
SITE VISIT: Venezuela—Programa Hogares De Cuidado Diario Plan De Extension Masiva

Source: Ruesta, M.; Gonzalo, M.; and Zarikian, A. (1993). *Programa Hogares De Cuidado Diario, Plan De Extension Masiva: Venezuela*. Ministerio de la Familia, Fundacion del Nino. UNICEF.

Overview of the Project

The Programa Hogares de Cuidado Diario, begun in 1974, attends to the care, nutrition, health, education and developmental needs of children up to 6 years of age in the lower income sectors of the population in Venezuela. This care for children under six is provided in community houses where children are cared for by trained care mothers.

In 1989 the Program was selected by the government to be part of the massive extension of social programs undertaken in the context of deteriorating socio-economic conditions of the less favored population. By 1993 the Program's coverage grew to 200,000 children. This expansion has meant promoting and obtaining active participation of the community and diverse NGOs. In 1993 two variants on the child care model existed. In the Hogares de Cuidado Diario eight children receive attention in a care mother's house, under the supervision and support of a specialized staff. In the Multihogares (Multi-homes) up to thirty children are cared for (an average of 10 children per care mother) in centers located within the communities.

The program focuses on the most vulnerable sectors of the population: children up to six years of age and their mothers. The program aims to provide a direct subsidy to families at critical poverty levels in order to help them provide for their young children. One of the program objectives is to help strengthen the family unit, particularly mothers, in the process of bringing up their children. The program aims to increase the mothers' knowledge of the development and welfare of children, improve their income, and generate the development and participation of the community.

The Context/Need

Venezuela is a country located in the northern part of South America, with a territorial extension of 916,700 km and a population of 19,307,811 in 1991. It is a country of contrasting realities: on the one hand it is an oil-rich country, with a developed technological sector, high urban growth (90% of the population lives in urban areas) and high purchasing power of a minority of the population. Its per capita income was more than \$2,500 in 1993. On the other hand Venezuela has a high poverty level in the majority of the population. There are insufficient economic

resources, significant illiteracy rates, high infant mortality and unsanitary conditions. All of these factors play a key role in the insufficient services for the majority of children under six in Venezuela.

In 20 years the country has shifted from a remarkable economic boom between 1974 and 1979, to a considerable erosion of its economic indicators since 1983. Between 1980 and 1989 the country suffered a negative annual economic growth rate of 2%. Falling oil prices have had a dramatic effect on the Venezuelan economy. In 1989 economic adjustment measures were taken in order to confront foreign debt problems, declining economic performance and pressures from international financial organizations. The short term impact of those measures affected lower income sectors and contributed to the triggering of social uprisings on February 27, 1989, bringing to the forefront the urgency of addressing the needs of the poor. These uprisings brought forth public opinion and it was in this context that the massive extension of the Programa Hogares de Cuidado Diario arose, as part of the reformulation of social policies directed to alleviating the worsening conditions of the poor.

There are great disparities among Venezuela's population, characterized by social stratification. There is a juxtaposition between the rich suburbs and the "misery belts" surrounding the capital city of Caracas. Between 1984 and March 1993 the consumer price index rose more than 1,000% for the poor in Venezuela. Due to income contraction and sustained price increases, the most vulnerable groups expended a greater portion of their income in food (up to 70%), generating serious limitations in the possibility of satisfying basic educational, health and housing needs. According to the United Nations Program for Development (UNDP), the optimum level of social expenditure is 40% of public spending. Venezuela has been near that level: 36.5% through the 1980's and stagnated at approximately 32% in 1992-1993.

Given this context of a country undergoing violent social and cultural changes over the last fifteen years it is understandable that the Venezuelan family has been dramatically impacted. Inequality across social strata makes it impossible to talk about 'the family' in Venezuela. It is more appropriate to talk of 'family groups' in different strata, each with its own characteristics, social and cultural behaviors.

Certain studies and statistics give a sense of the situation of families and children in Venezuela:

- Studies (ENSO 91, 1993) based on data from the *Oficina Central de Estadística e Información (OCEI)* underline the high percentage of homes with one parent as head of the family (28.8%), primarily a woman (20%).
- The *Encuesta Social (ENSO)* of 1993 formulated a topology of homes taking into account population stratification based on occupational data of the head of family. It also identifies different phases in the family life cycle according to the age of the head of the family.
 - Approximately 75% of the homes are formed by couples (complete homes); almost 50% legally married.

–40% of the heads of families are illiterate women who are not working due to insufficient child care services and the cultural tradition of keeping small children at home. These mothers are unable to earn a sufficient salary to satisfy the basic needs of their families.

■ The Venezuelan population is very young: in 1993 the total population was 19,307,811, more than seven million of whom were under 14 years old. The estimated population in 1993 of children 0-6 years old was 3,764,675, of which approximately 1,500,000 were living in critical poverty conditions, representing 42.72% of that group. (Catala de Trejo 1992)

■ Children of preschool age suffer from a type of malnutrition characterized by multiple deficiencies, with a low protein and high carbohydrate consumption. A study in 1991 of children under 15 years of age attending health centers showed that 13.7% of them had some kind of nutritional problem. Inflation has contributed to the erosion of the diet's nutritional quality due to scarcity of diverse food products available to those living in poverty. (Instituto Nacional de Nutricion 1992)

■ The infant mortality figures for children 1-4 years old in 1987 were 24: 1,000. However these did not reflect the disparity between social strata and geographic areas within the country. In 1989 the specific mortality rate between 1 and 4 years of age was 150:100,000. There has been an increase in malaria, dengue and preventable diseases due to the erosion of socioeconomic conditions and inadequate and insufficient health service systems.

■ The maternal-child health care situation is particularly vulnerable because few pregnant women make use of available medical services, thus the number of children under medical control is very low. There have been periodic massive vaccination campaigns to prevent epidemics.

■ In 1990 the illiteracy rate was 7.8%. The data shows high disparities in illiteracy distribution between the urban (6.25%) and rural sectors (24.7%), and less between women (8%) and men (6.25%). There are also an estimated 4 million functioning illiterates who present difficulties in obtaining and processing information. (CPPDN 1991)

■ **Preschool Education:** The situation of preschool children in Venezuela can be considered critical: the group of 4-5 years of age served by the Ministerio de Educacion in 1991 through formal (674,000) and other services (105,710), and those between 0-6 years of age served by the Ministerio de Familia and the Fundacion del Nino (244,206) represent only 27% of the estimated total population of children 0-6 years. (ENSO 91 1993) The situation for preschool children in poverty conditions is particularly serious as they require not only nutrition and health care, but also a schedule that meets the needs of their mothers' work demands. The Encuesta Social of 1993 estimated preschool coverage for 4-5-year-olds to be 44.5% in 1991. For children between 7-12 years of age the coverage was 93%.

Process—Goals and Objectives

The violent social uprisings on February 27 of 1989 brought to the forefront the existence of a high level of social tension nationwide. In response there was an intense mobilization of governmental organizations involved in social issues to formulate adequate responses. The State

formulated a social policy focused on alleviating the situation of the most vulnerable social sectors. The series of programs were included in the *Plan de Enfrentamiento de la Pobreza (Plan to Confront Poverty)* and in the chapter on *Social Commitment* of the *VIII plan de la Nacion*. The following are some of the relevant features of these programs:

- Compensatory characters—seek to minimize the negative effects of the economic measures on the poorest sectors whose quality of life is more vulnerable to income variations.
- Focus on specific targets and thus the application of direct subsidies instead of previous indirect ones.
- Incorporation of new management practices in the social area.
- Promotion of the involvement of NGOs and of the private sector.
- Taking into account the possibility of international technical and financial assistance.
- Role as a bridge toward a model of structural transformation.

These social programs were targeted toward three basic areas:

1. Labor and local investment, to increase productive activities of adult members of low income families, such as the Programa de Microempresas (micro-enterprise program) to promote entrepreneurship.
2. Nutrition and maternal-child health care with programs pursuing nutritional and health goals linked to school attendance.
3. Preschool and basic education which includes programs to supply school materials and uniforms, an expansion of preschool services and the Programa Hogares de Cuidado Diario.

The Programa Hogares de Cuidado Diario has been in existence since 1974 when it began in the Fundacion del Nino, a private institution presided over, according to its statutes, by the wife of the President of the Republic, whose fundamental mission it is to provide aid and protection to the children of Venezuela. It has gone through a series of stages which have reflected the social, cultural, political and economic conditions of the country.

The child care concept is based on the observation of senora Blanca Rodriguez de Perez that working mothers with children under six years of age turned to their neighbors or relatives who did not work outside the home to care for their children during working hours. The mission of the Fundacion del Nino has been to systematize, support and enrich this natural form of day care.

Pilot Program: The beginnings of the program provided a structure that included technical support teams for every 20 Hogares de Cuidado Diario. These teams consisted of a social worker, child care worker and a teacher, who were in charge of the administrative and functional supervision of the Hogares, of coordinating relations with public health organizations to guarantee preventative and curative care for the children, and of carrying out educational activities in the Hogares de Cuidado Diario. There was a coordinator for groups of three technical teams.

Formative Evaluation: In 1978 the Fundacion del Nino, advised by UNICEF, and with the technical support of the High/Scope Foundation, carried out a formative evaluation of the

Program, which by 1978 had a national network of 2,071 Hogares. This evaluation resulted in UNICEF recommending the Venezuelan experience as an effective model of integrated attention for children. Due to the changes in the administration and political shifts that occurred in the country the precise recommendations of the evaluation were not put into practice.

International Expansion: The model was proposed by UNICEF for other countries in Latin America as a strategy for providing for the needs of children under six years of age, as it permits a rapid implementation and involvement of community in the process of caring for their children. In 1979 a pilot program called Hogares Comunitarios began in Guayaquil, Ecuador as part of a basic services program. Due to a change in government in 1984 the program suffered a setback. The model has also been used in Colombia where it now serves 1,000,000 preschool children.

Revisiting the Evaluation: In 1992 the 1978 recommendations were reviewed and incorporated in the results of the Diagnostic Studies carried out for the Proyecto de Cooperacion Fundacion del Nino-UNICEF, oriented towards the strengthening of the program.

Extension Phase: The Programa Hogares de Cuidado Diario has developed a revised set of objectives:

1. Attend to the care, nutrition, health, education and developmental needs of young children up to six years of age belonging to the lowest income levels of the population.
2. Provide a direct subsidy to families at critical poverty levels with children up to six years of age, to help them cover the basic needs of their children.
3. Strengthen the family unit, particularly the mothers, in the process of bringing up their children, providing support and guidance to increase their knowledge of the development and welfare of children, improve their income, and generate the development and participation of the community.
4. Strengthen the capacity of civil organizations to participate in actions which promote the development and welfare of children, especially those belonging to sectors with the lowest levels of critical poverty.

Approach/Program Description

The Beneficiaries

The program focuses on the most vulnerable sectors of the population: children up to 6 years of age and their mothers, taking into consideration the critical social and economic situation in which vast numbers of the Venezuelan population live, and the fact that the first years of life are critical in developmental terms. The program is a fundamental strategy in response to the developmental needs of children up to six years of age and an important support for mothers in conditions of poverty, large numbers of whom constitute the sole economic, affective and moral support of their families.

In 1989 when the massive extension phase began there were 2,000 Hogares attending to 10,000 children nationally. By the end of 1989 the number had risen to 30,344 children. In 1990 the

coverage reached 108,274 children. In 1991, due to restrictions in the national budget, growth was less intense with the program reaching 137,251 children, an increase of 27%. By 1992 the number increased 78% reaching a coverage of 236,206.

The Structure

The Programa Hogares de Cuidado Diario is a part of the government's strategy of massive extension of social programs because of its flexibility and its potential for encompassing, motivating, and stimulating attention in basic areas. Several institutions have participated in the extension phase of the Programa Hogares de Cuidado Diario:

- The Ministerio de la Familia functions as the governing and financing organism of the Program.
- The NGOs participate as executive and administrative agents of the Program at the community level.
- Members of the communities participate as Madres Cuidadoras (Day Care Mothers).

The *Ministerio de la Familia*, as the governing agent of the Program, is responsible for dictating general guidelines pertaining to technical and administrative aspects, selecting NGOs interested in participating, obtaining and transferring to them the financial resources necessary for executing the program, establishing annual goals, and recommending the operative geographic locations for the Hogares de Cuidado Diario. It is also responsible for accounting for the resources assigned to the Program, requiring a detailed report concerning the use of the funds and coverage achieved, in order to guarantee the continuity of the Program. There is an organizational structure within the Ministerio de la Familia at the national level made up of State Administrations, present in each of the federal entities of the country.

The *Facilitating Organisms (NGOs)* are the mediators between the State and the community and are responsible for the administration of the funds allocated for the implementation of the service. Several requirements must be filled to be eligible as a facilitating organism. The link between the Ministerio de la Familia and the facilitating organisms is based on a written agreement which establishes the responsibilities of the parties involved. As of July 1993, 297 NGOs with widely varying goals had been incorporated into the Program. These NGOs included the following: Religious (41), Charity (12), Directed to Children (55), Educational (6), Community (148), Health (9) and Cultural (26).

The *Fundacion del Nino* plays a central role in the Program. This organization is presided over by the wife of the President of the Republic and has a long history with the Program. The Fundacion del Nino has been assigned an important role in the execution of many of the Program's goals as well as providing critical links to support from the public sector.

The staff within the individual homes usually consists of the Madre Cuidadora (day care mother) and assisting community members in training. The Program has a series of requirements which guide the selection process:

- being a mother or having experience in the care of children

- between 30 and 45 years of age
- preferably a nuclear family unit, without the presence of other adults in the home during – the hours in which it functions
- no more than two children below six years of age who are children or direct relatives of the Madre Cuidadora, living in the home and incorporated in the Program
- literate, preferably with primary school complete
- family economic situation average in relation to the community
- presence of neighborhood organizations within the community

The Madre Cuidadora receives the following contributions:

- a monthly amount for the care of each child
- an allotment for the feeding of each child during the 20 working days of the month
- an allotment for the purchase of one kilo of powdered milk per child per month
- a monthly allotment from the mother of each child
- support for upgrading the home is given by the Instituto Nacional de la Vivienda in situations where the performance of the Madre Cuidadora is excellent

The facilitating organisms carry out direct and permanent supervision of the Programs through their technical teams. These teams consist of one *Promotor* for every 25 homes, one *Supervisor* for every 150 homes, and one *Coordinador* of the Program in each state. The following overviews of the job descriptions provide a detailed picture of the multiple roles each person plays in the program.

Promotor:

- to carry out the activities necessary for the opening of the Hogares de Cuidado Diario
- to carry out the administrative and technical control for 25 Hogares de Cuidado Diario
- to gather, analyze and interpret the qualitative and quantitative information concerning the health, nutritional state and development of each child
- to provide guidance, training and support for the Madres Cuidadoras in the discharge of their duties
- to coordinate the enlistment, selection and training of the community volunteers who help the Madre Cuidadora provide activities which stimulate development
- to establish and maintain relationships with community institutions which contribute to the focus on integrated care, and promote activities and campaigns to improve the quality of community life

Supervisor:

- to supervise approximately 150 Hogares de Cuidado Diario
- to insure the achievement of the objectives of the program for each trimester
- to guide and support program activities related to administration, promotion, supervision and training

Coordinador:

- to participate in the planning and evaluation of the program
- to establish inter-institutional relations which will support the implementation of the program

- to meet with the coordination team and pertinent personnel for problem solving and decision making
- to guide personnel in the carrying out of their duties
- to supervise the Hogares de Cuidado Diario periodically to evaluate the functioning of the program and guarantee the achievement of objectives

The supervision process takes place once a week at the state level and once a year at the national level. The national supervision process has the goal of selecting a cross section of the Program in order to assess the level of implementation and the observance of rules. The Supervision Unit selects a sample of the Hogares, Multihogares, Coordinadores, Supervisores and Promotores. It visits and observes the Program sites and at the same time observes the performance of the Fundacion del Nino personnel in the state. Once the process is finished suggestions are made and the Madre Cuidadora, the Promotor and the Supervisor receive guidance.

Curriculum/Program Activities

The massive extension phase of the Programa de Hogares de Cuidado Diario has provided space for variations within the day care homes structure. All of the programs aim to provide integrated services for young children up to the age of six years of age. There are four variations on the day care homes that have evolved with the expansion of services: Hogares de Cuidado Diario Tradicional, Hogares de Cuidado Diario Exonerado, Multihogar de Cuidado Diario and Hogares de Cuidado Integrado.

■ HOGARES DE CUIDADO DIARIO TRADICIONAL

These function in the homes of the *Madres Cuidadoras* (day care mothers), attending to eight children up to six years of age belonging to families of the same community. The communities where the program is installed are urban and rural zones where critical poverty levels have been detected. The dwellings where the day care homes function must fulfill a number of requirements as to construction, location, access, basic services and areas for the children's activities. In these settings there is a daily routine from 6 a.m. to 6 p.m. The routine includes breakfast, free and organized play, bath, lunch, nap and snack. The Madre Cuidadora provides the children with care and focuses on their health, nutrition and development, under the supervision of a *promotor*. The promotor is a specialist in social work or education and is responsible for supervising, promoting and supporting the Program in the community. Promoters are responsible for the supervision of 25 day care homes. The homes are provided with the necessary equipment before opening, this includes: a table and eight child-sized chairs, play materials, playpens, mats for nap time, basic kitchen and eating utensils, and a first aid kit.

■ HOGARES DE CUIDADO DIARIO EXONERADO

This variation on the model has the same characteristics as that described above, as to services, routines and requirements, but differs basically in that it is directed toward those sectors of the population at the critical poverty level, in which the mothers, due to their precarious social, educational, and personal conditions do not have the option of obtaining employment, and thus cannot afford to contribute the monthly amount in the traditional model. The biological mother is excused from paying dues while she is in training in order to join the work force. This variation

arose as a response to the fact that the Program, in those communities considered poorest and therefore neediest, grew slowly due to the inability of families to pay the monthly dues.

■ MULTIHOGAR DE CUIDADO DIARIO

In this variation thirty children up to the age of six years are cared for by three Madres Cuidadoras in a community setting specially selected or constructed for this purpose. It functions according to the same guidelines as the traditional model as to equipment, services, routines, location, and requirements. However, the biological mother does not contribute the monthly allotment and the facilitating organism gives the Madre Cuidadora an exoneration stipend for each child. This model arose as a strategy to increase the expansion of the Program. One *promotor* is assigned to each Multihogar. The Fundacion del Nino has been assigned the responsibility of creating Multihogares and Hogares de Cuidado Diario. The other facilitating organisms are responsible for creating only Multihogares.

■ HOGARES DE CUIDADO INTEGRADO

In this variation the Hogares de Cuidado Diario Tradicional attends to children with special needs. The established number is five children per home, two of which present mild difficulties in their development. The Madre Cuidadora receives the allotments set out in the agreement and is allowed to have one child of her own with special needs attending the Program.

The content and design of the Programs are guided by the framework provided by the overall objectives. There are detailed guidelines in the areas of health, nutrition, child development and family guidance and support. These guidelines are used by the Promotores who support the Madres Cuidadoras in the implementation of Programs. Promotores also assist with periodic health check ups and follow up procedures for the children.

Training

In the area of training the individual NGOs have developed diverse strategies for the training of Supervisores, Promotores and Madres Cuidadoras. There are however certain deficiencies in the training component and thus the Ministerio de la Familia formulated the Plan for Autonomous training with the objective of training the different figures who participate in the Program, in the Multihogar variant, using all the resources available in each state, and taking into account detected needs. The training process is framed within the policy of decentralization, and coordinated by the regional administrators of the Ministerio de la Familia.

■ PLAN DE CAPACITACION: TRAINING PLAN

The Fundacion del Nino has formulated this training plan for the systemic preparation of Madres Cuidadoras and supervision teams. This training plan is framed within the institutional policy of consolidating and strengthening the technical components of the program. It is based on the following ideas of Brouwer and Martinic (Yanez, L. 1993).

- training strategies must avoid placing the Promotor in the role of reproducing and repeating ideas; training strategies must stimulate autonomy and the development of individual and group leadership abilities
- strategies and processes must be stressed rather than contents
- reciprocal learning must be stimulated based on the needs of the community
- training must be continuous and systematic
- training must be oriented toward the solution of those problems defined as important by the participants
- training must be based on the knowledge of popular culture, using it as a new strategy to stimulate the acquisition of new knowledge
- training must contemplate the objectives of comprehension, application and communication of newly learned processes

The *training process* combines four interrelated modalities: initial training workshop, annual plan of permanent learning encounters, special workshops and continuous support and accompaniment.

A) Initial Training Workshop

This is for the Madre Cuidadora and Promotor. It includes the basic standards for the administrative functioning of the Program, personnel roles and functions, minimum contents necessary for the areas of attention provided by the Program (health, nutrition and development) and indicators of the quality of the Program. The workshop has three parts: theoretical content, observation and supervised practice.

B) Annual Plan of Permanent Learning Encounters

These are periodic meetings of groups of 10 to 15 Madres Cuidadoras and biological mothers in order to discuss situations related to the quality of the Program, plan measures to solve problems or define specific training needs. This plan is based on a stable schedule of activities which permit constant monitoring of advances of each Program in each locality and planned measures to meet the needs detected.

C) Special Workshops

Some areas of interest may require specialized treatment. More structured encounters are planned with the participation of specialists or local institutions. These workshops include areas such as health, nutrition and child development.

D) Continuous Support

Supervisory support is offered and provides an invaluable tool for the Madre Cuidadora to reflect on practice in action.

Knowledge Creation and Dissemination

The source for this description (Ruesta et al. 1993) gives a good sense of the many documents that have been produced related to the Programa Hogares de Cuidado Diario.

Program Costs and Funding

The Madre Cuidadora receives from the State, through the facilitating organism, \$9 per month for the care of the child, and \$19 per month for nutrition. She also receives the necessary equipment (table and chairs, playpens, mats for nap time, play materials, kitchen utensils), and training and supervision on the part of the Facilitating Organism. In the Hogares Tradicionales the parents give the Madre Cuidadora a monthly contribution, which varies depending on the region. In the Hogares Exonerados, the Madre Cuidadora receives a Bono de Exoneracion (exoneration fee).

The *cost per child per month* is \$39, distributed in the following way:

Nutritional Allotment	= \$19
Care Allotment	= \$9
Educational Component	= \$1
Operational Expenses	= \$10

The *resources available* to the Program come from the funds assigned by the Ley de Presupuesto (Annual State Budget). During 1992 the resources generated by the Ley de Privatizacion (Law for the Privatization of State Enterprises) were as follows:

Annual State Budget 1992	= \$ 33,860,000
Resources from Privatization Law 1992	= \$ 60,000,000
Total	= \$ 93,860,000

The *installation costs* for Hogares in 1993 was \$ 622, and for the Multihogares de Cuidado Diario \$ 3,500.

Program Quality, Impact, and Effectiveness

In order to insure the quality of the Program in diverse contexts the Proyecto Cooperacion Fundacion del Nino-UNICEF was carried out in 1992-1993. Several teams of external consultants, cooperating with Fundacion del Nino teams, studied conditions in the different areas of attention and aspects of the functioning of the Program. From these studies they prepared projects with guidelines and recommendations. The goals of the Proyecto were to:

insure maximum levels of quality, fortify integrated intervention, make the impact of the Program more effective and sustainable, and to fortify the family unit. In July 1993 recommendations for each component were presented and preparations were made for their implementation.

The Ministerio de la Familia with the support of the World Bank and the Instituto de Investigaciones Economicas y Sociales of the Universidad Catolica Andres Bello developed and implemented a mechanized system to measure the impact of the Program on its participants (child/family/community), and the evaluation of the Multihogares. These evaluative tools will be used to revise the Programs and to optimize the quality of the Programs.

Diagnostic studies have been carried out as part of the Proyecto de Cooperacion UNICEF-Fundacion del Nino. In 1992 the National Supervision Report was carried out by the Fundacion del Nino. In 1993 a report was presented by the Universidad Catolica Andres Bello that examined the Multihogares. The study used a representative sample at the national level of 212 Multihogares, 3,937 children and 1,011 parents.

The selection process for the madre cuidadora is a fundamental element in the opening, permanence and proper functioning of the Hogares de Cuidado Diario. For this reason a study of the causes relating to the closing of Hogares was carried out in 1993. The study was based on a representative sample (10%) of the Hogares and Multihogares of the Fundacion del Nino. Results showed that in 1991 for every 100 Hogares opened, 18 were closed; in 1992 the number had risen to 29:100. The findings of this evaluation posed some critical questions for the Program to address. Many issues were looked at including selection processes, characteristics of those Madres Cuidadoras who stay with the program, and the higher rate of closing in the Hogares Tradicionales in comparison to the Hogares Exonerados.

Several studies have been done on the health and development of the children attending the Program. The health team from the Proyecto de Cooperacion Fundacion del Nino-UNICEF carried out the 'Aproximacion Diagnostica' in 1992. The report noted favorable sanitary conditions and adequate lighting and ventilation. Height and weight records were being kept but were not used for diagnosis. In terms of food and nutrition, it was recommended that the program should make more use of locally available foods and that guidelines were required in relation to food management and the quantity of calories and nutrients required by children at different ages.

In 1993 the 'Diagnostico de la Situacion del Area de Desarrollo Infantil' was prepared for the Proyecto de Cooperacion Fundacion del Nino-UNICEF. It reported that the Madres Cuidadoras carried out educational and recreational activities during the periods set aside for play, however the report also pointed out the absence of guidelines, materials and human resources; especially in terms of the Madres Cuidadoras training in and knowledge of child development. In 1992 an effort was started to provide teachers with training in methods of supporting the young child's development using the young community volunteers as a resource.

Sustainability

Developing a program and reaching a coverage of almost 300,000 children below six years of age in just four years has been a testament to the day care homes model. The longterm viability of the Program is framed within a government policy oriented toward the confrontation of the critical poverty produced by a fundamental reorientation of the economic development of the country. There is thus a great deal of uncertainty in terms of the future availability of the financial resources necessary to maintain the Program. The continuity of a Program such as the Hogares de Cuidado Diario is only guaranteed to the degree in which it becomes an integral part of public policies and budgets. The absence of this integration with government policies explains the pattern of the evolution of the Program from 1979 to 1989, as well as its slowed growth during 1991.

The relevance of the Program as a day care system means that once the situation of critical poverty in large portions of the population improves, it will continue to be a valid model for the care of children of working mothers. It will be necessary to find alternative sources to provide financial resources. One suggestion is to look to the private business sector to involve them in providing day care services for the children of their workers. The families themselves could also be encouraged to participate in sustaining the Program by contributing the fee for service which they currently receive without charge. Communities could be mobilized to demand the continuity of day care homes that provide a vital service to mothers and their young children. Financing and technical support might also be sought from international institutions or from other sectors which are not exclusively public.

Lessons Learned

There have been many lessons learned at the different levels of participation. Some have shown the value of the activities carried out and others have given rise to new initiatives for strengthening the strategy.

- Opening the way for the participation of civil organizations was a determining factor. The increased coverage of the Program would not have been possible without the presence of many institutions and people who assumed, in a solitary manner, the challenge of attending to the needs of children below six years of age at the critical poverty level. Currently the Program is at risk due to the national budget but many sectors of the population have exerted pressure to continue the day care homes. This would not have been the case had the Venezuelan government been the sole implementer of the Program.
- Community mobilization and participation have played a key role in the success of the Program. The community has been involved in all phases of the Program's implementation and has managed to communicate the message that all partners involved in the day care homes are partners in the task of providing for the welfare of the children.
- This enterprise meant working at times with great effort, to counteract institutional jealousies which interfered with the concerted labor of many sectors. In some states there is

still competition for workspaces and acknowledgment. With the Fundacion del Nino it was necessary, for example, to develop a delicate negotiation to achieve the acceptance of the presence of other facilitating organisms in what until that moment had been considered a model belonging exclusively to this institution. Much work was necessary to keep all participants focussed on the need of the children rather than on the political complexities of multiple organizations collaborating.

- With the involvement of the Facilitating Organisms it became clear that it is critical to develop a climate of mutual trust and respect. This can be achieved if the roles of each participant are clearly defined. The financial proposal which the government presents should at least partially acknowledge the value of experience in the community work which an NGO contributes when it offers to establish a Hogares or Multihogar.

- An effective decentralization scheme has been fundamental for the success of the Program. There has been autonomous participation on the part of the institutions involved. The Fundacion del Nino had previously encouraged autonomy in the work of its administrations at the state level; this autonomy was strengthened during the massification phase. In this the Ministerio de la Familia and other participating institutions have been at the forefront of the decentralizing process.

- The level of positive political support which the Program has received has been fundamental to its success. Its insertion within a social policy oriented toward the poorest sectors of the country has been a strengthening element and has generated important support due to finances received and the network of services that have been made possible.

- The acknowledgment of and use of the institutional experience accumulated by the Fundacion del Nino, achieved through several years of development of the program on a small scale, have been important. The planning of the initial stage of the implementation was enriched by the existing knowledge of the Program and its implementation.

- The motivation, social sensitivity and enthusiasm of all involved in the implementation and development of the Program over the years has been key to its success.

- It has become evident that it is critical to incorporate parents in the strategies carried out, not only as active participants in the implementation of the Program, but also as recipients of the benefits which lead them to sustained development, strengthening their capacity to improve their lives and take more control of their future situation. Community development is essential to the success of the Program. Communities need guidance and support in assuming responsibility for generating solutions to the problems they confront, and to generate pressure mechanisms in order to demand those measures which the government can and should take to contribute to their solution.

- It became evident that it was necessary to broaden the concept and strategies in the area of health, initially restricted to nutrition and very specific aspects of growth. The welfare of the children cannot be isolated from the welfare and hygiene of the family and community setting.

- Much was learned about the convenience of creating a differentiated process for the training and supervision of the Madre Cuidadoras on the basis of their permanence in the

Program. The Proyecto de Selección de la Madre Cuidadora (1993) dealt with the critical period represented by the first year in the operation of an Hogares, during which a high percentage of closings occurred. Attention was paid to Bronfenbrenner's recommendation (1979) concerning the length of training that a paraprofessional requires in order to carry out efficiently her function of caring for children. It is suggested that during the first year home visits and attendance at training workshops should be much more frequent (weekly supervision and biweekly workshops). After the first year visits could be made biweekly and workshops every 2 or 3 months.

- Initially in the early stages of the Program external agents were brought in to provide children with experiences based on conventional models of preschool education. This idea did not last due to the cost of employing large numbers of external teachers who often found it hard to reach the Hogares (due to the lack of security), or of transporting the children to classrooms. For these reasons it made sense to build on the features inherent in the model, by concentrating on a strategy which focuses on: (1) the Madre Cuidadora as the one who can offer a degree of continuity in experiences of the children, and (2) the home setting, due to the characteristics it has which contribute to socio-emotional development: a similar setting to their homes, with a small group of children of different ages, in which normal daily activities take place. To this end, the Madre Cuidadora can be given training and guidance, not in order to transform her to a teacher, but to support her in making the most of her role as a mother and in carrying out simple learning experiences, within the framework of the daily activities in the home using materials present in the home. Guidelines for this strategy are being implemented.
- One of the issues the Program has dealt with has been the imperative need to generate a rapid response to the difficult social situation of a vast sector of the child population versus the need to insure a permanent monitoring of the service rendered, in order to preserve its quality and promote the effective and permanent participation of the members of the community and of the participating families. This is a difficult dilemma to solve because the introduction of a stricter monitoring system on the part of those levels which impose Program standards implies limiting the initiatives of the basic implementation levels and therefore the expansion process is restrained. The executors of the Program are very absorbed by their administrative duties thus it would be difficult for them to deal with more technical aspects which require a large amount of reflection and elaboration.

Highlights

One of the significant aspects of the Program is the role women play at all levels. Not only are women the direct beneficiaries as mothers of the children cared for, they are also the ones who implement the Program. In the massive extension phase of the Program women were involved in its defense and implementation. In the interior of the country for example the wives of the mayors have found in the Program an important arena to air their initiatives for social action, as well as a place to use their leadership capacities. The program has provided opportunity for training and income for the Madres Cuidadoras.

The Program has continually emphasized the importance of community involvement in order to make it a sustainable and viable service for mothers with children six and younger who are living in conditions of extreme poverty.

The relevance of the Program as a day care system means that once the critical poverty in large portions of the population improves it will continue to be valid as a model for the care of children 0-6 years with working mothers.

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