

REPORT ON FINAL EVALUATION OF PROJECT

“YOUNG MOTHER CENTRE (CMA)”

PROJECT No. 471053

Project period 2000-2005

Implementing organization:
CENTER OF PRODUCTIVE AND TECHNICAL DEVELOPMENT (CEDETEP)



Lima, January 2006

<p>1. Project name</p> <p style="text-align: center;">“CENTRO DE ATENCIÓN DE MADRES ADOLESCENTES (CMA)”</p> <p style="text-align: center;">PROYECTO No. 471053</p> <p style="text-align: center;">Project period 2000-2005</p>
<p>2. Type of evaluation (Intermediate, final, etc.)</p> <p style="text-align: center;">FINAL EVALUATION</p>
<p>3. Date: (Year and month)</p> <p style="text-align: center;">24-11-2005 to 2-1-2006</p>
<p>4. Owner of the evaluation (Who asked for the evaluation)</p> <p style="text-align: center;">STROMME FOUNDATION</p>
<p>5. Operative partner (Name of the operative partner of the evaluated project)</p> <p style="text-align: center;">CENTER OF PRODUCTIVE AND TECHNICAL DEVELOPMENT (CEDETEP)</p>
<p>6. Author (Name and address of the team leader)</p> <p style="text-align: center;">SERGIO BARRIO TARNAWIECKI</p>

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MEMBERS OF THE EVALUATION TEAM

Mrs Susana Tapia Porras	Regional Director Stromme Foundation LA (SF)	Stromme Foundation (SF)
Mrs. Filomena Guillén	Executive Director of the Project CMA	CEDETEP
Mr. Sergio Barrio Tarnawiecki	Economist and therapist (Consultant)	Guest and responsible of writing the report.

PARTICIPANTS IN THE EVALUATION PROCESS

In the TOR it was requested the following participants.

1. Project members
2. Employees
3. Leaders
4. Other beneficiaries
5. Evaluation team

In the initial proposal it was proposed to invite the following actors:

1. The teenage mothers (YM),
2. Teenage mothers children
3. Teenage mothers' partners, who are with them,
4. Teenage mothers' parents, chosen by the young mothers.
5. Other teenage mothers' relatives, chosen by the young mothers.
6. The psychologist, who assisted the teenagers.
7. Female teachers, who were teachers of the teenage mothers
8. Social workers of health centers.
9. Lawyers,
10. Gynaecologist and other health professionals that provided assistance to teenage mothers (doctor and paediatricians).
11. Representatives of the Municipality,
12. Representatives of the Police Station for women.
13. Representatives of community vigilance,
14. Representatives of the community association, neighbours and friends.

The list of institutions and people, who participated in the evaluation are included in Annex 6.

OBJECTIVES OF THE EVALUATION

The following objectives were planned within the terms of reference for the present evaluation process:

- ◆ To determine to what extent the objectives of 471053 “Young Mother Center” Project has been fulfilled.
- ◆ To determine the pertinence and efficiency of the strategies established by the Centre for Teenage Mother to attend its target group.
- ◆ Definition of findings and learning that could be replicated in other initiatives to assist the problematic of teenage mothers (MA).

It was mentioned that vocational training is part of the purposes of evaluation because for SF is interested in evaluating and finding out in what way the project contributes to the teenage mothers’ self-sustainability and integration to the society.

OBJECTIVES OF THE PROJECT

The aim of the project is to improve the living conditions of teenage mothers and help them to be integrated into the society. In addition it aims to contribute to diminish the number of new adolescent mothers through preventive and sensitizing campaigns.

After evaluating the progress of the project in 2004, SF considered necessary to provide an additional year of support with the purpose of making possible that the partner institution:

i) finishes with the construction works already planned, ii) finishes the educative guide of early pregnancy prevention, and iii) goes on with the proceedings to create the Foundation Pro Teenage Mothers.

In addition it was requested to evaluate to what extent the conclusions and recommendations of the intermediate evaluation had been fulfilled.

METHODOLOGY OF THE EVALUATION

The methodology of evaluation process was participative and involved representatives of the target group (adolescent mothers and teenagers at risk), project staff and representatives of local institutions. With these institutions and people, we carried out personal and group interviews with dynamics, motivational chats and present surveys. Additionally there were surveys by e-mail. We also requested specific information to people in charge of specific work areas, like accounting, training, attention, school, legal consultant office and health attention. There was also a review of the annual

reports and intermediate evaluation report taking into account the "preoccupation issues" from the FS.

SCHEDULE OF EVALUATION MEETINGS

Here there is a summarized description of the meetings summoned by the Evaluation Commission from 24th to 30th of November, indicating the main subjects and people, groups and represented institutions that took parte in the participative evaluation. The indicated schedules were a desideratum that we tried to keep, but we were not always able to fulfil due to richness of certain meetings, the complex process and the difficulty to get that the participants attend the meetings on time. Additionally, the team agreed on having a meeting in two occasions after the evaluation work. These meetings took place in the Offices of Stromme Foundation on Tuesday 13th and Tuesdays 20th of December. In those meetings we continued talking about the conclusions and recommendations of the Final Report of the Evaluation.

Time	Day 1 24/11 <i>I and love</i>	Day 2 25/11 <i>My strength to love</i>	Day 3 28/11 <i>My capacity to be a loving presence.</i>	Day 4 29/22 <i>The spiritual and emotional food that comes from love.</i>	Day 5 30/11 <i>The wise committee producing love.</i>
Institutions and representatives invited to participate from 09.00 to 12.00	<p>Methodology of evaluation with the Young Mother Center Team</p> <p>Perception about the Young Mother Center YM in the temporal shelter</p> <p>YMs, who live outside Teenagers (school children)</p>	<p>Institutional and project functioning MINDES UGEL Municipality of Villa María del Triunfo Community Kitchens</p>	<p>Attention of the Project del Py. Cedetep, Municipality, Demuna, Health Center, Church, Community Kitchen.</p> <p>Families and partners perception about the project</p>	<p>Preventive sexual education School students that receive preventive training.</p>	<p>Self-sustainability Cedetep team.</p> <p>Conclusions and recommendations Evaluation team:</p>

From 12.00 to 13.00	Lunch	Lunch	Lunch	Lunch	Lunch
Time	Day 1 24/11	Day 2 25/11	Day 3 28/11	Day 4 29/22	Day 5 30/11
Institutions and representatives invited from 13.30 to 15.30	Meeting with Cedetep team to assess the evaluation process.	Families and partners perception about the project	Training Cedetep, teachers, UGEL, YM (temporal shelter and community)	Teachers training With teachers that received training.	

DESCRIPTION AND NOTES OF THE SESSION

EVALUATION DAY 1

MORNING

Meeting with the staff in order to strengthen their weak attitude in the evaluation process.

The general scheme of work for the evaluation was presented, suggesting guidelines to modulate the attitude before the YM and to strengthen their weak. The main objective of this meeting was to reinforce the capacity of YMC team members to be able to listen to the YMs and their gifts to not interfere with the evaluation processes, to be receptive, warm and understanding. This objective was useful to prepare their participation for all the meetings, beginning with the second meeting that we describe below.

Meeting with the resident young mothers, external young mothers, who were in the temporal shelter and who were supported by the center and with presence of the YMC staff.

The **objective** of the meeting was to accompany the teenagers in a trip about themselves and their life, observing their capacity and resources, and their experience in the center, schools, in their family and their relationships. It was expected that through this trip, we could gather their appreciation on the project.

1. It was carried out an exercise to extend the consciousness. In the exercise the participants closed the eyes smoothly and focused their attention towards their inner world, their body, their corporal sensations, their breathing, their internal thoughts, images, dialogues, their feelings, without committing themselves with none of those aspects and keeping distance. Meaning that they had to observe themselves with tolerance, without judgments, without criticize, accepting themselves and valuing themselves. The objective was to help the participants to get in contact with themselves in a more integral way and at the same time be aware of their feelings, their reasons and their inspiration.

2. We requested the YMs to form groups and then tell a beautiful story, the most beautiful in their lives. In order to motivate them the evaluator told the participants a personal story about his son, when he was 2 years and half old. The evaluator accompanied a group and there were three groups more. In the group, which was companied by the evaluator, there were 4 participants. One of them told that the most beautiful moment was before her parents separated from each other, when they went out and played in a park. After that the only beautiful moment was when her baby was born, she added. The other three participants said that the only beautiful moment in their lives was when their children were born.

In the group that Filomena accompanied, there was not any beautiful story. On the contrary, the participants told extremely violent stories, like: a story of a threat with a gun against her mother. The participant was victim of violence before this threat. Another story was full of sadness because of the needs that she suffered with her mother and grandmother. There was also a story of sexual rape. The partner was a thief, who attacked the girl and threatened her if she denounced him. In this case the YM told her partner the story. She said that he understood her and he loved her very much.

3. Then the participants were asked to form groups and answer the following 3 questions:

- a) What have we done well?
- b) What difficulties have you found in the functioning of the center?
- c) What can we do to improve the center?

The answers were:

What we have done well

The teenagers that were part of the evaluator's group mentioned the health campaigns, the bakery workshops, donation of clothes, medical attention, paediatric and psychological attention. One of the girls did not know that there was a psychological service. They mentioned the refectory, the knitting and cosmetology classes and the garden. About the temporal shelter, they were shy and mentioned that they preferred to live with their families.

The second group mentioned that the infrastructure had been improved as well as the entrance, there

are more workshops and the YMs receive support to go to school and they receive materials and food.

Another group said that the Center supported the productions of toys and bread. They also said that the center found donors, who could donate things for the babies and the young mothers to celebrate Christmas, birthdays and the mother's day.

In addition it was mentioned that the YM supported the cleaning of the center, they improved the hygiene, order, discipline and their behaviour. They felt good because they were attending the school and their babies were healthy because they take care of them well and they respected their daily activities.

The fourth group emphasized the possibility of participating in workshops to learn to make bread. They also said that they were able to talk with the psychologist about their lives, to participate in theatre, to go out to the countryside, to go swimming, to participate in the meetings with children and adolescents from South Cone representing the Young Mother Centre. They also emphasized that they had learned to be mothers, to take care of their children. They said that these things were not easy. In addition they affirmed that they learned to be clean, make their beds to clean their rooms with care, and to their children and to respect themselves.

Some of them said that they learned to take care of their children, be mothers and respect their children. Finally they mentioned that they and their children received attention, food and protection.

About the difficulties

Regarding the difficulties, in a first group in which I was present, the perception about the participants was that they were mature. They mentioned the limitations rather than to the difficulties. One example was that there was not permanent psychological and medical attention. This is a serious problem in a zone because the health center is far from the center. Another limitation was the outreach of the center because the number of premature pregnancies is increasing. The participants said: "all the adolescents are pregnant. "Not some, but all of them". This emphasizes the serious problem and a need, whose difficulty is not seen as a unique but different. They reiterated that there are not enough services for young people, where they can receive orientation, and spaces, where to educate the families. The problems of the separation of the parents, the unfaithfulness problems, and the lack of care in the house were pointed out as demonstration of the lack of parents' direction, (their babies' grandparents).

They said that the lack of success in the economic field is because work teams are not formed and nobody works as a group. They said that when you joined efforts, you succeed.

In another group the participants mentioned the difficulties: “ *We cannot go to see our families. Many are far away and we do not have communication or we are here because of the court. It is hard, we feel alone sometimes and therefore we get angry and we do not want to do the tasks, we are lazy or anxious.*”

They also referred to economic limitations to buy glasses according to measure, tickets to travel because of the distance their family is not able to come frequently.

Finally in the second group, they were sorry because they were not able to help the other girls that had problems.

In a third group one of the YM explained that in the beginning she was afraid of staying and learn tasks, that people said were for them. It was difficult to learn how to wash their babies and change diapers.

Some of them also mentioned that they were afraid, when they pregnant and when they were giving birth.

About the equipment in the workshops, they said that it was a bit difficult to learn how to use the machines and the iron, when they had to iron the clothes.

The bad behaviour of some teenage mothers with their children and other teenage mothers caused difficulties.

Some adolescents emphasized their personal difficulties and those related to their children. Some were ashamed because they gained weight and their stomachs started to grow during the pregnancy. For some others it was difficult to learn how to shower their babies. They were afraid because the babies had a very fragile body. Little by little they overcome those difficulties and achieved confidence. It was difficult for them to learn how to change their babies’ clothes and diapers, but when they learned, they taught other girls.

They were afraid and sad, when their babies got sick. They were afraid when they were about to give birth in the hospital (they remembered the recommendations received, but with the pain they forgot all).

Finally, the group complained saying that they did not receive visits from their families. They expressed sorrow, when they said: “nobody asks for us”.

What we can do to improve

In a first group the participants pointed out that the main problem is the lack of work. The center must generate work, they suggested. They mentioned that more productive and technical formation activities would be necessary to promote. Handcraft like clothes for the kitchen, toys, bread, etc. could

be produced and sold. Each workshop could be a production center. For instance school uniforms, t-shirts and children clothes could be produced.

In the second group the participants said that the bakery is fine, but they lack materials and more customers.

They said that there is lack of motivation to cultivate the garden. Nobody wants to participate.

"If we do it, we are criticized because we do not do it like they want it", they explained.

Likewise they mentioned that they would like to raise ducks and hens.

In addition they expressed that a computer room could be implemented and a teacher could organize classes, where they could learn Word, Excel, etc.

Finally this group suggested changing the external appearance plastering the walls and painting it. They also said that they could do a nicer announce with the project and kindergarten name.

The third group suggested making a park or a water fountain in the middle to walk the babies.

They mentioned that it would be good if they could learn computer and organize formative workshops.

It was expressed the need of reaching more teenage mothers outside the center. Finally this group suggested that they should be more unite, solidar and stop being conflictive.

The third group suggested rent a kiosk or a stall in one of the local markets to sell their products, because they know how to produce different things. To have a small business, save money and then have a bigger shop.

They suggested forming a group to entertain in children parties.

They also felt that it is necessary to take care of their children better, so they don't get sick and be able to save money for other things.

The participants said that what they had learned in the center should be shared with their families in order to improve the relationship with their kids.

NOON

Visit to the Center

It was amazing to find infrastructure well equipped, completed but apparently not fully used. In the project implementation and financing it was prioritized the construction work. Like we mentioned later, it is necessary to work the sustainability aspect in parallel to the project.

It could be transformed in a productive center that generates meaningful income in an adequate market. It could be possible to have a cosmetology center, bakery production center, dressmaking and textile center, a center for social activities and a farm, where domestic animals are raised and then sold.

Afternoon

Meeting with the professional support and administrative team

The objective was to listen to the team members and their vision about the teenage mothers and their world. In addition it was important to perceive their personal and institutional resources used to receive the young mothers, to approach to their world and to appreciate their experience with empathy.

This meeting started with a motivation and mythological story about Hecate and Persephone as an archetype of the relationship between mother and adolescent daughter and her sexuality. In the story it was pointed out the kidnap of Persephone by Hades, as the beginning of the sexuality. Then Hecate's disappearance as a representation of the pain of being away from her daughter and accepting that her daughter is not her property and she has got her sexuality and that the mother is not part of it. The image of Baubo is the integration of body and mind in a healthy sexuality that recovers Hecate's desire to live. The representation of the sexuality in the passion fruit that Persephone was not allowed to eat and the possibility of a tense solution, which will integrate the common life with the family and the underground and secret life of the sexuality with Zeus, who send Hermes God of the Communication.

After this there was a dialog with the professional and administrative team focused on the experience of the work done in the morning. They were asked to emphasize the relationship with the teenagers, what mobilized them about their own adolescence and what was the message of that experience regarding their own personal and institutional resources. The participants committed themselves to summarize their answers in a paper and send them by e-mail.

Then there was a presentation, in which it was examined the fact that some YMs get pregnant on purpose. There was a case of a YM, who got pregnant after being pregnant 2 times spontaneously. It was also examined the fact that all YMs said that the most beautiful moment in their life was when they gave birth to their children. It was also analysed the experience of the YM that said that her partner was understanding and accepted her although she was raped by another person.

In these cases it seems that the pregnancy was not the result of bad information, but a way to fulfil the gaps in their lives. It was a way to give a meaning to their lives. The project staff recognized that their maternity was moment to mature and for important personal changes. They observed the same things in the teenage mothers, when they were pregnant and then got their babies and in some cases when they got a partner.

The YMs seem to try to retrieve an intense and private link, with their child and perhaps with a partner, who expressed them care, interest and recognition and valued them. However it is important

to recognize that the pregnancy and maternity becomes an emotional resource that in some way may help them to recover internally and private them from the reality. They are adolescents, who need to be taken care of. They need to finish their physical, intellectual and emotional development.

There was a limited participation because of the time, so we requested the participants to write down the critical points of the process. The contributions received were included with the annexes to this report.

EVALUATION DAY 2

MORNING:

The objective of this meeting was listen to the opinions of institutions related to work of the YMC about its institutional and project functioning. This meeting failed because there was only one representative of the Women Emergency Center (WEC). Despite this situation the exchange with Mr Jose Luis Illescas, representative of WEC, was very fruitful. They provide legal advice, psychological and social support to women victims of violence. They sent cases to the YMC and they hope to strengthen the collaboration links with them. The YMC Project shared with WEC the case of a YM's child, who was kidnapped by his father. WEC managed to reunite mother and baby. They offered to send information about the situation of the women in the area and data about the case.

Regarding the improvement of collaboration ties, the staff suggested to provide psychological attention to families of the teenagers assisted by the project in order to facilitate their reincorporation into their families. They clarified that they never worked with the aggressor, when a violence problem had happened.

About improving the collaboration, they suggested to provide them with more information about the activities of the project, details about policies of attention and information about what they do, a visit to its center and the establishment of regular meetings including other institutions. They suggested a bimonthly meeting with a settle agenda with the following institutions:

1. Fiscally y Judge of Family
2. Health center
3. Young Mother Center CEDETEP
4. Women emergency center
5. Police station, DEMUNA, Zone Center of PNP
6. Welfare House of Manuela Ramos
7. INABIF
8. Ministry of Education, UGEL
9. Clubs of Mothers, and
10. Others NGOs.

In the training area it was suggested to investigate the possibility of signing agreements with SENATI, TECSUOP, CENSICO in order to make better use of the equipment that the center have and to provide quality training, so the YM can have access to jobs with better salaries.

It was also suggested to find a space in the commercial area of Villa El Salvador close to the YMC, in which they could sell exportable products like industrial textile, shoes, bags, handcraft, etc. or products that could be attractive in the area like uniforms, industrial globes, etc.

It was also suggested to get help from PROMPEX and FOVIDA.

Summarizing it was suggested that the institution find ways to overcome their economic dependency and the adolescents' dependency through a certificated qualification or training and the development of profitable activities.

AFTERNOON:

The afternoon meeting was postponed because it was 2 p.m. and there were just 2 relatives.

The difficulties of summon, punctuality and attendance show one of the weakness of the organization and the project, although there is a team with excellent human and professional quality. In the following days (3, 4 and 5) the YMC's summon was successful.

EVALUATION DAY 3

FIRST HALF OF THE MORNING

Objective to collect opinions about the assistance that YMs receive and what are the needs to be improved.

Meetings with representatives of the local authorities

There were representatives of the Municipality, police, and institutions of the health center, civil register, Women Emergency Center (WEC from MIMDES) and a religious organization. There was a considerable participation of teachers of local schools, so it was possible to collect their contributions, which enriched the meetings for teachers carried out in the afternoon. It is important to mention that on the 2nd day of evaluation a representative of the WEC was present. His contribution was

summarized in the respective chapter.

The institutions were requested to provide information about their relationship with the project and express comments about the services provide by the YMC, the outreach of the project, the effects and efficiency. They were also requested to provide suggestions on how the project could be improved and how to articulate the YMC function. Their opinions are described below:

Maria:

Representative of the Women Emergency Center in San Juan de Miraflores, that works issues related to sexual violence. They collaborate with CEDETEP. About the situation of the teenagers, they said that there is information about the incident of sexual violence according to age groups at MAMIS NGO, in the police stations and other organized institutions. From every 100 cases of premature pregnancy 20% are victims of sexual abuse and 8% of these are girls. The number of adolescent rapists is growing.

There is not any self-sufficient institution. Multidisciplinary and multisectorial work is necessary. We recognize the importance of the YMC that pays attention to YMs and does a very important work in the sensitization of the community and training of adolescents.

Micaela:

About the Modulo of Infant Bad treatment Attention, they considered that the temporal shelter provided by the YMC is very valuable and important. It prevents the repetition of sexual abuse. We have an excellent relationship with this kind of shelter, because in our opinion the attention is excellent and its projection too. You should facilitate the growth of facilities and to increase the training efforts and to add therapy program for the youngsters and families. The problem is chronic and all the staff must be trained, even the doorman

Martha:

Center of Mothers. The YMs does not usually receive support from their parents, who often throw them away from their homes. For that reason we think it is very important that these girls have an alternative. We recognize the value of the campaigns in the schools to prevent and the distribute medicines. It is very important to develop workshops on topics related to family and social violence. Not all the YMs' mothers support their daughters. Some mothers want them to abort.

Filomena:

In 1998 we detected 3270 cases of teenage mothers in the Southern Corner. In 2004 the Organization Medicos del Mundo detected 9970 YMs between 12 and 18 years old. Our goal was to reach 200 YMs, but we have registered and provided services to 425 cases.

Mariella

Doctor of the Maria Auxiliadora Hospital. Between January and September this year we provided pre-born attention to 1058 YMs between 15 and 19 years old and 2 cases between 10 and 14 years old. Altogether we took care of 1470 cases, 1191 childbirths of YMs, among them there were 345 Caesarean cases. The problem of the abortions between adolescents is very serious. Every month we reported between 10 and 17 cases of emergencies because of abortions. Our goal was to take care of 2480 cases and we have taken care of 60% more than we planned or established in the goal. 15 % of the reported pregnancies are product of sexual abuse and from them 80% happened in the house. In legal terms sexual violence against a child younger than 13 years old is considered violence against the dignity. Many children accepted a sexual submission and they were not forced necessarily. There is sexual violence without product, in other words a baby. All this has to be with the cohabitation, which are circumstances considered as "normal". The families are dysfunctional and have inadequate models for the girls causing a dangerous behaviour. I believe the education sector has a very serious responsibility.

Martha

Teacher: The judges do not give importance to the cases of sexual abuse happened within the home and they usually send the abused children back to their home. Often children do not know what to do and the tests are lost. Many mothers make their daughters feel guilty. The institutions are saturated. 80% of the sexual abuses happen in the house by the fathers or step-fathers. The YMC should receive more YMs. In Lima there are 14 family courts and everywhere they request attention to the YMs. All the cases receive shelter including in qualified houses. INABIF sends the YM to Santa Rita de Casia or Hermelinda Race Institutions. There is much opposition to the idea of allocating the YMs in families because then they will end as maids.

Nadinea

Carmelite Sister: She considers that the dining room is very important for many YMs. The YMC is a great help for all Lima. They help contributing with spiritual education and supporting the development of their self-esteem. Every 15 days the YMs go to the abbey, where they receive information and orientation. In addition their children are baptized there. We visit the families in order to promote the possibility of a good relationship with the parents and partners. There are very complex cases, like

babies with Down syndrome or brain paralysis. It is necessary to support the study of this problem, how to improve the training and self-sustainability of the YMC.

Edith

Women Emergency Center in Villa El Salvador: The experience of the YMC shows a wide history of bad treatments that started in the childhood. The support provided to the YMs is excellent. She suggests forming of a self-help group in the YMC with support of the WEC. Here the adolescents find a family. They get closer to their children and they improve their nutrition. The ambulatory attention is also very good because of the vocational training and chats. We also appreciate the chats offered in the schools.

Beatriz

School teacher: We have participated in a seminar workshop about recognition and value of the body, changes in the adolescence and the prevention of the premature pregnancy. We have given the youngsters space to express themselves, so that they are able to speak and learn to say no. We try to make that their sexual life does not start so early, but time is very short...

Yolanda

Teacher trained by MIMDES with support of ONG PROPOLIS: The main objective is prevention. There are parts of the body that must not be touched. AIDS is a punishment because of unfaithfulness. In the Bible it is described how unfaithful women were punished with stones.

Alicia

CEDETEP: Very often the adolescent mothers often create stories of sexual rape and bale other people in order to protect their boyfriends. There are girls with great emotional problems that need specialized attention and cannot be assisted in the Center.

Julio Quispe

National Police of Peru (PNP): The sexual rape is the main crime in this area. I have my doubts about sexual education. I believe that speaking about this issue may promote the irresponsible sex. We coordinated with the YMC so this center facilitates medical and psychological attention to victims of sexual rape. An extremely complex factor is the gangs, who trap the adolescents. The reason is that many daughters stay at home alone because their parents and mothers must go to work or have other reasons.

Nidia

YMC: We have trained the teachers and we have offered "school for parents" for all parents in the kindergarten.

YM 1

YM Committee: We have to organize meetings with games and dynamics so the youngsters do not get bored.

YM 2

YM Committee: There must be a space in the health center. We must spread information about the problems, so that people don't look at us bad. It is meaningless to say "don't do it"

Maribel

Teacher: We have participated in chats outside our working hours. They ended late at night, but we need follow up. We request chats for the school for parents and not only for the students.

Martín Zavala

Teacher and former father of the Kindergarten in the YMC: In the beginning I was suspicious, but now the relationship is good. The kindergarten has sensitized the parents. There are serious problems in the neighbourhood. The teenagers are trapped by gangs. The responsibility is in the authorities' hands.

Silvia

Coordinator of tutors in a school: We need a guide from the Ministry of Education about sexual education, which has been left aside.

Edith:

The problem is that there is only one hour for tutorial per week. Sometimes teachers have different opinions about sexuality and they do not receive support from authorized people.

Carmen

Teacher in a kindergarten: The problem must be worked out from kindergarten education.

Shirley

Municipality: We are organizing a campaign against infant sexual abuse in coordination with taxi drivers, mototaxi drivers, buses and other means of transportation. We play cassettes with information. As DEMUNA we coordinate preventive actions. If both are adolescents we try to solve the legal problems concerning food and civil registration.

José

Chief of registration area in the Municipality: There is a project to prevent the family violence.

Yolanda

Teacher: It would be good to produce training material that can be used with children of different ages because their problems are different.

Raquel

Responsible of tutorial work in UGEL 01, responsible of sexual education: It is important the relationship with all the NGOs in order to avoid duplication of efforts. We are asking CEDETEP to train teachers in Lurin, San Juan de Miraflores and Villa El Salvador. The training is given in schedules that do not affect the school classes.

Filomena:

Prevention is wider every time. We want to start the radio program with specialists. We must receive support from students and parents leaders. The didactic guide for prevention was delivered to UGEL in 2004. We received support from the Youth Network and Tierra de Niños. That guide has been reviewed by psychologists and teachers. We implemented a pilot plan in 4 private schools and 4 public schools. Now we are working with 15 public schools and 7 private schools. We also received visits of schools, which brought clothes, medicine, food and also support from teachers. We have also received a lot of support from Maria Auxiliadora hospital. The Church supports us with psychologist and psychiatrists. But there were very serious cases in which the mother loved and hated her baby. The church helped us including us in spiritual encounters, where the mothers recuperated the love for their babies. They baptized their babies and they were baptized too. If they were alone, they would not have done it. In collaboration with FS we are creating the Foundation Pro Young Mothers. We coordinated with the community kitchens, so they could provide food to the undernourished mothers and their babies. The Committee of Ladies from Villa Maria supported us with food and medical campaigns.

In the report prepared by the Infant and Maternity Centre of Jose Galvez it was informed that the problems of the YMs and their babies are:

- YMs: more probabilities of pregnancy disorder like: higher pressure, anaemia, urine infection, haemorrhage and risk of abortion (spontaneous or provoked).
- Babies: low weight, delay in their growing, infections linked to the intrauterine stage, anaemia, breathing problems, diarrheic infections, parasitizes, dermatological infections, dental decay, low size, malnutrition, delay in the psychomotor development, delay in speaking.

SECOND HALF OF THE MORNING

With families and YMs partners.

The objective was to have an impression of their worries, perceptions and expectations about the YMC.

The session started with motivational presentation of what is Christmas for the participants. I suggested that everyone answer and participate. The idea was to present Christmas as the family party and to help them discover the values within this Christian feast.

These are some of the reflexions I gave:

- The commitment of Jose to Mary and the recognition of her pregnancy as a Divine will presented by the Angel.
- Virgin Marie was a teenager; she was 14 years old when she got pregnant.
- The decisions of the adolescents to have a baby are contradictory to the abortion.
- The unlimited love of Jesus mother.
- The veneration of Milk Virgin
- The respect towards the Child's wisdom, when he was presented in the temple, he Etc.

The participants were requested to comment about Christmas, the described light and love. They were also requested to find the way to nourish two families: their families and the YM's. So I asked them to answer the following question: What do their families need to feel better. You the father and mother of the teenage mother, what do you do with her?. And what does the YM do with her baby?.

The comments of the participants are described below:

Partner 1:

- To have a child is nice
- There are problems in a couple
- I go to church
- You have to give the best from you

- Good makes you feel that He is with you
- I was born in family, where the parents were separated and I had problems with my brothers.
- People say that when you are good person you are silly and the bad guys are good.
- Ask God and progress.
- You have to be in peace to handle situations
- Parents should give love to their children
- My parents never talk to me
- Not everything is work, they must talk
- We had parents, who beat us and treated us very bad.
- They did not mistreated but they did not give us love
- They did not give us love, but they said that they spoiled us.
- We have to let children learn.
- Children remember the people that talk to them
- Everybody is going to die
- My partner had a difficult life
- The relationship with my partner was difficult. There was poverty, violence, physical bad treatment. No love. I hold her mothers' hands, so she could not beat her.
- Only God can change people.
- I accepted my child from the very beginning
- Little by little she will change
- Sometimes we think that our pain is the biggest in the world. But if we look around we will see that there are bigger pains.
- I am afraid of God, but He has to say.
- I love my parents and my family

Grandmother 1:

- I raised my grandchild a YM, when she was a couple of months old. She did not have father and mother.
- She got pregnant, when she was in 5th grade of secondary
- The YMC helped her with gifts, birthday parties and medicine.
- My grandchild lives here sometime until she moved with her partner.
- I worked and my grandchild stayed at home alone.
- The service that I value the most is the treatment my granddaughter received. They even gave a job.
- Until now nobody visits my grandchild, only her baby's father from time to time to give the Money for his child.
- My granddaughter was looking for love.

Mother 1:

- My daughter (17) got pregnant, when she was 14 years old.
- God send me the YMC
- My daughter continues with her boyfriend
- My husband, who was in shock with the news and I try to take it easy.
- Her partner helped her
- Her boyfriend got away from her little by little because he lost his job.
- The girl wanted to escape with the boy
- The support received from the psychologist helped a lot.
- We are considering the possibility that she moves out with her boyfriend in order to see how life is.
- She doesn't want to study
- The psychologist helped a lot
- The relatives think that there won't be more pregnancies.
- To teach them to be better women instead of teaching them about birth control.
- We were responsible of her pregnancy because my husband was unfaithful and also because I started to work.
- We harvest what we cultivate.
- My daughter's father always disappeared between 6 and 11 p.m.

Mother 2:

- There are negligent parents.
- I have a child in the YMC, who is 3 years old. Now he leaves the kindergarten.
- He and I got moral and spiritual support.
- I received vocational training in bakery, dressmaking and chocolate.
- I form my business with the training I received.
- In PROPOLI, an institution that supports micro entrepreneurs, I won the first prize for forming a business.
- I teach now.
- The prize included equipment and furniture.

Mother 3:

- (*She cries*) The YM's father wanted to send the baby away.
- Strong problems, he always abandoned her.
- I have given all to my daughter but she does not do anything
- When she was 16, she got a baby with a boy member of a gangster and who was reputation of being a rapist.
- I discovered that she was pregnant, when she was already 5 months.

- Her father abandoned me, when I got pregnant
- I have 3 children with my present husband
- My husband complains because there is a new member in the family.
- My daughter wanted to have an abortion, when she was 5 month, but I said no.
- The father was a neighbour, a married man, who had children.
- The neighbour wanted that she had an abortion
- The neighbour travelled and disappeared.
- The baby is autistic, I don't have resources, My husband does not want to assume any responsibility.
- Now my daughter is 19 years old. She used to work in the Wawawasi (Nursery). She is a problematic and aggressive girl.
- She received psychological assistance and she stayed in the YMC 4 month. She worked 1 month in the Wawawasi (nursery).

Partner 2:

- I cannot speak I feel much pain
- I feel ashamed
- They have been very unjust with me. They sent me to jail because of love
- I have been 1 year and a half in Lurigancho jail
- They destroyed my inner life
- The prisoners destroyed my external life
- I did not believe in God or in anything. I hated them all. To my parents....e gave money.
- I was close to the drugs, to weapons and alcohol
- I cannot be like San Jose and forgive
- My son is very well. They take care of him well
- I am happy to have my son
- As man I feel bad
- They gave me my freedom, but I am not able to feel it
- I put in lawsuits, in problems
- I destroyed my life because I fall in love
- Others are free
- It hurts to me to see my son here like he was an orphan. The judge does not allow me to see him.
- But I see him and when I see him my heart melts, but when I leave him I get lost
- I have nightmares and I remember the jail
- I would like that there was family therapy and the therapies for couples would be also a good idea.

Madre 4:

- I have a daughter in the YMC, who is 12 years old (she cries)
- They helped me and they continue doing it.
- I cannot speak

Madre 5:

- Thanks God for this invitation
- The CMA has helped me economically and emotionally.
- It was difficult to come but I am very happy that I did it
- The girl, you are taking care of, is my husband's sister's granddaughter, whose mother died. Her father abandoned her.
- Her stepfather registered her as his daughter
- I wanted to take care of her
- She decided to come to the YMC
- She has been here nine months
- The assistance is excellent
- The doctor always visits her and takes care of her.
- She studies
- We would like that you give her good orientation
- She wants to study and she wants a scholarship-
- The girl goes to Church
- God exists. He loves us all and He does not punish. He is a father for all of us.

EVALUATION DAY 4**MORNING****Meeting with teenage students, who participated in the preventive education course.**

The objective was to evaluate the formation of teenagers, how they handle their attitude, concepts, values in order to have enough information evaluate the teachers training and methodology used in the training manual.

There were 3 groups of students with 48 students in total, who received training from CEDETEP in the following schools: Santísimo Salvador, Juan Guerrero Quimper and Rodrigo Lara Bonilla.

DYNAMIC OF DIALOGUE IN GROUPS

Sheets of paper containing questions (described below) were distributed among the participants. The students were requested to choose those questions that they considered more interesting and felt comfortable to answer. They received big papers and colour pens to write down a report on the answers of the group. They were asked to include the disagreements and then to present it to the whole group. There were 7 groups, where women and men were separated. There was only one mix group. Spontaneously the majority gave a name to their groups and some groups decided to give a message to the whole group. In addition, each group was asked to present their recommendation on how to improve the training they received, at the end of each presentation.

THE QUESTIONS RAISED WERE:

Looking at myself

What did I learn about what love is?

What did I learn about what intimacy is?

What did I learn about how my body and feeling changed?

Are you able to be by yourself? Do you like to be alone sometimes?

Are you able to postpone things or do you want everything fast?

What happens when you get frustrated?

The relationships between partners

Are you sure that you know the person you are dating or do you have a fantasy?

If you were with a person and then you break up, you break up without problems or you try to stick to her/him?

Have you ever had a boyfriend/girlfriend?

How important are the relationships with partners as a couple?

My parents and my sexuality

What did I learn about being away from my parents without being far from them?

What did I learn about my perception of my parents?

Do you think that it is hard for your parents to accept your sexual feelings?

Do you think your parents are also afraid of their sexuality?

Sexuality

When do you think your sexuality started?. When you were just born?. When you were 2 years old?
6? 12? 15? ...?

Do you think you are ready to start your sexual life?
 Do you believe sex is just sex?. Do you believe sex is fun? Without illusion? Without love?
 What make you think that you are not ready? Or that you already are?
 Do you think you are able to take care of a baby?
 Do you think your partner would be ready to take care of a child?

Spirituality

What do you think the virginity is?
 Do you think there is a spiritual side of the virginity that you can take care of?
 What do you think is the relationship between your sexuality and your spirit?
 Have you ever had sexual experiences or not in which you felt unsatisfied, empty, sad, guilty or angry?

Inter gender

What is the difference between man and woman?
 What do you admire the most in men? In women?
 What do you hate the most in men? In women?
 Do you talk about sex with your boyfriend or girlfriend?
 Do you think you have to tell him/her everything?

The experience about the course and your relationship with the teachers

Would you prefer that the course is given separately for men and women?
 In the classes did you feel that your sensibility and dignity were protected?
 How was your teacher with you? With the group?

The answers

GROUP I

Topic	Group/ Members	School
Looking at myself	<i>"Friends Forever"</i>	Juan Guerrero Quimper

Questions:

1. *What did I learn about what is love?*

It is a mutual feeling that grows between two or more persons. It is also a deep feeling that could end in a strong and painful feeling.

Also we cannot misunderstand love with like.

2. What did I learn about what intimacy is?

It is not the same now like it was before. Now we want our space and privacy. It means to be alone in a reserved space, which allows us to reflect and think about.

3. What did I learn about how my body and feeling changed?

Our body changes, when we grow. It changes physically and psychologically. The feelings that are always with us are: illusion, misunderstanding and love.

4. Are you able to be alone by yourself? Do you like to be alone sometimes?

Yes, if we like it. It allows us to reflect and think about better.

5. Are you able to postpone things or do you want everything fast?

Sure, because it is better to do things in the right time and moment.

6. What happens when you get frustrated?

I become desperate, get depressed and cry. Then I get confused and feel sad.

GROUP II

Topic	Group/ Members	School
INTER GENDER		Santisimo Salvador N ^a 7239

Questions:

1.- For you what is the difference between a man and a woman?

Man and women have different sex: Feminine and Masculine. There are also differences because man's responsibility is to take care of his home that is why the man is stronger and tougher than women.

2.- *What do you admire the most in men? In women?*

Men are weaker and more fragile when they are in love and they understand the needs of their partners. But some men think it is a game.

Women think that all men just think about the physical aspect. Other men think about their plans for the daily routine.

3.- *What bothers you the most about men? about women?*

In general almost all men are machos and have bad intentions. They just think about being one day with a girl and then with another.

Girls are very strict, moody, gossiping and in some cases unfaithful.

4. *Do you talk about sex with your boyfriend or girlfriend?*

We have to be prepared for the consequences. The problems of the couples stay as part of love.

Message:

The message of School Santísimo Salvador is: Think and inform yourself, when you are about to make a mistake. Think with your head and not with your hormones.

GROUP III

Topic	Group/ Members	School
The experience about the course and your relationship with the teachers	"Las Directas"	Juan Guerrero Quimper – R. I. B. Nª 7098

Questions:

1. *Would you prefer that the course is given separately for men and women?*

Our opinion is that men and women should be together in one group, so they are able to know and exchange ideas and feelings.

2. *In the classes did you feel that your sensibility and dignity were protected?*

In the beginning it was different, but later all of us get to know each other better and improve the relationship between us.

3. *How was your teacher with you? With the group?*

I did not know how to explain it correctly, but we talk about in detail.

GROUP IV

Topic	Group/ Members	School
INTER- GENDER		Juan Guerrero Quimper 3B

Questions:

1. *What is the difference between and man and a woman?*

His way of thinking, feeling, talking and the development of his maturity.

2. *What do you admire the most in men? In women?*

His capacity to achieve its dreams, goals and in some cases its character to face problems.

3. *What do you hate the most in men? In women?*

When they are machos and feel that they have more capacities than women to do certain activities.

4. *Do you talk about sex with your boyfriend or girlfriend?*

Yes, because it is important. It is not only important the communication about the relationship but also about the sexuality because today youngsters are in risk of getting sexual transmission diseases or getting pregnant.

5 *Do you think you have to tell him/her everything?*

Yes, because it is important that they know about our lives without exaggerating.

Message: Communication is the main fundament of a good relationship.

GROUP IV

Topic	Group/ Members	School
SPIRITUALITY	"Los Castos"	Juan Guerrero Quimper / R.L.B

Questions:

1. *What is the virginity?*

It is when a man or woman has not had sexual relationships yet. This is something very precious.

2.- *Do you think there is a spiritual side of the virginity that you can take care of?*

Yes, and you must respect it.

3.- *What do you think is the relation between your sexuality and your spirit?*

It is when you have not had sex with a person.

GRUPO V

Topic	Group/ Members	School
SEXUALITY	"Bad Girls"	Juan Guerrero Quimper – R. L. B. Nª 7098

Questions:

1. *When do you think your sexuality started?. When you were just born?. When you were 2 years old? 6? 12? 15? ...?*

When I was between 11 and 12 years old. When I started to grow.

2. *Do you think you are ready to start your sexual life?*

No, because our body is not developed enough.

3. *Do you believe sex is just sex?*

No, because having sex is different of making love.

4. *What make you think that you are not ready yet? Or that you already are?*

No, I am not because my body is not developed psychologically and physically yet.

5. *Do you think you are able to take care of a baby?*

Not, because a baby needs a lots of care that we cannot provide them because we are very young.

6. *Do you think your partner would be ready to take care of a child?*

No, he is not, because he does not have enough economic resources to take care of a family.

GRUPO VI

Topic	Group/ Members	School
The relationships between partners	<i>“Las Puertas del Saber”</i>	It was not mentioned.

Questions:

1. *Are you sure that you know the person you are dating or do you have a fantasy?*

We cannot be sure because we do not know the people we are dating. We can say that the first time we experiment what it is to be with a person and then it can be a fantasy.

The first time it can be difficult. It depends on how you met in the relationship. If the relationship was free then it would not be difficult to break up.

2. *If you were with a person and then you break up, you break up without problems or you try to stick to her/him?*

Yes.

3. *Have you ever had a boyfriend/girlfriend?*

No

4. How important are the relationships with partners as a couple?

The importance is according to the level of people's maturity. If someone is mature enough in their way of thinking and know how to assume a relationship with a boyfriend, then they will know how to handle it. Being a couple does not mean that you have to be sexually active, but that you respect and trust each other.

GROP 7

Topic	Group/ Members	School
My parents and my sexuality	"Girls Stone"	Juan Guerrero Quimper Rodrigo Lara Bonilla

Questions:

1.- *What did I learn from being away from my parents without being far from them?*

I learned to be independent, responsible, value ourselves and take care of our self-esteem.

2.- *What did I learn about my perception of my parents?*

We are afraid of some things. We want to do things by ourselves. They don't take into account our thoughts and feelings.

3. *Do you think that it is hard for your parents to accept your sexual feelings?*

They don't accept that we have changed in our way of thinking and acting. It is difficult for them to accept when we are in love. They overprotect us.

4. *Do you think that it is hard for your parents to accept your sexual feelings?*

In some cases, they feel afraid of expressing their feelings. There are parents, who are too direct and hurt everyone around them.

Suggestions of the students to the evaluation team

At the moment of picking up the papers worked by the students, we did not pay much attention in the order, so it was impossible to identify, which groups gave recommendations. Below you will find the recommendations:

1. In the course we speak about topics that we already know
2. We should talk other topics like drug addiction
3. We should talk topics related to our parents.
4. There should be more talks. The ones we receive are not enough. They should give us complementary and present videos.
5. We are not listened at home. In the school we can be listened and that should be respected.
6. There are some teachers, who are very serious, strict and not expressive. They should be kinder and more direct because we want to learn.
7. The topics should be work with more detail and information because we do not want to make mistakes.
8. For women the virginity is very valuable, so there would be more explanation about it.
9. The courses must be more interactive.
10. Participation should be promoted.
11. The classes are very well, but they should not be just a workshop, but a complete course
12. The teachers are a bit boring. They should be happier, more specific, more dynamic, and more direct and go straight to the point.
13. They should talk to the parents, so they are able to know what we need from them.
14. It is not good to get pregnant. If your parents trusted you, you don't have to let them down.

EVALUATION DAY 4:

AFTERNOON

Meeting with the teachers of sexual education to prevent pregnancy.

The objective was to have an idea about preparation and attitude of the teachers, who were trained in the course and workshops offered by the YMC. Likewise it was expected to listen to their opinions about the training they received and what their recommendations to improve the YMC support.

Due to the limit of time, the teachers were asked to give their opinions, perceptions, experiences and recommendations directly. Their contribution was:

Teacher 1

- Violence comes from the abandonment, gangs, drugs and homosexuality especially among boys. The sexuality and alcohol trap the girls

Teacher 2

- The subject sexuality has disappeared in the first grades of the schools. Yes, we give classes about values. In the first year of secondary we do not have anything officially programmed about sexuality. We work topics like self-esteem, values, drugs, tobacco, alcohol, projects of life, abilities and goals.
- This is not good. Before we work subjects like gender, sex and sexuality, premature pregnancy, sexual transmission diseases.

Teacher 3

- In third grade of secondary there is not space for working topics like sexuality. I do it, but not officially. I have talked about sexuality and premature pregnancy in the social subject.
- They are children, who are 13 years old. So the topic is interesting for them.
- They are children with many affective lacks.
- I try to give them an optimistic message, so they don't abandon their studies.
- To visit the YMC was an encouraging experience for them.

Teacher 4

- We want that the young people present their own conclusions
- In secondary there are 25 students per classroom and there is only one session per year. We put together 1st, 2nd and 3rd grade.
- They had to draw a picture in which they recognize the sexual organs.
- We asked question about women's period
- We realised that the teenagers did not recognize the difference between sex and sexuality
- We made a big puzzle on sexual system of man and woman. We also prepared cards with the name of each part. Most of the students knew all of parts.
- We talked about hygiene
- We saw a video about the changes in the adolescence.
- We worked with the students of 4th and 5th grade contraceptive methods
- We asked other teachers to give us permission to use more time
- We showed them a video, about how should be the relationship in a couple
- Then we worked with prevention. We requested the students to prepare the reasons of a premature pregnancy and its consequences. With a third group we worked on how to prevent the premature pregnancy. If they forgot something, we helped them to prepare the answers.

Teacher 5

- We received two trainings offered by the YMC in two days from 2 to 9 p.m.?
- The dynamic helped us in the teaching process
- The youngsters knew a lot about sexual issues
- They knew that a sexual relation is not just sex. They knew that all kind of relation is sexual but not necessarily costal
- When they watched a film about the abortion, where a doctor was explaining the risks, they show to be afraid.

Teacher 6

- The sexual subject is treated in the tutorial session in just 1 hour per week. We introduced the sexuality and love subjects in the religion class. And the students liked it.
- Thanks to this, the girls have limited their sexuality more than the boys.
- An interesting dynamic that we have used with the students was to form couples (a boy and a girl) in order to take care of an egg during one month and half.

Teacher 7

- We show them videos to teach them
- In our own families there have been cases of premature pregnancy.

Teacher 8

- I am a maths teacher, but I worked the sexuality Tepic with them.
- The students start their sexual life, when they are 13 and 14 years old. They say that it is like touching the sky.
- We want them to recognize that love and sex is responsibility of 2 persons.
- We would like to have more videos and didactic material.

Teacher 9

- We need more materials
- The present material is strong, but in the part this topic was taboo.
- When I show the materials I felt like I was taking the kids' clothes off and I felt bad.
- I thought I was old fashion, but I know that sex is not only a carnal union.
- The human being is more than that. We have to talk about marriage, birth planning and prevention.
- It will be interesting to open channels, so the students are able to make anonym questions that may help them to protect themselves.

Observations

The participants made observations about the difficulties in sexual education and its contradictions. These observations are included in this report especially in the chapter that talks about teachers training and the training manual.

Other complementary questions

The teachers were asked if they knew the preventive guide published by CMA. They said no because it was recently published. They also said that there was not any monitoring or follow up process from YMC regarding the sexual education program.

When they were asked what was the most valuable contribution of the YMC, they said the way they interact with the students, the dynamics to approach the teenagers. They also said that it was very important, when the YMs visited the schools because they were in contact with the students and talked about their experience. It facilitated that the students face the reality and help them to have a comprehensive and tolerant attitude towards toward the YMs.

In school 1 it was reported 5 to 6 pregnancies and they were not reported to the YMC because of lack of information. In school 2, there was just a case in which a girl had to leave the school.

In the annexes 3 and 4 you can find information about preventive training.

EVALUATION DAY 5:

MORNING

With staff members of YMC and CEDETEP

In order to talk self-sustainability, it was proposed to have a very cognitive meeting with the team, where they could talk about the projects implemented with their own resources including fund raising. The objective was to know the business strategy that influenced them to take decisions about certain projects. In addition to learn about what kind of evaluation was carried out to know the working opportunities for the young mothers and what possibilities of market were available to sell products and services produced in the workshops (bakery, dressmaking, cosmetology, animal breeding and the vegetable garden). Likewise it was observed the kind of business strategies could be considered and what to do to make them available. It was also important to know what strategies of association with development organizations and social help could be considered to raise institutional funds.

It is pending a detailed report from the project accountant, who was requested to prepare a “summary

statement about the annual budget application” from 2000 to 2005 including fund raising detailed by financial fonts. The purpose was to see the trends in the community and international support.

The director Filomena Guillen prepared a summary of the efforts done and the strategy to achieve that the YMC survive in the future. Susana Tapia contributed with information about the strategy. In addition the representative of Medicos del Mundo, Nicolas Gravier contributed with observations. The rest of the team also contributed. Below you will find a summary:

1.- Bakery

The bakery is equipped completely. What it is needed is to increase the scale of production. It was thought to rent a facility to increase the production and diversify the products, so the community gets to know the products better. To do this it is required working capital and income.

2.- Capacity building

It is important to strengthen the institutional image in the community.

Many people do not know about the YMC. It is necessary to publish brochures and prepare posters. It is necessary to spread information about the project and to develop a Web page. It will facilitate the fund raisings, to conquer friends, let the people know about the workshops, get materials and donations for the kitchen and the attention in general. It will also provide a non monetary support for the temporary shelter program, developing to the inter-institutional networks and the agreements.

3.- Kindergarten

If the kindergarten improves then there would be more income from the school fees. At the moment the school fee is S/. 20.00, but it could be increased to S/. 35 or S/. 40.00. There are 87 children now. You should get a computer, a TV, a VHS and paint an external wall.

4.- Volunteering

It is important to promote it.

5.- Technical productive training

It is important to strengthen the handcraft and dressmaking work. The YMC could be a specialist in clothes for babies, which have a great demand in the local market. Of course it will require a special training to achieve good quality, learn about the size and measures adequately. It was suggested to sign agreements with SENATI and TECSUP, so the training offered by the YMC is recognized as good and professional.

6.- Auditorium

It would be important to improve the floor and the lighting, to build a stage and get sound equipment in order to rent the infrastructure for special celebrations like family parties, weddings, etc. Each rent could cost between 150 and 200 soles.

7.- Animal breeding

It was considered to raise animals like guinea pigs and snails. The participants realised that it is necessary to have adequate technical training and follow up.

8.- Foundation Pro Teenage Mothers FPMA

This institution will inherit the YMC. They will have their executive direction and will be operative from 2006. The members of this Foundation will be: the municipality, ASPA , CEDETEP, and SF, until it is guaranteed that the YMC will continue functioning. The Foundation will take over all the projects mentioned above realising that the YMC has been a strong investment. It will also recognize that the YMC does not belong to CEDETEP, but it is a service available to girls and teenagers of the Southern Corner.

It is still pending an updating report on the process of creation of Foundation Pro Teenage Mothers.

9.- Strategic alliance

The French Medical ONG, Medicos del Mundo has worked since 2004 preparing a proposal to support the teenage mothers in health problems in Villa Maria, Villa El Salvador and San Juan de Miraflores, linking their program with the YMC. The project is designed to last 3 years. They have already received funds for the first year. Medicos del Mundo will not provide funds to the YMC or other institution. They will work in the platform of the YMC and will implement health centers. Their idea is to support existing networks providing medical attention to provide sexual and reproductive health care. Medicos del Mundo will improve the understanding of the problem and quality of attention. This contribution must be recognized as merit of the YMC work.

APAPI is an NGO that has worked in the center since June providing assistance to children from 0 to 5 years old. They work with children at social risk. They have an important link with the pedagogical institute of kindergarten and they are looking for funds in Canada. They expect to have an answer between January and March. This could be a meaningful support for the Wawawasi (Nursery) because mothers and babies and the first infancy in general could receive assistance. The idea is not to make any change or improvement in the existing infrastructure, but to support the equipment and

capacity building of the staff.

Observations

Regarding the assistance, it was recommended to get support from the Psychotherapeutic and Psychological Center of Lima, which has a facility in Villa El Salvador and also receive support from the Scientific University of South, which is pretty close to the YMC.

CONCLUSIONS AND RECOMMENNDATIONS OF THE EVALUATION

FULFILLMENT OF RECOMMENDATIONS RESULT OF THE INTERMEDIATE EVALUATION

Regarding the recommendations the following opinions were prepared (text between each recommendation):

- 1. It is necessary to strengthen CEDETEP's capacity building through an open strategic plan that provides long term objectives and strategies, combined with a proactive attitude versus an actual reactive attitude, in order to assure an institutional sustainability and the overcome of the dependency with SMF. This strategic planning should give them a diversified strategy and a project portfolio in order to achieve the expected institutional autonomy.*

It is still necessary a strategic vision. The short term plans are defined, but it is necessary a real exercise of a strategic planning. It is important to refer to the promotion of productive centres and training efforts, because they are mentioned in the evaluation in the chapter of self-sustainability.

- 2. CEDETEP and ASPA should specify their strategy, make it very clear what they want to achieve. Be more specific what groups they want to reach, and how to reach them. Be more specific about their prevention work with students. The strategy should say something about how long time the girls shall receive support from the project, and how ASPA & CEDETEP will help mothers to graduate from the project*

In February 2004, ASPA decided not to renew its agreement with CEDETEP to implement the project together recognizing CEDETEP's maturity and capacity to implement the project alone. Both institutions still have a cordial relationship, but they are not implementing the YMC together.

- 3. Form committees of mothers, committees of parents, to promote the work of the Centre. Use graduated mothers as model cases for self-sustainability in the community. Representatives from both committees should be board members of the Foundation that will be established.*

The YMs Committee and the Parents Association part of the Kindergarten were created, but there is not a Parents Committee. Some YMs have been presented as successful cases of self-sustainability. But the YMs have not been considered as members of the Board because of their age. It was requested to include YMs older than 18 years old and who are already members of community base organizations.

- 4. Focus on leaders and role models in the community. Identify leaders among the adolescent mothers and provide training*

There were cases of YMs, who received support and were identified as leaders. They received training and as result they were able to work in the communities with very good results.

- 5. When more girls enter, they may be grouped in self help groups sharing the same challenges. Focus on graduated mothers who can act as role models for the others serving as mentors. Role models from the parents committee can also work in the self-help groups. Use approaches and methods with the girls to promote self-esteem. Music and drama can be used to express themselves. Access to psychology services for those in need.*

It was done. The Women Emergency Center, Church through volunteers, have provided support, but not as organic self-help groups formed in the Center. The cases that get to the center are immediately assisted by the team. The staff talks with the mother and then the self-help group is formed spontaneously. But there are not forma self-help groups.

- 6. Music and theater could be used to express themselves*

Yes, they are used as means of expression and to grow.

- 7. The center should consider providing psychological services to girls, who need it.*

They receive attention twice a week and they also receive medical attention, but they always need more support.

- 8. Raise the issue of a more solid fence with ASPA, which is in charge of the construction work. Discuss how budget can be adjusted, or increased, to meet the need for a better fence. It seems that issue of the fence is a symptom about how has been built the relationship between CEDETEP and ASPA. It seems that it shows us an inter-institutional relationship which is not very clear in terms of responsibility and functions.*

The fence was built. The project is planning to install an electric fence because the robberies have happened frequently.

9. *It is necessary to explain the terms of reference of this relationship through a clear and open agreement that benefits both institutions and the Center too.*

ASPA decided to end its participation because they considered that CEDETEP was strong enough as institution to continue alone.

10. *To control the process of transferring money.*

They implemented measures like bank accounts, payments with checks. So the project does not transport important amounts of money in cash.

11. *Ensure that the processes improve*

It was done. They don't transport important amounts of money.

12. *To challenge the partners to collaborate with donations in money and kinds.*

The project has promoted institutional relationships with friends achieving financial and in kind donations. These donations had contributed to reduce the operative costs of the YMC. They received donations to finish incomplete constructions and better budgets for construction.

13. *To mobilise resources from the community that also gets benefits from the Center.*

The community is sensitized, they give us clothes, food and also support with volunteers in the kitchen (3 women).

14. *Different methods to recover the money should be tried before asking Stromme Foundation to add up.*

The Church and several other institutions have supported the project, but it is still necessary to mobilize resources. They still need to prioritize the activities related to fund management according to the effectiveness. We have to observe these topics in the evaluation of the budget.

15. *In order to reach more potential adolescent at risk, it should be implemented a better strategy with regards to teachers training in preventive actions.*

Yes, teachers have been trained. See the chapter in this report.

16. *To train, supervise and monitor teachers training in sexual education.*

There was limited training but not enough monitoring or supervision. See the chapter related to this topic in this report.

17. *The female teachers should transmit to the girls the message about prevention and sexuality.*

The strategy was modified. We changed the visits to the schools and conversation with small groups for a strategy to train teachers with a bigger outreach. Now there are professional women of different specialities, who give the classes in the schools. Please see the chapter related to this topic.

16. *To strengthen the public system by training teachers in prevention is in line with Stromme Foundation strategy on Education*

This is a new strategy in the project. See the chapter related to this topic in this report.

17. *To support and add value to the government system, rather than building of separate systems.*

It is done. See the chapter related to this topic in this report.

18. *To invite collaborating organizations to a planning meeting: Challenge all participants with the following question: What can my organization and I do for adolescent mothers of the Project? Promote commitment through specified action plans. Recommended method: Appreciative Inquiry.*

They are working with local networks answering to questions through working tables (Table of kindergarten education, Table of children's and adolescents' rights, Table of Health and Table of Fight against Poverty).

19. *To form a network of organizations working with adolescent mothers for sharing of experiences and collaboration, promote campaigns and advocacy for social policies in favour of the young mothers and youths on behalf of the State and Civil Society.*

It was not formed a real network of support. It is missing an inter-institutional encounter. They have contact with these institutions in an intensive way, but there are not agreements yet. There is a network of contacts, which is in process of forming a real network.

20. *The strategy says that YMs should be trained to be self- sustainable in the future. Then activities should be carefully chosen based on profit and market possibilities.*

See this topic in the present report in the respective section.

21. *Unite with other NGOs supported by SF, and ask the SF Lima to lobby towards the educational authorities to secure teachers in the future projects.*

It has not been done because there is not a similar organization in Lima, but there are groups that participate in campaigns and local demonstrations carrying messages about children's and adolescents' rights and against sexual abuse of adolescents.

22. *Set up strategies to reach a greater number of teenage mothers, communities, school children etc., to make sure more people benefit from the resources invested in the project*

Yes, through promotion and prevention activities. There is more identification at local education authority's level. See the chapter that refers to this topic in the report.

23. *The children should receive treatment for their health problems (as previously). Mothers should be taught health care, baby care and nutrition to better the chance for a healthy life for themselves and their children.*

Yes, it was implemented. There are campaigns like nutritive box lunch, nutritional value of meals, nourishment support of nutritionists and paediatricians, etc. In an abbey there is also the possibility to learn to prepare food.

24. *The partners should be part of the program as to guiding, counselling, health; prevention and childcare is concerned. There should be talks about responsible parenthood theme*

Yes, the project promotes that couples are integrated and they talk with the social worker, psychologist and in the health centres, where they are sent. Most of them don't have a partner. The partners of those YMs, who have, participate in meetings although some of them are reluctant to attend because they think "they are women meetings". They can participate but because of the age and some problems they have or because they are part of the target group, there are more difficulties for their participation. To pair off is not a responsibility of the YMC.

CONCLUSIONS AND RECOMMENDATIONS RELATED TO THE OBJECTIVES OF ATTENTION:

Positive achievements

The YMC is an extraordinary achievement. It is an oasis in the middle of a social problematic that is hard, indifferent and cruel. When entering the YMC, you breathe an optimistic atmosphere, of work,

love and protection with smiles, movement, work, and care for the adolescent mothers and their children. It is evident that inside the walls there are many dramas and the pain is present everyday, but in some way you feel there is not a capacity to reduce the pain or heal it. You may perceive atmosphere of love and spiritual presence in everyone especially in the YMC staff.

However, the YMC is in a serious phase, because they are in the middle of a growing problem, with scarce resources when the project is about to finish.

The goal was to assist 200 YMs within the project period. This number was exceeded and they assisted 425. 27 teenage mothers receive integral support per year.

YMs have received legal support in topics like: (a) filiations, food pension and visits, (b) violence and (c) child's responsibility. There were 104 cases in 2003, 78 in 2004 and 53 in 2005.

63 YMs receive psychological support in 2003, 145 in 2004 and 98 in 2005. In 2003 there were 30 girls in the temporal shelter, 25 in 2004 and 25 in 2005.

In annex 2 there is an excellent and detailed report about the assistance program, which presents the following conclusions:

- There are very meaningful learning and experiences that show the important work done despite the limitations as a human group.
- The YMC is an important and great effort implemented to work with a complex problematic as it is the adolescent pregnancy. In addition the purpose is to intervene in policies that contribute the poverty circle.
- It is necessary to reflect about this experience and to create a network of support by creating effective strategies that expanding the assistance of teenage mothers and their families.

In summary, the assistance and attention offered by the center is very good and with good quality. It shows big institutional and personal efforts. The local institutions recognize and value the YMC and considered it a gender example. When they evaluate the YMC, they often use adjectives like: "excellent", "valuable", "very important". They also say that it has achieved a meaningful impact reducing the number of sexual abuse repetition.

The teenage mothers have found a family in the YMC. It is a family that cares about them and supports them. It is formed by an ethical, good, warm and professional staff including 2 permanent social workers, medical visits and a psychologist service twice a week. The food provided by the center is adequate and it is served in a good environment from a spiritual and emotional point of view. The rooms for temporal shelter have a good standard of hygiene and order, and they seems to be well organized and with discipline although the normal problem that may occur. Young mothers have

received support to continue studying in the school. In addition the center provides nursery service for their kids. There is an excellent infrastructure, whose construction works are almost finished including a surrounding security wall.

In order to provide the different services, there is a supportive network formed by various institutions. The centre receives important donations, mainly goods. In addition they negotiate new agreements of collaboration with other institutions like "Medicos del Mundo", who may contribute to improve the quality and the outreach of the offered services.

Observations and recommendations

Difficulties, limitations and needs to clarify some concept and strategic topics have been detected.

It was perceived that there is a great necessity to have permanent medical attention, especially in the psychological area because this attention is very necessary in a center like this. In addition it is suggested that they consider the possibility to offer individual therapies and family therapies for the teenage mothers, their families and partners.

In order to strengthen the excellent resources of the staff and improve the treatment, it is suggested that all the staff, who is responsible for providing attention and training, is formed in the fundamentals, principles, methods and necessary techniques to have a therapeutic attitude towards the young mothers and their families.

There is a great sensibility about the YMs issue because the trends that condemn their situation and lead to a contradiction between the risk and the need to prevent bad treatments. It is a subject that must be studied and given a solution. In most of the families there is a father or a brother, who criticizes the YM and feels ashamed of her. So it is important to develop resources to avoid that the YMs are hurt in their self-esteem in any situation.

It would be important to offer channels to support the YMs' families and their partners.

About the treatment that should be given to the teenage mothers, it should be given equal priority to their condition of teenagers and mothers, and not more to one side or the other one. It should be avoided that one of these conditions displaces the other. In fact the YMC fulfil this role, but perhaps it should be assumed in a more conscious way.

Some of the evaluation participants think that is better they stay in their home, but it could be a big risk or danger, when the YM was raped at home.

We must give equal priorities to support them as teenagers and mothers. Not to give priority to one of

these options. The YMC fulfils with this responsibility, but perhaps this should be assumed in a conscious way.

About the improvement and complementation of the attention offered, it was recommended to get support from the Lima Center of Psychoanalytic and Psychotherapy; and from Universidad Científica del Sur.

Self-help groups have been formed and that is valuable, but not as part of the formal structure of attention.

The project tried to integrate the teenage mothers' partners in the problematic, but the YMC does not have the role of bringing them together. There are complex problems like the fact that many pregnancy cases happened among adolescents. Some families promote the possibility of living together between these teenagers, but this is not a good idea. The adolescents must take their own decisions in the most conscious way, without losing their condition of teenager.

There are other cases in which the partner is much older than the teenagers, so the law considers them as rapist. Although they want to repair their failure, the YMC does not have the role of bringing them together.

About the legal situation, it was noticed a significant reduction of the attention offered and not enough effectiveness in the problems of legal paternity. The project must take into account this reality.

CONSLUSIONS AND RECOMMENDATIONS RELATED TO THE OBJECTIVES OF PREVENTION.

Positive achievements

The number of premature pregnancy seems to be increasing in the region, but there is not an adequate measurement to evaluate if the project has had a significant effect on that incidence. In 1998 CEDETEP detected 3270 teenage mothers in the Southern Corner. In 2004 "Medicos del Mundo" identified 9970 YMs between 12 and 18 years old. In the first 8 months of the present year 1060 YMs received medical attention in Maria Auxiliadora Hospital. It is suggested to follow up the number of premature pregnancies in the schools in order to have an extra data that report on the trends of this problem among the adolescents.

But on the other hand, it is not reasonable to expect that the YMC project achieve such significant incidence in reduction of early pregnancy. This is an objective that must be redefined. However, its influence has been addressed definitely in the right direction. So now the YMC is an example of how to provide assistance and how to prevent the early pregnancy, despite the limitations that are pointed out in this report.

The efforts in the prevention area were concentrated on: (a) The training of school teachers, so they can be better teachers, and in (b) sensitization and diffusion campaigns. A great number of teachers were trained. There were talks and preventive campaigns for teenagers and teachers in the schools. Detailed data that shows an impressive dimension of the efforts are described in Annex 3 and Annex 4.

Youngsters, who have received training based on the YMC model of sexual education, have given samples of an extraordinary lucidity, great capacity of behaving in public without scenic fear, result of a high self-esteem. In addition they have shown to have very solid moral and social criteria not according to their age and little experience.

It is obvious that their answers are marked by some normal errors of their age, by prejudices of their environment, their parents, their families and our culture, and in some cases they show and say what their teachers want to listen. However, in general boys and girls, who participated in this evaluation freely, can be a reason for their parents' and teachers' pride and certainly for the YMC because it is their contribution.

We do not pretend to attribute to the mentioned model all these personal resources of the interviewed teenagers. In fact we think that the model has limitations, however, we can affirm that the model has contributed to this development. It must be mentioned the teachers' human quality, the spiritual wealth of many families and evident positive attitude of the youngsters.

On the other hand, as product of the work experience and as response to the needs of the training courses for teachers, the team did a great effort to prepare a didactic guide for education about preventing pregnancy, which was published and ready by the time the evaluation was performed. This is an important achievement, despite the critical observations on its content.

In addition the formation in values and the affection provided to the young mothers assisted in the centre have influenced our opinion in a very positive sense regarding their personal, emotional and spiritual development and in the prevention of having an early pregnancy. Finally it is necessary to point out the special effort to form young mothers as leaders providing them a very good training to act in the community.

Observations and recommendations

The main tool with more outreach for the prevention goals has been the teachers training. This training has several limitations that can be overcome and which are listed below:

1. In some cases the teachers training has been very brief and incomplete not only in the range of contents but also in the profundity.
2. It has not been monitored or supervised. Neither the training offered to teachers nor the results in class have been followed up.
3. Teachers have not been trained to handle emotional, psychological and behaviour problems that arise in the processes of sexual education.
4. The training does not cover the subjects related to family relationships significantly, widely and deeply.

The didactic guide for the teachers training is an important achievement. However it is important to introduce meaningful changes on the context and methodology. In order to have an adequate review, it should be checked by institutions like the Doctor School, the Peruvian Society of Psychoanalysis, the Psychologist School and the Psychoanalytic and Psychotherapist Centre in Lima.

It is recommended to offer teachers training in emotionalism and psycho-sexuality for at least 10 months with weekly meetings of 3 hours each one.

Among the teachers, who participated in the evaluation, it was found a great human capacity, great commitment and motivation and the characterized spirit of sacrifice of most of the teachers in the country. However there were inevitable concept mistakes and prejudices, which are part of our own culture and universal culture. One of this, which calls the attention of the evaluation team, was the difference between “sexual relations” and “coitus relation”. It was very confusing the purpose of such difference. On the other hand it was suggested to the participants that all the relations among human beings was “sexual relations” because “we are all sexual beings. It was also notices that some participants made difference between “sexual games” and penetration. With a group that is just starting to cultivate its natural restraint and conscious limits, this situation could be a way to allow them indirectly to have sexual relations without penetration.

We are aware that sexual games are inevitable for most of the teenagers, our mission as grow ups is to promote restraint and postponement of sexual activities. It is evident that the teenagers are going to transgress those efforts of restrain, but they do it as an attempt to affirm their individuality in front of their parents, so they will prepare themselves better for this experience. Our attitude as adults is to promote the postponement and strengthen the natural restrain. Therefore we must be very careful with the words, attitude and behaviour we have and use, when teaching, because they could provoke risky behaviours among the teenagers.

The distinction between “sexual relations” and “coitus relations” seem to push the teenagers to have sexual experiences, without being mature enough. We emphasize that behind these statements there are not condemn or a critique to the youth’s natural sensuality or the need to be expressed through sexual games, which later will take them to their sexual life.

The sexual education model in used is based on the didactic guide that was just published. We think that this guide has several failures that can and must be improved. Details observations are included in Annex 5. Below we summarize the reasons:

- There is no explicit reference about the spiritual resource of love, importance and virtue. There is a total absence of spiritual criteria. The subject of the values is mentioned but there is not any section talking or dedicated to the values topic.
- The subjects related to risks of sexuality (ETS and risk of the pregnancy) are emphasized, based on traumatic testimonies mainly and not in the value of raising awareness about the gift of sexuality and how wonderful is the experience of a beautiful and opportune sexuality. The traumatic testimonies that are offered undervalue the sexuality and the only thing that produce is distress and anxiety in the adolescents, without giving the possibility for a greater understanding of the sexuality or the restraint and healthy delay of the sexual impulse.
- That means that it is not a virtue of the delay, postponement and healthy restraint of the sexuality, nor the recognition of well-being experience of the adolescent.
- Also the project does not work on the spiritual, emotional, physical and social sexual preparation or the normal, healthy and happy maternity.
- In the guide there is an explicit reference about the subjects like anatomy of genital organs in a detailed way, which is unnecessary. In addition this is presented in the beginning of the workshops and not after presenting the necessary resources to handle this topic and without discriminating the eateries groups for its use.
- The topic about the human body is limited to the genitals and not to the body in an integrated sense like a center of: (a) corporal sensations (sensitivity, pain, pleasure, tension), (b) emotions (fear, shame, blame, desire, joy, sadness, etc.), (c) feelings (well-being, malaise, fullness, emptiness, love); and not a center of (d) spiritual experiences (like the joy for being important, the plenitude of love, the prodigy of pregnancy, the breast-feeding, maternity and paternity, the mystic of life creation, the total satisfaction of mutual commitment, the love enriched by the subliming, etc.).
- There are impressions and statements that are not clear enough about the menstrual cycle and the opportunity for pregnancy that may produce mistakes.
- It is not cultivated in the teachers the capacity to listen, to be compassionate and understandable and nor their capacity to handle emotional, behaviour and psychical difficulties of their students.
- The topic about caring of student's dignity and decency is not worked with the teachers in an explicit way. The methodology does not foresee the ways to protect dignity and decency of the adolescents, when facing topics about sexuality, nor mechanisms to facilitate that the students to receive very explicit and confidential consultations, without feeling themselves exposed.

- It is not offered a treatment or classes according to the age groups.
- The contents on adolescence indicate a repetitive knowledge that does not facilitate the approach between teacher and the real difficulties of the adolescent, which has to be with its link to the “law”, the relation with his/her body, the rupture with the family and the sexual initiation. In addition there has not been a revision of the upheavals of youngsters at that age and the serious difficulties that the human being lives at this point of its life.
- It is not spoken about the true processes of the relation in the adolescent, like the topic of idealization of affection, the difficulties to approach and to separate and the inner work to get to know if you are ready for the sexual initiation.

The improvement of the project impact regarding the number of premature pregnancies depends on factors like the ones described below:

- A deepest understanding of the problem
- Improvement of training programs for teachers and students
- Better insertion of these training programs in the education program of the schools.
- Mayor publicity of the activities promoted by the YMC and its vision.
- A deepest work in the community, especially among parents.

The goals regarding prevention have been based in great extent to the teachers training activities, but this training is very brief in terms of time. It does not cover a work with the natural emotional difficulties of the teachers or a clear orientation about the natural psychological process of the adolescence. There are important gaps and conceptual difficulties. It is recommended a teachers training program about affection and psychosexuality, starting with theories, methods and techniques of work and counselling of at least 10 months every week with 3 hours per session.

CONCLUSIONS AND RECOMMENDATIONS REGARDING SELF-SUSTAINABILITY OBJECTIVES

Positive achievements

At the same time of reaching a recognition and position about its functions and roles, the YMC has set up the bases to achieve support from the community and other charitable institutions. They have reached important donations in terms of goods and services improving the project capacity of self sustainability with its own resources.

Part of this achievement that came from the community is reflected in the number of inter-institutional cooperation agreements signed with the authorities, and the progress in the creation of the Adolescents Mothers Foundation with participation of the Municipality. In addition there have been advanced conversations with “Medicos del Mundo” from France to provide and improve the services for the children.

On the other hand, the project is trying to give a commercial vision to the productive activities regarding quality of products and market demand.

It has also contributed in the capacity of many YMs, their partners and families, so they are able to survive in better living conditions. This is the result of the counselling, love and training received. Like we mentioned before, the YMs and their families received training in bakery, cosmetology, dressmaking and gardening.

Observations

During the evaluation it was emphasized the need to promote industrial, services and commercial projects, which are more powerful, in order to contribute to the YMC survival. The YMC functioning is extremely expensive, and it should not be so vulnerable regarding the availability of donations of charitable institutions. It is required to put more emphasis in the trade of its products and services, and do a better evaluation of the feasibility of some businesses. This statement does not deny nor misestimates the importance of the social mobilization capacity that has a project of this type, which due to its humanitarian motivations wakes up important forces for self-help and social support from the community.

In addition it was mentioned that it is not only important to generate funds for the YMC, but to create more channels, so the YMs and their partners are able to find job opportunities to work.

For these goals, we did observations that we describe below:

1. It was recommended to carry out a technical evaluation of the bakery project. In addition it was proposed to intensify its use and if it was possible to make it work 24 hours a day increasing the number of products, improving the quality and variety. In order to implement these actions, it is necessary to have a clear policy of trade, an organization of the production, which is superior and efficient in quality and production. It was recommended to have an overview of the market, a diversification of the products, a precise evaluation of the costs and a policy of prices, which are competitive and realistic. It was considered important that the productive activities are handled like a PYME with criteria of a small or medium business.
2. Regarding the dressmaking workshop, it was recommended to establish links with local industrial zones like Villa El Salvador, to have contact with financial institutions and to establish relations with important companies to provide them with services. So it was considered important to manage the activity as a small or medium business (PYME).
4. About the cosmetology workshop, it was recommended to increase the efforts considerably in order to reach the market by using the existing infrastructure.
5. The existing infrastructure in the YMC is extremely important and must be considered as base for profitable activities and for training. From there, profitable and meaningful activities can arise with

the purpose of generating income and providing employment to the adolescent mothers and their partners.

6. The animal breeding is a problem because of the care that the animals must receive. It was supported the initiative of raising snails, but it was recommended to receive technical support, because the great diffusion of this kind activity could put in risk the non competitive producers.

In addition the evaluation team observed important aspects related to the self-sustainability capacity of the YMC. It was recognized the importance of forming the Mothers Committee, but it was not formed a committee of parents.

It was pointed out that the project trains people, but not teamwork. The cooperative strategies are not found in business.

It was recommended a continuous technical formation and also to sign agreements with SENATI and TECSUP to improve the quality and get a better academic recognition for the technical formation provided by the center. It was indicated that people are trained, but work teams.

Finally, it was recommended to look for support from PROMPEX, COFIDE, and PROVIDA for the productive activities and also to get financing from the banks.

CONCLUSIONS AND RECOMMENDATIONS RELATED TO THE STRATEGIC EVALUATION

Positive achievements

It is remarkable the joy, maturity, human sensibility of the personnel, which are expressed to the young mothers. The young mothers also give examples of human attitude, a positive and nice behaviour, demonstrating a personal growth and an important learning. These facts are the best indicators that the implemented strategy is adequate and right.

The institution has been strengthened considerably. Several campaigns of promotion and prevention have been organized. The message has arrived at unusually important groups of the population, raising collective awareness on sexual abuse and about the difficulties and problems of premature maternity.

There is still a charitable direction, however it is not incorrect. In fact, it is something necessary and inevitable. Therefore it is needed a more solid strategy for its subsistence.

The strategy towards the families encourages the support from parents of the young mothers. It aims to avoid unnecessary punishments in their families, pressure to abort and helps to avoid that young

mothers become victims of ostracism and humiliation. Also the strategy is well oriented because it focuses the professional training of young mothers, as well as the training for teachers about how to prevent the pregnancy through education.

Observations and recommendations

Like we have said in other sections of this report, it is not realistic to expect that the YMC affects the reduction of pregnancy incidence in the adolescents from the Southern Corner of Lima significantly. However its services are definitively oriented in the correct direction. It is not realistic because the dimension of the problem exceeds their possibilities and because there are other factors out of its outreach that make the situation more serious. So it would be necessary to redefine the YMC objective and carry out a strategic planning process in which the community takes part because of its commitment with the YMC.

The young mothers receive a high quality attention, but there are important deficiencies to take into account. For instance the psychological attention must definitively receive a greater priority. The medicine provision must be assured. The nursery (Wawawasi) and the kindergarten must give priority to young mothers' children.

There is a suggestion to evaluate if the YMC should specialize or not its services targeting YMs, who were victims of sexual abuse in their own homes. This will protect the YMs of being exposed to more risks, more violence and abuse. The time defined for their stay would be 3 months, but that is very brief. There are cases in which it is necessary more time, but that would demand some changes in the infrastructure.

The project has worked with local networks, but a specific action plan and a real network of support have not been prepared implemented or formed. The institutions that form this network are:

- Fiscally and Family Court
- Health Centres
- Young Mother Center, CEDETEP
- Women Emergency Center
- Police Station, DEMUNA, Zone Center of the National Police
- Manuel Ramos House
- INABIF
- Ministry of Education, UGEL
- Clubs of Mothers, and
- Other NGOs.

It is recommended that this network has bimonthly meetings.

The return of young mothers to their families is a very delicate and complex subject that must be solved, taking into account the aspects related to the non-functional and functional character of the family that intervened in each case of the young mothers.

FINDINGS AND LEARNING

More than a sign of lack of information on birth control methods, the reproductive system and sexual transmission diseases, the premature maternity, is mainly caused by pathologies and non-functional character of the family provoking the consequent disturbance of the adolescent, its poor self-esteem and absence of healthy limits.

Also it was important to determine that although the abuse and sexual violence are very serious problem, they are not the main cause of the teenagers' pregnancy. 15% of the cases are under that category, but most of the cases (80%) happen at home. This number may have inconsistencies in two different directions. On one side the victims do not denounce the sexual rape, but there is also another group of teenagers that denounced to be raped by other people and not their boyfriends. They just wanted to protect their boyfriends. The first tendency happens more often, but there is not way to confirm it. These numbers emphasize the problem of malfunction in the families.

Promiscuity, cohabitation, overcrowding, low cultural level, poverty, violence, instability in the marriage with the consequent separations, divorce and fights, are united to the absence of emotional, psychological and spiritual work inside the families and the pernicious influence of mass media that trivialize sex in order to increase the number of premature pregnancy.

Premature maternity seems to be a way to replace existential emptiness, with an unconscious attempt to find the meaning of life. Young mothers seem to be looking for reparation of an intense and private bond with their children and perhaps, previously, the same in the relation with a partner, who seems to show them affection, interest, recognition, care and value them.

However it is necessary to recognize that pregnancy and maternity become an emotional resource that somehow may help them to repair themselves internally, but they do not stop facing the other reality. They are teenagers, who need to be protected and who need to finish their physical, intellectual and emotional development.

In reality, what it seems to be increasing is an irresponsible and light attitude of youngsters towards sexuality, the relationships with their partners, which is unstable and considered as "free will". As a contradiction the proliferation of contraceptives may end up promoting this trend. What seems to be the main reason is the absence of healthy models in the family and predominance of pathologies in the relations among couples.

The cultivation of spirituality and love in the family, besides being an evident value itself, it is the main tool to prevent the sexual abuse and premature pregnancies. The cultivation of spirituality and the required love has to be with the capacity of being in silence with ourselves in order to be in contact with the prodigy of being pregnant and the creation of human being. It also has to be with the wonderful experience of a beautiful and opportune sexuality, the joy of being important, the plenitude of love, and sublime experience of breast-feeding and maternity and paternity. The cultivation of mystic, compassion, mercy, commitment is the word love expressed in its highest sense.

Most of the interviewed YMs said that “the most beautiful moment in their life” was at the moment giving birth” or some memory about wellbeing and love in their parents’ house.

Personal problems of young mothers, their pathologies and disorder of behaviour require individual therapeutic but at the same time group therapy. This support is needed during pregnancy and after that too for permanent periods of weekly meetings. Many require an emotional and human support at the moment of giving birth.

Finally, another important finding is the topic related to self-sustainability of the YMC, which need a business management capacity very different from the administration of a center. This is very important because the profitable activities are vital for the survival of a service that is so costly, necessary and transcendent. The management of the center is in hands of very motivated and extraordinary high qualified people, but their weakness is the management aspect for profitable activities. It is evident that the institution is a non-profitable organization, but it does not mean that they do not have to raise fund to achieve their aims. It is necessary to establish activities highly profitable because the cost of its services is very high and they can not depend on the support of social help institution. The outreach of the humanitarian services must be replicated in many other places, cities and areas. Therefore it is necessary to have meaningful resources to start similar institutions.

The budget has been pretty high, especially because of the infrastructure investment. Therefore it was necessary an efficient and effective management. In fact we have the impression that until now, the YMC has not developed enough capacities to generate its own funds, especially, additional funds different from donations that come from the productive capacity and its self-sustainability capacity.

A charitable activity, which is based on important amounts of donations is in risk of disappearing very fast if it does not create its own economic resources.

CONTRIBUTION TO PREMATURE PREGNANCY TOPIC

There is a big problem in Lima caused by the pregnancy of adolescents. It is said the television, gangs, drugs, sexual violence, discotheques, impulsivity of the adolescents, but specially the ignorance about the contraceptive methods and risks of sexual transmission diseases are the responsible.

All that is true, but perhaps it does not include the main cause: the absence of the love and spiritual abandonment, especially at home. When there is a lack of affective expressions at home, lack of communication and hardness, there are already gaps big enough in the teenager's world that makes them look for affection from real or imaginary people.

It is obvious that in that context the teenagers will take their own decisions. Not all the responsibilities belong to the environment. We believe that there is a high rate of real freedom, even in young people, who have suffered a lot in the family environment. It is not good idealise the teenagers saying that they are just victims. Youngsters have options (see annex 1).

A cold and an aggressive environment with gaps in the communication, absence of love and spirituality, makes difficult that an adolescent experiment the beginning of its sexuality in a healthy way, despite the money he or she has.

The pregnancy of adolescents in most of the cases is consequence of searching for love, affection, tenderness expressed by the physical contact, love words of girls and boys, who lack all these things in their homes. In the adolescence, this search for affection is affected by the tendency of idealization, because of difficulties when learning about limits on their way to become adults.

The reason why 20% of teenagers get pregnant is not because of ignorance about the anatomy and physiology of sex or lack of information about contraceptives methods and sexual transmission diseases. This sentence does not pretend to deny that this knowledge is necessary and important, but criticises that it emphasizes on the generation of fears about sexuality, anatomy and contraceptives methods. This tendency, made smooth by values like love and care, could mean that the battle to protect the teenagers is already lost and instead we are making the situation worst.

The natural restraint of sexuality and postponement of the sexual life beginning has a natural and biological fundament that is express with fear, resistance, doubt and natural discomfort regarding the premature progress. It is required to have a better capacity to recognize their own feelings and corporal signs as well as good human relations and values that may help the teenagers to have a life with meaning.

It is important to make a parallel line between artistic education subject and sexual education. The art students do not need greater knowledge on the art tools, like the structure of piano, the nature of fibbers of a brush or the composition of acrylic painting to express their spirit through their art work.

The just need general knowledge unless they want to become producers of musical instruments. The same situation happens with the adolescents, they do not need to know detail of the anatomy of their sexual system in order to learn to love and to live their sexuality in a good way. They need to know more than what it is said in the street, but not in detail. Unless they are interested in being doctors or nurses in the future. They do not need to shown the detailed anatomy, which sometimes may them feel that their privacy is invaded.

When we talk about spirituality we do not talk about religious education, but we do not exclude it either. We talk about everything that has a meaning for life, everything that makes that our actions have a purpose. Everything that is good for the well-being and calm the existential anxieties (human tragedies, diseases and death) produced in daily life. We believe that through the spiritual values we can find enough strength to control, nourish and raise the sexuality and integrate it to cultural forces, so it could be a source for well-being and happiness and help to avoid unnecessary suffering and resist inevitable and the painful situations.

The spirituality culture has to be with a capacity to be in silence with you, to be in contact with the fact of pregnancy and the creation of new human being. It helps to prepare yourself to get to know how wonderful is the experience of a beautiful and opportune sexuality, love, the sublime experience of feeding a baby and the parenthood. It is the cultivation of mystic, compassion, mercy and love words of the love in the highest sense.

ANNEX 1

PREGNANCY IN THE ADOLESCENCE A LOOK TO ITS INNER WORLD

Suddenly the news is confirmed. The impact of such news causes fear mixed with anxiety and desperation. Suddenly she wants to run away. She denies accepting it despite her suspicious... Now what am I going to do? .. What is going to happen?... She touches her belly and she can hardly understand what is happening. She gets confused ... my life ... my parents ... the school ... he... will he accept it?. How will I tell it to him? ...people will notice it ... how I hide it .. everybody is going to notice it.... Why I did it.... I did not think that something like this could happen to me.

If she has a partner, she will tell it to him. And he does not know what to do either. They will have to leave the school to work. Maybe their parents will throw them away from home.... And if they look for help to have an abortion?... Everything will be solved then, but where? ... They are very scared, unsecured, desperate and disoriented.

If she is alone, she suffers alone. She cries a lot. She does not have anyone to share her pain. In both cases the girls refuse to observe their body, which is changing. She does not want to touch herself. Time passes by and she takes time to assimilate and accept all what is happening specially what she is feeling. She refuses to go out, to eat, to change her clothes. She prefers to use bigger clothes. She prefers to be alone at home. When she is asked, she answers: Nothing is wrong”.

While she is struggling to hide her situation, the baby continues growing. But she does not let him grow and then the baby is not able to develop well. Some girls use stripes around their belly. Other girls use tricks to make that their underwear is dirty every month. The true is that if the baby does not have enough space, he/she is not going to grow well. The changes she is suffering make her feel angry and she is not always able to hide the nauseas and dizziness. Her face looks pale and her look is bad. Maybe she won some kilos, but if somebody dares to mention it, she will continue denying it. When she is alone with herself, she gets rid off her fears, confusions and many ideas cross her mind: to run away?... To have an abortion? ... To commit suicide?. Only her best friend knows it.

These thoughts and feelings are often. ... if her partner does not want to accept it She cries and regrets it She hits her belly and she wants to disappear... she feels uncomfortable with her body. ... she feels lost.... But the pregnancy continues. Every time she goes to the toilet, she hopes to see a sign of her period that releases her from her pain. But nothing happens.

Perhaps she will ask her friend to accompany her to the hospital or maybe she will go alone or she does not go. She prefers to waits, while she thinks about a solution. She prepares some things, but she is not able to take a decision.

When her pregnancy is discovered, there is a family and personal shock. Her life changes radically. She must confront her parents, the whole family, the school and her friends. If she receives support, she will feel better and she will make it. Her mother is her best friend perhaps, despite they did not talk much before. The teenager used to be rebel.

She is ashamed of going to school or the hospital to the medical check-ups. She feels that everybody observes her. She feels discriminated and perceives comments about her status. Even the professional at the health centers make comments about her status.

She begins the assimilation, acceptance and preparation process for the labour. In this moment the support of the family and the partner is very valuable. This is given in small portions. She has many ghosts, fears, doubts and she becomes insecure about the baby and the delivery.

When the baby is born, she starts the hardest stage. She faces an unknown, unplanned reality and imposed by the circumstance.

Her tasks are multiplied. The baby demands a lot from her. Many times she does not know what to do. Her mother teaches her some things or perhaps she will have to learn things by herself. The baby gets sick, he/she cries a lot. She gets anxious. She has pain in her breasts and she still remembers the pain at the moment of giving birth. She does not know how to hold the baby in order to feed him/her. She thinks that her baby can falls down. Little by little she learns and she makes mistakes. Sometimes she is confused. She is relaxed, when she sleeps, but when she gets up, she realises that she has a baby at her side. It is going to take time until she gets used to the idea that she has a baby. Little but little the baby will start to form part of her life. She needs company. She has to learn many things, change diapers, wash him, feed him, hold him in her arms, provide him with care, talk to him, play wit him and even learn how to look at him. These things are not going to be easy.

She must leave her friends, games and books aside. She feels like a prisoner of her new situation. She even blames the baby about everything and her frustration. The conflicts appeared. She does not take care of the baby. She let him cry. She gets tired and finally she feels very bad. Why is all these happening?. If she just wanted to be loved, listened, understood and appreciated by someone. She just wanted to leave her home because she had problems, yells and discussions there everyday. She was tired of that and her family problems. She never thought that the consequences would be like these for her. Why he continues with his normal life.

Now everything continues like at home, but for her everything is worst. Now she is not able to escape. Now she has a child and everybody says the same. Now you are a mother and you have to be responsible for you and your child,but how?... if she is just 15 years old. Will she have to work?... what a bout the baby? Who is going to take care of him? . She gets depressed because the problems continue. Everyday she has lots of clothes to wash. She wants to watch TV, but her child does not let her sleep.

In moments like this, many girls end up punishing their children or not taking care of them. Some will abandon them and others will eat them. Some others assume their maternity as a compensation of the lack of love they had. They get closer to their children and feel fine. Some of them will say: "I want to give my child something different and better than I received!... This marks and more real relationship and with better possibilities for both. Despite this is true, they will require company to keep and strength this link along the time that will ensure the child's development.

But why the girls get pregnant?

According to my experience I can say that I found different reasons. The girls don't get pregnant alone, this happens because two people intervene. Two persons start to discover each other. They touch each other and look for opportunities to be alone and suddenly they do not know how to stop each other.

There is not self-control, sexuality appears and something impossible to stop happens. They act through their desire without thinking in the consequences. The game is fun. They fill the gap of lack of acceptance, affection and contact.

Everything is so fast. They do not have enough time to get to know each other better to find similarities, to be friends. They get involve in this kind of experience and they even change partners very fast and then there are many children, who are not recognised by their parents.

I had case in which the girls just know the name of their child's father. There is a previous knowledge of the anatomy and physiology of their bodies and also about the contraceptive methods. But when it is time to use them, they do not do it. They feel ashamed, incapable to propose the possibility to use the contraceptives. The prejudices have more value than what they learned. They are in a hurry to feel and discover, how does it feel and they end up being convinced that nothing will happen.

They have a scarce value of themselves and their body. It does not matter if they are touched. There are no limits. The boy can continue and the girl will let him to invade her. She does not show to be against that. Her mind does not want to do it, but her body does it. Then she feels guilty. If she gets pregnant the boy will not assume its responsibility because if she did it with him, then she also did it with other boys. They are girls, who are always living at the edge, being at risk all the time not only of getting pregnant but also to get a disease (ETS, HIV, etc.)

There are difficulties to take decisions and to make plans for the future. This is not included in any education program and the parents do not work them out with their children at an early age, because in places like this everybody lives in a hurry to get the daily food. Nothing is foreseen. Tomorrow is not important and boys and girls copy this way of living.

Kids are confused with sex and love. They think that making love is having sexual relations. To like each other is just enough to do it. The feelings are not always important although sometimes they (the girls) will say that they fall in love. When I asked them: do you love him?... They will answer: I do not know, because he did not behave well with me.

But it is true that when they are pregnant they become stronger and they say that they will fight for their children. Love and responsibility arise.

I think that when the girl leaves the center, they should have a contraceptive method and lots of information about ETS and HIV/AIDS. Many of the girls, who come back to visit the center come with their second child or they are pregnant. Not always their second child belongs to the same partner.

What can we do?. The preventive area must emphasize the development of social skills, so they are able to handle the information in a better way.

They should include personal aspects like: What am I going to do with my body, with myself, ... sincerity, Respect rights.

We should work aspects related to the identity and values, affective relations and power relations, lack of communication with the family. There should be good information and knowledge about contraceptive methods.

I believe we may contribute to diminish the number of premature pregnancies through promoting equal relations of gender. I think we can design and manage an intervention program as institutional goal.

I am sure there is a lot to do with and for the teenagers, who are the beneficiaries of the Project in order to contribute to their sexual and reproductive health and prevent early pregnancies. So they are able to learn to take their decisions about when and how to protect themselves, in order to improve the relationship with their parents, learn to value themselves and be stronger. So they learn to control themselves and establish limits. They have goals for their future and they do not need to depend on others....

Esperanza Marchán (Psi.)

ANNEX 2

YOUNG MOTHER CENTER PROJECT REPORT ABOUT ASSISTANCE PROGRAMS

1. LEGAL ATTENTION:

The following cases were assisted:

- **Filiations, food pension and Schedule of visits:**

Teenage mothers and their families are advised about the proceedings they must do. Regarding this aspect the following limitations were found:

- The father avoids its responsibility "it is not my child"
- The teenage mother does not know the address of the father because she had an occasional affair or in some cases they moved to another place and lost contact with or without intention.
- The father does not have personal documents or he is not old enough.
- The teenage mother does not have identity documents because some of them come from other towns. So they do not have a birth certificate.
- The father does not have a stable job, so he does not have permanent economic income.
- The teenage mother's family is against the relation between father and child.

The adolescent mothers decide not to register their children or they give them just their family name and then they assume their child's care with the support of their families.

- **Violence:**

The young mothers and their children are permanent exposed to violent situations because of the social emotional context in which they are. So they develop conflictive relations with their families and partner.

UIT regards to that situation, the teenage mother and her family are oriented about the outreach of the Law against Family Violence and Child's and Adolescents Code as well as about the proceedings to follow the cases of violence: denounce evaluation and recovering.

In several occasions, there is not an effective attention and the violence continues. That hurts the emotional health of the teenage mother and her child and the violence goes on.

In case of violence and according to our experience we consider necessary to denounce the situation, but it is also important to take the necessary actions in order to promote the emotional recovery of the victims.

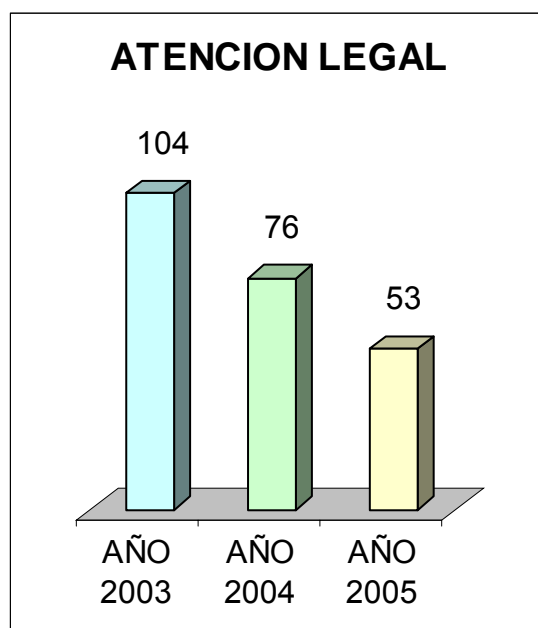
When violence happened inside the family, it is hard that the teenage mother denounce the aggressions because she loves her family. According to the case, the project works with the family and takes necessary actions to protect the integrity of the mother and the child.

- **Tenancy:**

There were cases in which the tenancy of the teenage mothers is assumed by the family temporarily because of behaviour or emotional problems of the mother. So she is no able to take over such responsibility because it could be a risk for her child. In order to take that decision the project coordinates with the network of institutions to evaluate the case and collect all the necessary documents to support the decision.

In other cases the teenage mother and the child's father want to assume the responsibility. So they are advised about the proceedings.

In the attention program, there is not a lawyer responsible to assist these cases, so there are derivate to institutions that form the network of support. Unfortunately there is an overload of cases in the court, so the cases are delayed. The lack of effectiveness and the costs have generated mistrust on behalf of the teenage mothers and their families, who after some time give up the case. It reflects on the number of persons that request the service from the YMC.



2. PSYCHOLOGICAL ATTENTION:

Most of the YMs come from families, who are not so affective and with many problems in which the roles are not performed adequately. There are conflict, lack of communications and economic problems.

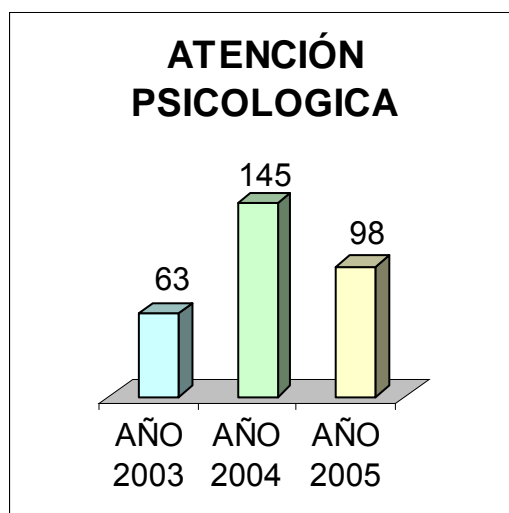
The YMs have normally problems with their partners. They seem to be very worried because of the pregnancy and the great responsibility of being a mother. They express to be afraid of educating and up-bringing their children with care and love without using violence and punishment. They say that they need lots of care, approval and comprehension.

In some moments they are very sad and depressed. Sometimes they are aggressive with themselves and show emotional attitudes that need psychiatric treatment.

They lack of information regarding sexuality and self-care. There is a conflict between their desire to live their adolescence, become mothers, live with love and be happy with their families.

From the need of attention the demand of psychological attention has been increased. There is a psychologist in the centre, who works in the afternoons twice a week. She assists the YMs, kindergarten children, parents and members of the community in general. She also supports the preventive activities. In addition the project has facilitated psychological service from some institutions that are part of the network or volunteer professionals.

Through the experience of work it is possible to affirm that it is important to expand the service in order to achieve the emotional recovery of the target group, who are the YMs and their family.



3. TEMPORAL SHELTER PROGRAM:

This program provides shelter to YMs and their children with care and dedication.

The working experience has made possible to define the purpose and outreach of this program and be known as institution because the proposal of work is different from others. It has integral character. Therefore the program is at the moment a program with great demand of attention because of the characteristics of the population but also because of efforts and budget invested.

Through this program two types of cases receive support: if the family request or if the public institutions (Court, Ministry of Women, Police Station, Church, Social Organizations, etc.) do it. The time of stay is at least 3 month, however the nature of the case, it may be extended. That means that it would be necessary more budget.

In order to provide attention we coordinate with institutions that belong to the network of support. These are the limitations we find:

- Population with a complex problematic, victims of sexual abuse, abandonment and family violence, with strong emotional problems (psychiatric), with behaviour, adaptation problems, health problems. These meant great institutional responsibility, efforts to assist them and get their recovery.
- Frequent problems of health in the population that demand attention because of the lack of preventive habits like the weather changes that affect their children's health.
- Absence of family and lack of personal documents because the majority comes from town outside Lima.

From the assisted cases it is important to mention the positive effects, which are an example for the rest of YMs. It is important to mention that the fact of living together has generated exchange and learning processes and self-help and solidarity attitudes.

This program represents a great performance, commitment and responsibility, because the participants are in a formation process and their needs are very urgent. They do not only need material things but also emotional in order to recover and integrate them.

Through this program the YMs receive:

- Emotional recovery.
- Health care.

- Food.
- Possibility to continue their education.
- Vocational training.
- Spiritual formation.
- Legal support.
- Family attention.
- Nursery and kindergarten.
- Counselling.
- Formation workshops.
- Personal and social formation.

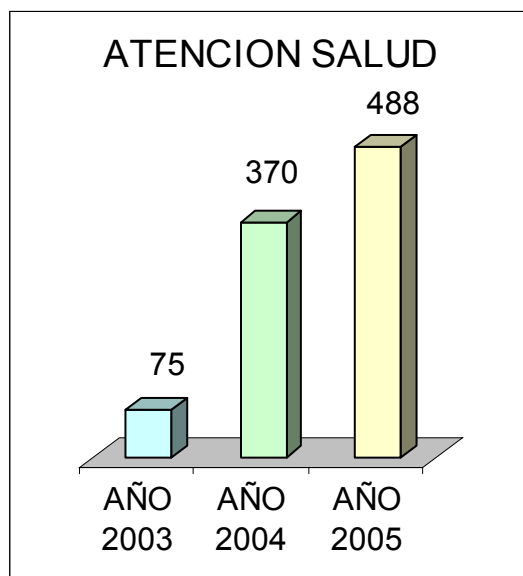
It was also a work of raising awareness in the community and institutions in order to promote:

- Non discrimination of mothers and their children in the community.
- Effective procedures for managements and attention of cases (Centers of Health, Hospital, Courts).
- Shared support for the attention of YMs and their children with expansion to external YMs.
- The voluntary support from sensitized professionals



4. HEALTH ATTENTION:

YMs and their children have been supported in coordination with institutions that are part of the network of support and volunteer professionals, which facilitate the number of assistance is increase.



The project got the integral insurance of health (SIS) for YMs and their children in the temporal shelter. The external YMs were advised about the benefits and limitations of the SIS and also the proceedings to get it. Some cases were also supported thanks to the medicine provided by Medicos del Mundo NGO.

These were the main reasons of medical attention:

YMs	Children
Control of pregnancy	Vaccination
Analysis for pregnancy control	Control of growth and development
Delivery or Caesarean	Bronchial Syndrome.
Control post delivery	Laryngitis
Typhus	Pneumonia
Anaemia	Bronchitis
Urinary Infections	Diarrheic Disease
Vaginal Fungi.	Conjunctivitis
Gripe	Otitis
Diarrheic diseases.	Epilepsy
Laryngitis	Parasitism
parasitism	Acarosis
umbilical Hernia	Impetigo
Migraine	Under nourishment
Discarding TBC	Traumatisms
Acarosis	Anaemia
Dental Decay	Hurt.
Acne	Physical therapy

	dental Decay Therapy physical Caries dental
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Most of the health attentions are offered to the participants of the Temporary Shelter Program; who due to the little instruction they are lack of positive habits regarding prevention of diseases; and the influence of the changes in the weather, which affect their children.

During the work experience there were very serious cases of children with health problems, who recovered thanks to good care and responsibility.

At the moment with the purpose of reducing the health problems, we follow up the medical indications and we also take preventive measures in basic aspects like hygiene, balanced nutrition and child's care. In addition the center provides preventive talks on health topics.

The SIS has contributed to reduce the cost of medical attention of the center. However they were not able to give us all the necessary medicine.

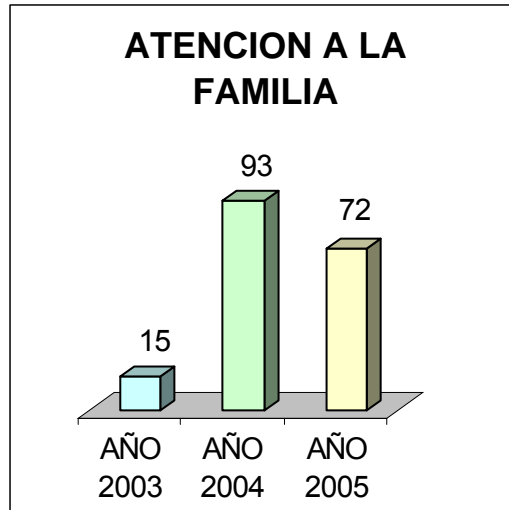
5. FAMILY ATTENTION:

Parents and partners have received support in order to promote a better family environment for the teenage mothers and their children.

They normally request:

- Irresponsibility of the adolescent mother, parents or partner
- Opposition of the parents of the adolescent mother to have a relation with her partner
- Abandonment, psychological and physicist mistreat from her parents or partner Family problems or tolerance
- Economic problems that affect to the adolescent mothers and their sons Discrimination of the adolescent mother in her family, school or community

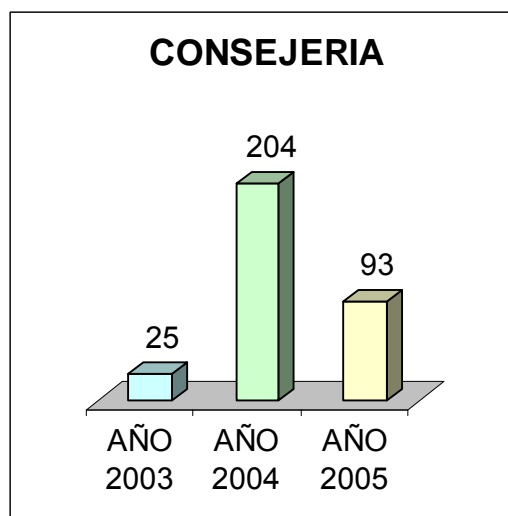
Families are invited and the project provides them with advice and also sensitizes them previously, then we analyse the different opinions and establish commitments and agreements about possible steps. According to the case, it can be sent to institutions that are members of the network of support in order to provide them with the necessary legal support.



6. COUNSELLING:

The YMC offers counselling and follows up the YMs in the following topics:

- Hygiene.
- Child's care.
- Values.
- Respect, living together and tolerance.
- Responsibility.
- Love and friendship.
- Solidarity.
- Importance of the family, etc.

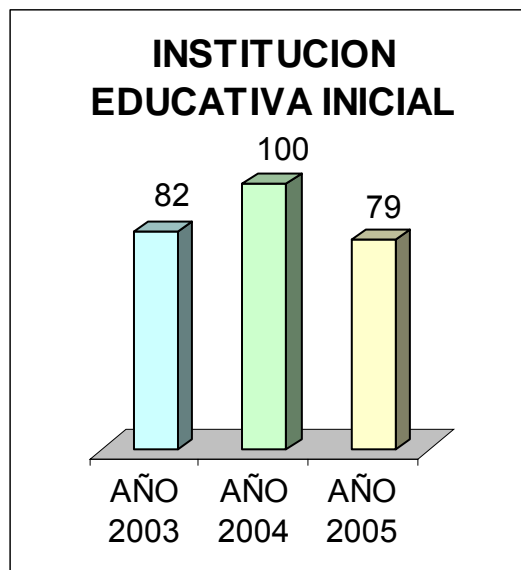


7. KINDERGARTEN:

This service is offered to children between 3 and 5 years old from the community and some teenage mothers' children. There is some work with parents motivating them to participate in their children's education process.

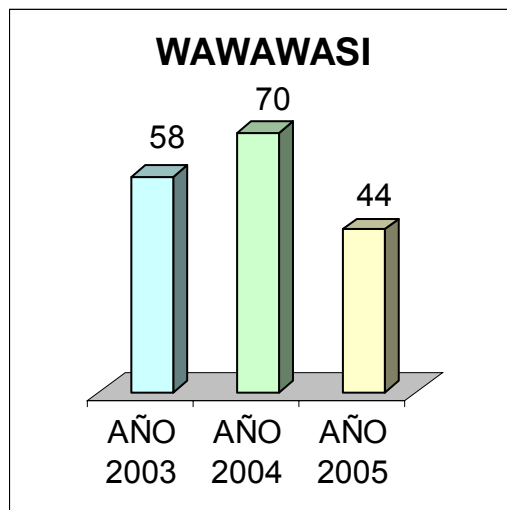
Parents pay a monthly school fee that contributes to the economy of the center. Some parents, who have been considered as social cases, are exonerated of the monthly fee and support in different activities like preparing food in the kitchen, animal raising and gardening.

The project offers a program for parents called school for parents. The topics related to psychology, legal, health because they contribute to improve the quality of life of the community.



8. WAWAWASI (NURSERY):

It provides attention to children from 6 months to 3 years old. Most of them are young mothers' children and some from families of the community. The mothers are sensitizing in topics like health and stimulation. so they can provide an adequate attention to their children.



9. Perceptions:

From the experience it is important to recognize that:

- There are meaningful and satisfactory learning and experiences that show the important work done despite the limitations as human group.
- The YMC is an important and great effort to work with premature pregnancy problematic and to influence the policies to break the poverty circle.
- It is necessary to think about this experience and request support of the institutions member of the network of support, to create effective strategies that extend the attentions towards YMs and their families.
- It is important to strengthen the register of information system in order to have more precise data about the supported target group.

Lic. Rosemary Atencio Merino
Social Worker

Font graphics:

- Annual Narrative Reports 2003 and 2004
- Half year and quarterly narrative reports 2005 (January to September 2005).

ANNEX 3

ACTIVITIES IMPLEMENTED WITH THE PURPOSE OF PREVENTING EARLY PREGNANCY AMONG ADOLESCENTS 2000 AND 2004

2 000

It was promoted 8 hours per month, so 72 hours per year in the Radio Program “New youth and life”, which was in charge of a teacher, with participation of specialists: lawyers, doctors, psychologies and teachers.

2001

It was continued the work in the radio with support of specialists.

Talks about pregnancy prevention were organized making use of posters and brochures. These talks were carried out in schools with groups of 5th grade of secondary: 479 students.

2002

- Talks about consequences of the adolescent’s pregnancy in 8 schools of secondary.
- The Project received 500 students of different schools. They came to find information fro their school work and had the chance to share with teenage mothers.
- 70 children from 9 to 16 years old of “Chamberos” program implemented by the national police participated in some talks about “personal development and self-steam”.
- We participated in a capacity building course offered to 70 teachers by School Jerónimo Cafferata. We were one of the speakers.
- April- December
- Radio program with 8 young mothers’ leaders in charge of the program. There were specialists invited.

2 003

- The radio program continued with the same format inviting specialists like doctors, psychologist and politicians.
- It was organized a talk about the consequences of pregnancy in the adolescence in 5 secondary schools.

Participants	Quantity	%
Shanty town	16 people	1.3%
Community base organizations	55 people	4.5%

Students assisted by the project	185 pupils	19.8%
Parents of the schools	243 parents	19.8%
Pupils of the schools	731 pupils	59.4%
Total	1230	100%

In 5 communal kitchens of AA. HH. San Camilo de José Gálvez the Project offered talks about pregnancy prevention.

2 004

Participants	Quantity	Observations
IE. Juan Guerrero Quimper	32 teachers	Use of the didactic guide
IE. 6015	29 teachers	Use of the didactic guide
IE Ollantay	32 teachers	Use of the didactic guide
IE Perú EE.UU	20 teachers	Use of the didactic guide
Total	113 teachers Tutors	4 200 pupils
IE Juan Guerrero Quimper	147 pupils of 2nd and 5th years of secondary	Talks and workshops There are 3000 pupils in this school: works in 3 schedules.

Visitors:

Participant	Quantity	Observations
Universidad Enrique Guzmán y Valle" La Cantuta	20 pupils with their teacher	Consequences of pregnancy.
Total	20 pupils and 1 teacher	

Visitors:

IE San Luis Rey de Surco	25 pupils	Workshop with YMs.
IE San Luis Rey de Surco	22 parents	Workshop with YMs.
IE Villa María	25 pupils	Workshop with YMs.
IE. Juan Valer Sandoval	23 pupils and 5 teachers	Workshop with YMs.
IE. José Carlos Mariátegui	71 pupils	Workshop with YMs.
Total	171 assisted	

- Municipality of Villa Maria: Day of no violence against women.

Community Facility of José Gálvez

Participants	Topic
74 people	Prevention of sexual abuse

ANNEX 4

TRAINING WORKSHOPS CARRIED OUT IN THE YMC IN 2005

Teachers and students of the schools (guided visits and organization of workshops)

N	SCHOOLS	DISTRICT	ASSISTED POPULATION	ATTENTIONS <i>Topic</i>
1	I.E MARISTAS DE SAN JUAN	San Juan de Miraflores	Adolescents : 147, teachers 10	Consequences of Adolescents´ pregnancy In the YMC
2	I.E. NUEVO PROGRESO	Villa María del Triunfo	Adolescents: 365, teachers 20	Consequences of Adolescents´ pregnancy In the YMC
3	I.E JEAN PAUL LE BOULCH	Surco	Adolescents: 81, teachers 4.	Consequences of Adolescents´ pregnancy In the YMC
4	I.E JUAN VALER SANDOVAL	Villa María del Triunfo	Adolescents: 29, teachers 5.	Consequences of Adolescents´ pregnancy In the YMC
5	I.E LATINOAMERICANO	Surco	Adolescents: 180, teachers 4.	Consequences of Adolescents´ pregnancy In the YMC
6	I.E JOSÉ CARLOS MARIÁTEGUI	Villa el Salvador	Adolescents: 35, teachers: 4	Consequences of Adolescents´ pregnancy In the YMC
7	I.E JOSE MARIA ARGUEDAS	San Juan de Miraflores	Adolescents: 59, teachers 4 .	Consequences of Adolescents´ pregnancy In the YMC

8	I.E VILLA EL SALVADOR	Villa el Salvador	Adolescents: 1st workshop : 27 2nd workshop : 10 TOTAL: 37 students and 7 teachers	Consequences of Adolescents' pregnancy In the YMC
9	I.E RODRIGO LARA BONILLA	Lurín	Teachers: 25	1. Teachers training In the School
			Adolescents: 1st workshop : 80 2nd workshop: 27 3rd workshop : 80 4th workshop 28 TOTAL : 215	Consequences of Adolescents' pregnancy In the School
			Parents: 139	1. School for Parents In the School
10	I.E SANTÍSIMO SALVADOR		Parents: 121	1. School for Parents In the School
		Pachacámac	Teachers : 30	1. Teachers training In the School
11	DOLORES CAVERO DE GRAU	San Juan de Miraflores	Parents: 115	1. School for Parents In the School
			Teachers : 19	1. Teachers training In the School
12	ELOY GASPAR URETA	Villa María del Triunfo	Teachers: 19	1. Teachers training En la In the School
13	6060 JULIO C. TELLO	Villa María del Triunfo	Teachers: 15	1. Teachers training In the School

14	BARTOLOMÉ MITRE	Villa María del Triunfo	Teachers :15	1. Teachers training In the School
15	6023	Lurín	Teachers : 26	1. Teachers training In the School
16	PERU ESPAÑA	Villa el Salvador	Teachers: 15	1. Teachers training In the School
17	SAN MARTÍN DE PORRES	Lurín	Teachers: 18	1. Teachers training In the School
18	SASAKAWA	Villa el Salvador	Teachers: 10	In the YMC
19	DOMINICO SAN MARTINCITO	Villa María del Triunfo	Parents: 60 Teachers: 5	1. School for parents In the School
20	MAX UHLE	Villa el Salvador	Teachers: 12	1. Teachers training In the School
21	VIRGEN DE FATIMA	Villa el Salvador	Parents: 61 Teachers: 10	2. School for parents In the School
22	FAUSTINO SÁNCHEZ CARRION	Lurín	Parents: 72 Teachers: 6	3. School for parents In the School
23	JHON F. KENNEDY	Lurín	Teenage leaders: 10, with 1 teacher	Consequences of Adolescents' pregnancy In the School

TOTAL		Adolescents : 1 158 Teachers 284 Parents 568	284 x 35 : 9 940 Adolescents informed about the consequences of Adolescents' pregnancy
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Schools that participated in 6 training workshops part of the didactic guide Prevention of Adolescents' pregnancy

SCHOOLS	DISTRUCT	N° TEACHERS
I.E RODRIGO LARA BONILLA	LURIN	25
I.E SAN MARTÍN DE PORRES	LURIN	18
I.E. 6023	LURIN	26
I.E SANTÍSIMO SALVADOR	PACHACÁMAC	30
I.E DOLORES CAVERO DE GRAU	SAN JUAN DE MIRAFLORES	19
I.E JULIO C. TELLO	VILLA MARIA DEL TRIUNFO	15
I.E ELOY GASPAR URETA	VILLA MARIA DEL TRIUNFO	19
BARTOLOMÉ MITRE	VILLA MARIA DEL TRIUNFO	15
PERU ESPAÑA	VILLA EL SALVADOR	15
Total		182 TEACHERS
182 teachers were supported with the training. Each one of them is in charge of about 35 students. That means that we reached at least 6,370 adolescents.		

SEMINAR OF INTEGRAL PREVENTION, Summer 2005

In February 2005, 150 headmasters, 50 teachers of kindergarten, 50 of primary and 50 of secondary were trained by CEDTEP. The main topic of the seminar was Prevention of Adolescents' Pregnancy and it was used the didactic guide prepared by the project. The event had the participation of institutions like UGEL 01, OPCION, WEC, MEDISOL, who were part of the working table of Integral Prevention.



ANNEX 5

EVALUATION OF THE DIDACTIC GUIDE ABOUT PREVENTION OF ADOLESCENTS' PREGNANCY

Detailed information

In the paragraph about "what are the sessions about", it seems that they refer to the objective and dynamic of theory class rather than to approach to the human sexuality.

"To explore, to develop and to come to a conclusion" are basic cognitive processes that are elements to prioritise the sexuality topic. However sexuality is a topic that demands emotional, spiritual, psychic and social-relational covering, more than a cognitive way of talking.

In the same paragraph, it is presented a "confident environment", but it is not specified what confidence is, how to achieve it and if it is possible to achieve it.

Observations

MODUL 1

They start showing the anatomy and reproductive physiology, as well as some general concepts about the adolescence. These contents have not been presented with the purpose to understand the adolescent and youngster as individual person

The contents about the adolescence show a repetitive knowledge that does not promote the approach of the teacher to the real problem of the adolescent, which have to be with their link to the "law", the relation with their body, the conflict with the family and the initiation of their sexuality. They have not done a review of the disorders that appeared in the adolescents' life according to their age.

The presentation of Modulo 1, it seems to be invasive and repetitive for those who does not know it well

It is important to point out that all the modules start with traumatic testimonies that undervalue the sexuality. They only produce anxiety and anguish among the adolescents without giving them the possibility to understand their sexuality.

It starts from the scheme that says "you made a mistake then I punish you". This attitude does not favour the self control and self-knowledge.

In another moment it refers to "gather previous knowledge" with direct questions. I believe that previous knowledge must be gathered carefully and not with questions but with thematic.

In this module there is a diagram of the menstrual cycle that should specify the fact that its validity depends on regularity of the period. In the text talks about the possible regularity and irregularity of the cycle, but as it is an important diagram, it should include such reference

The diagram on page 33 at the bottom of the page is more confusing, because we have the words "YES" or "NOT", but it does not specify what it is about. Perhaps it would have to say, the other way around, that - when there is a regular cycle – THERE IS POSSIBILITY TO GET PREGNANT ON days 9 and 20. An in the other spaces it should say IF the PERIOD REGULATE, PREGNANCY WILL NOT HAPPEN. As it is known the rhythm method is not so secure. So I think that the text should say that it is a scientific approach to protect against pregnancy. It is risky to trust that method, not only because of the possible irregularity of menstrual period but because it is complicated to follow the method.

We also criticize the fact that it is used the words "YES" and "NOT" because, obviously, it refers to "Yes, it is possible to have sexual relations without risk", or "No, you should not have sexual relations because there risks to get pregnant". Some of these implicit affirmations are a way to allow premature sexual relations. On the other hand they present a security of not getting pregnant, which is not so reliable.

All the activities seem to be part of an anatomy course and not sexuality. In my opinion it should be reviewed and moved to the last pages of the guide.

MODUL 2

It is a module that talks about the relations among adolescents, but leaves big gaps about the relationship itself. There are several contradictions because they mix several topics (masturbation concepts and affective relation based on respect, loyalty, confidence and sincerity) in one point

It does not talk about true processes of a relation inside the adolescent, like the topics about idealization of affection, difficulties to approach and to get away. It does not even talk about how to know if the adolescent is ready to start his/her sexual life.

There is not a space to see the relevance of the relationship of a couple.

In the second session, in the exercise "Do you love me?"

When the participants seat one by one in the middle of the meeting and everybody ask one of the participants: "do you love me...?" and they answer: "Yes, but I also love....". This could aggravate the actual tendency to trivialize the affection and could be a way to humiliate the adolescents. Everybody has the right to be loved in a special way and not to be exposed to comparative affections.

Again the module starts with a traumatic story.

MODULES 3, 4 and 5

They are adequate modules in its content and form. However we point out the aspect of the testimonies or stories that are used to start the module. In module 4 the "types of behaviour" that may happen are described, but there is not an explanation about how the teacher will handle this emotional reality of the adolescent.

MODULO 6

It is a chapter totally disconnected of the previous ones. There is not connection between the relationship and sexuality. It seemed to be an anatomy and physiology class that mentions the risks that the adolescents will face. This increases the level of anxiety of the youngsters instead of generating a healthy contact themselves and the partner.

ANNEX 6

LIST OF EVALUATION PARTICIPANTS

Staff of the YMC and CEDETEP:

MEETING BETWEEN THE EVALUATION TEAM AND CEDETEP AND PROJECT STAFF.	
DIANA GONZALES CIPION	: SECRETARY
MIRIAM CASTAÑEDA	: ACCOUNTANT
LIVIA VILLAFUERTE ASTO	: RESPONSIBLE OF THE PREVENTIVE AREA
HILDA TINOCO A.	: TEACHER IN CHARGE OF 3 YEARS OLD CHILDREN
CARMEN SANTISTEBAN	: TEACHER IN CHARGE OF 4 YEARS OLD CHILDREN
ESPERANZA MARCHAN	: PSYCHOLOGIST
RAQUEL BRAVO S.	: TEACHER IN CHARGE OF 4 YEARS OLD CHILDREN
BERNARDINO MANRIQUE	: GUARDIAN

External institutions:

MEETING BETWEEN THE EVALUATION TEAM AND REPRESENTATIVES OF EXTERNAL INSTITUTIONS ON 28.11.05

NAMES	INSTITUTION
ZOLIA OTILIA CAHUI PURHUAYA	IE. 7239 SANTISIMO SALVADOR teacher
CARLOS RUFINO DOMÍNGUEZ A	IE. 7239 SANTISIMO SALVADOR
MARTÍN ZAVALA	IR 7239 SANTISIMO SALVADOR
MAXIMINA YOLANDA MORA E.	IE 7239 SANTISIMO SALVADOR
BEATRIZ MOLLCAPZA TITO	IE 7139 SANTISIMO SALVADOR
ORFELINDA IMELDA SARMIENTO	IE 7239 SANTISIMO SALVADOR
MARTHA MENDOZA OROS	CLUB DE MADRES MICAELA BASTIDAS.
MARIA ATOCHE GUTIERREZ	(PRESIDENTA)
MICAELA MAVILA SALON	CEM-SJM.-MIMDES
DRA. MARIELLA PITA MEJIA	MAMIS- HOSP. MARIA AUXILIADORA
YOLANDA SOTO ROJAS	HOSPITAL MARIA AUXILIADORA
HILDA GUTIERREZ PAREDES	IR 7239 (DOCENTE)
SILVIA GONZALES VASQUEZ	IE 7098 RODRIGO LARA BONILLA teacher
CECILIA CABREJOS PEREZ	IE 7098 RODRIGO LARA BONILLA

NADINE ALBORNOZ CHIRINOS FLOR MARIA DELGADO G. EDITH CARRASCO OLIVAS NARCISA YZAGUIRRE RAQUEL CHAMORRO MENZALA JOSE CRUZ RABANAL SHIRLY GAMARRA P. CARMEN DE LA CRUZ AVALOS EDITH TOVAR VELIZ ALICIA SOSA SOTO MARTHA ZOLIA JURADO SOFIA PARRAVICINI CABALLERO JULIO CESAR QUISPE LL. ROSEMARY ATENCIO MERINO LIVIA VILLAFUERTE ASTO ANDREA LOTHE JENNY QUISPE ICHPAS JOHANNA ORMEÑO ARIAS	IE 7098 RODRIGO LARA BONILLA HNAS. CARMELITAS- IGLESIA 19 Y 2DO.JUZGADO MIXTO DE VMT. MIMDES-CEM- VES. CLUB DE MADRES M. PARADO UGEL 01 SJM. REGIST. CIVIL MUNICIPALIDAD VMT. DEMUNA MUNICIPALIDAD VMT. IE 7239 SANTISIMO SALVADOR IE 7239 SANTISIMO SALVADOR OBSTETRIZ- CEDETEP IE 7239 SANTISIMO SALVADOR teacher CMI. JOSE GALVEZ- MINIST. SALUD CAMISARIA PNP JOSE GALVEZ CEDETEP CEDETEP VOLUNTARIA ACT NOW COMITÉ MADRES ADOLESCENTES COMITÉ MADRES ADOLESCENTES
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Students, family and partners

MEETING BETWEEN THE EVALUATION TEAM AND SCHOOL STUDENTS ON 29.11.2005

NAMES	SCHOOL
MISAEEL PEREZ ALVARADO	IE SANTÍSIMO SALVADOR
MAXWELL MENDOZA P.	IE. SANTÍSIMO SALVADOR
JUNIOR DE LA CRUZ QUISÉ	JUAN GUERRERO QUIMPER
CARLOS CASTILLO	JUAN GUERRERO QUIMPER
ROCIO MENDOZA ARMAS	JUAN GUERRERO QUIMPER
RENE HUAYHUAS CCACCYA	JUAN GUERRERO QUIMPER
NATHALY DURAND P.	JUAN GUERRERO QUIMPER
PILAR GUTIERREZ H	JUAN GUERRERO QUIMPER
MARIA QUISPE Y.	JUAN GUERRERO QUIMPER
SUSAN DIAZ M.	JUAN GUERRERO QUIMPER
KATHERINE LLANTOY E.	JUAN GUERRERO QUIMPER
ELIZABETH IPANAQUE G.	JUAN GUERRERO QUIMPER

VIRGINIA VASQUEZ M.	RODRIGO LARA BONILLA
JOSE JARA R.	RODRIGO LARA BONILLA
RENZO FRANCO S.	JUAN GUERRERO QUIMPER
HOBER ROJAS M.	JUAN GUERRERO QUIMPER
LUIS REYES PERALTA	JUAN GUERRERO QUIMPER
LUIS TURPO CH.	JUAN GUERRERO QUIMPER
MIGUEL CHUMPITAZ Q.	RODRIGO LARA BONILLA
SHAWNNI BECERRA	JUAN GUERRERO QUIMPER
RUTH PFUÑO	JUAN GUERRERO QUIMPER
JENNIFER ORACO	JUAN GUERRERO QUIMPER
SARA PAREDES	JUAN GUERRERO QUIMPER
WENDY ATOCCSA	JUAN GUERRERO QUIMPER
SARA CALLME	JUAN GUERRERO QUIMPER
ISABEL RAMÍREZ	RODRIGO LARA BONILLA
VICTOR TANTALEAN	JUAN GUERRERO QUIMPER
GEORGINA ARAUJO	JUAN GUERRERO QUIMPER
NATALIA AGUILAR	JUAN GUERRERO QUIMPER
DEYSI MARCATINCO	RODRIGO LARA BONILLA
DEYSI VIERA Q.	JUAN GUERRERO QUIMPER
BEATRIZ ACERO Q.	JUAN GUERRERO QUIMPER
MAYTE ACUÑA	JUAN GUERRERO QUIMPER
ZOLIA CAMACHO P.	JUAN GUERRERO QUIMPER
ROSANA YACTAYO C.	JUAN GUERRERO QUIMPER
EMILY HUAMANI	JUAN GUERRERO QUIMPER
ALEXANDRA ZARATE	JUAN GUERRERO QUIMPER
GERALDINE CANCHUMANTA	JUAN GUERRERO QUIMPER
MARIANELA FERNÁNDEZ A.	RODRIGO LARA BONILLA
YERIKA SÁNCHEZ	RODRIGO LARA BONILLA
GIGI LOPEZ T.	SANTÍSIMO SALVADOR
GIAN CARLOS ISIDRO	SANTÍSIMO SALVADOR
PIERE QUISPE M.	SANTÍSIMO SALVADOR
MOSMER BERMUY Q.	SANTÍSIMO SALVADOR
MAQUER PEREZ A.	SANTÍSIMO SALVADOR
VANESA USAQUI MEJIA	RODRIGO LARA BONILLA
CHARLOT LOPEZ U.	RODRIGO LARA BONILLA
KRISS BURGA H.	JUAN GUERRERO QUIMPER
EDTIH GARAY E.	JUAN GUERRERO QUIMPER
PATRICIA ABANTO P.	JUAN GUERRERO QUIMPER

ANGELA CANALES	JUAN GUERRERO QUIMPER
MAYRA JOYA SUNARY	JUAN GUERRERO QUIMPER
MAYRA CARRERA CASTILLO	JUAN GUERRERO QUIMPER

MEETING AMONG THE EVALUATION TEAM, TEENAGE MOTHERS' PARTNERS AND THEIR FAMILIES

NAMES	FAMILY OF
Sra. Irma Estrada de Barros	Laura Velazco y Olga Velazco
Domitila Ramírez	Blanca Condori R./ Lorena Condori R.
Julio Barros	Cristhofer Barros Ormeño
Sara Briceño	Julissa Revollar / Gean Paul/ Renzo
Elena López	Junior
Hilda Mauro	Victoria / Daniela
José Alejandro Llashay	Madre adolescentes Flor Carmin
Lucy Acuña	Madre adolescente Lesly Paucas

Section A

1. Name of project

Project: **"YOUNG MOTHER CENTER"(YMC)**

Project N° 471053

Project period 2000 - 2005

2. Type of evaluation (mid-term, end of project, etc.)

FINAL EVALUATION

3. Date: (Month and year)

FROM 24.11.2005 TO 02.01.2006

4. Owner of the evaluation (Person for whom evaluation has been prepared)

STROMME FOUNDATION

5. Operating partner (Name of partner operating the evaluated project)

CENTER OF PRODUCTIVE TECHNICAL DEVELOPMENT (CEDETEP).

6. Author (Name and address of corporate and team leader)

SERGIO BARRIO TARNAWIECKI

7. Executive Summary (Must include all recommendations)

CONCLUSIONS AND RECOMMENDATIONS RELATED TO THE OBJECTIVES OF ATTENTION:

Positive achievements

The YMC is an extraordinary achievement. It is an oasis in the middle of a social problematic that is hard, indifferent and cruel. When entering the YMC, you breathe an optimistic atmosphere, of work, love and protection with smiles, movement, work, and care for the adolescent mothers and their children.

The teenage mothers have found a family in the YMC. It is a family that cares about them and supports them. It is formed by an ethical, good, warm and professional staff including 2 permanent social workers, medical visits and a psychologist service twice a week. The food provided by the center is adequate and it is served in a good environment from a spiritual and emotional point of view. The rooms for temporal shelter have a good standard of hygiene and order, and they seem to be well organized and with discipline although the normal problem that may occur. Young mothers have received support to continue studying in the school. In addition the center provides nursery service for their kids. There is an excellent infrastructure, whose construction works are almost finished including a surrounding security wall.

In order to provide the different services, there is a supportive network formed by various institutions. The centre receives important donations, mainly goods. In addition they negotiate new agreements of collaboration with other institutions like "Medicos del Mundo", who may contribute to improve the quality and the outreach of the offered services.

Observations and recommendations

It was perceived that there is a great necessity to have permanent medical attention, especially in the psychological area. In addition it is suggested that they consider the possibility to offer individual therapies and family therapies for the teenage mothers, their families and partners.

In order to strengthen the excellent resources of the staff and improve the treatment, it is suggested that all the staff, who is responsible for providing attention and training, is formed in the fundamentals, principles, methods and necessary techniques to have a therapeutic attitude towards the young mothers and their families.

About the treatment that should be given to the teenage mothers, it should be given equal priority to their condition of teenagers and mothers, and not more to one side or the other one. It should be avoided that one of these conditions displaces the other. In fact the YMC fulfil this role, but perhaps it should be assumed in a more conscious way.

About the improvement and complementation of the attention offered, it was recommended to get support from the Lima Center of Psychoanalytic and Psychotherapy; and from Universidad Científica del Sur.

The project tried to integrate the teenage mothers' partners in the problematic, but the YMC does not have the role of bringing them together.

About the legal situation, it was noticed a significant reduction of the attention offered and not enough effectiveness in the problems of legal paternity. The project must take into account this reality.

CONCLUSIONS AND RECOMMENDATIONS RELATED TO THE OBJECTIVES OF PREVENTION.

Positive achievements

There is not an adequate measurement to evaluate if the project has had a significant effect on advocacy. But on the other hand, it is not reasonable to expect that the YMC project achieve such significant advocacy in reduction of early pregnancy. However, its influence has been addressed definitely in the right direction.

The efforts in the prevention area were concentrated on:

- (a) The training of school teachers, so they can be teachers, and in
- (b) The sensitization and diffusion campaigns.

Youngsters, who have received training based on the YMC model of sexual education, have given samples of an extraordinary lucidity, great capacity of behaving in public without scenic fear, result of a high self-esteem. In addition they have shown to have very solid moral and social criteria not according to their age and little experience.

It is obvious that their answers are marked by some normal errors of their age, by prejudices of their environment, their parents, their families and our culture, and in some cases they show and say what their teachers want to listen. However, in general boys and girls, who participated in this evaluation freely, can be a reason for their parents' and teachers' pride and certainly for the YMC because it is their contribution.

We do not pretend to attribute to the mentioned model all these personal resources of the interviewed teenagers. In fact we think that the model has limitations, however, we can affirm that the model has contributed to this development. It must be mentioned the teachers' human quality, the spiritual wealth of many families and evident positive attitude of the youngsters.

On the other hand, as product of the work experience and as response to the needs of the training courses for teachers, the team did a great effort to prepare a didactic guide for education about preventing pregnancy, which was published and ready by the time the evaluation was performed. This is an important achievement, despite the critical observations on its content.

On the other hand, the formation in values and the affection of the young mothers assisted in the centre have influenced in our opinion in a very positive sense regarding their personal, emotional and spiritual development and in the prevention of having an early pregnancy. Finally it is necessary to point out the special effort to form young mothers as leaders providing them a very good training to act in the community.

Observations and recommendations

The main tool with more outreach for the prevention goals has been the teachers training. This training has several limitations that can be overcome and which are listed below:

- In some cases the teachers training has been very brief and incomplete not only in the range of contents but also in the profundity.
- It has not been monitored or supervised. Neither the training offered to teachers nor the results in class have been followed up.
- Teachers have not been trained to handle emotional, psychological and behaviour problems that arise in the processes of sexual education.
- The training does not cover the subjects related to family relationships significantly, widely and deeply.

The sexual education model in use is based on the didactic guide that was just published. We think that this guide has several failures that can and must be improved because of the following reasons:

- There is no explicit reference about the spiritual resource of love, importance and virtue. There is a total absence of spiritual criteria. The subject of the values is mentioned but there is not any section talking or dedicated to the values topic.
- The subjects related to risks of sexuality (ETS and risk of pregnancy) are emphasized, based on traumatic testimonies mainly and not in the value of raising awareness about the gift of sexuality and how wonderful is the experience of a beautiful and opportune sexuality. The traumatic testimonies that are offered undervalue the sexuality and the only thing that produces is distress and anxiety in the adolescents, without giving the possibility for a greater understanding of the sexuality or the restraint and healthy delay of the sexual impulse.
- Meaning that is not part of the virtues of the delay, postponement and neither healthy restraint of the sexuality, nor the recognition of well-being experience that these virtues generate in the adolescents.
- Also the project does not work on the spiritual, emotional, physical and social sexual preparation or for the normal, healthy and happy maternity.

- In the guide there is an explicit reference about the subjects like anatomy of genital organs in an unnecessarily detailed way. In addition this is presented in the beginning of the workshops and not after presenting the necessary resources to handle this topic and without discriminating the eateries groups for its use.
- The topic about the human body is limited to the genitals and not to the body in an integrated sense like a center of: (a) corporal sensations (sensitivity, pain, pleasure, tension), (b) emotions (fear, shame, blame, desire, joy, sadness, etc.), (c) feelings (well-being, malaise, fullness, emptiness, love); and not a center of (d) spiritual experiences (like the joy for being important, the plenitude of love, the prodigy of pregnancy, the breast-feeding, maternity and paternity, the mystic of life creation, the total satisfaction of mutual commitment, the love enriched by the subliming, etc.).
- There are impressions and statements that are not clear enough about the menstrual cycle and the opportunity for pregnancy that may produce mistakes.
- It is not cultivated in the teachers the capacity to listen, to be compassionate and understandable and nor their capacity to handle emotional, behaviour and psychical difficulties of their students.
- The topic about caring of the student's modesty and decency is not worked with the teachers in an explicit way. The methodology does not foresee the ways to protect the modesty and decency of the adolescents, when facing topics about sexuality, nor mechanisms to facilitate that the students to receive very explicit and confidential consultations, without feeling themselves exposed.
- It is not offered a treatment different from sexual education by age ranks.
- The contents on adolescence indicate a repetitive knowledge that does not facilitate the approach of teacher or guide to the adolescents' true difficulty that has to be with its link to the "law", the relation with its body, the rupture with the family, the sexual initiation. There has not been a revision of the upheavals of youngsters at that age and the serious difficulties that the human being lives at this point of its life.
- It is not spoken about the true processes of the relation in the adolescent, like the topic of idealization of affection, the difficulties to approach and to separate and the inner work to get to know if you are ready for the sexual initiation.

The goals regarding prevention have been based, to a great extent, on the teachers training activities, but this training is very brief in terms of time. It does not cover a work with the same natural emotional difficulties of the teachers, a clear orientation about the natural psychological process of the adolescence. There are important gaps and conceptual difficulties. It is recommended a teachers training program about affection and psychosexuality, and in the beginning theories, methods and techniques of work and counselling with duration of minimum ten months including weekly meetings of 3 hours of duration.

CONCLUSIONS AND RECOMMENDATIONS REGARDING SELF-SUSTAINABILITY OBJECTIVES

Positive achievements

At the same time of reaching a recognition and position about its functions and roles, the YMC has set up the bases to achieve support from the community and other charitable institutions. They have reached important donations in terms of goods and services improving the project capacity of self sustainability with its own resources.

Part of this achievement from the community is reflected in the number of inter-institutional cooperation agreements signed with the authorities, and the progress in the creation of the Adolescents Mothers Foundation with participation of the Municipality. In addition there have been advanced conversations with "Medicos del Mundo" from France to provide and improve the services for the children.

On the other hand, the project is trying to give a commercial vision to the productive activities regarding quality of products and market demand.

Observations

The YMC functioning is extremely expensive, and it should not be so vulnerable regarding the availability of donations of charitable institutions. It is required to put more emphasis in the trade of its products and services, and do a better evaluation of the feasibility of some businesses. This statement does not deny nor misestimates the importance of the social mobilization capacity that has a project of this type, which due to its humanitarian motivations wakes up important forces for self-help and social support from the community in its wider sense.

For these goals, we did observations that we describe below:

1. It was considered important that the productive activities with the criteria of a small or medium business are handled like PYME, without creating companies that produce costly management load difficult to assume.

2. It was recommended to perform a technical-economic assessment of the bakery project intensifying its use.
3. Regarding the dressmaking workshop, it was recommended to establish links with local industrial zones and to establish contacts with important companies to provide them services.
4. About the cosmetology workshop, it was recommended to increase the efforts considerably in order to reach the market by using the existing infrastructure.
5. The existing infrastructure in the YMC is extremely important and must be considered as base for profitable activities and for training. From there, profitable and meaningful activities can arise with the purpose of generating income and proving employment to the adolescent mothers and their partners.
6. The animal breeding is a problem because of the care that the animals must receive. It was supported the initiative of raising snails, but it was recommended to receive technical support, because the great diffusion of this kind activity could put in risk the non competitive producers.

It was recommended a continuous technical formation and also to sign agreements with SENATI and TECSUP to improve the quality and get a better academic recognition for the technical formation provided by the center. It was indicated that people are trained, but work teams.

Finally, it was recommended to look for support from PROMPEX, COFIDE, and PROVIDA for the productive activities and also to get financing from the banks.

CONCLUSIONS AND RECOMMEDATIONS RELATED TO THE STRATEGIC EVALUATION

Positive achievements

It is remarkable the joy, maturity, human sensibility of the personnel, which are expressed to the young mothers. The young mothers also give examples of human attitude, a positive and nice behaviour, demonstrating a personal growth and an important learning. These facts are the best indicators that the implemented strategy is adequate and right.

The institution has been strengthened considerably. Several campaigns of promotion and prevention have been organized. The message has arrived at unusually important groups of the population, raising collective awareness on sexual abuse and about the difficulties and problems of premature maternity.

There is still a charitably direction, however it is not incorrect. In fact, it is something necessary and

inevitable. Therefore it is needed a more solid strategy for its subsistence.

The strategy towards the families encourages the support from parents of the young mothers. It aims to avoid unnecessary punishments in their families, pressure to abort and helps to avoid that young mothers become victims of ostracism and humiliation. Also the strategy is well oriented because it focuses the professional training of young mothers, as well as the training for teachers about how to prevent the pregnancy through education.

Observations and recommendations

Like we have said in other sections of this report, it is not realistic to expect that the YMC affects the reduction of pregnancy incidence in the adolescents from the Southern Corner of Lima significantly. However its services are definitively oriented in the correct direction.

The young mothers receive a high quality attention, but there are important deficiencies to take into account. For instance the psychological attention must definitively receive a greater priority. The medicine provision must be assured. The nursery (Wawawasi) and the kindergarten must give to priority to young mothers' children.

The project has worked with local, but a specific action plan has not been prepared and a true network of support has not been formed. It is recommended that this network has bimonthly meetings.

The return of young mothers to their families is a very delicate and complex subject that must be solved, taking into account the aspects related to the non-functional and functional character of the family that intervened in the particular case of the young mothers.

FINDINGS AND LEARNING

Premature maternity, is mainly caused by pathologies and non-functional character of the family provoking the consequent disturbance of the adolescent, its poor self-contention and absence of healthy limits.

Also it was important to determine that although the abuse and sexual violence are very serious problem, they are not the main cause of the adolescent's pregnancy.

Promiscuity, cohabitation, overcrowding, low cultural level, poverty, violence, instability in the marriage with the consequent separations, divorce and fights, is united to the absence of emotional,

psychological and spiritual work inside the families and the pernicious influence of mass media that trivialize sex in order to increase the number of premature pregnancy.

Premature maternity seems to be replacement of existential emptiness, with an unconscious attempt to find the sense to life. Young mothers seem to be looking for reparation of an intense and private bond with their children and perhaps, previously, the same in the relation with a partner, who seems to show them affection, interest, recognition, care and value them.

However it is necessary to recognize that pregnancy and maternity become an emotional resource that somehow may help them to repair themselves internally, but they do not stop facing the other reality. They are teenagers, who need to be protected and who need to finish their physical, intellectual and emotional development.

The cultivation of spirituality and love in the family, besides being an evident value itself, it is the main tool to prevent the sexual abuse and premature pregnancies. The cultivation of spirituality and the required love has to be with the capacity of being in silence with ourselves in order to be in contact with the prodigy of being pregnant and the creation of human being. It also has to be with the wonderful experience of a beautiful and opportune sexuality, the joy of being important, the plenitude of love, and sublime experience of breast-feeding and maternity and paternity. The cultivation of mystic, compassion, mercy, commitment is the word love expressed in its highest sense.

Personal problems of young mothers, their pathologies and disorder of behaviour require individual therapeutic but at the same time group therapy. This support is needed during pregnancy and after that too for permanent periods of weekly meetings. Many require an emotional and human support at the moment of giving birth.

Finally, another important finding is the topic related to self-sustainability of the YMC, which need a business management capacity very different from the administration of a center.

The budget has been pretty high, especially because of the infrastructure investment. Therefore it was necessary an efficient and effective management. In fact we have the impression that until now, the YMC has not developed enough capacities to generate its own funds, especially, additional funds different from donations that come from the productive capacity and its self-sustainability capacity.

CONTRIBUTION TO PREMATURE PREGNANCY TOPIC

There is a big problem in Lima caused by the pregnancy of adolescents. It is said the television, gangs, drugs, sexual violence, discotheques, impulsivity of the adolescents, but specially the ignorance about the contraceptive methods and risks of sexual transmission diseases are the responsible.

All that is true, but perhaps it does not include the main cause: the absence of the love and spiritual abandonment, especially at home. When there is a lack of affective expressions at home, lack of communication and hardness, there are already gaps big enough in the teenager's world that makes them look for affection from real or imaginary people.

It is obvious that in that context the teenagers will take their own decisions. Not all the responsibilities belong to the environment. It is not good idealise the teenagers saying that they are just victims. Youngsters have personal options.

The pregnancy of adolescents in most of the cases is consequence of searching for love, affection, tenderness expressed by the physical contact, love words of girls and boys, who lack all these things in their homes. In the adolescence, this search for affection is affected by the tendency of idealization, because of difficulties when learning about limits on their way to become adults.

The reason why 20% of teenagers get pregnant is not because of ignorance about the anatomy and physiology of sex or lack of information about contraceptives methods and sexual transmission diseases. This sentence does not pretend to deny that this knowledge is necessary and important, but criticises the emphasis on the generation of fears about sexuality, anatomy and contraceptives methods.

The natural restraint of sexuality and postponement of the sexual life beginning has a natural and biological fundament that is expressed with fear, resistance, doubt and natural discomfort regarding the premature progress. It is required to have a better capacity to recognize their own feelings and corporal signs as well as good human relations and values that may help the teenagers to have a life with meaning.

When we talk about spirituality we do not talk about religious education, but we do not exclude it either. We talk about everything that has a meaning for life, everything that makes that our actions have a purpose. Everything that is good for the well-being and calm the existential anxieties (human tragedies, diseases and death) produced in daily life. We believe that through the spiritual values we can find enough strength to control, nourish and raise the sexuality and integrate it to cultural forces, so it could be a source for well-being and happiness and help to avoid unnecessary suffering and resist inevitable and the painful situations.

The spirituality culture has to be with a capacity to be in silence with yourself, to be in contact with the fact of pregnancy and the creation of new human being. It helps to prepare yourself to get to know how wonderful is the experience of a beautiful and opportune sexuality, love, the sublime experience of feeding a baby and the parenthood. It is the cultivation of mystic, compassion, mercy and love words of the love in the highest sense

<i>Signature of team leader (name and date)</i>

Section B-1 (Operative Partner)
<p>11. Appreciation of the evaluation report</p> <p>Opinion about the evaluation process, its conclusions and recommendations:</p> <p>Excellent () Good (✓) Adequate () Inadequate () Do not know ()</p>
<p>12a. Follow up recommendations</p> <p>If any of the recommendations are not followed, give the reasons why:</p> <p>12b. Other recommendations of the RD</p> <p>Recommendations to be followed that are not contemplated in the report?</p>
<p>13. Learning from the evaluation</p> <p>How will the “learnt lesson” through the evaluation process and its conclusions be used?</p>
<i>Signature of CEO (name and date)</i>

PART C (SF Program Support-Head Office)
<p>14. Appreciation of the evaluation report</p> <p>Opinion about the evaluation process, its conclusion and recommendation:</p> <p><i>Excellent () Good () Adequate () Inadequate () Do not know ()</i></p>
<p>15. Policy implications from the evaluation:</p> <p>Implication from the evaluation process to be followed up in Support Staff or in SF as such:</p>
<p>16. Use of the report</p> <ul style="list-style-type: none"> • Conclusions and recommendation in the report are useful for the purpose/ regions: _____ • The report is useful as case material/information: _____ • The evaluation implies innovations in methods or approaches: _____
<i>Signature (name and date)</i>