

Reason for the research and the need to help these people

A young woman that worked for a company that was in the same building as FairPlay has a son. At the time he was about 2,5 years old. She took her son to work each day since she had no alternative and the son used to sit in a corner or play quietly with some toy he got somewhere.

On a Monday she turned up with her son (Carlos) being very sick. He had diarrhea and a fever. By Friday Carlos had lost weight, was dehydrated and in pain so I couldn't watch this anymore and persuaded the mother to let me take him to a good pediatrician.

The pediatrician examined the child and gave the mother a prescription and some explanation and a booklet with guidelines on nutrition.

Apart from the virus the child had, he was suffering from 2.5 years of malnutrition.

I know the mother quite well and know she loves her child and would do anything to give him the very best that she could offer. Unfortunately most mothers lack education and knowledge to understand the benefit of nutrition, hygiene and health. They rely on what their mothers have thought them.

When mother and son had left, I had some questions left for the pediatrician.

This is how I learned that children's brains form physically during the first 3 to 4 years of their lives and when a child is constantly malnourished during these years, the development of the brain suffers most. This results in a stupid child that will be a stupid adult. There's nothing you can do after these first 3 to 4 years.

Therefore children can't follow at school, get frustrated, lose their interest and drop out. These children are doomed to low paid jobs in the best case or being unemployed most of the time, seeking relief in alcohol or drugs,

I think this is incredible. At 3 years old you are already out of the system and chanceless. I couldn't let go of this story. It is a story that is always with me and since that day we started working on a plan that really made sense and that could break this circle of extreme poverty.

Defining a problem and executing research

A small pre-research project in 2007 led to some shocking facts. About 24 % of the families in Cusco live in extreme poverty and about 72% of these families consist out of a single mother with 1 or 2 children.

The definition of 'single mother' is a mother who takes care of herself and her children completely by herself and doesn't receive any help from the father of the children or a partner.

With a big scale research we have tried to understand what the living conditions are of this group of families and what the consequences are for their children.

The research had 2 parts;

- A. Child Status Index is a tool from the United Nations which they use to measure the condition of a child, divided into 5 chapters. We adjusted this tool to serve our goals of the research and it existed out of 180 multiple choice questions covering; nutrition, hygiene, living environment, care and protection, education and psychosocial development. The BMI was measured and mothers filled out a schedule of the daily menu's, divided into the 6 food groups.

- B. Livelihood research is an interview with 200 open questions to create an image of the living conditions of the family and especially of the chances and threats to their way of living.

A team of Peruvian single mothers was trained during 2 weeks to execute the interviews. We visited 6 poor neighborhoods spread over Cusco and did a total of 400 interviews of which 310 were valid and within the boundaries set.

The research itself has been created by a team with a Dutch anthropologist, a Dutch psychologist with working experience in Cusco and the FairPlay team.

To motivate families to participate we gave each child a set of colors and some paper and we had a lottery in which 1 participant out of 50 won a set of cooking pans.

All women that executed the interviews had a scale and measuring tape to determine the BMI of the children.

All women interviewed are single mothers with a maximum of 2 children that live with her and for whom she has full responsibility and that have no physical or mental handicaps.

Conclusions from the research

The 400 interviews gave us 310 valid ones.

Although in a purely scientific sense there were quite a few parts of the research that had space for personal interpretation, we have been able to get some data and conclusions out of the research.

CSI nutrition

1. The average menu of the children looks like this;
Breakfast; a cup of tea with a piece of bread
Lunch; rice, often in combination with potatoes and sometimes a bit of vegetables, mostly for the taste.
Diner; leftovers from lunch
Children spend a few centimes on candy, on special occasions there's a little bit of meat and sometimes there's drinks with a high level of sugars
Children almost never eat dairy products, fish or meat, vegetables or fruit. Sometimes there's soup existing out of water, a very small amount of vegetables and pasta.
Carbs are the big majority of the total nutrition. Most mothers have no idea about the necessity or value of varied nutrition, proteins, vitamins or minerals.

CSI Hygiene

1. About 90% of the families do not have running water, a toilet, a fridge, soap and toothbrushes or toothpaste. When there is running water it is a tap in the patio (used by several families) and there is always a limit to the amount of water they can use.
2. Hands, plates, forks and knives and cooking utensils are usually rinsed in a bucket with water that is being used all day. A bucket is being used as a toilet and is emptied at the end of the day in the bushes outside.

CSI Care and protection

1. The families have no access to medical care and usually self medicate. For emergencies there's access to a poor peoples medical care system but mothers have to register and have an address. Since they move very often, almost 100% is never registered. To register they have to bring an invoice of water or electricity with the address where they live but the owners will almost never give them one. When they get to a government run hospital, the stay and treatment is for free but all medication and utensils have to be paid for. Someone with a cut in his hand will visit a doctor,

- get a prescription for a needle, antiseptic and thread, has to buy this in the pharmacy and return to be treated.
2. 90% of the mothers have an unstable occupation and have to work 6 or 7 days a week, often at very unfavorable hours. They have no money for private day care for their children and the government ones are very limited and of very bad quality. More than 70% of the (often very young) children are left alone at home. Usually the children are locked in the house, in rare cases there's someone watching the children now and then.

CSI Education

1. There is an obligation to go to school for children up to 16 years of age. Government schools are for free apart from materials and uniform. There is however no control on kids going to school and often the classes are so big (40 to 50 kids in 1 classroom) that the teachers are happy that part of them never show up. At school there are no materials or books. The teachers write the content on the board and the students copy this if they want. There are no tests or exams that are graded so the students pass unless the teachers decide that someone has to do a year over.
2. Due to malnutrition as a baby and young child, the children's brains don't develop well and children can't follow in school and fall out. These children (often between 8 and 12 years old) help their mothers at work or wander around in town. These children are easy pray for abusive situations.

CSI Psychosocial development

1. Young children are very independent. Mothers are never there or tired from work and depressed because of their living situations. The families live very isolated. Children don't develop a connection with other people and never receive love, attention or warmth.
2. Most children grow up without a father or man in their lives and if there's one it is almost always a negative influence due to frustration, alcoholism, abuse, ...

Livelihood

The livelihood research only led to some conclusions. The reason is that while developing the research, we started from a living situation that was far over rated. We started with the idea that lots of area's were very bad or negative but never expected lots of issues to just not exist.

1. The families have no stable source of income so due to irresponsible behavior or sickness of the mother there is sometimes no money for rent at the end of the month and the family is evicted from the house. We don't know exactly how often this happens since there's a lot of shame about this subject but it seems that the average extremely poor family moves 2 to 3 times per year.
2. The families have no form of security or help from the government or their surroundings. The people have no insurances, can't access any form of help and have no contact with their surroundings or neighbors. The mothers have no savings, property and don't build a pension. If there's money, there's food, if not, not.
3. Sometimes these mothers get into such difficult conditions that they leave their children behind or with other people, knowing it is not good for their children but with no other options in life.
4. No one knows exactly how many of these people die due to sickness and lack of medical care, extreme malnutrition or cold. No one exactly knows how many of these people and children live on the streets or which role alcoholism, drug abuse, violence, physical and sexual abuse, play in this ongoing poverty.