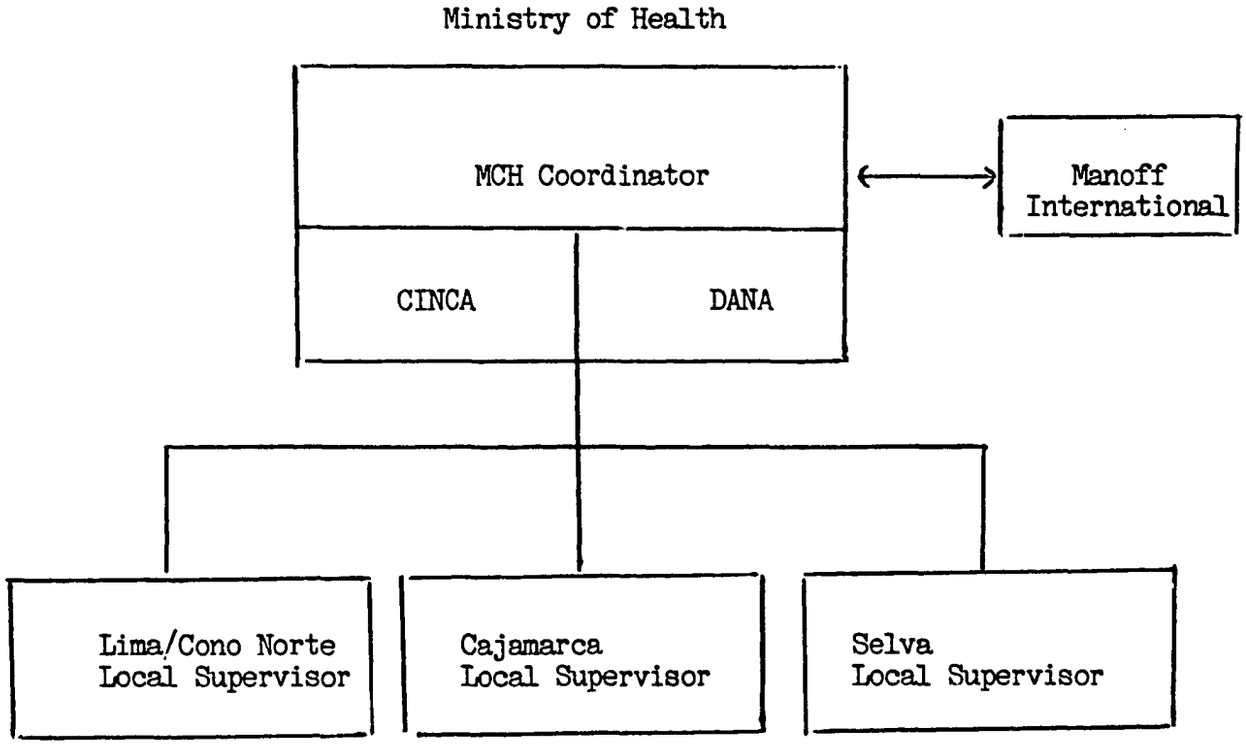
		Lima/Cajamarca	Lima/ Cajamarca/Selva
II.	**Strategy Formulation**		
2.1	Analysis of Information	5,000	5,000
2.2	Materials	2,500	2,500
2.3	Secretarial Services	500	500
	Phase II Total:	8,000	8,000
III.	**Implementation and Monitoring**		
3.1	Design of Materials	5,000	5,500
	a. Artist (3 months)	1,500	1,500
	b. Production (limited)	3,500	4,000
3.2	Pre-testing of Materials	17,250	26,200
	a. Travel (3 prs/2 days/site)	600	1,200
	b. Per Diem (5 days/prs/visit)	1,050	2,100
	c. Large-scale production (incl. radio)	15,000	20,000
	d. Local transportation	400	600
	e. Per Diem - chauffer	200	300
3.3	Training (On-Site)	2,350	4,200
	a. Travel (3 persons/site)	300	600
	b. Per Diem (10 days/prsn/site)	1,050	2,100
	c. Materials	1,000	1,500
3.4	Baseline Survey	3,200	4,800
	a. Fieldworker salary (4 prsn/mo/site)	800	1,200
	b. Materials	2,000	3,000
	c. Local transportation	400	600

	Lima/Cajamarca	Lima/ Cajamarca/Selva
3.5 Supervision with Continuing Education	11,300	20,400
a. Travel (12 visits/2 prsns/ site)	2,400	3,600
b. Per Diem (5 days/visit; 2 prsns/site)	4,200	8,400
c. Materials	1,500	2,000
d. Local transportation	1,800	3,600
e. Per Diem - chauffer	1,400	2,800
Phase III Total:	38,100	61,100
IV. Evaluation		
4.1 Training (in Lima)	4,375	7,250
a. Travel (5 prsns/site)	500	1,000
b. Per Diem (5 days/prsn)	875	1,750
c. Materials	3,000	4,500
4.2 Implementation (2 months)	7,100	12,300
a. Fieldworker salary (4 prsn/site/2 mo.)	1,600	2,400
b. Local transportation	1,600	3,600
c. Materials	3,000	4,500
d. Per Diem - chauffer	900	1,800
4.3 Supervision	1,420	2,840
a. Travel (2 prsn/2 visits/site)	400	800
b. Per Diem (4 days/visit/site)	560	1,120
c. Local transportation	300	600
d. Per Diem - chauffer	100	320
4.4 Analysis	10,000	13,000
a. Computation	8,000	10,000
b. Materials	2,000	3,000
4.5 Preparation of Reports	5,000	7,000
a. Production	4,500	6,500
b. Secretarial services	500	500

	Lima/Cajamarca	Lima/ Cajamarca/Selva
4.6 Seminar (Lima)	15,000	15,000
a. Travel (35 persons)	3,500	3,500
b. Per Diem (3 days)	3,675	3,675
c. Materials	6,000	6,000
d. Location (rent)	1,825	1,825
Phase IV Total:	42,895	58,390
	107,700	157,600
V. Other Expenses (10%) (Contingency)	10,770	15,760
	118,470	173,360

APPENDIX C

Organizational Chart for The Weaning Project



APPENDIX D

The Sample Size
(estimates)

Region	Lima	Cajamarca	Selva	Total
The Focus Groups				
# of communities	4	4	4	12
# of field workers	4	4	4	12
# focus groups/community	4	4	4	12
# focus groups/region	16	16	16	48
# participants/focus group	6	6	6	—
# participants/community	24	24	24	72
# participants/region	96	96	96	228
Household Surveys				
# of communities (same as above)	4	4	4	12
# households/community	20	20	20	80
Total # households/region	80	80	80	240
# of field workers	4	4	4	12
# households/field worker	20	20	20	—
# of visits/household	2-3	2-3	2-3	—

El Proyecto de Ablactancia

Informe de Viaje: Peru
abril 8-26, 1985

Resumen Ejecutivo

Este informe se describe la visita hecho por Ellen Piwoz para establecer el proyecto de ablactancia en el Peru. La visita duro tres semanas, y incluyo las siguientes actividades: (1) asistir una conferencia apoyada por UNICEF sobre la promocion de lactancia en el pais; (2) reunir con organizaciones locales; (3) discutir los detailles del proyecto con representantes de la AID y el Ministerio de Salud; (4) elaborar un anteproyecto; (5) visitar a varios centros de salud en Lima y Cajamarca.

Discusiones formales con la AID y el Ministerio de Salud resultaron en las siguientes decisiones:

* El Proyecto de Ablactancia seria apoyado por la Direccion de Materno-Infantil y Poblacion (MI) con fondos de la Enmienda Nutricional.

* La Sra. Nelly Leon, nutricionista, seria la persona responsable, dentro de MI, por el proyecto.

* El proyecto seria implementado en las regiones de salud de Lima/Cono Norte, Cajamarca, y San Martin o Selva Central.

* Visitas preliminarias serian realizadas a las regiones de salud de Lima-Cono Norte y Cajamarca para determinar el interes y el potencial para cooperacion en las actividades del proyecto.

* Un anteproyecto y un presupuesto serian elaborados por Manoff Internacional (E. Piwoz), MI (N. Leon), y un representante de CINCA (J. Reyes) para delinear los recursos necesarios y un plan de accion.

El progreso realizado en cada actividad esta descrito en el informe. Un anteproyecto estaba elaborado y sera distribuido. Se presentara el anteproyecto al Dr. Farje, jefe de la Direccion de Materno-Infantil y Poblacion, en una reunion el 6 de mayo, 1985. Una vez que ha sido aprobado, sera preciso a tomar unas medidas iniciales, para preparar por la seleccion de comunidades, capacitacion de trabajadores del campo, y las actividades del diagnostico. La descripcion y la programacion de cada actividad estan incluidas en el informe. La proxima visita esta programada por los finales de junio or la primera semana de julio.

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APPENDIX B

Presupuesto Ilustrativo Detaillado

	Lima/Cajamarca	Lima/ Cajamarca/Selva
I. El Diagnostico		
	(US$)	
1.1 Seleccion de Sitios	630	1,260
a. Viajes (2 personas)	200	400
b. Viatecos (4 dias/lugar)	280	560
c. Transporte local	150	300
1.2 Capacitacion — Lima	3,525	5,350
a. Viajes (5 personas/lugar)	500	1,000
b. Viatecos (7 dias/prsa)	1,225	2,450
c. Materiales	1,300	1,400
d. Asistencia tecnica (1 prsa/mes)	500	500
1.3 Investigacion — 3 Meses	12,900	20,200
a. Sueldo ($100/prsa/mes; 4 prsa/lug.)	2,400	3,600
b. Transporte local	2,500	5,000
c. Materiales	7,000	10,000
d. Viatecos - supervisora (10 local dias/mes)	400	700
e. Viatecos - Chaffeur	600	900
1.4 Supervision (equipo central de Lima)	1,650	3,300
a. Viajes (3 visitas x 2 prsas)	600	1,200
b. Viatecos (5 dias x 3 visitas)	1,050	2,100
Fase I Total:	18,705	30,110

		Lima/Cajamarca	Lima/ Cajamarca/Selva
II.	**Formulacion de Estrategias**		
2.1	Analisis de informacion	5,000	5,000
2.2	Materiales	2,500	2,500
2.3	Servicios Secretariales	500	500
	Fase II Total:	8,000	8,000
III.	**Implementacion y Monitoreo**		
3.1	Diseño de Materiales	5,000	5,500
	a. Dibujante (3 meses)	1,500	1,500
	b. Produccion (limitada)	3,500	4,000
3.2	Preuba de Materiales	17,250	26,200
	a. Viajes (3 prsa x 2 dias/lugar)	600	1,200
	b. Viatecos (5 dias/prsa/visita)	1,050	2,100
	c. Produccion a gran escala (incl. radio)	15,000	20,000
	d. Transporte local	400	600
	e. Viatecos - chof.	200	300
3.3	Capacitacion (local)	2,350	4,200
	a. Viajes (3 prsa/lugar)	300	600
	b. Viatecos (10 dias/prsa/lugar)	1,050	2,100
	c. Materiales	1,000	1,500
3.4	Prueba de Entrada	3,200	4,800
	a. Sueldos (4 prsa/mes/lugar)	800	1,200
	b. Materiales	2,000	3,000
	c. Transporte local	400	600

		Lima/Cajamarca	Lima/ Cajamarca/Selva
3.5	Supervision con Educacion Continua	11,300	20,400
	a. Viajes (12 visitas/2 prsa/ lugar)	2,400	3,600
	b. Viatecos (5 dias/visita 2 prsa/lugar)	4,200	8,400
	c. Materiales	1,500	2,000
	d. Transporte local	1,800	3,600
	e. Viateco - chof.	1,400	2,800
	Fase III Total:	38,100	61,100

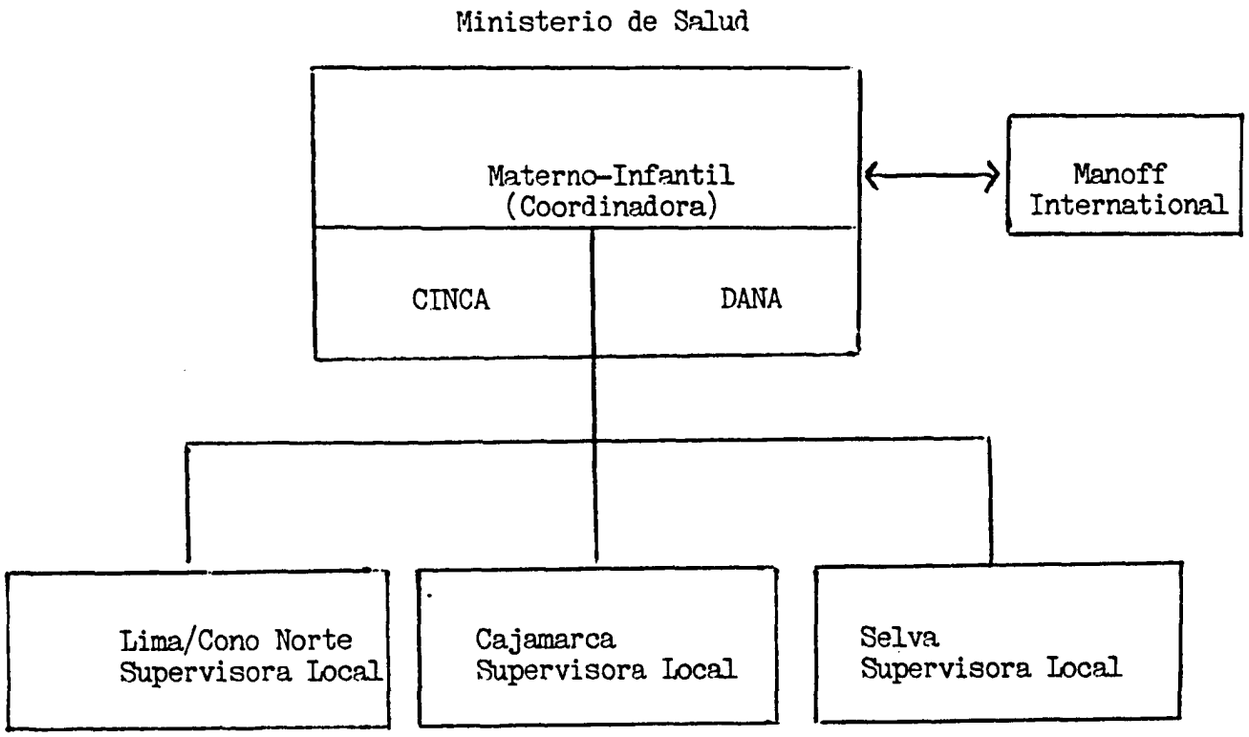
IV. Evaluacion

4.1	Capacitacion (Lima)	4,375	7,250
	a. Viajes (5 prsa/lugar)	500	1,000
	b. Viatecos (5 dias)	875	1,750
	c. Materiales	3,000	4,500
4.2	Implementacion (2 meses)	7,100	12,300
	a. Sueldos (4 prsa/lugar/2 mes)	1,600	2,400
	b. Transporte local	1,600	3,600
	c. Materiales	3,000	4,500
	d. Viatecos - chof.	900	1,800
4.3	Supervision	1,420	2,840
	a. Viajes (2 prsa x 2 vsta/lugar)	400	800
	b. Viatecos (4 dias/vsta/lugar)	560	1,120
	c. Transporte local	300	600
	d. Viatecos - chof.	100	320
4.4	Analisis	10,000	13,000
	a. Computacion	8,000	10,000
	b. Materiales	2,000	3,000
4.5	Preparacion de Informes	5,000	7,000
	a. Produccion	4,500	6,500
	b. Servicios secretariales	500	500

	Lima/Cajamarca	Lima/ Cajamarca/Selva
4.6 Seminario	15,000	15,000
a. Viaje (35 prsa)	3,500	3,500
b. Viatecos (3 dias)	3,675	3,675
c. Materiales	6,000	6,000
d. Localidad (aguilar)	1,825	1,825
Fase IV Total:	42,895	58,390
	107,700	157,600
V. Otros (10%)	10,770	15,760
	118,470	173,360

APPENDIX C

Organograma del Proyecto



APPENDIX D

El Tamaño de la Muestra
(Ilustrativo)

Region	Lima	Cajamarca	Selva	Total
Los Grupos Focales				
No. de comunidades	4	4	4	12
No. de trabajadores del campo	4	4	4	12
No. de grupos focales/comunidad	4	4	4	12
No. de grupos focales/region	16	16	16	48
No. de participantes grupo/focal	6	6	6	—
No. de participantes/comunidad	24	24	24	72
No. de participantes/region	96	96	96	228
Las Encuestas Familiares				
No. de comunidades (igual que arriba)	4	4	4	12
No. de familias/comunidad	20	20	20	80
No. total de familias/region	80	80	80	240
No. de trabajadores del campo	4	4	4	12
No. de familias/trabajador del campo	20	20	20	—
No. de visitas/familia	2-3	2-3	2-3	—

The Weaning Process in Peru:

A Proposal for an Applied Research Project

Executive Summary

This proposal outlines the operational plans for the implementation of The Weaning Project in Peru. The project will be the primary responsibility of the Department of Maternal and Child Health and Population (MCH), and will be carried out in coordination with the Center for Nutritional Research and Food Control (CINCA) and Manoff International (MI).

The project is 30 months in duration and consists of four phases. Each phase will be carried out in selected communities of the health regions of Lima/North Cone (urban/coastal), Cajamarca (sierra), and San Martin (selva). The phases will include the following activities:

1. The Assessment — the collection and review of the literature of weaning practices in Peru; the selection and training of field workers; community selection; the assessment field work, which includes focus group discussions and household interviews (6 months).

2. The Formulation of Strategies — the analysis of information collected during the field work; the preparation of strategies to be implemented in each region (3 months).

3. The Implementation and Monitoring of the Strategies — the design, pretesting, and preparation of materials to be used in the implementation of the strategies; the training of health personnel in the use of these materials and in the implementation of program strategies; the selection and training of field workers to carry out the baseline survey; the implementation, monitoring, and supervision of these activities; continuing education for all personnel involved (15 months).

4. The Evaluation and Dissemination of Results — the development of the evaluation instruments; the selection and training of field workers; implementation; analysis of information; and the dissemination of results in reports, publications, and through a national seminar (6 months).

The project will be carried out in coordination with local personnel from each health region. A steering committee, with technical expertise in nutrition, public health, community development, and field research, will be formed to provide guidance throughout the course of the project.

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