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Research Article

Effect of the Implementation Project of Integral Development Centers on Child Development Indicators in Children Under Three Years Old

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Abstract:

Aim: Evaluate the Effect of the project to implement comprehensive development centers on child development indicators in children under three years of age in San Jeronimo, The beneficiary results of the PICED belong to the 2006-2019 longitudinal study to assess the effects of the PICED project on children under three years of age served by the PICED. The measurements were carried out according to the international standard methodology for data processing. The application was used. SpSS v27.

Results: The number of children under 3 years of age who carry out at least four early stimulation sessions per month is 5,225 boys and/or girls under 3 years of age in the systematization area. The number of children at risk of psychomotor development totals 150 minors., with deficits in their psychomotor development are 532 minors and with psychomotor delay 25 minors. The number of children with delayed psychomotor development recovered were 783 minors, the number of children at risk of development of the motor area recovered were 279 minors, the number of children at risk of development of the personal social area recovered were 279 minors, the number of children at risk of development of the personal social area recovered were 279 minors, the number of children at risk of development of the personal social area recovered were 279 minors, the number of children at risk of development of the personal social area recovered were 279 minors, the number of children at risk of development of the personal social area recovered were 279 minors, the number of children at risk of development of the personal social area recovered were 279 minors, the number of children at risk of development of the personal social area recovered were 279 minors, the number of children at risk of development of the personal social area recovered were 279 minors, the number of children at risk of development of the personal social area recovered were 279 minors, the number of children at risk of development of the personal social area recovered were 279 minors, the number of children at risk of development of the personal social area recovered were 279 minors, the number of children at risk of development of the personal social area recovered were 279 minors, the number of children at risk of development of the personal social area recovered were 279 minors, the number of children at risk of development of the personal social area recovered were 279 minors, the number of children at risk of development of the personal social area recov

Conclusion:

It was verified that the size of the effect of the project on the chronic malnutrition indicator managed to reduce chronic malnutrition in the districts where the intervention was carried out.

Key words: chronic malnutrition, psychomotor development.

Introduction

It is stated emphatically that there is no more important moment in the life of a child (and the human being) for their development than the first three years of life, in which early interventions that seek to

strengthen their bond with parents, social investments and their environment, have greater impact and leave deep marks on their personalization process and socialization, than at any other time in your life.

Among the reasons for priority attention and basis for human and social developmentiiiof childhood would be: a)Scientific advances that support the importance of child care from pregnancy, especially up to 3 years of age; b) Care for children as the most solid basis for building democracy

and citizenship; and, c) Child care influences local and national development.

In this sense, UNICEF alsoiiiproposes the following as basic rights of every boy and girl, especially children from 0 to 3 years old: a) Protection against physical danger; b) Adequate nutrition and health care; c) An appropriate vaccination; d) An adult with whom to establish emotional ties; d) An adult who understands her signals and knows how to respond to them; e) Objects to look at, touch,

listen, smell, taste; f) Occasions to explore the world around them; g) Appropriate stimulation of language, as a tool of communication and encounter with others and their culture; h) Support to acquire new motor, linguistic and mental skills based on their abilities and possibilities; i) The

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possibility of obtaining a certain degree of independence; j) Help to selfcontain or learn to control behavior; k) Occasions to learn to take care of themselves; l) Daily occasions to play with certain objects that promote their development.

There are also other complementary rights such as: a) Build your person in an environment that stimulates and facilitates your development; b) Have adults who take care of him with sufficiently good support and physical and mental support; c) Respect for their individuality and their way of being and being in the world here and now;

d) Be recognized as a subject of action and transformation; e) That their own abilities to learn are recognized and respected.

In this sense, UNICEF and UNESCOiv, the two United Nations organizations most characterized by their interest and educational attention in childhood, point out that in Latin America and the Caribbean there is greater awareness about the importance of the first years in human development, although the concept of initial education It refers to different age groups in different countries and in which the ministries or institutions where government responsibilities fall are different. However, boys and girls from 0 to 3 years old are primarily served through non-formal modalities, while formal pre-school education serves children from 4 to 6 years old.

Most countries do not have a reliable data or information system. Data on care coverage of non- formal programs are practically non-existent. There is also an absence of studies on the analysis of demand and the adequacy of supply.

Childhood in Peru is an issue that demands the intervention of public and private bodies, the confluence of different disciplines with approaches that make it possible to understand the special complexity of the problem and the proposal of creative and lasting solutions. There is a pressing need to rethink the way in which children are being approached, worked on and supported in the country, in which reflection, understanding, convergence and inter-institutional cooperation, supported by political will, is essential, so that The child is recognized as a developing person and the necessary measures are taken so that every girl and boy in the country can receive support as an active subject. In addition to the preparation of professionals and auxiliary and promoter personnel who can carry out this complex work with ethical, theoretical, philosophical and scientific supports, which allows rethinking and developing strategies relevant to the needs and competencies of the boys and girls of the country and the regions.

In Peru, the main State policy instruments regarding early childhood are

the Millennium Goals, the National Agreement, the National Food Security Strategy, the National Plan of Action for Children and Adolescents, the National GROW Strategy, the National Plan to Overcome Poverty, the National Plan for Education for All, the National Family Support Plan.

For example, the National Agreement, in its Sixteenth Policy, indicates "Strengthening the Family, Protection and Promotion of Children, Adolescents and Youth." DS N°027-2007-PCM mentions: "6.2: Develop programs aimed at reducing infant mortality, preventing chronic diseases and improving the nutrition of minors. 6.3 Adopt measures to eradicate child labor and support the promotion of responsible parenthood". And Law No. 29289 - Public Sector Budget Law 2009, prioritizes the Maternal Neonatal Health; the Articulated Nutritional program; Learning achievements at the end of the III Cycle and Access to identity.

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For its part, the Regional Government of Junín outlined as its first policy: The fight against poverty, supporting the population's efforts to develop their capabilities within a framework of equal opportunities, pointing out howStrategic Objective: Reduce Chronic Malnutrition in children under 5 years of age to 6% by 2010. It currently has the motto "Girls and boys First in Junín", in whose framework as Social Investment Projects, implements theProject "Early Stimulation Centers for Boys and Girls Under 3 Years of Age – PICED", with the Objectives of a) Promote the comprehensive development of boys and girls under 03 years of age and pregnant mothers; b) Reduce the psychomotor development deficit; c) Reduce abuse and family violence.

Inprenatal stimulation, Obstetricians develop stimulation sessions with pregnant women, feeding and nutrition sessions, together with prenatal control, recognizing the intrauterine child as a sensitive and intelligent being with memory and learning capacity. In early stimulation: Nurses and Early Education Teachers provide early stimulation to girls and boys from 0 to 3 years old, using techniques to promote learning, taking into account the age of the child, the development of their skills and what they want to achieve; with individualized attention, in stimulation rooms from 0 to 1 year, 1-2 years, 2-3 years.

Materials and methods

Study Design

A quasi-experimental study was carried out with baseline and final measurement between 2006 and 2019 with children under three years of age.

Population And Sample

The number of children under 3 years of age who carry out at least four early stimulation sessions per month is 5,225 boys and/or girls under 3 years of age in the area of systematization.

Measurements

Inprenatal stimulation, Obstetricians develop stimulation sessions with pregnant women, feeding and nutrition sessions, together with prenatal control, recognizing the intrauterine child as a sensitive and intelligent being with memory and learning capacity. In early stimulation: Nurses and Early Education Teachers provide early stimulation to girls and boys from 0 to 3 years old, using techniques to promote learning, taking into account the age of the child, the development of their skills and what they want to achieve; with individualized attention, in stimulation rooms from 0 to 1 year, 1-2 years, 2-3 years.

Ethical Aspect

For the project, after initial contacts with educational and health authorities, official permission was requested from those who direct the PICED participating in the study. The authorization of the parents and the consent of each student was obtained; The identity of the participants was kept confidential in the data analysis phase. It is important to emphasize that for the application of the survey and the taking of the corresponding anthropometric measurements of the children, the parents were informed about the study, its objectives, indicating that there is no risk against them or their child by participating. of the study, and the information provided will be confidential. Once the mother or father voluntarily agreed to participate, I signed the respective informed consent. So the study was framed within the codes of medical ethics and health research of the Declaration of Helsinki.

Analysis of Data

The results were entered into an Excel database by double digitation, after the control they were exported to the SPSS v 25 program for data analysis.

Results

The number of children under 3 years of age who carry out at least four early stimulation sessions per month is 5,225 boys and/or girls under 3 years of age in the systematization area.

The number of children at risk of psychomotor development totals 150 minors, with deficits in their development

psychomotor are 532 minors and 25 minors have psychomotor retardation.

The number of children with delayed psychomotor development recovered was 783 minors.

The number of children at risk of motor area development recovered was 279 minors.

The number of children at risk of development of the coordination area recovered was 279 minors. The number of children at risk of development of the personal-social area recovered was 279 minors.

According to Table No. 1, during 2019, 5,225 children under 3 years of age are served, in the scope of systematization of the project. Of the total number of children, 532 minors presented deficits in their psychomotor development; 150 minors were at risk in their psychomotor development; and 25 minors showed signs of delay in their psychomotor development.

ACTIVITY	INDICATOR	Pangoa	Acobembe	Shuero	River Black	Orange	Sente Rose Ocope	Perlehuence	Sincos	Janjallio	AA.HH	Huachac	Oroye	Sacco
	From 0 months to 1 year		19	14	44	120	33		25	13	31	24	12	41
Process of	From 1 to 2 years	27	25	19	62	90	38	33	26	28	46	25	22	55
selection of children 0 to 3	From 2 to 3 years	25	10	25	121	69	61	40	27	46	31	54	56	67
children 0 to 3 years in each spot focused	Children who come from vulnerable groups over 3 years old		10	22	7	30	0	0	0	sanj	0	0	9	30
	Number of Beneficiaries	72	64	80	224	309	131	84	78	95	108	103	90	193
Sessions of stimulation early development	No. of sessions	202	128	205	1170	344	220	336	192	4	356	412	342	772
paychomotor for children From 0 to 3 years	No. against references and references	72	64	80	224	1236	116	84	78	61	108	412	342	193
Sessions of stimulation early to	No. of sessions	13	78	0	103	309	12	52	36	4	0	0	60	240
children in	Social Affective	2	7	0	30	36	0	3	2	9	0	0	8	3.4
risk	Coordination	0	4	0	18	26	0	2	0	0	0	0	12	4
development	Language	1	7	0	54	5	12	5	9	10	0	0	30	1419
	Engine	0	8	0	-	3	0	3	7	2	0	0	10	4
Sessions of stimulation	No. of sessions	5	0	85	90	22	0	12	38	4	68	36	28	32
early to	Social Affective	0	0	17	24	1	0	0	5	0	5	1	2	3
children ill	Coordination	0	0	2	12	1	0	0	3	0	0	2	6	2
deficit	Language	1	0	53 13	32 30	1	0	4	10	2	6	3	16 4	6
development	Engine	0	0	13	30		0				•	3	4	0
Sessions Incluidualization to parents	Number of parents who participate in sessions	72	64	80	231	309	116	84	78	75	108	2	342	193
Visits domiciliary	No. of leaves Informative of visits	4	40	0	23	14	3	6	5	5	0	1	3	175

Acolla	Ulcumayo	Chembere	Setipo	Mezemeri	Chupece	Selat Jerome	Commea	Pichenaki	Mills	Colca	TOTAL	MEDIA OF CHECK	RESULTS
53		26	28	215		30	30		24124	25	874		
82	28	27	25	290		36	61		26	22	1093	Database	
122	28	22	25	320		30	27		19	28	1253	elaborate	Selection process
10			7	30		10	35		33		319		of children aged 0-3 years organized and inclusive
267	86	95	80	855		96	153		123	86	3482	Mapping of beneficiaries	
1068	344	380	300	5200		144	612		496	344	13571	Clinic history	Children 0-3 years old Improve their
267	86	0	may	855		99	153		123	86		References and cons reference ww establishment of health	coordinations engine thin and thick
101	0	24	150	0		D	148		94	51	1475	Clinic history	Children 0-3 vears old
5	0	4	10	0		0	8		25	4	187		rehebilitated in the
9	0	0	3	0		0	36		24	2	140		development
30	0	2	30	0		0	90		43	3	351		psychomotor
7	0	0	25	0		0	10		30	3	123		
111	6	4	12	665		44	100		0	49	1322	Clinic history	
5	1	0	0	40		2	4		0	3	113		Children from 0 to 3 years
8	1	0	0	35		3	4		0	2	81	List of assisted	old rehabilitated in he development
19	2	0	6	390		12	4		0	3	570	List or assisted	paychomotor
8	2	1	6	200		5	4		0	3	292	1	
267	86	95	80	855		99	153		123	86		Clinic history	Parents of children from 0 to 3 years old involve, fulfill your responsibilitiesand reinforce tasks
62	80	0	-	35		ffby	30		24224	nary	616	Visit cards	Tracked child

Table N° 1: Early Development Stimulation, December, 2019

ACTIVITY	INDICAT	OR	Pangoa	Aco	obamba	Shuaro	nter Black	Orange	Sta Pink Ocopa	Pariahuanca	Sincos	Janjaillo	AA.HH	Huachac	Oroya	Sacco	Acolla
Sessions			inaniy ra na		inaniyawa	12	26	107	16	48	12	44	29	12	32	105	68
from nutrition to families	% <u>of</u> fath what app knowledg	olles	fifty%i	:	32%	25%	12%	35%	fifty%	57%	25%	fifty%	fifty95	25%	fifty96	55%	26%
Ulcumayo	Chambara	Satip	oo Maz	amari	Chupac	a sa Jeron		Commes	Pichanaki	Mills	Colca	TOTAL	CH	DIA ECK	OF	RESULTS	
55	23	1	. 2	32		2	4	71		60	46	1084		k design		Parents of from 0 to 3 y who practice proper nut in their fami	ears old a rition

SOURCE: GRJ – GRD – SGDS – PICED Project Coordination, September 2019.

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			OF GIR And Vi					NUM	BER O	FPREC	GNANT		EN WI 2009	TH AB	U SE A	ND VI	DLENC	:Е,
DISTRICTS	Number of Children Evaluated	Heathy Child	Anxiety	Depression	Conduct Disorder	Language problems	Individual Diagnosis A Children with Deficiency	Development Number af programi vamen Evaluated	Pregnant Women Without Factor Identified Kisk	Mild Anxiety	Moderate Anxiety	Severe Anxiety	Mild Depression	Moderate Depression	Severe depression	Unidentified Pregnancy	Disorder Personality	Individual Session With Program wante
Satipo	137	0	75	35	19	18	29	53	0	28	0	3	24	0	0	7	0	56
Black river	108	18	44	16	12	14	27	28	3	14	0	2	9	0	0	2	0	26
Mazamari																		
San Martin	114	0	59	43	17	22	58	47	0	24	0	0	inanty	0	0	13	0	Page Page
from Pangoa																		
Pichanaki	153	19	65	26	38	etaan.	89	alaran.	0	7	0	1	1	0	0	2	0	2
San Ramon - Orange	75	38	19 10 00	14	14	5	18	14	2	4	0	0	6	0	0	2	0	0
Acobamba	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Janjaillo	22	1	9	3	2	3	1	4	0	1	0	0	0	0	0	2	1	2
Sincos	alater	4	3	0	6	0	7	18	0	5	9	0	0	0	0	13	0	alayan.
Acolla	31	1	5	6	7	7	3	0	0	0	0	0	0	0	0	0	0	0
Mills	12	2	3	3	2	1	3	0	0	0	0	0	0	0	0	0	0	0
La Oroya	58	16	13	5	8	13	29	14	9	5	0	0	0	0	0	0	0	0
Santa Rosa from Sacco	54	to and y	5	1	10	13	24	12	0	6	0	0	2	0	0	4	0	0
Ulcumayo	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Santa Rosa from Ocopa	****	0	2	0	7	2	4	2	0	2	0	0	0	0	0	0	0	0
Commas	30	6	7	3	3	10	2	9	1	2	2	0	0	0	0	4	0	0
Chupaca	30	5	6	2	16	2	13	4	Ó	4	ō	Ō	Ō	Ō	Ō	3	Ō	5
Chambara	18	2	7	0	5	0	9	6	0	3	0	0	0	0	0	6	0	0
Huachac	tractores	4	5	Ō	9	0	7	6	0	3	2	0	1	0	Ō	6	Ō	0
Colca	9	3	3	0	3	0	0	1	0	0	1	0	0	0	0	1	0	0
Pariahuanca	23	13	8	3	2	1	24	2	2	2	0	0	0	0	0	0	0	0

SOURCE: GRJ - GRD - SGDS - PICED Project Coordination, September 2019.

Table Nº 3: Number of girls and boys with abuse and violence and number of pregnant women with abuse and violence

DIAGNOSIS	< 1 year	1 year	2 years	3 years	SUBTOTAL
Normal	1,118	1,267	1,387	742	4,514
Deficit	91	150	168	123	532
Risk	39	47	36	28	150
Disorder	4	0	0	0	4
Delay	8	1	12	4	25
TOTAL	1,260	1,465	1,603	897	5,225

SOURCE: GRJ - GRD - SGDS - PICED Project Coordination, September 2019.

Table N° 4: Number of children at risk of psychomotor development, by age, 2019

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According to Table No. 1, during 2019, 5,225 children under 3 years of age are served, in the scope of systematization of the project. Of the total number of children, 532 minors presented deficits in their psychomotor development; 150 minors were at risk in their psychomotor development; and 25 minors showed signs of delay in their psychomotor development.

DIAGNOSIS	< 1 year	1 year	2 years	3 years	TOTAL
Language	18	62	130	91	301
Engine	44	43	18	5	110
Social	aisvan	51	43	25	130
Coordination	43	sventy.	17	4	84
Intervention	fitty	68	26	14	158
specialized					
TOTAL	166	244	2.3.4	139	783

Table N° 5: Number of children with deficits, referred and recovered in the Psychomotor Development Area, By age, 2019

DIAGNOSIS	< 1 year	1 year	2 years	3 years	TOTAL
Language	18	62	130	91	301
Engine	44	43	18	5	110
Social	aisten	51	43	25	130
Coordination	43	svensy	17	4	84
Intervention specialized	fity	68	26	14	158
TOTAL	166	244	2.3.4	139	783

SOURCE: GRJ - GRD - SGDS - PICED Project Coordination, September 2019.

Table Nº 6: Number of children with deficits, referred and recovered in the Psychomotor Development Area, By age, 2019

		HILD (A) WITH C MALNUTF	NOITION	OF MA	EN RECOVI ALNUTRITI HRONICLE			AT RISK	۱L		nuado beef you 0 0 1 0 12 0 0 0		
DISTRICTS	New	Continue adores	King resos	New	Conti nuado beef	King resos	New yes	Conti nuado beef	King resos	New yes	nuado		
Satipo	0	0	0	0	0	0	0	0	0	0	0		
Black river	0	5	0	0	2	0	0	3	1	0	1	0	
Mazamari	0	13	1	0	1	0	0	these	0	0	12	0	
San Martin From Pancoa	0	0	0	0	0	0	0	0	0	0	0	0	
Pichanaki	0	0	0	0	0	0	0	4	0	0	0	0	
San Ramon - Urange	0	0	0	0	0	0	0	0	0	0	0	0	
Acobamba	0	0	0	0	0	0	0	0	0	0	0	0	
Janjaillo	0	0	0	0	0	0	0	0	0	0	0	0	
Sincos	0	6	0	0	0	0	0	6	0	0	0	0	
Acolla	0	0	0	0	0	0	0	0	0	0	0	0	
Mills	0	0	0	0	0	0	0	0	0	0	0		
La Oroya	1	14	0	0	0	0	1	14	1	0	4	0	
Santa Rosa De Sacco	0	0	0	0	-	0	4	0	0	0	0	0	
Ulcumayo	0	0	0	0	0	0	0	0	0	0	0	0	
Santa Rosa from Occoa	0	0	0	0	0	0	0	2	0	0	0	0	
Commas	10	0	0	0	25	0	0	33	0	0	0	0	
Chupaca	0	0	0	0	0	0	0	0	0	0	0	0	
Chambara	0	0	0	0	0	0	32	18	0	24	16	0	
Huachac	0	0	0	0	0	0	0	4	0	0	2	0	
Colca	1	0	0	0	0	0	0	0	0	0	0	0	
Pariahuanc to	0	0	0	0	0	0	0	0	0	0	0	0	
Jauja	9	9	0	0	0	0	10	5	0	0	1	0	
Saint Jerome	0	0	0	0	0	0	0	0	0	0	0	0	
San Luis De Shuaro	0	0	0	0	0	0	0	0	0	0	0	0	
TOTAL	hariyana	47	1	0	39	0	47	104	2	24	36	0	

SOURCE: GRJ - GRD - SGDS - PICED Project Coordination, September 2019.

 Table Nº 7: Nutrition of boys and girls under 3 years of age, 2019

SOURCE: GRJ – GRD – SGDS – PICED Project Coordination, September 2019.

According to the previous table, within the scope of the PICED project, during 2019, there were a total of 69 children under 3 years of age with chronic malnutrition, while 39 children have recovered. Likewise, there were 153 minors with nutritional risk, while 60 from some nutritional risk have recovered.

DISTRICT	2006	
	%	MINSA - INS -
		THEY DINNER
Satipo	16.4	11.4%
Black river	13.2	14.6%
Mazamari	10.3	8.3%
San Martin de Pangoa	35.4	26.2%
Chanchamayo	9.6	6.9%
Pichanaki	13.8	20.4%
San Ramon	11.1	9%
St. Domingo de Acobamba	38	23 %
Janjaillo	Four. Five	42.9%
Sincos	25	24.6%
Acolla	35	32.6%
Mills	57.2	42.9%
La Oroya	12.3	13.1%
Saint Rose of Sacco	14.9	14.8%
Ulcumayo	20.2	16.8%
Saint Rose of Ocopa	16	14.5%
Commas	40	39.4%
Chupaca	17.7	16.5%
Chambara	23.3	18.8%
Huachac	17.2	12.1%
Colca	17.1	16.7%
Pariahuanca	40	13.3%
Jauja	21.9	21.9%
San Jerónimo de Tunan	33.5	13.6%
San Luis de Shuaro	13.4	12.6. %
Viques	58	13.3%

Table N° 8: Percentage of children under 3 years of age, with chronic malnutrition, According to districts, 2006 – 2019

SOURCES: 1) DIRESA-JUNIN, Office of Statistics and Informatics – Operational Report / HIS. Sep. 2019.

2) Estimated population by specific ages, five-year groups, according to DISA, DIRESA, Peru 2019, projected to June 30.

3) MINSA - INS - CENAN: JUNIN SIEN 2019.

According to the previous table, chronic malnutrition in children under three years of age in the area of intervention of the PICED project has worsened in most districts between 2006 and 2019, except for slight reductions such as in Chanchamayo (from 9.6 to 7.3%).), San Ramón (from 9 to 5.7%), Santa Rosa de Ocopa (from 16 to 15.1%) and San Luis de Shuaro (from 13.4 to 12%). The district that presents a drastic reduction is Molinos, which fell from 57.2% in 2006 to 26.2% in 2019. In the other districts, chronic malnutrition has clearly worsened, with the most serious cases being San Martin de Pangoa (69.4%), Comas (45.6%), Sincos (42.4%), La Oroya (39.6%), San Jerónimo de Tunan (38.9%), Santo Domingo de Acobamba (37.3%), Janjaillo (36.6), Río Negro (34.8%), Ulcumayo (31.3%), Acolla (30.7%).

							val lence in 15%				val ence in 5%
		Statistician ÎCO	gl	р	They differ company of SOCKS	Bottom Of	Superi Or	-	Tama ñoo of Effect	Bottom Of	Superi Or
malnutrition ion chronicle 2006	T of stude nt	9.82	25. 0	<.0 01	26.6	21.0	32.2	™eD of coh in	1.93	1.26	2.57
malnutrition ion chronicle 2019	T of stude nt	9.77	25. 0	<.0 01	20.1	15.9	24.3	™e⊅ of coh in	1.92	1.26	2.56

Note. $H_a \ \mu \neq 0$

Table 9: Effect of the project to implement comprehensive development centers on child development indicators in children under three years of age.

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It was verified that the size of the effect of the project on the chronic malnutrition indicator managed to reduce chronic malnutrition in the districts where the intervention was carried out.

Discussion

Evaluate the effect of the project to implement comprehensive development centers on child development indicators in children under three years of age in San Jeronimo

The children under three years old evaluated presented, 532 minors presented deficits in their development psychomotor; 150 minors were at risk in their psychomotor development; and 25 minors showed signs of delay in their psychomotor development.

In total there were 69 children under 3 years of age with chronic malnutrition, while 39 children have recovered. Likewise, there were 153 minors with nutritional risk, while 60 from some nutritional risk have recovered.

Recommendations:

Coordinate joint actions, from the management level to the operational level, with the other projects (social and economic) implemented by the regional government, so that the results are more auspicious. For example, reducing chronic malnutrition involves implementing productive and economic actions that complement the actions of the PICED project. That is, its reduction depends on the results obtained in an articulated manner, since if the PICED intervenes in the early stimulation gap through its various components, it must be complemented with productive and economic strategies that complement the changes in the practice of early stimulation. It is not enough to change attitudes, behaviors or attitudes, it is crucial to change the socioeconomic reality in each district, in order to achieve the sustainability of the project based on the empowerment of local development actors.

Design a new baseline with the approach called "Baseline Study", based on the logical framework methodology and management for results.

Improve the monitoring and evaluation system, based on the results of the baseline study of the PICED project.

Improve the project's information system, both physical and virtual, that allows quick access to its activities.

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