



Turimiquire Foundation

Annual Report 2015

Our U.S.-based non-profit 501(c)3 Foundation has served the low-income population of Sucre state in north-eastern Venezuela since 1996. Based on more than 38 years of living and working in impoverished rural regions of northeastern Venezuela, we have developed our three-step [Recipe for a Thriving Community](#) as a blueprint for action that guides our work in these rural communities:

(1) FAMILY PLANNING: Empowering women and families with the means to control their own fertility.

- ⇒ In 2015, we offered our services to more than **3,000** additional reproductive-age women and their families, delivering **10,196 Couple Years of Protection (CYPs)** - the metric by which USAID measures family planning achievement - to the low-income populations that we serve.
- ⇒ Calculating an average family of five, approximately *12,000 additional family members* also benefited.
- ⇒ Cumulatively, from May 1997 through December 2015, we have delivered a total of **89,739 Couple Years of Protection** to low-income families seeking to control their fertility.
- ⇒ To achieve this, we have served over **38,000 rural and urban women** with birth control methods, including **4,854 tubal sterilizations**, the most popular method for mature women and their families here in Venezuela.
- ⇒ Since 1997, we have done this on an average budget of less than **\$50,000** a year dedicated to family planning and reproductive health. Our operating costs, at **\$10.09 per CYP** in 2015, are well below documented averages.
- ⇒ Venezuela has a large young population with one of the highest teenage pregnancy rates in Latin America and the Caribbean. Starting in 2003, we have offered a total of **2,623 Workshops in Sexual and Reproductive Health** to **50,677 participants**, primarily students and teenagers, averaging almost 200 presentations each year.
- ⇒ We are reaching more and younger women with reversible family planning. In the past, most rural women survived significant infant and maternal mortality and morbidity — as well as economic adversity often directly related to supporting large families -- until they would finally seek surgical sterilization in their 30's. Now, in 2015, the average woman we serve is in her mid 20s with two children, taking control of her reproductive health and fertility with a variety of reversible options much earlier in life.
- ⇒ Women relieved of the burden of involuntary fertility become outspoken examples for their extended families and neighbors, showcasing the improved quality of life accessible through controlling the size of their families.
- ⇒ As the *only* civil organization offering these services in the whole eastern half of Venezuela, we have become the local reference point for family planning services and reproductive health education. In the current economic crisis, with contraceptives largely unavailable, our resources have been stretched to an extreme.

(2) EDUCATION: Once families gain control of their fertility, they concentrate on giving their children the best possible future through schooling.

- ⇒ Our **Scholarship Program** for the *Vía Cumanacoa* community enables an average of **50 rural students** each year to continue their studies at local high schools. Over 500 students from semi-literate families have now attended high school with the help of our program. Previously, most students in this community abandoned their formal education at or before the sixth grade.
- ⇒ *Twenty* of these high school graduates are now studying at the *college level* with ongoing Foundation support, a real precedent. Each year more students graduate from high school and continue to college.
- ⇒ Two of our rural college students have graduated with *nursing degrees*, and one in food technology.
- ⇒ Three of our high school graduates run outlets out of their rural homes for our *subsidized school supplies* for these remote primary and high school students.
- ⇒ Our *Brito-Barrancas Education Program* offers staffed library and computer facilities at a new site upriver – two hours walking distance from the nearest road—to support students at the new remote rural high school, and to maintain a government-sponsored satellite Internet connection.
- ⇒ We help support several kinder and primary rural schools with teacher training, school supplies, maintenance and lunch programs.
- ⇒ Our rural high school and college students, as well as low-income urban students, regularly study at our urban *Computer Center* in Cumaná, which offers *free Internet, tutoring and a study area* for schoolwork.
- ⇒ Everyone agrees: **Education is the priority.**

(3) COMMUNITY: Investing in people first!

We develop community infrastructure in the remote road-less rural valley that we work and live in. We support projects in water delivery, electricity, public trail improvement, and agriculture, including the cultivation of unusual tropical fruits. Our Education and Community Center encourages sports for youth, and also serves as a base for local commerce and town-related activities.

Our Finances in 2015

We work hard to accomplish a great deal on a small budget. We do more with less:

- ⇒ We spend very little on infrastructure and staffing. Instead, we ride "piggy-back" on existing public and private health infrastructure, adding only specifically what is needed for them to deliver their services more effectively.
- ⇒ Donations, *social marketing*, and sliding scale fees for our medical services all help to cover our operating costs. Our services are offered at highly subsidized prices, and *no one is turned away* for not being able to pay. Most everyone can help with *something*, and a few need extra help from us.
- ⇒ We invest *minimally in public outreach*. Women and families proactively promote our services through word-of-mouth, and state public health facilities and private agencies now regularly refer clients to us.
- ⇒ Our goal is to improve the lives of as many low-income clients as we can. Our success drives demand. More people come to us for help than we can satisfy at our currently funded levels.
- ⇒ Our Officers and Board Members are volunteer. All paid staff is Venezuelan.
- ⇒ Fundación ServYr, our non-profit organization in Venezuela, independently received **\$3,614** in patient co-pays and in-country support in 2015.
- ⇒ Administrative costs for 2015, including fundraising, were **3.4%** of our overall budget. Over **96 cents** of every dollar went directly into the field. Over the past fifteen years, an average of over **93%** of our budget has gone directly into the field, and we are becoming even more efficient.

In Venezuela, a little can go a long way. We appreciate the help that many of you give us, and hope that you'll continue to support us. *Thank you!*

The Turimiquire Foundation is a 501(c)(3) non-profit organization.

Donations are fully tax deductible.

Please contribute by check, payable to the Turimiquire Foundation, or online at www.turimiquire.org/contribute/

Expenses		%	Income	
Administration:		3.4%	Donors \$5,000 and more	\$ 76,000
Office	\$ 3,382	2.9%	Grants and Support from Organizations	\$6,750
Fund Raising	\$ 637	0.5%	Individual donations \$1000-\$5000	\$ 18,903
Programs:		96.6%	Individual donations less than \$1000	\$ 11,000
Family Planning and Education in Responsible Sexuality and Reproductive Health			Interest Income	\$58
\$ 103,368		88.1%	Total	112,710
Rural Education Center and Student Scholarships			Most years our income does not cover our program expenses, but we always find a way. The occasional years that income exceeds expenses are what allow us to cover the deficit years, and to be able to respond to important new opportunities.	
\$ 7,179		6.2%		
Rural Development, Infrastructure and Agriculture				
\$ 2,733		2.3%		
Total				
\$ 117,299		100%		

Donations in any amount help to sustain our work!

Turimiquire Foundation



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