

*Yo Quiero, Yo Puedo:
25 Years of Changing Lives*

IMIFAP



25th Anniversary Report



"Development can be seen . . . as a process of expanding the real freedoms that people enjoy."

Amartya Sen, Development as Freedom

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Statement from the President



Imagine it, millions of people more able to make their rights a reality, to care for their health, start their own business, provide for their children and improve their community. This is what IMIFAP has

done. In its 25 years IMIFAP has identified the common bases of a range of personal and community issues and developed a broad life skills and psychosocial reduction model of programming that brings about long-term changes in people's identity and outlook on life. By extending and scaling up our programs this model has reached over 15 thematic areas, 19 million people, and 14 countries.

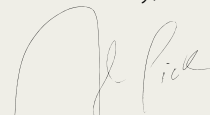
There is so much to say about our achievements over these 25 years, so let me share with you a few of our projects of which we are particularly proud. This year we completed our largest program to date, a six-year comprehensive community development program in the southern Mexican states of Chiapas and Hidalgo. We reached over 696,000 individuals. We also launched the Ven Atrévete initiative. Encouraging adolescents to "atrévete", or dare to ask about HIV/AIDS, VenAtrévete.com uses interactive media and games to spread awareness of HIV/AIDS issues to young people across the Spanish speaking world. At the same time we undertook a second project with adolescents, creating a powerful one minute video clip, which will be shown in movie theaters across Mexico, to sensitize youth about partner violence. We began work with the Mexican government this year to utilize our life skills model to enhance the nutrition and civic participation of the nation's 300,000 poorest households. And in the coming months we will publish with Oxford University Press a book on strategies for more sustainable human development programs, based in the theoretical work of Nobel Prize Winner Amartya Sen and our 25 years of experience.

What has made us successful in our work is what also makes us unique: the way we develop and carry out our programs. Since 1985, we have conducted rigorous formative research, pilot testing, and evaluation, and have based our programs on these findings. We work closely with schools, community leaders, government and businesses in program development and implementation to ensure that our programs and the public policies and social programs that result from them represent the needs of the communities. In 2008 we won the support of the *Fondo de Estrategia Social* to strengthen our institution and broaden our reach. This year I received an invitation to serve as a Senior Fellow at Ashoka; Ashoka describes its Senior Fellows as "leaders in their fields" who have "created widespread impact". This recognition of our innovative programming means a lot to us at IMIFAP, and we are thrilled for such opportunities to share what we know and further develop our program models.

"What has made us successful in our work is what also makes us unique: the way we develop and carry out our programs".

I have been unimaginably lucky over the past 25 years to have been part of the strong IMIFAP family. Teachers, parents, authorities, governments, NGOs, program participants, program funders, and staff from around the world have been central to IMIFAP's success. This family has supported us and allowed us to grow, and for that we are very grateful. In the following pages I hope you gain a greater understanding of our programs and the ways you can support our work. We look forward to having you as part of our family over the next 25 years.

Sincerely,


Susan Pick
President



Jonathan Márquez, former teacher who collaborated with IMIFAP in the application of several IMIFAP “I want to, I can” programs. *“The workshops that IMIFAP carried out in my school have always been fruitful and truly innovative. They are intensely-lived experiences, and we loved them. Before the workshop there was a certain resistance to participate in the school community on the part of the parents ... afterward, there was a much greater disposition to become part of that community and to take on a more involved role in the education of their children. I thank the people of IMFAP who allowed me to grow.”*





Mission

To create and implement programs which contribute to sustainable human development in order to allow individuals to take control of their own health, productivity, and lives.





Objectives

- ✧ Strengthen human capabilities, specifically those related to health, education, and productivity
- ✧ Facilitate psychosocial skill-building and life skills development from childhood through adulthood
- ✧ Design, implement, and evaluate comprehensive health, education and productivity education programs supported by scientific research
- ✧ Establish partnerships with NGOs, governments, businesses, and communities
- ✧ Search for prevention-focused, sustainable solutions in accordance with community needs
- ✧ Instigate social change directed towards promoting well-being and active participation in the communities in which we work
- ✧ Replicate and extend the advances of our programs in other regions



A 25 Year Retrospective

In the 1980s, research in Ciudad Netzahualcoyotl, a shanty town on the outskirts of Mexico City, showed that although most women thought positively of the use of contraception there was a discrepancy between these ideas and their practices. Sex education programs present within Mexico at the time were basic and technical; they focused on population control. Research showed that as a result, the women of Ciudad Netzahualcoyotl lacked knowledge of contraceptives, had minimal decision making and communication skills, and felt fear, shame and powerlessness over their decisions.

IMIFAP was founded by a group of social psychologists to continue this work. We looked to apply social psychological research to sustainable development programs, and focused mainly on identifying determinants of women's contraceptive behavior. In the first few years, our results suggested that sexual health and behaviors of adolescents in Mexico were strongly influenced by socio-cultural patterns. Comments from adolescents reflected this influence: "What will people think of me if I talk about those things?" "Whether or not to have sex is the man's decision. He uses us; that is what is expected of us". Based on these and other results, we began to facilitate family planning practices among women living in marginalized areas of Mexico.



Our approach focused explicitly on individuals' needs and behaviors. Our programs would be participatory and reflection based, teaching life skills and reducing psychosocial barriers to change. Our goal was to help participants acquire factual information about sexuality, increase cross-gender awareness, build decision-making and communication skills, understand their rights, and develop a sense of autonomy and control over their lives. In the end, after much piloting, this would become the first program and first educational material we developed, entitled "Planning Your Life".

With further research, we extended the program to children of younger ages and developed a program for parents. Working with the Mexican Ministry of Education we trained teachers nationwide in the program and introduced sexuality education into the national school textbooks. Concurrently we deepened our theoretical knowledge and determined that many health behaviors had similar predictors and that programs that took a multi-thematic approach brought about improved results overall. Furthermore, we found that through our multi-thematic programs, beneficiaries developed control in other spheres of their lives as well.

It is this research and the understandings that derived from it that have driven IMIFAP's health promotion and poverty reduction programs since inception. After 25 years, we have shared our research with the development community through over 200 articles and 240 books. We have developed, evaluated and scaled-up 15 health programs, two to the national

level, and today, a substantive portion of school-age youth in Mexico uses textbooks containing a life skills education program. Over the past 25 years, 19 million individuals have benefited from IMIFAP's work.



Reflections on 25 Years

Héctor Pérez, Vice President of Administration and Finance

Almost two decades working with IMIFAP, and each day is a new challenge, a new way of making our mission reality for the populations with which we work. I am proud to be part of this institution that has developed and continues to grow with strength and enthusiasm.





A 25 Year Retrospective



Martha Givaudan, Executive Vice President

"I arrived 19 years ago, when IMIFAP was very small. We didn't have much in the way of technology, and we were made up largely of volunteers. In the intervening years our staff has grown, and so has our number of programs and publications. A greater awareness of the importance of public health has developed in Mexico and government initiatives now align more closely with IMIFAP's vision. IMIFAP has given me the opportunity to do something for my country. Our challenge now is to bring our programs to more people, more organizations, more policy makers and more countries."

IMIFAP through its Slogans

2008-2009 Highlights

- 22 projects underway in 2009
- 1,279,658 estimated program beneficiaries in 2009
- 25 projects completed in 2008
- 1,040,914 program beneficiaries in 2008

When IMIFAP was first founded in 1985, we chose the slogan "Hacemos en pequeño para que otros hagan en grande" [We do on a small scale so that others can do on a larger one]. This reflected our goal to work for the scaling up of successful programs. But in many ways we were ahead of ourselves; our work was still focused on determining what exactly the small program should look like. And

so within a few years, IMIFAP's slogan was changed to "Educación, salud y vida" [Education, Health and Life]. While this new slogan aptly captured the topics in which we worked, it failed to express the profound impact we were seeing from our programs. "Facilitando alternativas... Mejorando vidas" [Facilitating alternatives . . . Improving lives], our next slogan, lasted only a short while before we judged it to be simply too complicated. We have finally settled on "Tu vida en tus manos" [Your life in your hands], vividly explaining the impact of our work. Changes in IMIFAP's slogans have gone hand in hand with our growth. And while our slogan may again change as we continue to develop as an organization, our mission to enable individuals to take control of their lives remains unchanged.

"Before I was scared, because the truth is I didn't go to school and when someone spoke to me, I thought they wanted to rob me or they were going to tell me to leave. Yes, I was very scared before, but not anymore."

- Single mother participant, Santa Ana Tzacaula, Hidalgo





Executive Summary of Program Results

19 million people have been reached by our programs.

Since 1995 in particular:

- 938,414 people reached by a comprehensive development program
- 18,157 children, parents and education professionals reached by workshops on substance abuse prevention
- 13,189 women educated about cervical and breast cancer
- 9,544 people educated on diabetes prevention
- 32,400 children reached with programming on coping with a natural disaster
- 275,337 people educated on HIV/AIDS prevention
- 6,877 men and women trained and financially supported in starting a microenterprise
- 96 percent loan return rate in our microfinance projects
- 303,110 people educated on nutrition
- 43,935 people educated in family planning
- 6,476 children, parents and education professionals reached by programming to improve children's school performance
- 229,930 people trained in violence prevention
- 11 million adolescents and children trained on citizenship



Programs

After twenty-five years of involvement in community-based development work in Mexico and around the world, IMIFAP still holds true to the original ideals which have made its programs a success: each program strives to allow individuals to take control of their own health, productivity, and lives. Our programs cover a wide range of topics, from public health concerns including violence, diabetes, HIV/AIDS, unwanted pregnancy, cancer, and substance abuse, to school performance, parenting, gender issues and microenterprise development.

IMIFAP programs are targeted to strengthen individual and community capabilities and to promote in participants personal changes in behavior, norms and attitudes as the route to human and community development. In order to achieve this goal, the Framework for Enabling Empowerment (FrEE) (Pick and Sirkin, in press, Oxford University Press) has been developed to guide the creation of each new program. FrEE stresses four objectives: facilitating the acquisition of knowledge, life skills and opportunities for reducing psychosocial barriers such as shame, guilt, fear and social pressure to conform; encouraging individuals to experience that behavior changes are possible and under their control; strengthening these activities with training for local teachers and community promoters, advocacy with local public officials, and dissemination of information to the broader public in both official and indigenous languages; and conducting programs in an interactive fashion, supported by educational and promotional durable materials and in small groups.



All programs are based in formative research and diagnostic studies, integration of evaluation into program design, creation of materials, program piloting, and training in schools, communities, government, and businesses. Through a focus on direct action in communities, we ensure that we are addressing unforeseen yet critical needs in our target populations. Close accompaniment of facilitators during workshop replication and coordination with program beneficiaries and external evaluators is also essential, ensuring program quality and providing our staff with a strong feedback loop. The result of the well-built partnership between IMIFAP personnel, the communities with which we work, and

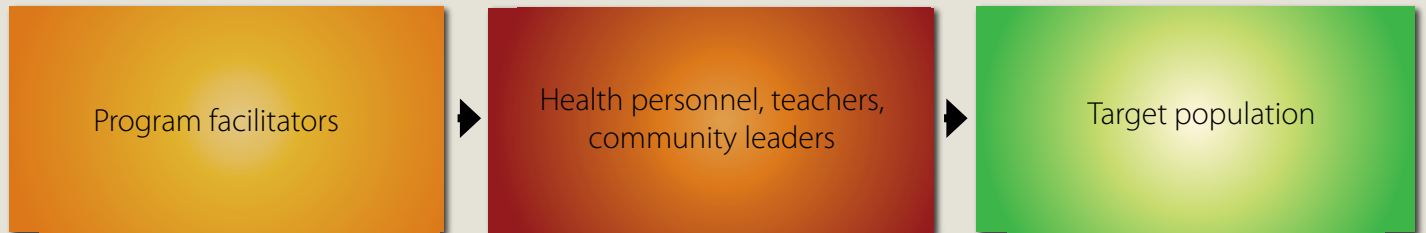
“The result...is a program that is fine-tuned to the needs of the target population and well-positioned for institutionalization”.

evaluating agencies is a program that is fine-tuned to the needs of the target population and well-positioned for institutionalization.

IMIFAP program results have been significant, bringing about changes in participants’ knowledge, attitudes and behaviors in the targeted areas for each program. These results range from better school performance to increased vegetable consumption,

from growth of participants’ sense of empowerment to their willingness to be open with their neighbors about problems and to intervene on behalf of community members who suffer abuse.

Our evaluation questions and scales have shown that non-targeted results are a key outcome of our programs. Results go beyond changes in knowledge, skills and behaviors to include increased personal agency and community involvement by participants. Beneficiaries not only attend health clinics, get better grades in school, use contraception, boil their water, and have pap smears; they also work for improvements in water access, higher teacher attendance rates and better health services in their communities. These kinds of results are seen for programs across the board: violence prevention, parenting, health and microenterprise. Empowering individuals in one context gives them the tools to take other areas of their lives into their own hands. This is proof of our guiding principle: that giving people the tools to help themselves is the fundamental building block of development.



IMIFAP programs use a closely accompanied cascade methodology, whereby we train community health personnel, teachers and community leaders; these individuals are then charged with replicating the program among community members to achieve maximum impact. All our programs are based on a perspective of life skills, gender and masculinity, and social participation.

	Comprehensive Community Development	Cervical and Breast Cancer	Citizenship and Culture of Legality	Disaster Relief	Family Planning	HIV/AIDS	Hygiene and Sanitation	Microenterprise	Nutrition	Obesity, Diabetes and Cardiovascular Disease	Parenting	Quality of Health Services	School Performance	Substance Abuse	Violence
Children	✓		✓	✓		✓	✓		✓				✓	✓	✓
Adolescents	✓		✓		✓	✓	✓		✓	✓				✓	✓
Women	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓		✓		✓
Men	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓		✓		✓
Teachers	✓		✓	✓	✓	✓	✓		✓		✓		✓	✓	✓
Health Personnel	✓	✓		✓	✓	✓	✓		✓	✓		✓			✓



Comprehensive Community Development

Comprehensive Community Development is our most recent program. Incorporating the range of topics necessitated by the needs of each particular community in which we work, this program is also the keystone of all our work for its ability to holistically address the issues within a community as they relate to one another in a sustainable and cost-effective manner. Topics are addressed concurrently with health personnel, adults, adolescents and children in both school and community contexts.

For children, women, and men alike, the mono- and multi-thematic IMIFAP workshops utilized in the Comprehensive Community Development program aim to bring about behavior changes in health, rights and economic productivity; building participants' empowerment in these areas so that they may have a higher quality of life. Across communities the program has led to improvements in inter-family communication, changes in attitudes about gender, better communication and decision-making skills and

health practices, greater knowledge regarding sexuality, and improved personal satisfaction and self-image, with variations among these results reflecting the way in which the program was tailored to the community. The program aims to reach 11,000 rural communities and includes a focus on nutrition for the 300,000 poorest households.

The Comprehensive Community Development program combines many of the topics which we discuss below and can include any range of other topics as well. Its structure is ideal because it brings together different themes into a single, cohesive whole, rather than treating them as separate and unrelated topics. We at IMIFAP feel that development comes as a result of the integration of the different topics into people's lives. Comprehensive Development enables us to attack poverty in a community from all fronts, tailoring the methods and the topics we utilize to each community's needs.



Case Study: Comprehensive Development in Chiapas and Hidalgo

From 2002-2008 IMIFAP implemented its Comprehensive Community Development program through a project entitled "Empowerment, Health, and Productivity for Social Development." Carried out in the southern Mexican states of Chiapas and Hidalgo, it is one of IMIFAP's largest projects to date. In collaboration with twelve government agencies, IMIFAP was able to reach over 696,000 men, women and children. Independent evaluations confirmed the program's positive results, finding that participants across all demographic groups made significant advances in their understanding of hygiene, sexual health, social well-being, and the importance of self-assertiveness.



"Everywhere I see the connections between my work at IMIFAP and what is happening in the lives of people I know."

- Mariola Beltrán, IMIFAP staff member



Although Mexico's overall cancer rates are low on a global scale, certain conservative attitudes in Mexico have resulted in the steadily rising national prevalence of cervical and breast cancer. Because of a lack in understanding of these cancers in many communities, stigmatization of those who undertake testing, and a lack of personal agency among women in these communities, cervical and breast cancer remain two of the deadliest cancers in the country. Economic impact analysis has shown that the average number of healthy years lost to cervical cancer mortality is 22 for a Mexican woman; this is despite breakthroughs in detection and prevention methods that have reduced mortality rates in many other regions of the world. Such prevention work is highly cost effective. The prevention of the death of a Mexican woman from cervical cancer saves \$42,000 U.S. dollars.

Facilitators in our cancer projects work to establish a base of knowledge on cervical and breast cancer for female participants, dispelling cultural myths that surround the diseases and providing women with tools to make sexual health decisions. Facilitators simultaneously encourage women to get Pap smears, and educate husbands about the importance of allowing their wives to attend gynecological appointments, which men often oppose due to the exposure of a woman inherent in the appointment. Women who have participated in our cancer programs demonstrate significant increases in knowledge about cancer and are much more likely to take preventive measures against the disease than they were before the course.



Case Study: Cancer Prevention in Michoacan

Year: 2006-2008

Topic: Cervical and breast cancer

Location: Michoacán state, Mexico

Program outcomes: Marked increase in participants' knowledge of the how to prevent cervical and breast cancer. Significant increase in participants' personal agency.

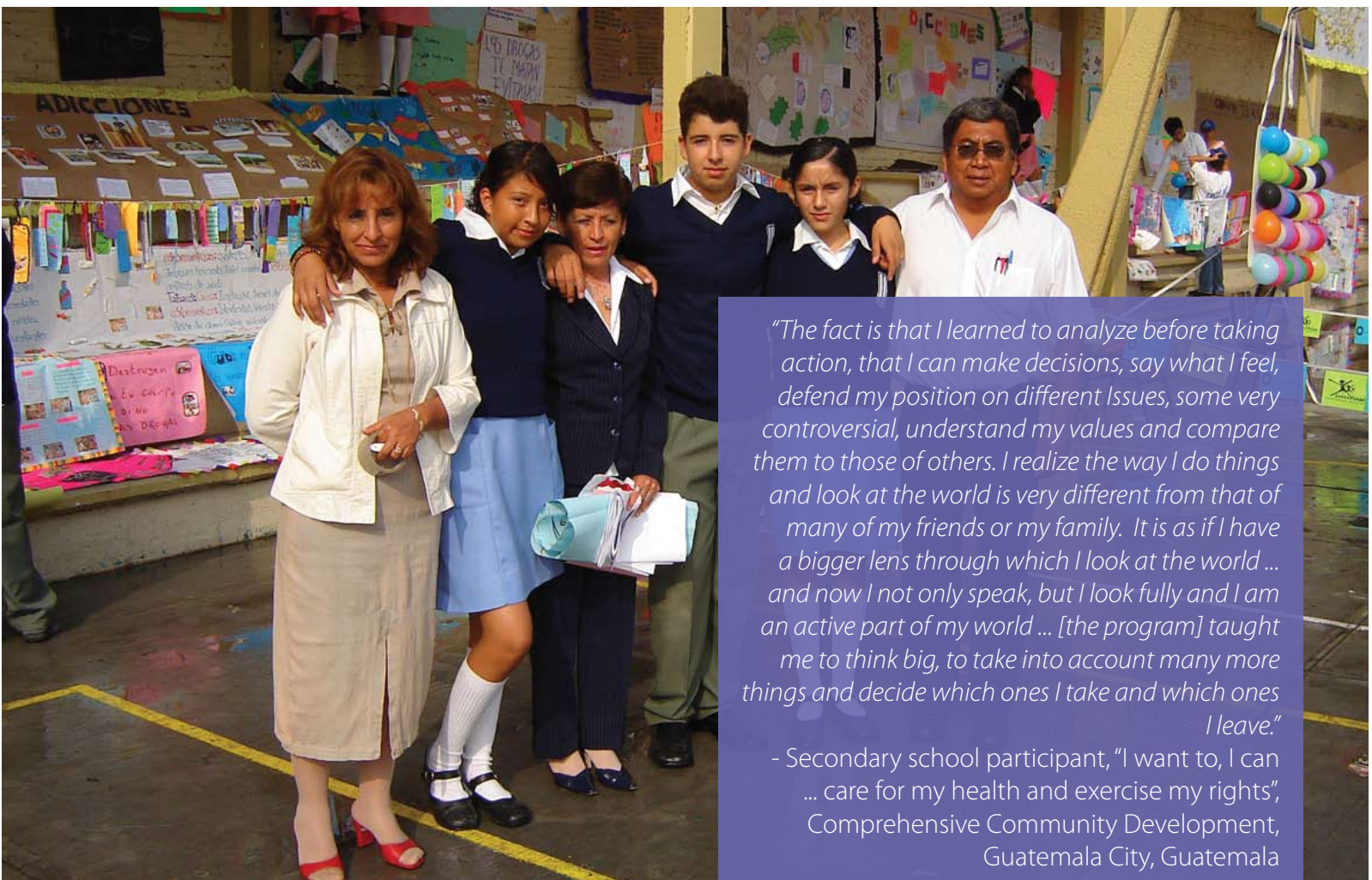




Citizenship and Culture of Legality

The objective of the Citizenship and Culture of Legality program is to promote the development of a participatory citizenry from an early age. This secondary school-based program trains students in accountability for the consequences of their decisions so that they enter adulthood with a firm understanding of the responsibilities of citizenship. Furthermore, it encourages analytical thinking in students so that they are able to achieve a brighter future based on reasoned and conscious choices. As in all of our school-based programs, teachers

are directly trained by IMIFAP personnel and then replicate the program with their students during classes. We have developed interactive *Civics and Ethics* textbooks for each grade level and a training program for teachers. The textbooks' content covers such topics as participating in civic life, the constitution, democracy, values and substance abuse prevention. IMIFAP's Civics and Ethics curriculum is now mandatory in Mexican public secondary schools. More than 11.5 million students have used our Civics and Ethics textbook since 1999.



"The fact is that I learned to analyze before taking action, that I can make decisions, say what I feel, defend my position on different issues, some very controversial, understand my values and compare them to those of others. I realize the way I do things and look at the world is very different from that of many of my friends or my family. It is as if I have a bigger lens through which I look at the world ... and now I not only speak, but I look fully and I am an active part of my world ... [the program] taught me to think big, to take into account many more things and decide which ones I take and which ones I leave."

- Secondary school participant, "I want to, I can ... care for my health and exercise my rights", Comprehensive Community Development, Guatemala City, Guatemala

Disaster Relief



In the late fall of 2007, unusually heavy rains caused rapid, heavy and widespread flooding in the Mexican states of Chiapas and Tabasco. Nearly 80 percent of the land area of Tabasco and half of its population were affected, leaving half a million people homeless and without a job. The resulting turmoil also rendered many people without sufficient access to potable water and in unhealthy conditions where they were susceptible to the rapid spread of contagious disease.

In response to this disaster and others like it, our disaster relief programs seek to develop knowledge as well as psychosocial and life skills related to basic health practices, disease prevention and emotional management in situations of environmental risk. This school- and community-based program is similar to many other IMIFAP programs in that teachers and healthcare workers are trained directly by IMIFAP personnel, and then replicate the program in the community and the classroom. This serves two purposes: it makes the training more effective because it comes as part of a normal routine (medical visits, school) and it comes from a trusted community source (health workers, the teacher), and it ensures that the training will continue year after year regardless of our input, because the person in charge of training is a permanent member of the community. As a result of this IMIFAP program in Chiapas and Tabasco, participants gained knowledge of topics related to disease prevention and general health during times of environmental disaster as well as increased their ability to manage emotions, resolve conflict, work in teams and communicate successfully with the members of their community.



Cuahtémoc Sánchez, IMIFAP facilitator

For Cuahtémoc, the strength of IMIFAP programs comes from its methodology. "It is the strongest aspect of our programs, the interactive and experiential training, the development of life skills; because everything is tied together the program make sense, and effectively brings about a great change. People really do change and grow as a result."





Family Planning



In Mexico, nearly one in every six children is born to a woman under the age of twenty. Over the years IMIFAP has conducted formative research and numerous diagnostic studies on the issue. The outcome, our pregnancy program, aims to address this national context of unintended adolescent pregnancies. Objectives include understanding one's own sexuality, discussing sexuality with one's partner, children and parents, and being able to make autonomous decisions regarding the use of contraception. Evaluations of this program have found statistically significant increases in all these skills. The program has been extensively implemented in schools and community centers in Mexico and throughout Latin America, the United States and Greece.

In the Mexican Ministry of Public Education's 1994 reform for educational modernization, the Ministry took IMIFAP's program as the basis for official sexuality education curricula. This development pointed to a new understanding of both the significance of youth education in sexual health and rights, and the importance of policies promoting life skills. These themes were and still are a central component in IMIFAP's approach.

"I learned that I can go up a step at a time, like in a staircase. And that at every step I turn around to see who is watching. At first they watch because they want to pressure me not to keep going, but after some steps they watch because they want to learn to do the same. They realize it is a way of growing, of being independent, of not letting the others tell you what to do, when to do it. Once I see that they are starting to watch through this different filter I feel proud that they are watching, and I am not scared anymore."

-Young male program participant, "I want to, I can ... prevent pregnancies", Santiago, Chile



Within Mexico taboos on HIV, sexuality and drug use hinder open discussions on HIV/AIDS. As such, HIV/AIDS awareness among the population is low and prevention practices are not widespread. Bringing about widespread behavioral change is critical to avoiding future spread of the disease among the Mexican population. The objective of IMIFAP's HIV/AIDS program is to train secondary school students in life skills-based HIV/AIDS prevention. We work with schools to first provide the course to teachers, both so they can master the content and for their own personal development. The teachers then replicate the program with their students in a semester-long course. Impact results show that the program leads to statistically significant increases in correct condom use, communication with partners about condom use, intention to use a condom, knowledge regarding forms of preventing HIV transmission, and safe sex. The program has particularly impacted students' assertiveness, self-esteem, and communication attitudes, norms, intentions and behavior.



Case Study: Using the Net to Increase HIV/AIDS Awareness

In 2006 IMIFAP launched the media campaign "Ven Atrévete" to spread awareness of HIV/AIDS issues to young people across the Spanish speaking world. VenAtrévete.com serves as the focal point of the campaign, providing information on HIV/AIDS in the form of interactive media and online games. Engaging Mexican pop star Diego González as the spokesman for the campaign, it gained public recognition and widespread attention. Together with the distribution of thousands of posters and a series of radio commercials, "Ven Atrévete" has brought information on sexual health and HIV/AIDS prevention to over 250,000 Mexican adolescents. For more information, visit www.VenAtrévete.com.





Hygiene and Sanitation

The hygiene and sanitation program is perhaps the most basic IMIFAP program and is often the first one that will be provided to a community, laying the foundation for future workshops in more advanced topics like school performance or microenterprise development. Personal cleanliness and bodily care are taught alongside general life skills and decision-making abilities, allowing participants, who are largely women, to view their health in a personal context, as well as through the lenses of family and community. Participants leave the program with increased knowledge of personal health topics and a greater sense of their right to control their own life and health decisions.



Case Study: Bringing Improved Sanitation to Indigenous Communities

Between 1999 and 2002, the program “I want to, I can ... care for my health and exercise my rights” brought information and skills on public hygiene to nearly 39,000 girls and women living in rural areas of the Oaxacan Mixteca, one of the most underdeveloped regions in Mexico. Working with hundreds of community action promoters, rural health assistants and local volunteers, IMIFAP held workshops on hygiene and psychosocial skills, diffusing vital health information to communities often lacking access to adequate health care, supporting changes in participants’ hygiene and sanitation related behaviors. IMIFAP also partnered with local radio stations to bring public service announcements on hygiene specifically to indigenous communities. A follow up study after 18 months showed that the behavior changes undertaken by the women and girls as a result of the program were maintained.



Microenterprise



It is no coincidence that microenterprise development and women's empowerment programs go hand in hand all around the world. Economic and financial development among poor and marginalized populations benefits men and women alike. However, from the beginning of IMIFAP's microenterprise program in 2002, we have maintained a particular focus on female entrepreneurs because we feel that this program is a key tool for achieving gender equity. A woman who is more financially independent relies less on her husband, and is therefore less likely to tolerate an abusive relationship and more likely to be treated as an equal in family decisions, such as how to spend money and whether or not to use contraceptives. For this reason, while we include both men and women in our microenterprise programs, women make up a significant majority of our participants.

Unlike many other microenterprise programs, IMIFAP programming focuses first on giving people struggling with poverty the tools to take charge of their lives through a life skills and health education workshop. After this cycle is complete, we provide training in the practical skills needed to run a successful community bank and small-scale business. Our participants organize themselves into community banks and with IMIFAP funding and support they provide loans to viable local entrepreneurs. Borrowers pay back the loans with interest, which continually generates more capital for the bank. More than 130 community banks have developed as a result of our microfinance program, and 1,364 women have developed microbusinesses. Our impact results have found that the loan return rate among these projects is nearly 100 percent. One and one-half years into the projects, all businesses have been self-sustaining, a third have hired paid employees and half provide the women owners with a salary.



Case Study: Entrepreneurship in Indigenous Oaxaca

Year: 2007 - present
Topic: Microenterprise
Location: Indigenous Mixteca
community, Oaxaca state, Mexico
Program outcomes: 22 community
banks have been established;
600 women have developed
microbusinesses





Nutrition

As with hygiene and sanitation, IMIFAP programming includes nutrition as a basic component in many programs, such as diabetes and school performance, as well as having specific programs devoted entirely to the topic. Poor nutrition is a pervasive problem in poor and marginalized areas, and also one of the most easily ameliorated. With a basic program that explains nutritional principles, IMIFAP provides the foundation for a healthier community that is more able to take on larger issues. Although each nutrition program is slightly different due to the variety of topics it can be paired with depending on the needs of the community, all programs focus on increasing participants' awareness of the basics of nutrition and providing them with the life skills and other tools needed to undertake changes in their food consumption and bring about a healthier lifestyle. Upon completion of the course, participants demonstrate a much better understanding of nutritional concepts and are able to apply them in their daily lives, reporting increased consumption of vegetables and fruits, as well as lower intake of fatty foods and soft drinks.



Case Study: Bringing Better Nutrition to Families

IMIFAP has recently begun work with the Mexican Ministry of Social Development to lower mortality rates for both mothers and infants in marginalized areas. Through the project, we will develop and implement a program that provides mothers with vital information on the nutritional needs of pregnant women and young children, a strong factor in mother and infant mortality. At present, approximately 1500 community health promoters have participated in the training.

Obesity, Diabetes and Cardiovascular Disease



Diabetes causes more deaths in Mexico than any other single factor. This is due in large part to the high consumption of dietary fats among impoverished and marginalized populations, particularly in rural areas, where limited understanding of basic nutrition and healthy living habits is elevated. Our diabetes program centers on educating adults about diabetes and obesity and working toward healthy and preventative behaviors. Furthermore, parents are given the skills to prevent obesity and diabetes in their children. Participants in the program demonstrate a positive change in their dietary habits, including decreased consumption of fast food, soft drinks and dietary fat, and increased consumption of fruits and vegetables. Increases in physical activity and improvements in biometric measurements and psychosocial skills also occur for those who take part in the course. In addition to targeting community members, IMIFAP has run diabetes-focused workshops with medical professionals. These are designed to encourage strategy-sharing on how to educate patients about the risks and causes of diabetes as well as on innovative prevention strategies.



Case Study: Preventing Cardiovascular Disease on U.S.-Mexico Border

Year: 2006-2008

Topic: Cardiovascular disease, obesity and diabetes

Location: 10 cities in Mexico's United States border region

Why: The Mexico – U.S. border region has the highest prevalence of these 3 diseases nationally

What: A 40 hour workshop on the 3 diseases for community members, accompanied by disease testing, and an 18-hour workshop with health professionals from the region, developed in collaboration with the Mexican Ministry of Health.



Parenting

IMIFAP's parenting program seeks to help parents of children ages 0-12 and of adolescents to better understand, value and undertake their role in their children's lives. Many parents are unaware of the profound effects their parenting has on their children. The contents of the program include self-awareness, childrearing styles, rule-setting, family types, communication, values, respecting individuality, gender roles, self-esteem, building affection and trust, decision-making, child development, sexuality, discipline and life skills. Parents who have participated in the course report that they are better able to communicate with their children and demonstrate changes in attitude towards discipline, decision-making within the family, and encouraging their children's independence. By helping parents raise healthier children, the program is a strong component of IMIFAP's prevention approach.

Recently, IMIFAP has developed a program for caregivers focusing specifically on the difficulties of raising children in families where one or both parents have been forced to migrate for work. This is a very common situation in some regions of Mexico, and leaves a distinct mark on children whose parents are gone. The program trains teachers and caregivers how to deal with the specific set of problems that these children face, with in-school workshops for the children themselves. After this program, children are better able to discuss emotional issues attached to the absence of parents, and their motivation, emotional communication and general emotional condition consistently show improvement.



Case Study: Improving Child Care in Mexico City

In 2008, IMIFAP began a project in 1,870 daycare centers across Mexico's 31 states and the Federal District. The project seeks to assist working mothers by studying the functioning of the nation's daycare centers, determining best practices and developing a manual of standardized guidelines for the centers. The manual will allow working mothers to demand high standards of care. It will also allow centers to learn from each other and will facilitate a dialogue to build the capacity of centers to provide the best possible service to working parents and their children.

Quality of Health Services



In resource-scarce areas of Mexico, health care access is limited, preventative care even more so. Poor doctor-patient relationships further contribute to diminished health outcomes. Conscious of this, IMIFAP has undertaken diagnostic studies to identify how to strengthen the provision of patient services. Using this research we have implemented a series of programs to train indigenous and institutional health care providers in patient care skills and health prevention techniques, as well as promote knowledge sharing between the two groups. Program results have included improved doctor-patient communication, increased patient trust, and increased patient understanding of prevention, diagnoses and treatment.

Ángela Castañeda, IMIFAP facilitator

Having worked previously as a facilitator with other institutions, Angela sees how IMIFAP's approach offers a refreshing new way that programs can be run. "IMIFAP has a way of detecting needs that I haven't seen elsewhere," she says. For her, the program methodology draws people into and leaves a mark on them even after the project has ended and IMIFAP personnel have gone. "It's the reason I put on the IMIFAP shirt."



David García, IMIFAP facilitator

For David, the human element of his work is the most powerful. "It's wonderful to feel a deep human relationship when someone is really working with you to make things better. You think that it's more difficult than that, that participants aren't going to respond or participate, but they do." He adds that not only does he help program participants grow, but he too grows through his work, "You train people according to this or that program, but at the same time you're training yourself to be a different kind of person."





School Performance

Although public education is a right mandated by the Mexican constitution, seventy-five percent of 25 to 34 year olds have not completed high school. Furthermore, reading and math scores are far below averages for the Organization for Economic Co-Operation and Development (OECD) despite Mexico's above-average financial investment in education. All of these factors point to the need for change within the Mexican education system. IMIFAP's school performance program works to shift education from being passive, based on rote memorization, to participatory, building students' ability to think for themselves in complex ways. The program is based around a core of analysis, problem solving and critical thinking abilities. As a result of the program, students' ability to assume responsibility for their school grades and to communicate with their teachers about things they do not understand has been enhanced. Higher school attendance, more frequent submission of homework on time and increased class participation, as well as greater inter-family communication and life expectations, are further outcomes. Students' integral development has been enhanced as they have adopted a more active approach to their lives.



Case Study: Improving Schools in Guanajuato and Aguascalientes

Topic: School performance

Project: "I want to, I can ... improve my academic performance"

Location: Guanajuato and Aguascalientes, Mexico

Program outcomes: Over 3,000 students, 1,500 parents, and 120 teachers reached. Increases in students' independent decision-making, self-confidence, and academic performance

Substance Abuse



"I learned that it is okay to ask questions – of everyone – even the director and the teacher. It is okay not to know and to ask how to know better. I used to not ask anything, never question anyone.

Whatever they said, I would just say yes with my head. Now I say yes, or no, with words as well as with my eyes."

-Fourth grade participant, "I want to, I can ... prevent substance abuse", Chiapas, Mexico



"No one is supposed to talk about drugs, we all make as if they don't exist. My parents think that if we do not talk about things that are difficult for them to discuss, we will not become interested in them. I believed that was the best way to go about things until I started to understand that not only is it ok but it is necessary to talk with your kids about everything, in an open and clear manner. It made me change my whole view about education. With information people can make better decisions than by repressing the issue. I have now gone out to also look for information about sex, which is another topic hard for parents to talk about. And I have talked about it with my mother and we now read books about it together."

- Mexican-American female adolescent participant, "I want to, I can ... prevent pregnancy", Tacoma, Washington, USA



Drug use is on the rise in Mexico. Once solely a transit country for drugs on their way to the United States, Mexico has developed a significant domestic market in the past decade. Dramatic increases have been recorded in both the number of people who admit to having tried drugs and the number of addicts, which rose by over 50 percent from 2002 to 2008. This rise in domestic consumption is widely believed to contribute to overall drug violence in a country already in the grip of a violent drug war.

IMIFAP's substance abuse prevention program, which was developed and tested in 2000 in the states of Hidalgo and Jalisco, is aimed at 3rd, 4th and 5th grade students. Workshops provide the same core life skills, empowerment and health curriculum as in the previously presented flagship program, but the content and materials maintain a focus on the prevention of substance abuse. After going through the program, participants reject harmful substances like alcohol and illegal drugs by more than 90 percent as compared to members of a control group, who reject such substances by 60 percent. Participants demonstrated increases in knowledge regarding substance abuse, readiness for change, self-efficacy and ability to express feelings.



Violence

Despite federal laws meant to lower the incidence of domestic violence in Mexico, gender violence is still a serious problem throughout the country. Sixty-seven percent of women over the age of 15 reported having experienced mistreatment, and in the past five years, cases of domestic violence have increased by 12 percent. In addition to the widespread nature of this problem, women often lack access to necessary services after experiencing abuse. In many traditional communities, violence is seen as a personal problem.

IMIFAP's violence prevention approach reflects our belief that domestic violence is a community issue. Our programs aim to train marginalized women to recognize domestic violence as a problem and to respond to abused women in a supportive rather than judgmental way. As a result of the program some women have actively intervened in violent situations, and others, who were themselves victims, have made positive changes in their lives, such as separating from their abusive husbands. Men are sensitized to recognize how domestic violence is harmful to their families and themselves. For adolescents, dating violence conferences are held in high schools, during which facilitators make clear how behaviors such as control and possessiveness are a form of violence and provide non-violent conflict resolution options. IMIFAP's violence prevention program for health professionals trains individuals to recognize the signs of violence, provide support to the patient and undertake appropriate procedures after the detection of violence.



Case Study: Increasing Awareness with YouTube

In order to sensitize teens and their communities to the issue of dating violence, this year IMIFAP created a 1 minute video "Prevention of Partner Violence" which will air with movie previews in theaters across Mexico as part of the Cineminuto program, as well as through YouTube and Facebook campaigns.



IMIFAP Stepping Stones

In 2000 Queen Silvia of Sweden recognized IMIFAP for our life skills and substance abuse prevention work. From left to right, Martha Givaudan, Queen Silvia, and Susan Pick.



- 1984** The Mexican Institute of Family and Population Research (IMIFAP) is founded
- 1985** IMIFAP undertakes its first study, on prevention of unwanted pregnancies in adolescence
- 1986** IMIFAP develops and validates its first measurement scales
- 1987** IMIFAP begins the development of a series of 101 books on family, life and health education for children ages two to twelve
- 1988** IMIFAP develops its first program and training manual, entitled “Planning Your Life”, and with it operationalizes Amartya Sen’s Capability Approach
- 1989** IMIFAP research shows that providing participatory, reflection-based programming to adolescents increases the likelihood of behavioral change as compared to traditional programs
- 1990** IMIFAP develops its first program for parents, entitled “Learning to be a Mom/Dad”
IMIFAP research shows that providing sexuality education programs before adolescents have sex increases the likelihood that they adopt safe sex practices. The research also shows that unprotected sex and substance abuse have similar predictors in terms of skills possession. As a result IMIFAP develops its first multi-thematic program
- 1991** The Mexican Ministry of Education commits to the nationwide training of its secondary school teachers in “Planning Your Life”
- 1992** IMIFAP launches its first international program, training NGOs from across Latin America.
- 1993** IMIFAP addresses a congressional committee meeting on the need for sexuality education, and a clause is included in Article 7 of the General Law of Education to the effect
IMIFAP develops its first video, entitled Talk to Me About “That”, to inform parents of the importance of sexuality education and communication
- 1994** IMIFAP launches its first program with physicians IMIFAP expands its programming to address HIV/AIDS
- 1995** IMIFAP participates in the World Health Organization’s Program on Mental Health and recognizes life skills as central to health promotion programming
- 1996** IMIFAP restructures its programs to create “I want to, I can”, today IMIFAP’s signature program
- 1997** IMIFAP launches its first program outside of Latin America, undertaken in Greece IMIFAP convenes the first Regional Psychology Congress for Professionals in America: Linking Science and Application in Psychology, together with the IUPSYS and IAAP
- 1998** IMIFAP expands its programming to address violence
- 1999** IMIFAP develops the “Civics and Ethics Formation” secondary school textbook for the Mexican Ministry of Education. The textbook reaches over 11 million students
- 2000:** Queen Silvia of Sweden presents IMIFAP with an award for its program “I want to, I can ... prevent substance abuse”
IMIFAP extends its programming to rural communities

IMIFAP Stepping Stones



2001: IMIFAP launches its first program with traditional healers

2002: IMIFAP launches its first microenterprise program

IMIFAP launches its first program to comprehensively target students, adults and microenterprise initiatives. Entitled “Comprehensive Community Development”, the program reaches 150,000 beneficiaries

2003: IMIFAP expands its programming to address cervical and breast cancer

IMIFAP launches its first program with rights for domestic workers

IMIFAP applies its conceptual model to make recommendations for improved decentralization of the health, education and social sectors in Mexico

2004: IMIFAP undertakes the development of an early life skills curriculum as an HIV prevention strategy

2005: IMIFAP expands its programming to cover all three years of preschool

2006: IMIFAP expands its programming to address diabetes

IMIFAP launches its first program targeted to migrant communities

2007: IMIFAP begins work along the US-Mexico border, addressing obesity, diabetes and cardiovascular diseases

IMIFAP launches VenAtrevete, an HIV/AIDS prevention initiative and website specifically for adolescents

IMIFAP serves as consultant to the Mexican Congress on violence prevention

IMIFAP develops a hygiene, personal agency and empowerment model for DICONSA, a branch of the Mexican Ministry of Social Development

IMIFAP develops and publishes a scale to measure agency and empowerment and better understand the changes brought about in program participants

2008: IMIFAP expands its programming to address school performance

2009: IMIFAP designs and implements nationally a program on nutrition and empowerment, targeting Mexico’s poorest 300,000 homes

IMIFAP develops one-minute video “Prevention of Partner Violence” to be aired in movie theaters across Mexico as part of the Cineminuto program





Looking Ahead

Milestones provide an opportunity to not only look back at achievements, but also to look forward. Over these 25 years, IMIFAP has been a pioneer in Latin America. In the coming years, we aim to expand the application of our proven program models to additional populations and countries so that more individuals may benefit. We are also looking to enlarge our focus in areas where we have undertaken only limited program interventions, particularly

on topics such as: Migrants, School Performance, Environment, as well as expand into the areas of Childhood Diabetes and Financial Management for Children. Concurrently, we are working to develop new program models. With plans for program expansion, institutionalization and sustained research, we move into the next 25 years poised to continue fulfilling our mission to improve the lives of people around the world in a sustainable way.

"I now know things depend on me, I am part of the world, I can be seen and heard, I can believe in myself because I can do things, and I can do them differently than I usually do and differently than the way others always do them. I can talk for myself and about myself. I woke up."

- Middle-aged community health promoter, Santa Rosa de Copán, Honduras



2008 Financial Report

Since 2000, our supporters have contributed over 139 million Mexican pesos (approximately 10.6 million U.S. dollars) for health education, life skills programs and other projects to strengthen communities. Today IMIFAP operates with a \$23.9 million Mexican peso (\$1,794,260.96 U.S. dollar) annual budget. The complete audited financial statements for IMIFAP can be obtained by calling (+52 55) 5611-5876 ext. 106, or by sending an e-mail to hector@imifap.org.mx.

Assets (USD)

Current Assets	\$371,564.51
Fixed Assets	\$28,290.35
Total Assets	\$399,854.86

Liabilities and Net Assets (USD)

Short-term Liabilities	\$186,178.35
Net Assets	\$213,676.51
Total Liabilities and Net Assets	\$399,854.86

Donations and Revenue (USD)

Private Foundations	\$1,174,801.50
Public Organizations	\$354,125.28
Government Agencies	\$280,269.75
Other	\$15,385.12
Total Donations and Revenue	\$1,824,581.65

Expenditures (USD) Percentage of total costs

Program Expenses	\$1,275,076.24	71%
Travel Expenses	\$139,696.08	8%
Salaries	\$282,963.39	16%
Management and Administration	\$96,525.25	5%
TOTAL (USD)	\$1,794,260.96	





Funders and collaborators

The support of organizations from around the world makes our work possible. We offer our sincere appreciation to our recent funders:

<i>Academy for Educational Development</i>	<i>Centro de Investigación, Educación y Servicios - Salud Sexual y Reproductiva</i>	<i>Puebla Sur</i>	<i>Fundación Educa México</i>
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We deeply thank the following past and present board members for their time, energy and commitment to IMIFAP.

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Ricardo Vernon, The Population Council
Harvey Waxman, Private practice
Arturo Weiss, DARSO, S.A.
Daniel Weiss, DARSO, S.A.
Sara Woldenberg, Comisión Federal de Electricidad
Alinka Zabudovsky†, Fundación Abraham Zabudovsky

"I have more life options ... there are always things that require me to think and work outside of the box, now I can confront many of those because I believe in myself and I can think by myself. When you count as a person you feel you count for everything else and you want to do more. When you do not count as a person like before when we only counted for the government because they wanted to use us for their politics or our husbands to use us to serve them or our children to care for them, I did not feel I counted. Now I do. ... Counting means you are important, you can believe in what you believe without having to ask others if it is okay. ...you count simply because you count, not because you do something ... and that makes you feel important, free, and intelligent."

- Middle-aged female participant, "I want to, I can ... care for my health and exercise my rights", Comprehensive Community Development, Lempira, Honduras





Publications

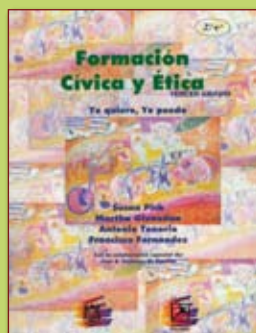
SELECTED MATERIALS

Since 1985 IMIFAP has developed 240 books, manuals, teaching materials, and storybooks for the public. These help us to reach millions of individuals, both in the scope of our programs and in bookstores across the world. The book *Yo adolescente: Respuestas claras a mis grandes dudas* has sold over 250,000 copies, *Planeando tu vida* 90,000 copies and *Formación cívica y ética* over 11 million copies. While our publications appeal to a variety of audiences, the goal of each work is to spread vital knowledge and provide critical skills that allow an ever-greater number of individuals to take control of their lives. Below are just a few examples of these works:

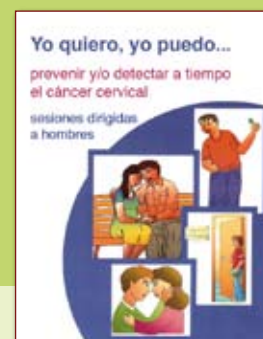
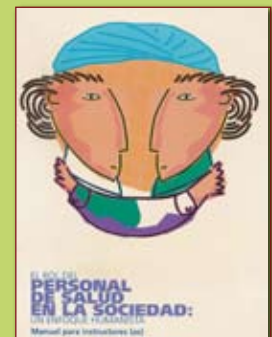
Books for the General Public:



Books for School Programs:



Books for Community Programs:





IMIFAP BESTSELLERS

Yo adolescente: Respuestas claras a mis grandes dudas by Susan Pick and Elvia Vargas (for adolescents)

Planeando tu vida: programa de educación sexual y para la vida dirigido a los adolescentes by Susan Pick, José Ángel Aguilar, Gabriela Rodríguez, Jeanette Reyes, María Elena Collado, Diana Pier, María del Pilar Acevedo and Elvia Vargas (for adolescents)

Formación cívica y ética by Susan Pick, Martha Givaudan, Alfredo Troncoso and Antonio Tonorio (for adolescents)

Vera la tijera by Susan Pick, Elvia Vargas, Guillermo Solano, María Isabel Rubio, Ana Lisa López, Diana Pier, Irlene Vivero and Susana Galdos (for ages 7 and up)

Un equipo contra el SIDA by Jeanette Reyes, Martha Givaudan, Susan Pick, Angela Martínez and Jessica Ramón (for adolescents)

Ximena aprende sobre abuso sexual by Susan Pick, Elvia Vargas, Guillermo Solano, María Isabel Rubio, Ana Lisa López, Diana Pier, Irlene Vivero and Susana Galdos (for ages 4 and up)

Juventud más allá del éxtasis by Susan Pick, Martha Givaudan and Fernanda Solórzano (for adolescents)

De visita al dentista by Susan Pick, Elvia Vargas, Guillermo Solano, María Isabel Rubio, Ana Lisa López, Diana Pier, Irlene Vivero and Susana Galdos (for ages 4 and up)

¿A cual vagón te pareces? by Susan Pick, Elvia Vargas, Guillermo Solano, María Isabel Rubio, Ana Lisa López, Diana Pier, Irlene Vivero and Susana Galdos (for ages 4 and up)

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Givaudan, M., Leenen, I. and Pick, S. (submitted). "Health education and life skills: Building life skills and knowledge in rural children in Mexico".

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Pick, S., Leenen, I., and Garcia, G. (submitted). Modelo para la promoción de la salud en comunidades rurales, a través del desarrollo de agencia personal y empoderamiento intrínseco.

Pick, S., Romero, A., de la Parra, A., and Givaudan, M. (in press). "Evaluación del impacto de un programa de prevención de violencia en adolescentes". *Interamerican Journal of Psychology*.

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"When you go into a community and start working with people you see immediate results with your own eye that the statistics can never fully express."

-Marco Barriga, IMIFAP Staff Member





Get Involved- Ways to Support IMIFAP

IMIFAP's programs improve the lives of marginalized individuals in Mexico and across the globe. There are many ways individuals, businesses and organizations can support us in our efforts - the following are just a few:

Make a Tax-Deductible Personal or Corporate Donation Today

In order for us to continue changing lives, we count on the generous support of individuals who are committed to development and helping our beneficiaries take their lives into their own hands.

Platinum Sponsor - \$500 or more – With your donation of \$500 or more IMIFAP can make possible a microenterprise program in a rural community, train 200 children and adolescents in topics such as nutrition, sexual health, and AIDS/HIV awareness, or help 50 women to better understand their rights and prevent domestic violence.

Gold Sponsor - \$250 – By donating \$250 IMIFAP can train 30 new facilitators on Drug Addiction, Breast Cancer, or Hygiene who can then empower hundreds of individuals to take control of these spheres of their lives.

Silver Sponsor - \$100 – A donation of only \$100 can provide 20 books to disadvantaged children living a rural, marginalized community, enabling them to build life skills and undertake healthier behaviors.

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Volunteer: We very much appreciate individuals who give us the gift of their time. From working in the field to volunteering at our Mexico City headquarters, each and every task that you perform is precious. You can make a world of difference in the lives of people by ensuring that our programs continue. We welcome volunteers of all ages and backgrounds.

Plan a Service-Learning Trip With Your Organization:

IMIFAP organizes service-learning trips to expose individuals to the communities in which we work. Trip participants have the chance to hear directly from the beneficiaries how our programs are contributing to their personal health and social and economic development. Visit the members of a growing community bank in the mountains of Oaxaca or see a health promotion program in Michoacán. To learn more about participating in a service trip or find out how you can share your professional expertise with IMIFAP's beneficiaries, please contact imifap@imifap.org.mx.

If you are a member or a representative of an organization and would like to learn more about supporting or collaborating with IMIFAP, please contact imifap@imifap.org.mx or (+52 52) 5598-56-73 ext: 220.



IMIFAP "Your life in your hands"
Málaga Norte 25
Col. Insurgentes Mixcoac.
México, D.F. cp. 03920.

For more information:
(+52 55) 5611 5876 / 5598 5673
imifap@imifap.org.mx
www.imifap.org.mx



*Report produced by Shoshana Grossman-Crist, María Belenky, James Finegan,
Eric Leventhal and Andrea Sophia Noyes.*