
SITE VISIT: Promesa—An Integrated Community-Based Early Childhood Education Program

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Publication of CINDE, 1998.

PROMESA, the Project for the Improvement of Education, Health and the Environment, CINDE's largest and most long-term program, situated on the Pacific Coast of Colombia, in a hot, humid and isolated area, which is accessible only by boat or small plane, was initially designed as an alternative participatory approach to ECCD focused on creating health physical and psychological environments for the development of children, that could serve as a basis for integrated sustainable social development. Embedded in PROMESA was a concept of community development based upon the notion that individuals must be involved in their own process of development, and that for this development to occur there must be a simultaneous process of change in the intellectual, physical, economic and socio-cultural aspects of life. Moreover, for this to happen individuals need to develop the ability to solve problems and to think logically, and they need to develop the confidence to carry out such changes. The approach is based on the following concepts:

1. The Healthy development of young children, depends on the quality of the environments where they grow being the family and then the community the most important in the first years of life.
2. To achieve sustainable integrated social development, each individual and community must be involved in, and generate their own development processes. This requires a process of accumulative changes in a critical mass of people in the different areas of human and social development: the psychosocial and educational, the physical, the productive and the socio-cultural. Through these processes, the individuals and groups gradually strengthen their self-confidence and ability to solve problems and obtain more psychologically energy to face gradually more complex problems to use more effectively the resources from their environment.
3. Those changes should be articulated around and within the family.

During its first ten years, PROMESA was sponsored primarily by two Dutch organizations, the Bernard van Leer Foundation and CEBEMO. The project started in 1978 with 100 families in four small farming and fishing villages, and involved training community mothers to be parent educators and community leaders. It now serves approximately 7,000 families both along the coast and in the interior regions of Chocó, while variations of its approach, or components of it,

are being implemented in other parts of the country and even in other countries.

The Methodology

The program began by encouraging groups of mothers, under the leadership of "promotoras", or community leaders (who were local mothers), to stimulate the physical and intellectual development of their children from 0 to 6 by interacting in meaningful ways with them and playing games with them in the home. Gradually, during the meetings the mothers started to identify other problems related to topics such as health, nutrition, environmental sanitation, vocational training, income generation, and cultural activities. Over time therefore, as individuals gained confidence and developed a greater understanding of their overall needs, PROMESA expanded into an integrated community development project, with the entire community participating in one or more aspects of the program. The various activities which developed can be classified into four basic components: socio-intellectual, physical, productive, and socio-cultural.

The component of psycho-social and intellectual development has involved the continuous education of adults through workshops, self-study groups and follow-up activities aimed at improving the quality of family interactions and life. Most of the participants are parents of children from zero to nine years, who are interested in improving the quality of the physical and psychological environment where they live, and in enhancing the development of their children. The education for these parents involves programs to learn how to provide a healthy environment for young children, vocational training, and education for leaders. It has also involved the development of a set of educational toys and games to improve the interaction between the parents and their children and to encourage processes of logical thinking. Preschool and nutrition centers have also been organized and run by the community, with the support of local institutional agents.

The physical development component includes health, nutrition, and environmental sanitation. The most important accomplishments of this component include the development of a primary health care system administered by the community based on an approach of **Health Promotion**, that included a methodology to prevent malaria.

The productive component has supported the organization of groups interested in improving their income generating, organizational and administrative capacities, and has included the establishment of revolving funds and activities aimed at improving the quality of work and the marketing of their products.

The socio-cultural component has aimed to foster the organization of activities designed to strengthen the cultural identity of the groups, especially by recovering and reviewing important aspects of their past history and culture. Part of this component includes the formation of groups whose objectives are to organize and become involved in different cultural activities, such as, drama and music; local or folkloric games; and the study of native myths, legends, and cultural medical practices.

Seven particular management features have had an important impact on the success of the

program, and deserve to be highlighted:

- a. The families represented especially by the mothers, have been involved from the beginning in all the dimensions of the program: planning, implementation and evaluation. Their participation has been centered on creating healthier physical and psychological environments for their children at the family and community level;
- b. Community leaders, many of them mothers, have been the main educational agents in the program;
- c. The external agent, CINDE's personnel, has not been directly involved with the community, but rather their role has been to educate the community leaders, to serve as facilitators in the development process, and to act as a link with other institutions;
- d. Emphasis from the outset on inter-institutional and inter-sectorial coordination and complementarily at the local and regional level has contributed a great deal to the success of the program; and
- e. Despite the impoverished area in which the program is located, attention has primarily been directed (especially the first ten years) towards educational and organizational processes.
- f. The priorities and specific activities in each community have been defined by them based in the identification and analysis of their own problems and needs.
- g. Most of project activities have started outside the school or other formal systems and gradually have been assumed by the system in the innovated form.

EVOLUTION OF THE PROJECT

The project has evolved in many ways:

- . From a process that started with 100 families in four communities of the Pacific coast of Chocó in two municipals (towns) to 38 communities in 7 municipals and 11.500 families in the whole state (7000 that participate in integral development processes and 4.500 additional ones that participate and benefit from the malaria project.
- . From working mainly with mothers interested in the healthy physical and psycho-social development of their children to an integrated development project involving all the members of the community in health, educational, cultural, housing and productive activities.
- . From a project initiated basically from the non-formal sector to a program articulated to the formal health, housing and educational system with basic education, and higher education.
- . From an informal organizational base integrated mainly by mothers from children from 0

to 6 to a program with a broad community organizational base (PROMESA) and an autonomous local NGO (CIDEAL) with the technical capacity to administer all the dimensions of the program.

- . From a project financed by components and activities on a short term basis to program financed on an integral basis on medium term.
- . From a project with presencial training programs only for community leaders to a flexible learning program using diverse educational strategies for people at levels including distance education using radio, radiophones, study groups and self learning strategies in addition to seminars and workshops.

ACHIEVEMENTS AND EVIDENCE OF EFFECTIVENESS OF THE PROGRAM

There are evidences of the effectiveness of the program in the whole environment, but they can be specified by target groups.

In children

The mortality rate in the first five years has decreased from 110 to 76 per thousand.

There has been also a sensible reduction in children morbidity.

Elementary school children are staying longer in school. Results from a longitudinal study show that in 1980 only 17% of twelve-year-old children reached fifth grade, but in 1989 51% of them did.

Elementary school children were achieving better in mathematics, language and logical thinking than their 1980 peers.

Children are participating in a dynamic way in the development of their own communities in educational and cultural programs, mainly through a child to child and a youth to child program and are making more productive use of their free time.

In the families and communities

There is a wide group of promoters, community personnel and about 220 volunteers and community based organizations guiding the different activities to support the community work.

PROMESA, the community organization started with groups of families that got organized at the neighborhood level and have now reached municipal and regional level.

The mothers show a healthier self-concept, have better relationships with their husbands, the communities value more the older people and there has been integration of the indian black population in the programs.

The parents and community are playing a very important role as educators of their children and improving the physical environment through constructions of latrines, reforestation, malaria and

cholera prevention programs.

About 4100 latrines (tazas sanitarias) have been installed by the communities and they have learned to use them adequately.

The houses are built in a more hygienic way and many of them have had improvements such as separating the different spaces, built with quality materials and away from stagnant water.

There is a network of 34 microscopes in the more isolated communities and a group of community health workers prepared to diagnose and treat malaria actively participating in the program. There have not been deaths or people going to the hospital because of malaria since 1992 and the cases of the diseases have decreased greatly in the last years.

There is a network of radiophones, 6 of them in indian villages to support communication, training and problem solving.

The communities are more self-confident and have more ability to work at the individual and collective level to solve problems related to their children.

Communities and families are valuing more the educational opportunities offered by their environment and have learned to mobilize resources to develop new opportunities.

In the teachers and schools

There is a program to strengthen Escuela Nueva.

The teachers from the different communities have developed a curriculum and materials to prevent malaria and cholera, are developing a child to child, dental health and learning how to think program.

Some schools have organized pedagogical teams formed by teachers and parents to strengthen the quality of education and the school community relationships.

The teachers have developed partnerships with the promoters to strengthen children's learning opportunities

The physical facilities of many schools have been renovated and many community and school libraries have been organized.

In the Institutions

The interaction among different institutions and the articulation of actions to improve the conditions of young children have been strengthened and mechanisms to evaluations and follow up have been devised.

CIDEAL (Center for Research and Local Sustainable Development) a new local NGO has been formed with people from the region, has assumed CINDE's functions and is articulating actions with the community organizations

There are about 140 professionals, working in the different institutions of the social sector that have graduated from CINDE's graduate programs on Education and Social Development and Social Project Planning and Implementation.

Many innovations related to the integral development of children are taking place in cooperation with national, state and local governments.

In CINDE

CINDE's 20 years of experience parallel the development of PROMESA. As a research and development institution we have evaluated and systematized as many dimensions of the experience as it has been possible and we are complementing all the available information this year with support from the Bernard van Leer Foundation.

The most important lessons learned from this experience are:

Children's programs can be the basis for integrated and sustainable social development.

Social development is a long process that requires: a critical mass of organized people involved in a diversity of participatory educational processes and actions that produce some accumulative effects.

The role of NGO's in social development programs in isolated areas is crucial: it is the glue that puts together all the pieces of the puzzle.

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