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**A REVIEW OF DEVELOPMENTAL ASPECTS OF THE CATHWEL PROGRAM
IN BURKINA FASO WITH OPTIONS FOR
FUTURE PROGRAM DIRECTIONS**

JUNE-JULY 1986

EXECUTIVE SUMMARY

This report presents a review, funded by USAID/Burkina, of the Catholic Relief Services (Cathwel) program in Burkina Faso. The purpose of the review is to provide information about developmental aspects of Cathwel activities related to the use of PL 480 Title II commodities and to suggest options for the program in the future. The review outlines the 20-year old Cathwel program in three areas: the Food and Nutrition Program (FNP), School Feeding (SF), and Food For Work (FFW). Strengths and weaknesses in each area are examined and options suggested for future program directions.

The present FNP is composed of four elements: a growth surveillance system (GSS) for children 0-3 years; health and nutrition education for the children's mothers; economic assistance to the family in the form of a Title II food ration; and, associated development activities (ADA) carried out by program participants. The program operates in 162 centers and reaches about 75,000 children and their mothers.

The SF program serves 1,338 mostly rural schools (75% of Burkina's primary schools) with a noon meal to 240,000 students 9 months of the year. An "Education-Production" (E-P) program exists in 23 schools and represents the sole developmental effort related to SF. The Tenkodogo Project emphasizes E-P in 6 areas: gardening; farming; small animal raising; forestry; nutrition education; and, provision of water.

FFW is a small part of the present Cathwel program with 101 projects receiving food aid. The major emphasis is on construction (schools, health facilities) and water development. FFW projects are usually run by village groups to realize identified developmental objectives. Reorganization of the program last year has increased Cathwel collaboration with government authorities in the selection and approval of development projects.

Three factors have recently combined to encourage changes in the Cathwel/Burkina program. The Government of Burkina Faso has become increasingly opposed to the uncreative use of food aid. It believes food may increase dependency and discourage those health and development activities which are not supported by food assistance. Food distribution in health facilities is particularly opposed by provincial and governmental health authorities. These positions contrast with positive village-level attitudes toward food assistance.

Secondly, recent changes in PL 480 and Title II regulations allow new uses of food in development efforts. Multi-year programs, monetization and new commodity sources encourage innovative program designs which stress development goals.

Finally, Cathwel itself is looking for new approaches to its programs in Africa which give greater emphasis to development rather than relief assistance while expanding the role of local counterparts in the management of projects.

The review team considered these factors along with its assessment of present program operations in formulating a number of suggested options for the Cathwel/Burkina program. The central element of these options is a reorientation of the FNP and SF activities towards an integrated village-level FFW approach to development.

Briefly, the team suggests a gradual shift from food distribution in the three separate program areas to village-level integrated FFW programs giving villagers options to address a number of development projects and issues, including health and education. Villages which choose not to participate could be phased out of food aid programs over a 5-year period, with food-surplus regions being given priority for phase out and food deficit regions commanding more of Cathwel's attention and resources. In order to ensure coordination with government development objectives, Cathwel should collaborate closely with their GOBF counterparts in planning and executing this reorientation.

These changes should accomplish three things: increase flexibility in the use of food aid for a more integrated spectrum of development activities; give a positive response to local government criticisms of Cathwel's food aid program by linking it directly to Burkina's development goals; and, streamline Cathwel operations from the present tripartite program to a single integrated approach which should facilitate management.

Upcoming meetings will discuss Cathwel/Burkina's future role in development activities. The review team suggested forming a special team composed of people from the Burkina government, Cathwel, and USAID to facilitate redesigning the program. It is hoped this report can serve as a resource in that process.

LIST OF ACRONYMS

CESAO	West African Center for Economic and Social Studies
CNR	Conseil National de la Revolution (National Council of the Revolution)
CREN	Center for Recuperation and Nutrition Education
CSPS	Health Care and Promotion Center
DEPS	Department of Education and Planning for Health (in the MOH)
DPD	Department of Planning and Development
DSME	Department of Maternal and Child Health
EPS	Education et Promotion de la Sante (Education and the Promotion of Health)
FFW	Food For Work
FNP	Food and Nutrition Program (includes MCH components)
GF	General Relief (Cathwel funded program)
GOBF	Government of Burkina Faso
GSS	Growth Surveillance System
GV	"Groupement Villageois" (Village Committee)
IH	"Investissement Humain" (human investment or FFW)
MCH	Maternal and Child Health
MOH	Ministry of Health
MPDP	Ministry of Planning and Popular Development
NCHS	Nutritional and Child Health Surveillance
NGO	Non-Governmental Organization
ORSTOM	Office de Recherche Scientifique et Technique Outre-Mer (Office of Overseas Technical and Scientific Research)
PAF	"Projet Agro-Forestier" (An OXFAM Agro-Forestry Project)
PDP	Popular Development Program
PSP	"Poste de Sante Primaire" (Primary Health Care Post)
SF	School Feeding
SMI	"Sante Maternelle et Infantile" (MCH)
SPS	Social Promotion Services
WHO	World Health Organization

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1.0 INTRODUCTION

1.1 Purpose of the Review

Catholic Relief Services (Cathwel in Burkina Faso) and the Government of Burkina Faso (GOBF) will hold a series of meetings beginning in September, 1986 to plan for a reorientation of the Cathwel program. In preparation for these meetings, Cathwel has undertaken a series of evaluations and studies of its program over the past year. The present review of development aspects of the program forms part of this process. It is based on information derived from previous evaluation efforts supplemented by additional field work and analysis.

Specifically, the review is to (a) assess developmental aspects of the current Cathwel program; (b) identify strengths and weaknesses; and, (c) develop options for future program directions.

1.2 Description of the Review Process

The review was conducted by a team comprised of personnel from Cathwel, the GOBF, and the United States Agency for International Development (USAID), which has overview responsibility for the Title II Public Law 430 (PL 480) commodities used in the Cathwel program. The team composition and primary areas of responsibility in the review were:

Outside Consultants

Judy Bryson, economist and team leader, was responsible for Food for Work (FFW).

Jon Cook, medical anthropologist, was responsible for Food and Nutrition Program (FNP).

Bob Adams, nutrition planner, was responsible for School Feeding (SF).

Mariam Yago, sociologist, contributed to the FNP sections.

GOBF

Valian Amadou, from the Ministry of Planning and Popular Development, was responsible for preparation of information on government policy and programs in the sectors of Cathwel involvement. In addition, he participated in the assessment and analysis of the SF program.

Cathwel

Ethleen Lloyd, the Cathwel supervisor of FNP and SF in Togo, prepared data on the overall Cathwel program and participated in the review of FNP and SF.

Alain Sawadogo, a FFW Technician, participated in the FFW review.
Guillaume Badoit, a FFW assistant, participated in the FFW review.

USAID

Ousseini Yeye, a PL 480 Food Monitor, USAID/Burkina, participated in the SF review.

The team received extensive administrative and logistical support from both Cathwel and USAID. Personnel of the GOBF at national, regional, and local levels also met with the team and provided information as well as their perspectives on the program. The team's work was especially assisted by various staff at USAID particularly Charles Kelly and Roxana De Sole, and by Bill Canny at Cathwel. Organization of the typing process for the final report and editorial assistance was provided by Martha Fleming. John Ford assisted with data processing.

A preliminary scope of work for the review was prepared by a consultant, Joyce King, in April, 1986. The review process covered a period from 2 June-17 July, 1986. Due to work schedules, Jon Cook was the only member of the team who participated for the entire review period. Various team members prepared preliminary reports before their departure which were utilized in the preparation of this final review paper. The methods utilized in collecting information on the individual components of the program are described in section 3.0 below.

1.3 Organization of the Report

The Cathwel/Burkina program is supporting activities in a number of sectors but concentrates on education, health and nutrition. Its FFW activities are assisting in the creation of development infrastructure and Cathwel is also supporting a number of small agricultural development activities. The food resources used in its program also supply a small but significant portion of the overall food supply in the country. Section 2.0 begins with an overview of the development challenges faced by Burkina Faso in these areas. It also provides details of government policies and program plans in these sectors to provide a perspective on the overall framework within which the Cathwel program operates.

Section 3.0 describes the current Cathwel program and presents the results of the assessment. It begins with an overview of the program. Thereafter, each of the three major components of the program is discussed, the approach to the assessment is described and the principal findings concerning the development aspects and strengths and weaknesses of each component are presented. The remaining sections of the paper contain information to assist the upcoming Cathwel/GOBF planning process. Section 4.0 provides options for future directions of the program. Section 5.0 contains the conclusions of the review. Additional information is contained in the annexes to the paper.

2.0 GOVERNMENT PRIORITIES AND PROGRAMS IN SECTORS OF CATHWEL INVOLVEMENT

2.1 Guidelines established by the Conseil National de la Revolution

The political and economic orientation defined by the CNR is a vigorous response to the accelerated deterioration of the Burkina society and economy. Agriculture, water resources, health and energy will constitute the "hard core" of mid-term development actions.

Overall Objectives:

1. to achieve self-sufficiency in staple food crops e.g. cereals, oil seeds and legumes, and to promote cash crops (cotton, sesame, market gardening produce) and the monitored extension of cattle-raising;
2. to strengthen the production machinery through a more effective integration of agriculture and processing industry both upstream (fertilizers, water resource facilities) and downstream (food canning industries, oil factories etc...);
3. to achieve integrated development of power production, with as sub-objectives the control of deforestation, the promotion of industries and crafts through a reduction of energy costs and an effective decentralization of power facilities distribution;
4. to reorganize the distribution system with an enhanced government role;
5. to strengthen the decentralization process of economic capacities in the provinces by providing support structures for local initiatives (Regional Planning Department, Provincial Health Departments and Provincial hydro-agricultural development);
6. to raise the rate of employment of the economically active population through the setting up and promotion of infrastructures for off-season activities (market gardening, craft-works, etc..);
7. to reform the education system with a view to associating education with production; and,
8. to reinforce national health coverage by placing emphasis on health and paramedical training and the creation of infrastructures which are appropriate to the country's funding capacities, i.e. primary health care centers, health centers and regional hospitals.

2.2 Health and Nutrition

The health situation in Burkina Faso is characterized by a very high general morbidity and mortality rate, essentially caused by infectious diseases which can be prevented through vaccinations. These illnesses represent more than 60% of mortality. General mortality is estimated at 22% and infant mortality at 16.7% --one of the highest in the world. Life expectancy at birth is very low, about 43 years in urban areas, and 32 years in rural areas.

The high infant mortality rate can be attributed to the poor quality of obstetric services, malnutrition (during the weaning period in particular) and protein/calorie deficiencies which make young children vulnerable to diarrhea, malaria, communicable diseases, broncho-pneumonia, measles and meningitis. Weaknesses of the MCH and family planning services also contribute to these high infant (16.7%), juvenile (11.9%) and mother (6.5%) mortality rates.

As for health coverage, it is insufficient in quantity as well as in quality, particularly in the rural areas. Only about 59% of the population are fortunate enough to live within 5 kilometers of a health facility. In 1984, for a population of about 6,700,000* inhabitants, Burkina had the following infrastructures and facilities:

<u>Health Centers</u>	<u>Number</u>	<u>Number of Beds</u>
National Hospitals	2	1363
Regional Hospitals	5	721
Medical Centers	58	1739
Dispensaries, Maternity Centers and CSPS	281	1501
Maternity Centers alone	30	1562
Primary Health Care Centers	1184	--
Pharmacies	194	--
Total		6886

Thus, there is 1 hospital for 3,350,000 inhabitants (ideal number: 1 hospital for 1,000,000 inhabitants), 1 medical center for 114,000 inhabitants (ideal number: 1 center for 40-50,000 inhabitants), 1 CSPA for 24,000 inhabitants (ideal number: 1 CSPA for 15 to 20,000 inhabitants) and only 1 bed for more than 9,000 inhabitants.

*pre 1985 census estimate

The number of health and para-medical staff are shown below:

<u>Personnel</u>	<u>Number</u>	<u>Ratio to Population</u>
Doctors	180	1/37,200
Pharmacists	78	1/86,000
Dental Surgeons	16	1/489,000
Medical Assistants	170	1/39,400
Licensed Nurses	634	1/10,600
Midwives	284	1/23,600
Sanitation Assistants	13	1/515,000
Practical Nurses	1,219	1/5,490
Auxiliary Midwives	130	1/52,000

Source: MPDP - DPD Service du Developpement Social, GOBF.

These ratios are far from the recommended WHO levels for Africa of 1 doctor for 10,000 inhabitants, 1 licensed nurse for 5,000 inhabitants, 1 midwife for 5,000 inhabitants and 1 pharmacist for 10,000 inhabitants.

These ratios also conceal significant differences between regions and between urban and rural areas. Indeed, about 50% of the health personnel are based in provinces with large urban centers. For example, Kadiogo province has 1 doctor for about 8,000 people, 1 licensed nurse for at least 2,000 people and 1 midwife for 4,000 people. In rural provinces such as Gnagna there is only 1 doctor for 75,000 inhabitants, 1 licensed nurse for 21,000 inhabitants and 1 midwife for 50,000 inhabitants. In another rural province, Tapoa, there is only 1 doctor for 112,000 inhabitants, 1 licensed nurse for 16,000 inhabitants and 1 midwife for 56,000 inhabitants.

In addition to an inadequate number of health centers and personnel there are other factors which affect the quality of health care in Burkina. These include:

- a low school enrollment rate which limits the number of people who have access to health education;
- resistance to change in the field of hygiene;
- poor regional cooperation;
- difficulties in traveling to health centers in the rainy season;
- insufficient cereal production and potable water;
- a low economic level which further restricts access to health care and,
- an inefficient organization of health services.

The GOBF would like the population to assume responsibility for its own health care. This would be encouraged by a qualitative as well as quantitative expansion in health coverage so that at least 85% of the population would have access to adequate health facilities.

Overall Goals

The GOBF seeks to:

- strengthen the Planning Department in the MOH;
- reorganize, reinforce and complete the existing health infrastructure as well as the central and provincial management structures;
- institutionalize the primary health care system in all health facilities throughout the country;
- strengthen MCH and family planning services;
- reduce nutritional deficiencies and malnutrition;
- ensure the monitoring of widespread endemic diseases;
- establish a supply and distribution system which makes drugs available to the whole population; and,
- intensify health education and develop basic sanitation, hygiene and environment services all over the country.

Specific Goals

The GOBF seeks to:

- complete the implementation of the new government health information system by the end of 1986;
- strengthen physically and operationally the 30 provincial health centers;
- renew and equip 4 regional hospitals (Ouahigouya, Tenkodogo, Fada-N'Gourma and Gaoua);
- build and equip 4 regional hospitals (Koudougou, Banfora, Dedougou and Leo);
- build and equip 6 surgical units (Bogande, Diapaga, Zabre, Boulsa, Tougan and Kaya);
- renew and equip 27 medical centers;
- renew and equip 275 CSPPS;
- construct and equip 209 CSPPS;
- renovate the two national hospitals in Ouagadougou and Bobo-Dioulasso;
- build and equip a trauma ward; and
- build and equip a national public health laboratory.

Goals of the MCH, Family Planning and Nutritional Improvement Programs

The GOBF seeks to:

- expand pre-natal consultations and reach 50% of pregnant women by 1990;
- increase attended labor from 20% to 80% by 1990;
- increase from 10% to 50% the percentage of children from 0-2 years who report for post natal consultations;
- reduce the prevalence of vitamin A deficiency and endemic goiter disease by 10%;
- institute a widespread endemic disease control program;
- vaccinate at least 85% of the target population against tuberculosis, diphtheria, tetanus, whooping cough, polio, yellow fever, and spinal meningitis;
- establish a program of sanitation, environmental hygiene, and health education;
- establish an audio-visual materials production center;
- establish EPS units in Bobo-Dioulasso, Fada-N'Gourma, Ouahigouya and Gaoua;
- open a school for sanitation assistants;
- promote traditional pharmacopoeia; and,
- encourage the construction of drugstores in all villages where there is a CSPS.

2.3 Education

Traditionally in Burkina, children from 7 to 14 years have constituted the school-age population because of late admissions to school and the high number of those repeating classes. In recent years this trend has changed with the average age of students in class 5 being 13. Thus, the school-age population is now considered to be from 7 to 13 years, approximately 18.44% of the resident population. Projections for both the school-age and resident population (in thousands) from 1986 to 1990 are shown below. These projections are based on pre-1985 census estimates.

	1985	1986	1987	1988	1989	1990
Total Resident Population	6,836	6,988	7,143	7,301	7,464	7,629
School-age Population	1,284	1,289	1,317	1,348	1,378	1,407

Basic education is not yet widespread and the school enrollment rate remains one of the lowest in the world. For the 1984-85 school year, out of a school age population of 1,284,000 children (age group: 7 to 13 years) only 313,520, or 24.4%, were registered.

In recent years the number of students attending primary school (public and private) has slowly increased at an average 9% per year. In public schools, the number of students has regularly increased (8% per year on average), however, there was a record rate of increase (13%) in the number of students entering school in October, 1984. For private schools there is a significant variation in the annual growth rate with an average of 10.3% (c.f. Table 3, Annex A).

The growth in the number of students per class is about the same as the annual increase in students. An important exception is the rate of increase in class 1 which has grown 9.2% as opposed to 8.3%. In October, 1984 the registered number of students in class 1 increased by a record 23.4% over the previous year.

In the last 10 years the percentage of girls to the total number of students has been about 36%. Overall the percentage of girls as a part of the school-age population has fallen from 37.10% in 1970 to 36.8% in 1984. This disparity is even more evident in rural areas. In 1984 in Passore Province, for example, the percentage of girls to the total number of students was a national low of 28.8%. While in the urban provinces of Kadiogo (46.9%) and Houet (41.4%) the rate of attendance was much higher. This difference in the number of girls and boys attending school is largely attributed to traditional ideas about female roles.

While the national average school enrollment rate is 24%, school enrollment rates vary by province. This rate ranges from 6.5% for Seno Province to 59.9% for Kadiogo Province. Eleven provinces have a school enrollment rate higher than the national average. The poor school enrollment rate in some provinces can be attributed to a lack of educational infrastructure. In Namentenga Province (with an enrollment rate of 8.5%) the average number of students per classroom is 60. Low school enrollment rates may also be the result of a weak demand for education. In the Provinces of Seno and Oudalan where school enrollment rates are 6.5% and 7.1% respectively, the average number of students per classroom is 42 and 49 students.

The average number of students per classroom over the last 10 years is shown below.

	'76	'77	'78	'79	'80	'81	'82	'83	'84	'85
Public Schools	53	55	56	58	60	62	63	64	65	64
Private Schools	40	42	46	46	48	42	51	51	49	56
Public/Private	52	53	55	57	59	61	61	63	63	64

In both Ouagadougou and Bobo-Dioulasso classes can have 80 to 100 pupils. Such overcrowding has a detrimental effect on the quality of education. In particular, equipment and teaching

supplies are often inadequate. There are also problems in the rural areas. In December, 1975 there were only 1,537 schools in 7,487 villages (of which 260 were in the provinces of Kadiogo and Houet). This lack of schools is one of the main difficulties the rural populations face in educating their children.

From this discussion it is evident that some of the major inadequacies of the basic education system in Burkina are:

- a low school enrollment rate;
- regional and social disparities; and,
- a limited infrastructure.

Under the 5-year Plan the GOBF will attempt to reach the following educational goals for 1986-1990:

- increase the school enrollment rate enrolling boys and girls alike;
- reduce the disparities between regions;
- closely relate theory to practical work; and,
- reduce attrition in the educational system.

Under the 5-year Plan the GOBF hopes to achieve a school enrollment rate of 41.8%, that is to enroll 624,253 students from a school-age population of 1,490,601 by 1990. This enrollment rate is based on a 12% annual increase. In order to meet classroom needs for the projected school enrollment rate additional classrooms will be needed. Assuming classroom size is limited to 65 students, 4,230 new classrooms, or 850 per year, must be opened.

Sources: Ministry of Planning and Popular Development;
Department of Planning and Development;
Social Promotion Services; November, 1985.

2.4 Investissement Humain (IH)

IH refers to the mobilization of manpower in order to minimize the financial cost of any productive activity. It is a broad term which applies to at least four situations.

1) IH can refer to the mobilization of manpower for a specific task to be carried out within a short period of time (usually a day). In this case no food is supplied. Often referred to as "Faso Bara" in Dioula, or "work for the fatherland", IH consists of cleaning or repairing public facilities or completing any community project within a day. At most, workers receive water or a local drink.

2) IH can also refer to the mobilization of village manpower in order to complete long-term projects. The population in the surrounding area makes its contribution in kind or in cash.

This type of human investment is required to complete projects such as the building of schools, administrative buildings and recreational centers. Contributions are collected to purchase material not available in the village and to provide daily rations to the workers at the construction site.

3) IH can also be based on a government investment. The government provides building material and the villagers organize the work and supply manpower with or without a food supply. An example of this type of IH is the construction of houses, begun in 1984.

4) Finally, IH can refer to an investment in food supplies, usually by an NGO, for a village which then constructs a store, dam or bridge. This case refers specifically to FFW.

It should be pointed out that the IH effort depends on the nature of the project and is adapted to different needs. The kind and quantity of IH differs for dam and maternity construction, or for cultivation of community fields. In all cases, it appears food aid has an important impact on the realization of the work, and in addition may help support populations in drought zones.

The GOBF views these types of IH favorably, but with some reservations about directly supplying food to villages. The government is concerned that when food is not available people will not work when they are requested to help on a project. The 5-Year Plan, 1986-1990, being designed, will provide guidelines on this issue.

3.0 THE CURRENT CATHWEL PROGRAM: DEVELOPMENT ASPECTS, STRENGTHS, AND WEAKNESSES

3.1 Overview of Cathwel Activities

Cathwel/Burkina operates throughout the country in three basic program areas which include: FNP (38% of funding), SF (57% of funding) and FFW or "Investissement Humain" (2.5% of funding). Cathwel/Burkina also operates a General Relief (GR) program (2.5% of funding), agricultural projects, environmental improvement projects and income generating activities on a smaller scale. These latter activities are most often integrated into the three larger program areas.

Administratively the program is divided into two offices. Ouagadougou administers the central and eastern region and Bobo-Dioulasso covers the south-western part of the country. The Ouagadougou office, headed by the Country Representative and including the Assistant Country Representative and department

heads, is responsible for approximately two-thirds of the program activity. The other office, headed by the Representative for Bobo-Dioulasso, administers one third of the program activity. Both offices include supervisory and logistics staff. The total Cathwel/Burkina staff numbers 70 employees with responsibility distributed as shown on the organigram.

Program resources and funding include Title II PL 480 foods donated by the US government, GOBF contributions estimated at \$160,000, the Title II Outreach Grant, Cathwel general operating funds, local funds generated by program participants, sale of containers, and loss claims. Total program value including Title II commodities and sea freight is \$12,276,856. Operating costs excluding GOBF contributions will total \$1,188,000 for 1987. The GOBF will waive customs duties amounting to an estimated \$7,627,050 in 1987.

Cathwel/Burkina is presently undergoing a self-evaluation in an attempt to reorient its program toward a development strategy which is compatible and complementary to GOBF plans. Changes in programming must be made without abandoning the positive elements and developments which have been accomplished over the past 25 years. The following sections on FNP, SF and FFW look in detail at present programming and the use of Title II food resources.

3.2. Food and Nutrition Program

Cathwel/Burkina operates a FNP using a traditional program strategy which has been developed through experience in various African countries over a number of years. The program is composed of four basic elements which will be discussed in this section. The program elements include:

- 1) a growth surveillance program for children 0-3 years;
- 2) health and nutrition education with cooking demonstrations directed to the mothers;
- 3) economic assistance to the family in the form of a Title II PL 480 ration; and,
- 4) development activities associated with the centers and implemented by the women.

In June, 1986 Cathwel/Burkina FNP was operating in 162 centers in 24 of 30 provinces. The program is organized through several different channels which include village groups, the national health system, the national social system and religious missions, both catholic and non-catholic. The program is generally run by young women, "animators", chosen by the community and trained by Cathwel to carry out the various program activities.

ADMINISTRATIVE ORGANIZATION - CATHOLIC RELIEF SERVICES - BURKINA FASO

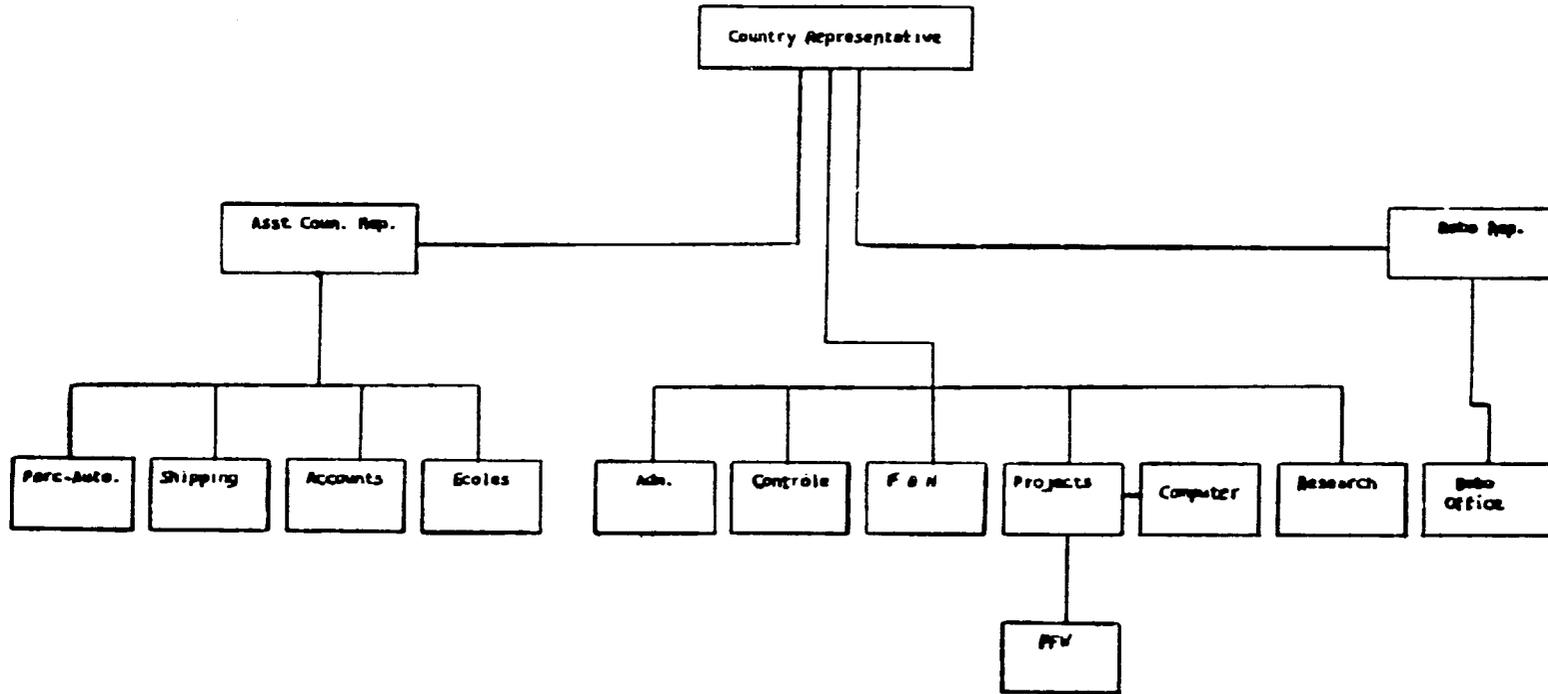


TABLE 3.2.1

Changes in Center Organizational Structure:

<u>Affiliation</u>	<u>December 1979</u>	<u>June 1986</u>
Village groups	2%	60% (2)
Ministry of Health	26%	21% (2)
Missions	24%	16%
Ministries of Social Affairs and Agriculture and Livestock	28%	3%

(1) 1981 Evaluation Report (16)

(2) The food is now distributed by a village committee thus creating a joint structure in a large number of centers.

The goal of the program is to "positively contribute to a normal, healthy growth pattern for each program child". The program activities are directed to the mothers --the primary caretakers-- who, through participation in the program, will be helped to achieve this goal. The specific objectives of the Cathwel program are to:

- 1) assure that the child's mother visits the center on a monthly basis;
- 2) inculcate in the mother a basic understanding of the relationship between good food, proper hygiene and normal infant growth;
- 3) assure that the mother can prepare and offer a variety of nutritious weaning foods to the child; and,
- 4) distribute an economic aid to the family and provide a potentially nutritious source of food for the child --ten kilos of food-aid per month to the family.

3.2.1. FNP Activities

Growth Surveillance: The Growth Surveillance System (GSS) is the focal point of the center activities. All participating children are weighed on a monthly basis and their weights recorded on an individual card which remains the property of the mother and on a master chart which records the nutritional status of the group of children weighed at each session. Both are based on the percent of standard weight for age using the Harvard standard. The present system was first introduced in 1978 and at the time of the 1981 evaluation was in use at 80% of the operating centers. At the time of this evaluation all centers were using the Cathwel GSS and the master chart.

The individual card is designed to serve not only as a growth monitoring device, but also as an educational tool for the mother. The card is intended to help the mother visualize the growth pattern of her child and to assist the animator in her task of explaining the relationship between good feeding and growth. As a monitoring aid the cards identify children in need of specific attention and provide a point of discussion for counseling mothers. The master chart is a means to record the status of the children as a group and to give an indication of program activity by providing a record of attendance.

Compiled data from the master charts enables Cathwel to plan responses to specific problems (drought, disaster, etc.), to target areas of need and to determine the best use of limited resources. The 1985 Emergency Program is a good example of this type of targeting. Cathwel programed increased rations to the FNP, made food distributions through the GOBF and channeled food to areas identified by the master chart as having the greatest number of children below standard. The FFW program concentrated its resources in these same areas in 1986.

Since 1983 the GOBF and Cathwel have discussed the GSS and its use throughout the country. Cathwel has been under pressure to use the government chart in a GOBF attempt to standardize the health recording system. In January, 1986 Cathwel agreed to phase out its own card and to begin using the GOBF national growth card. The Cathwel master chart will be maintained in the Cathwel centers. A plan to change over to the "Road to Health" chart is now being developed in collaboration with the MOH for implementation in 1987.

The present GOBF growth card is based on the Tanner standard, a measure similar to the Harvard standard used by Cathwel. The new card will be updated to use the NCHS system recommended by WHO. Cathwel will make the necessary changes in the master chart to conform to this new standard. Cathwel has worked closely with the Department of Maternal and Child Health (DSME) to develop the new national card. They plan to continue to collaborate with the DSME, specifically to assist in the introduction of the national card and to provide the necessary training to promote its use.

Nutrition and Health Education: Cathwel assumes that the combined elements of the program --education, growth monitoring, and the food package-- will enable women to improve the nutrition and health of the child. The educational component must not only be appropriate to a given situation but must also be carefully implemented in order to bring about a change in women's practices which leads to improved child nutrition.

In 1981 the evaluators found no standard curriculum in use. Since that time Cathwel has developed the "Guide de Causeries". This guide serves as the basis for the education which the

mothers receive in the centers. The "Guide de Causeries" covers the following topics:

- 1) advice for the center "responsables" and animators;
- 2) introduction to the FNP;
- 3) infant and child feeding;
- 4) the reproductive system and the birthing process;
- 5) preventive health care measures for children; and,
- 6) childhood diseases and home treatments.

The education program also includes a cooking lesson in order to demonstrate the preparation of an enriched porridge or weaning food using local products. The women bring ingredients for a recipe designated the previous month and then several women prepare the food and serve it to the children.

Economic Assistance: Economic assistance is a food package, composed of Title II foods and distributed each month to the participant women. The ration is intended to supplement the family budget by supplying foods which would normally be purchased and thus freeing a portion of the cash available for the purchase of additional foods or other necessities.

In 1982, the monthly ration was increased to the present 5 kilo package per mother and per child including 2 kilos of soy-fortified corn meal, 2 kilos of non-fat dry milk powder and 1 liter of vegetable oil. This package is estimated to be worth 6,300 FCFA (\$17.50) per month if replaced with equivalent commodities in the local market. Compared to the average annual income of \$210 per person, this package provides a considerable increase to the family budget.

Associated Development Activities: In addition to regular program activities, women also participate in small scale development activities designed to increase family income or improve the community. These activities generally include small scale vegetable gardening, farming collective fields, oil seed production, construction of a maternity center or storage facility for the Title II foods, and purchase of grain mills.

3.2.2. Management

Staff Composition and Activities: The 16 member FNP staff is structured as follows:

	<u>Quagadougou</u>	<u>Bobo-Dioulasso</u>
Cathwel FNP Project Manager	1	-
FNP Administrative Assistant	Vacant	-
FNP Supervisor Coordinator	1	-
FNP Supervisors	6	3
Training Coordinators	1	1
Master Chart Analyst	1	.5
Secretaries	1	.5

In addition, approximately 400 center workers, village committees, missionaries, GOBF personnel, and other Cathwel staff participate in the program.

In 1985 Cathwel/Burkina made staffing changes in order to improve program efficiency. The most notable change was an increase in the number of center supervisors from 5 to 9. This provides a supervisor for every 18 centers as opposed to 31 previously. Supervisors make periodic visits to assist in center activities and development projects and to monitor the Title II commodities. With fewer centers to cover, supervisors are now able to spend more time improving nutrition discussions and demonstrations, assisting in organization problems, identifying village needs, and developing projects.

The additional staff not only increases the number of possible center visits but also adds valuable expertise to the program as a whole. The supervisors and trainers include:

Registered Nurse	1
Practical Nurse	4
Medical Assistant	1
Home Economist	2
Home Economics Teacher	2
Social Worker	1

A training coordinator was added to the staff to help center workers better utilize the "Guide de Causeries". A six day training session was developed and, since November, 1985 the coordinator has trained small groups of animators on a regional basis. The master chart analyst uses individual center data to compile global statistics. Two secretaries, one in each regional office, complete the present staff. An administrative assistant is responsible for FNP office management, translations, statistics, the importing of donated medicines, logistics of training sessions and food ordering for centers. This post was vacant at the time of the review.

In addition to the increase in staff a concerted effort has been made to upgrade their training. Supervisors have participated in advanced training programs in small animal raising, home gardening, agricultural and anti-erosion techniques and reforestation. A project development workshop was held for Cathwel/Burkina personnel which included all supervisors, two controllers, the FFW coordinator, the Tenkodogo project manager (c.f. SF section) and six agents of the Ministry of Social Affairs. At the time of this evaluation, the FNP Department appeared well prepared to provide supervisory assistance to FNP centers throughout the country. It also showed promise in assisting village groups develop and implement small projects.

As recommended in the 1981 evaluation, Cathwel/Burkina has developed a program to provide additional nutrition information to animators and to improve their ability to educate mothers. Cathwel training coordinator, Sister Helene, working with the

West African Center for Economic and Social Studies (CESAO) in Bobo-Dioulasso, developed a 2 week review and training course. Since 1982, 207 animators have taken this course and 83 additional animators have received a review course only. The average educational level of the animators trained is CM2 to C.E.P. or 5th to 6th grade (U.S.). The course placed special emphasis on group discussions and problem solving sessions. Topics covered included:

- MCH in the village;
- infant development and nutritional needs;
- growth surveillance;
- adult education techniques;
- illnesses caused by nutritional deficiencies; and,
- group animation techniques.

Due to reduced Outreach funding Cathwel was unable to continue these training sessions in 1986.

Cathwel has been criticized for not including the MOH in the training program. Thus, if funds become available it is foreseen that future training will be done on a regional level and in coordination with the MOH through the provincial doctors. The GOBF is making an effort to standardize the MCH programs throughout the country. A national commission will review and revise the basic document for MCH activities. Cathwel has agreed to cooperate and if possible to participate in this process. Collaboration with the provincial doctors is extremely important if Cathwel/Burkina plans to work within the GOBF preventive health strategy.

Logistics: The Burkina FNP has an AER (Annual Estimated Requirement) beneficiary level of approximately 87,500 children and 87,500 women distributed among 162 centers. Average reported attendance for January-March, 1986 was 72,716 children. Most centers serve a number of surrounding villages within an average radius of 12 kilometers, some as far as 30 kilometers. Cathwel estimates up to 10 villages may be represented on an average at each center. Center size varies from 52 children to 2,000, with an average of 450 children per center. Considerable effort has been made in the past two years to decrease the number of beneficiaries per center in order to improve program quality. Decentralization and limited enrollment have helped to reduce center size. New centers opening in 1985 had enrollments of about 200 children and several were formed from larger centers.

A separate logistics department handles the delivery of food to the centers based on the requests of the FNP department. Cathwel/Burkina programs 37.5% of the Title I foods for the FNP. The review team did not attempt to study the complicated food delivery system. At the center level, food distribution occurs at the end of the monthly program to ensure that the women participate in all activities before departing. Distribution is done by the women themselves to help assure equality of ration size.

Mothers' Contribution: Each woman and child contributes a small monthly fee to participate in the program, 100 FCFA/mother and 100 FCFA/child or \$0.56/month (calculated as 1 USD = 355 FCFA). These contributions cover the cost of food transport to the center and a part of Cathwel/Burkina's administrative costs. The center retains 40% of the fee to pay the salaries of the animators, to cover small center expenses and to support development activities undertaken by the women. The 1987 Cathwel/Burkina budget projects 46% of the program financing for Title II food programs will be provided by such local contributions.

3.2.3 Coverage and Targeting

The Cathwel/Burkina FNP presently assists 162 villages and has an average attendance of 72,700 children per month (January-March, 1986). As of March, 1986 10 urban centers affiliated with the Ministry of Social Affairs had been closed. Beneficiaries were referred to government-run MCH centers in their zone. Cathwel/Burkina has helped the government-run nutrition recuperation centers (CRENs) in the past by donating money to buy local foods for malnourished children and is interested in helping on a regular basis. In 1984 and 1985 Cathwel donated Title II Emergency Food to CRENs.

Distribution: The majority of FNP centers are located in the central region (the Mossi plateau) which is the most heavily populated area of the country (c.f. Maps 1 & 2, Annex B). The program reaches 6.9% of the Burkina under-3 population, with more than 21% coverage in 4 provinces (c.f. Table 3.2.2) and less than 9% coverage in the remaining provinces.

The program is administered from two offices with provinces divided according to the government administrative system. Ouagadougou covers the central and eastern regions (75% of the FNP) and Bobo-Dioulasso covers the southwest (25% of the FNP). If the country is divided into areas of agricultural production as proposed by Haggblade (7), the following distribution of FNP activity is seen:

Region	kg/capita cereal production	% of cereal requirement produced *	% Cathwel program in each region
Sahel	129	63	2.5
Mossi Plateau	147	72	69.0
East	220	107	7.0
Southwest	550	268	21.5

*National minimum cereal requirement for Burkina calculated by Haggblade (7, p.54) is 205 kg/capita.

Table 3.2.2
FNP Coverage and Distribution of Malnutrition (1985)

Provinces	Population	% of Nat. Pop.	Population under 3*	Participants in CATHWEL FNP (under 3)	% coverage of children under 3	Average # Centers (1985)	% FNP Children <80% of Standard
Bar	164,263	2.1%	22,176	8,083	36.5%	19	51%
Bazega	306,976	3.8%	41,442	12,548	30.3%	21	45%
Bougouriba	221,522	2.8%	29,905	744	2.5%	1	43%
Boulgou	403,358	5.1%	54,453	767	1.4%	1	58%
Boulkiemde	363,594	4.6%	49,085	702	1.4%	2	55%
Comoe	250,510	3.1%	33,819	1,118	3.3%	3	33%
Ganzourgou	196,006	2.5%	26,461	2,083	7.9%	3	40%
Gnagna	229,249	2.9%	30,949	2,660	8.6%	3	53%
Gourma	294,123	3.7%	39,707		0.0%		
Houet	585,031	7.3%	78,979	4,806	6.1%	19	34%
Kadiogo	459,138	5.8%	61,984	4,702	7.6%	18	52%
Kenedougou	139,722	1.8%	18,862	107	0.6%	1	42%
Kossi	330,413	4.1%	44,606	1,392	3.1%	4	39%
Kourittenga	197,027	2.5%	26,599	1,147	4.3%	1	34%
Moun-houn	289,213	3.6%	39,044	2,500	6.4%	9	34%
Nahouri	105,273	1.3%	14,212		0.0%		
Namentenga	198,798	2.5%	26,838	2,018	7.5%	1	54%
Ouhritenga	303,229	3.8%	40,936	11,641	28.4%	19	53%
Oudalan	105,715	1.3%	14,272		0.0%		
Passora	225,115	2.8%	30,391	906	3.0%	3	56%
Poni	234,601	2.9%	31,671		0.0%		
Sanguie	218,289	2.7%	29,469	748	2.5%	1	36%
Sanmatenga	368,365	4.6%	49,729	3,554	7.1%	6	49%
Seno	230,043	2.9%	31,056	346	1.1%	1	72%
Sissili	246,844	3.1%	33,324	1,626	4.9%	7	50%
Soum	190,464	2.4%	25,713		0.0%		
Sourou	267,770	3.4%	36,149	7,697	21.3%	19	40%
Tapoa	159,121	2.0%	21,481		0.0%		
Yatenga	537,205	6.7%	72,523	1,785	2.5%	6	44%
Zoundweogo	155,142	1.9%	20,944	500	2.4%	1	58%
Total	7,976,119	100.0%	1,076,776	74,180	6.9%	169	47%

*population under 3 calculated as 13.5% of total population, from Burkina Faso Annual Statistics - 1985, Projection from 1975 census.

Selection Criteria for Beneficiaries: In 1985 Cathwel halted new center openings in an effort to concentrate on program quality. The creation of subcenters continued in an effort to decentralize and reduce enrollment in individual centers. There are now approximately 200 eligible children per village or new FNP subcenter. This practice leaves the selection of participants to the centers while asking that they follow certain criteria. Eligible children and mothers should come from the following categories: children 6 to 36 months old; all new mothers; women who have never attended the center program before; orphans; and, twins. There is a limit of 2 to 3 children from the same mother (excluding twins) before she is ineligible for the program and 3 nonjustified absences should constitute exclusion from the program.

Mainutrition: In 1985 the percentage of children participating in the Cathwel program below 80% of the Harvard standard varied from a low of 33% (Comoe) in the Bobo-Dioulasso area to a high of 58% (Boulgou) in the Ouagadougou area (c.f. Table 3.2.2). One center in the province of Seno recorded an average of 72%; however, this was based solely on 274 children. The 1985 country-wide average was 47%, with 50% in the Ouagadougou service area and 37% in the area served from Bobo-Dioulasso. This distribution is clearly shown on Map 1, Annex B.

In studying the master chart data over the past 2 1/2 years (c.f. Figure 3.2.A), several patterns emerge. Both administrative areas show the same recurring patterns. However, the Bobo-Dioulasso area consistently reports 10% fewer children below 80% standard.

The peaks in April-May represent the most difficult time of year with a smaller peak occurring in November. The April-May period corresponds to the end of the dry season when clean water is rarely available and food is in short supply, particularly if adequate stocks were not set aside after harvest the previous year. It is also the period when most childhood diseases occur. With the advent of the rains in June-July, leaves, fruit and other wild produce begin to alleviate the food problem. August is the first corn harvest and during September and October everyone participates in the grain harvest. The practice of women taking children to the fields during this period may contribute to the increased number of children below standard in November. Women have little time to prepare special meals for children and the effect is seen on the graph. The 1985 drought can also be clearly seen in the Ouagadougou area during March-April-May when up to 55% of the children in the FNP were reported below the 80% standard.

The first trimester of 1986 master chart data shows a below standard countrywide average of 42%; 47% in Ouagadougou and 36% in Bobo-Dioulasso. It is interesting to note that while the province of Sourou with 19 centers is situated administratively in the Bobo-Dioulasso area, logistically, it is 300 kilometers from Bobo-Dioulasso over poor roads and only 200 kilometers from

Burkina-Faso Patterns of Malnutrition

Shown in the 2 Administrative Districts

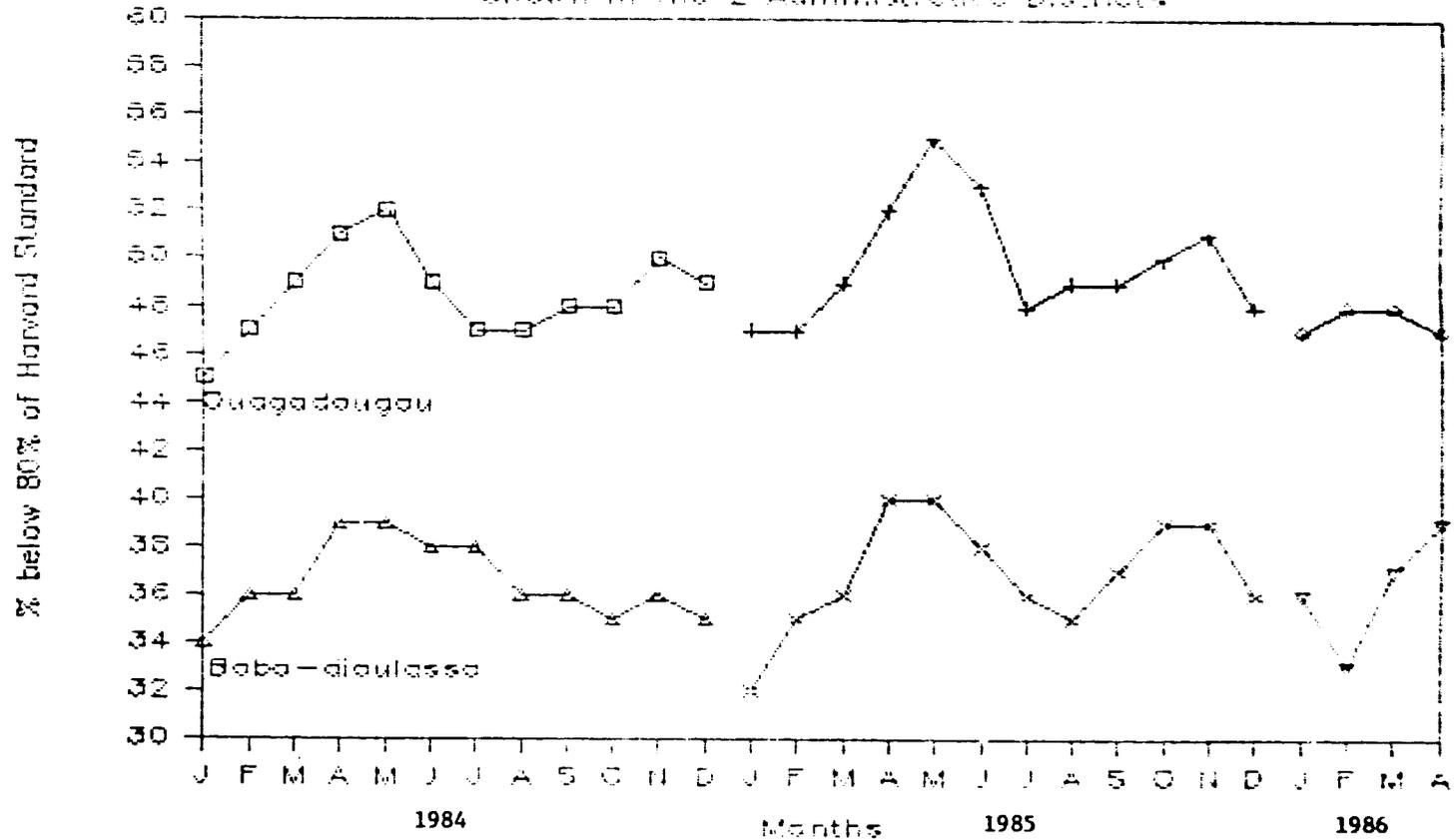


Figure 3.2.A

Ouagadougou over paved road. If the Sourou province (39% below standard) is added to the Ouagadougou area, the percentage of children below 80% becomes 46% in the Ouagadougou area and 25% in the Bobo-Dioulasso area. Sourou province appears to belong in the central area both administratively and in terms of the number of malnourished children.

3.2.4 Review Process: Method and Summary of Findings

Team members visited 13 FNP centers both during and after regular operating hours. They observed program activities and questioned participant mothers, animators, health workers, village committee members and heads of local village groups about program issues.

The team held discussions with Cathwel supervisors, Provincial Doctors, Ministry of Health personnel, and the Director of Mother and Child Health (DSME) and staff members. A local sociologist/ethnologist was hired to assist in the interviewing process and the interpretation of results.

OBSERVED CENTER ACTIVITIES

Current center operations differ little from those described in the 1981 evaluation (16) with the exception of size and eligibility requirements (doubled rations since 1982 and reduced age from 0-5 to 0-3). More centers are managed by village committees than previously and animators now follow a "Guide de Causerie" developed to aid in education.

Organization: Mothers arrive at centers early in the morning, unless exceptional circumstances dictate a change in routine. This occurred in one center visited the morning after it rained. Women preferred to work in their fields to prepare ground and plant crops before coming to the center around 10 o'clock after having worked for 5 or 6 hours.

Cathwel cards are collected as mothers and children arrive, in order to establish precedence and avoid crowding around the scales. Names are then called from the stack of cards. Children are weighed and weights recorded by the animators on the master chart and then on the cards. The animators return the cards to the mothers and may comment on the child's progress. Some animators are unable to forcefully counsel older village women. This seems especially true when the animators live in the village and come from lower status families.

After weighing, some centers distribute a demonstration weaning food prepared by designated mothers that morning. This food, usually a porridge made from local food products, should contain the three food groups. Ingredients are brought to the center by the mothers. These weaning foods are eaten at the centers during or after lessons.

Growth Surveillance: The team was not responsible for evaluating the nutritional status or change due to participation in the program. Through observation of the program activities and of the technical capabilities of the animators the team was only able to develop an impression of the reliability of the data being recorded. In most centers errors were found in recording and transferring data from the master chart to the individual cards, and most frequently problems arose in age calculations, especially when the women had missed a monthly weighing. Weights taken by the animators were for the most part correct, however papers under the weighing pan or poor placement of the scale probably caused errors in some cases. This can be attributed to a lack of attention to detail and understanding of the scale's limits. Errors also occurred when weights or percentages were called out to a second animator for recording.

The GSS system in use is not simple. The cards require that the correct age and weight be calculated, charted on the master chart and the percentage of standard located on the graph. This percentage is then recorded on the individual card. The process can be time consuming. Mistakes cannot be easily spotted unless there is a clear understanding of the process. The educational level of the animators is also a limiting factor.

Despite the possibilities for mistakes, analysis of the data collected shows little overall error, with an average of 94% of centers reporting master chart data on a regular basis. General observations indicate the master chart data are carefully recorded and most errors occur on individual cards through transfer of data or faulty age calculation.

Causeries: The "Guide de Causeries" described in section 3.2.1 is a reflection of modern medical thinking on topics which have been adapted to local conditions. Its emphasis on child feeding, health and hygiene is aimed at women who traditionally deal with these topics in the home. Problems arise however, when women try to apply the lessons learned.

One problem which was mentioned is the difficulty women have in finding time to prepare a supplementary porridge for infants and young children. The 1981 evaluation (16) cites a study by McSweeney and Freedman (11) which shows women in a Mossi ethnic area spending only 18 minutes in a 14 hour day on child care. The extra time needed to build a special fire to cook or heat up a child's portion of porridge discourages attempts to follow the animator's recommendations.

Another problem is, although the women in the program find the subjects discussed in the "causeries" interesting, they may also find them so inappropriate in their application as to arouse humour during the "causerie". This happened at one center visited when the animator stressed the importance of using mosquito nets, a luxury item beyond the means of the vast majority of rural families. For the sake of credibility, animators may wish to take such issues into consideration.

It may be helpful to note that women already have a very complete set of beliefs and behaviors concerning child raising, health and illness, and cleanliness and pollution. They share these beliefs and behaviors with the other members of their village and culture area [c.f. Bonnet (2), Fainzaing (4), Lalleman (9), Sindzingre (14), etc.]. It is therefore not surprising that, when conflicts occur between "causerie" lessons and cultural beliefs, mothers have strong reasons for retaining the latter. This is a recurring issue in all public health programs, regardless of cultural milieu. In this situation, it is preferable to present new health knowledge, not as the only reality, but as one way of dealing with health issues which should be tried. When this is done teacher status and credibility is very important. Unfortunately, many of the animators have been chosen, not for their traditional status, but for their ability to read and speak French. A particular handicap appears to be their relative youth in a cultural setting where age is generally respected. [See Annex E for further discussion on possible cultural barriers to using the "Guide de Causeries".]

A final difficulty with the "Guide de Causeries" is the contradiction between raising women's status in Burkina Faso and reinforcing their traditional roles. The "Guide de Causeries" stresses traditional female role behavior --child care, health concerns, house cleaning, food preparation-- and contributes to, rather than ameliorates, the present status of women. Since this also appears to be the approach taken by the MOH in the 5-Year Plan to educate mothers in child-raising and health, it may be worthwhile exploring this contradiction in the upcoming review of the program.

Distribution: Food distribution is the last activity in most centers. It is generally done by the women themselves. In this context, equal sharing is an important value. It is difficult, if not impossible, to give needy mothers more than others during the distribution, especially when the program is run by a village committee. This targeting strategy appears more feasible in health centers run by personnel who come from outside the village socio-political system.

Associated Development Activities (ADA): Most of the centers visited had some type of ADA project. The majority were vegetable gardens which supplied the center kitchen, or provided cash crops (peanuts, sesame seed) which paid for needed materials, seeds and medicines. These projects are run by the women participants who retain the money to be used as the group decides. This follows the practice in most of Burkina which allows women to manage money earned on their own (as opposed to their husband's) plot.

One oil-seed project was discussed at a medical center in Oubritenga Province. The head nurse there, while generally positive about the Cathwel food program, pointed out that Cathwel oil was competing with the locally-made peanut oil from the oil-seed project. Women were unable to sell all their oil at a price

they felt was fair. This sort of problem should be investigated before shipping oil to areas with these ADAs. The issue of competition may be pertinent to other parts of the food package, but no other information was obtained. One team member with experience in this area noted that such marketing problems were often resolved in 1-2 years when women discovered previously unexploited markets.

OTHER FNP OBSERVATIONS

Value of Food Package in FNP: In an attempt to examine the value of the food package, several centers which had had food but no longer benefited from Cathwel assistance were identified. In the past year a number of centers associated with the Ministry of Social Affairs had been phased out of the Cathwel program. Women had been referred to other centers in the area and so the team was unable to examine the impact of the food phase out. In the end, only three centers were identified and contacted, two in the Ouagadougou area and one in the Bobo-Dioulasso area.

The FNP which was conducted by the Post Office for their personnel was phased out at the end of February, 1986. By June enrollment had experienced a 50% drop. Many of the continuers were required to attend in order to receive their social security benefit paid for children under 3 years. Thus, these participants may otherwise have been dropouts as well. The center "responsible" felt, however, that a certain number of women understood the importance of the program and would continue to attend regardless of the food incentive.

Wemtenga, a center which by error had received food for a two month period in August of 1985, had an enrollment of 700 with 40% of the children below 80% of standard. During the period of food distribution the center enrolled as many as 250 children per week and was unable to keep up with the children requesting entry. By June, 1986, enrollment averaged 60 per month. Prior to receiving the food the center enrolled less than 40 per month. The "responsible" felt that the women continued to come because they learned about the center when the food arrived or they continued to hope that the food would be reinstated.

In the Bobo-Dioulasso region, a public health official asked that food distribution be stopped in his area because he felt it was detracting from the government MCH effort. He eventually changed his position due to strong opposition to withdrawing food and decreases in attendance in the program.

As a general rule, in discussions concerning food in the program, there was a direct relationship between access to the food package and praise of the program. The further removed discussants were from the village level the more circumspect they became about the benefits of food aid in a health program. No participants could be located who felt food was not a good idea, although many said the educational component was most important. Animators did not see how they could run their program without

the food ration. They felt few mothers would attend or pay their subscription fee without the food incentive and they stressed the need for extra food in some families.

Village committee men were unanimous in wanting to keep the food aid. They would like to increase the coverage as well. When confronted with the opinion, expressed by some health officials, that food aid in a health center motivated people to attend for the food, and not the health of the children, one old man succinctly stated, "What good is health without food?" While he may have missed the point made by the health officials, there was little doubt his logic was impeccable on the village level. Villagers are not willing to make the fine distinctions about motivation or dependency which one hears at higher levels. Food at the price they are paying seems a bargain.

Health personnel showed the most contrast as a group in their opinion of food aid in the MCH context. As a rule, village nurses were positive about food, whether they controlled the program, or whether a local village committee handled the money. At the provincial level, the Cathwel program received more stringent criticism, best summarized by the observations of a provincial doctor who recently chaired a workshop which among other things discussed the role of NGOs in health. He felt the Cathwel program had created a situation where villagers will no longer support a health promotion project (SMI, Sante Maternelle et Infantile) without a food package. He cited examples where this had happened in his province.

He also criticized the "verticality" of the Cathwel program. This term refers to the lack of coordination with other health structures in the country. He felt Cathwel should work through the Ministry of Health and not go directly to the village level. This is an understandable concern for a health administrator and planner who finds he cannot factor some of the health activities under his jurisdiction into his total health plan. He is responsible for health in his province, but can't control the functioning of an important health activity, the Cathwel FNP. Part of this "verticality" can be attributed to the lack of MOH activity and infrastructure at the time the Cathwel FNP began.

A final argument which is made rather frequently among upper echelon health professionals, is that a logical inconsistency exists when food aid and health promotion are in the same program. "Let's talk health promotion and leave the food out of it". The doctor was prepared to base his own SMI program on vaccinations, vitamin A tablets, nivaquine and other medical acts as the motivation to attract pregnant women (which Cathwel ignored) and to weigh their children. For him, the difference was that food aid was not part of his conception of a health promotion/primary prevention program. "Food misleads people" (into thinking they are doing something for their health, apparently).

For this health official, food has a role only for those needy cases of malnourished children identified during MCH weighing programs or referred by other medical entities (dispensaries, maternity centers, PSP (Poste de Santé Primaire)). This shifts the emphasis in the use of food from what Cathwel considers a malnutrition prevention program (where all children are included in a feeding/mother education program regardless of nutritional status) to a curative use of food in a malnutrition rehabilitation program. While this shift may seem ironic in a primary prevention effort, the population coverage under the present Cathwel MCH program (7% of Burkina families) is too small to represent a true prevention program on a national level. The government intends to retain the nutrition education component as its malnutrition prevention effort and to use food as medicine, rather than as the incentive to drive the prevention activities, as Cathwel has been doing.

Coverage and Targeting Issues: A glance at the distribution of FNP centers around the country (c.f. Map 1, Annex B) shows the highest concentration of centers around Ouagadougou (the Mossi plateau), Bobo-Dioulasso and the Sourou area in the West. Discussions with staff suggest several reasons for this distribution. First, centers closest to roads and distribution centers were served because of convenience. Secondly, requests were filled when they came into the offices, a fact which seemed to depend on the communication system between Cathwel and the potential participant groups. Missions were obviously aware of the Cathwel program and many asked for it. A second informal communication network existed between Cathwel staff and their friends and relatives living in various parts of the country. These staff people informed their home villages or villages of acquaintances about the possibility of obtaining the FNP. This may explain the high concentration of centers in Moore-speaking areas close to Ouagadougou, the language of most of that office's staff.

At the departmental level, pressures are brought to bear on provincial leaders to obtain programs for villages which feel they have as much right to a FNP as the village next door. Since Cathwel policy seems to have been to fulfill all requests regardless of demonstrated need, this has contributed to local "pockets" of centers rather than random and evenly distributed coverage.

The relatively large number of centers in the Sourou and Bam provinces do appear to correspond to a greater need in that area for food aid. However, the majority of Cathwel centers do not appear to be located according to food and nutrition needs, but to secondary factors related to the growth of the program in the country.

It is clear that unless requests are granted only from previously identified geographical areas, village targeting according to need will be difficult. As long as village committees manage FNP

programs, they will decide who may, and who may not participate according to local social and political reasons, and not medical need.

The criteria for the selection of beneficiaries are not clearly defined from village to village. Enrollment occurs between the ages of 6 and 8 months and children remain in the program until the age of 3 years. Other criteria were not consistent nor was it clear who makes the selection, an important point if malnutrition criteria are to be used.

Establishing criteria for selecting beneficiaries based solely on medical or governmental beliefs about the causes of symptoms of malnutrition, and therefore the efficacy of food targeting practices, is limited to the extent these ideas are shared by village groups and those participating in the selection process. Traditionally, symptoms of illness are often seen as signs of unsatisfactory relationships with one's neighbors or the spirit world. Treatment of symptoms may bring about relief, but ultimate rehabilitation of the patient depends on realigning social relationships, both in this world and in other worlds. In this sense, it may be difficult to convince village committees to target families with malnourished children for food aid when public opinion says they need to work instead on their moral and ethical behavior. This issue cannot be developed in depth here but is pertinent to all food targeting programs.

In village groups, the animators may or may not have input into the selection process. A village committee definitely has influence on the priority of enrollment. The first-come-first-served rule appears to be observed in most health centers, with an understanding that the nurse or doctor in the area can enroll a specific child in need. All the centers visited enrolled orphans on a priority basis and health personnel cited the program as a definite aid to these children.

It became obvious in our conversations with both villagers and Cathwel staff that, when faced with an increased demand for FNP resources, village committees distributed rights to participate in the program on a representative basis. Each "quartier", corresponding roughly to a lineage or clan, was given a share of the participant rations.

When this cannot or is not done, "problems" result. Jealous villagers hound the staff and life becomes difficult for animators and other program personnel. This attitude prevents targeting of the neediest families unless some authority figure such as a head nurse is able to impose his will in a particular case.

Attendance on a regular basis is a Cathwel requirement for continued participation, and in most centers women were required to attend for a period of three months or more before they were enrolled. Good attendance during this period was cited as a basis for choosing beneficiaries in several centers. Many

centers had organized special feedings for undernourished children. They required mothers to attend more often and to prepare food as a group.

Generally, mothers who cannot pay are not excluded from the program. Instead, "arrangements" are made to advance them the money. In some centers, women's association members regularly contribute 10 to 25 francs to a common fund which is used for solving such problems and for buying medicines.

3.2.5 Discussion

This section addresses Cathwel FNP strengths and weaknesses in order to provide a basis for considering future options. Impressions are based on discussions with concerned parties, from village participants to ministry-level personnel including Cathwel staff. In addition, the team used source materials from files provided by the GOBF, Cathwel, USAID and ORSTOM.

NUTRITIONAL IMPACT: At present the Cathwel program is unable to demonstrate any nutritional impact as measured by improvement in weight for age in its participant population. This could be due to at least two factors: one, there is no nutritional impact or two, Cathwel cannot demonstrate the presence (or absence) of nutritional impact because of methodological problems. The second situation is most likely. Matched cohort studies comparing program participants with non-participants have not been done. A study of weight for age for 1984-1985, both drought years, shows a 1% overall increase in the percentage of program children below 80 percentile of weight for age (c.f. Figure 3.2.A and Table 1, Annex A). Unfortunately, no comparison with a comparable non-participant population was done, which leaves the question of nutritional impact unanswered. The 1981 Evaluation Report (16) found little program nutritional impact, as measured by a reduction of the below 80% children. Again, methodological problems cited may be a factor in equivocal results.

NUTRITION SURVEILLANCE: Aware that program participants are not selected from a nation-wide representative sample, Cathwel does not claim to have a comprehensive nutrition surveillance program in Burkina. Nonetheless, as Reeser points out (13), Cathwel has the only extensive ongoing analysis of nutritional status of Burkina children which enables regional and seasonal comparisons. In spite of various shortcomings related to representativeness and technical issues of data collection and processing, this surveillance mechanism can be useful. If the information can be communicated to the relevant GOBF nutrition surveillance office on a timely basis, the government can keep tabs on trends by region and season. At present, this information is sent to provincial doctors in the form of graphs describing the percentage of children below 80% in their provinces, and to DSME, DEPS and UNICEF.

EFFECTS OF THE FOOD PACKAGE: Because of the issues raised above, the nutritional impact of the food package is presently unknown. The addition of 4 kilograms of soy-fortified cornmeal, 4 kilograms of non-fat dry milk, and 2 liters of soybean oil to a family's monthly food stock is valuable in terms of its caloric and protein contribution whether consumed by the family or sold to buy local foods. The present food ration supplies each participating family with approximately 65% of the daily caloric need and more than 100% of the daily protein requirement for one average family member.

The economic value of the food package, as noted in section 3.2.1, is currently worth \$17.75 per month to a family, or about 100% of the average per capita income (\$210). Although centers prefer that mothers feed the children the food package during the month, they have no practical control over the food once it leaves the center. Cathwel's position is that the food represents an economic addition to families, in that it allows economies to be made on other food purchases. This position was not contradicted by the results of this review.

The food package has a marked effect on the success of the Cathwel program. Women who come to the centers receive health and nutrition education, weight surveillance of their children, benefits from associated development activities and less tangible social benefits associated with the periodic gathering of village women at a public place. Withdrawal of the food package results in dramatic drops in attendance. Measured in terms of efficacy, the food package substantially contributes to reaching rural populations with modern medical, nutritional, and developmental ideas.

On the other hand, the Cathwel food package is alleged by the MOH and some NGO's to reduce the effectiveness of their own MCH programs in attracting participants to their centers without a food incentive. While such allegations are difficult to substantiate (and may sometimes represent the use of the Cathwel program as a scapegoat to explain other program failures) there is no doubt the food package makes Cathwel vulnerable to criticism from organizations which should be their partners in health and development activities. Cathwel FNP staff members find themselves in an increasingly defensive stance vis-a-vis the GOBF, MOH and various NGOs. This requires them to spend too much time justifying the program when they could be collaborating with these organizations for the benefit of the Burkina population.

DEVELOPMENTAL IMPACT OF THE CATHWEL PROGRAM: Measurement problems similar to those described above arise concerning nutritional impact when the effects of Cathwel developmental activities are examined. Although associated developmental activities are present in many centers, their true impact on the participant's lives cannot be assessed without community studies. McMillan's work (10) with resettlement populations in Burkina is suggestive of the kinds of extensive survey and intensive case

study methods which must be used to measure changing socio-economic conditions. While it may not be necessary to spend two years studying target communities, as she did, some effort should be devoted to measuring program effect. There is presently no data-gathering mechanism associated with Cathwel developmental projects which could furnish information of this kind.

In the absence of these feedback mechanisms for assessing the appropriateness of development activities, Cathwel appears to be taking a "leap-of-faith" approach to development by concentrating on projects related to food production and processing. This seems to be a good choice in light of Haggblade's observations (7, p.24). He concludes that Burkina Faso is currently (1984) deficit in the production of 15% of its caloric needs and 50% deficit in lipid production. The Cathwel oil-seed projects have the potential of addressing both deficits.

Grain-mill purchasing at the village level may free women for more food production and child-raising activities. Other small projects (birthing centers, warehouses, schools, pharmacies, wells, etc.) which may contribute to village infrastructure should be evaluated to determine their usefulness to the villages. In all cases, Cathwel should try to develop a mechanism to measure the success or failure and/or the developmental impact associated with these projects. Measuring the success of stated goals for 1987 --increasing family revenue and reducing women's work-loads-- is one place to start such evaluation activity.

CATHWEL EDUCATIONAL PROGRAM: The FNP educational program has tried to encourage women to use local foods to supplement breast milk after 6 months of age, and to adopt health and hygiene practices shown by modern medicine to reduce the likelihood of childhood diseases. Some cultural restraints to the adoption of these ideas were briefly discussed above. It was also pointed out that beliefs about child feeding and health/hygiene already exist which may agree with, be irrelevant to, or contradict the medical and nutritional views being taught.

A valuable teaching strategy, where new knowledge is to replace or complement existing knowledge, is to make apparent to all concerned just what that existing knowledge really is. This is necessary in order to prevent blatant contradictions and to provide a basis for open discussions of different perspectives. The present Cathwel FNP educational program ("causeries") appears to be an example of top-down, one-way, "single truth" teaching. Unfortunately, it is one often found in health education settings.

One way of improving this situation is to include more information about usual food and health habits and beliefs in the education program and to encourage animators to deal with these topics as well. This would doubtless lead to lively discussions

where ideas could be exchanged and positive behaviors encouraged. Mothers are certainly aware of the issues and discuss them if they feel they have permission to do so from animators and others. Team members were able to discuss several traditional beliefs important to weaning and infant feeding practices by simply broaching topics normally not debated in public. It should be possible for the trained animators to do the same, and in a less awkward manner.

Cathwel is planning to participate with the GOBF in a training program for village-level animators and it is hoped this broader perspective to health and nutrition education is part of the new curriculum. See Annex E for a brief case study of socio-cultural factors related to FNP and MCH.

At present, the impact of the educational component is just as difficult to measure as nutrition and development impacts. Participants are often able to correctly repeat lesson materials, but behavior changes have not been systematically studied. In light of earlier observations on cultural and economic constraints, some doubt remains as to the application of knowledge. A positive aspect of the Cathwel FNP and one shared with the GOBF and other NGOs, is the manner in which it brings village-level associations to focus their thinking and activities on health and nutrition issues in a novel way. To a large extent, health and nutrition have been family-level concerns. The creation of special groups to deal with common health issues at the village and community levels is a first step in the building of a modern primary prevention program which may bear fruit as the changing Burkina culture and economy presents new possibilities, and present constraints are modified.

3.3 School Feeding

3.3.1 Description of the School Feeding Program

The School Feeding (SF) program started in 1962 and covered nearly 100% of the primary school system until 1981-82, when expansion of the program was stopped. Table 2, Annex A shows the evolution of the SF program in terms of commodity tonnage, recipients and rations from FY 77 through FY 86. Table 3, Annex A summarizes SF coverage by province for 1986. Similar provincial statistics were not available for previous years.

Comparing information in SF Program Evolution [Table 2, Annex A] with Annual Increase in Primary School Enrollment [Table 4, Annex A] it is clear the numbers of primary schools and students continued to increase while commodity tonnages remained basically constant. The program was terminated in urban areas like Ouagadougou and Bobo-Dioulasso and later in Banfora because their schools were judged not as seriously in need of a feeding program.

as were rural schools --which continue to be added to the program. Cathwel also decided not to extend the SF program to newly created schools. The review found, however, that the policy on new schools was not followed. National coverage fell from near 100% in 1981 to 75% in 1986 (Table 4, Annex A).

Information regarding the early years of the SF program implementation was not readily available but in recent years the program has been almost entirely directed toward the actual delivery of food. Associated activities, such as nutrition education, nutritional status monitoring and encouragement of school agricultural projects were not included. During school year 1981-82, Cathwel attempted to introduce its GSS but found it was impossible to implement successfully because of the numbers of schools involved and the lack of trained personnel.

It is interesting to note that, after 24 years of continuous school feeding in nearly all primary schools, many educated Burkinabe under the age of 40 have been recipients of Cathwel food. Thus the psychological orientation of many people directly concerned with education and with the SF program is influenced by memories of their own school experience.

There is no question of the GOBF's intent to expand educational opportunities to the entire school age population. The task, however, is formidable. The percentage of school age population enrolled by province is shown in Table 5, Annex A. The government has directed resources toward school expansion with some success. The increase in student population has been dramatic, far exceeding population growth which is estimated at 2.7% annually, before emigration. The trend in school numbers is seen in Table 4, Annex A.

Plans for future development of the primary education system are included in the government's current 5-Year Plan, which is being refined at the provincial level and is not yet a national document. GOBF officials have clearly stated their desire to expand the school system to serve more students and to emphasize practical training in agriculture and related subjects in the curriculum.

It seems reasonable to conclude that the primary school system will continue to expand at a rate considerably higher than that of population growth. A solid, relevant primary education offered to as wide a range of Burkinabe children as possible will provide a major step toward long-term national development. The question remains as to the means by which the Cathwel SF program can improve its contribution to that process.

3.3.2 Methodology of the SF Program Review

Field visits and discussions of SF activities with school officials in four regions (Kourittenga and Boulgou provinces, Sanguie and Boulkiemde provinces, Comoe and Houet provinces, and Kadiogo) and discussions with the Cathwel offices in Ouagadougou and Bobo-Dioulasso and with the Ministries of Education and Plan provided information in the following areas:

- utilization of the Cathwel foods at the school level;
- perceptions of the impact of these foods on student health and educational activities;
- related agricultural production activities in primary schools, including those sponsored by Cathwel and other agencies; and,
- identification and discussion of alternative activities related to SF, and the possible reorientation of SF toward increased developmental impact should this be deemed appropriate and feasible.

3.3.3 Development Aspects: Principal Findings

Discussions with Cathwel and USAID personnel indicated a genuine desire to reconsider the role of donated food in primary schools and, if a program was justified, enhancing its developmental impact rather than focusing on its current nutritional impact. Cathwel/Burkina has demonstrated its concern in this area by its Tenkodogo "Education-Production" (E-P) project. This project, designed in 1984, includes 23 primary schools in the provinces of Kourittenga and Boulgou. It includes a three-year program of agricultural production activities similar in design to an earlier Cathwel-funded pilot project. This is a first attempt to generalize lessons learned and to develop a program for use throughout Burkina Faso.

Agricultural production in the Tenkodogo project consists of six integrated components: gardening; farming; small animal raising; forestry; nutrition education; and the provision of water. The goal of the project is to make a rural primary school self-supporting through the acquisition of food and funds earned from the sales of food, as well as to improve the cognitive and physical aptitudes of primary school students and to encourage their acceptance of agricultural work as a valuable means of livelihood.

A full review of the E-P project's current impact was not possible because its activities had started only a few months prior to the review. Four schools were visited and it was found that some were progressing faster than others and so results at the time of the visit differed.

One school was far less advanced in its implementation of project activities than the others. The team found that the single most important difference between schools was a lack of cooperation on the part of the parents which was apparently interfering with production efforts. By comparison to other schools, the garden was smaller and the field crops covered a smaller area. Although it was impossible for the team to actually determine which factors were most significant, it was interesting to note that this school had 299 students as compared to a range of 113-172 in the other schools.

It was generally noted that schools in urban areas did not display the same enthusiasm or support for Cathwel efforts as those in the rural areas. The school with the less-advanced project stood in marked contrast to three other schools where parents supported both the school canteen program and the production project. Parents were not concerned with the summer period because Cathwel has agreed to provide all project schools with a one-time special allotment of food to feed the children "who come and work". They were, however, concerned that they might face problems next summer without the Cathwel food. The hope is that the project will be far enough along to ensure the students' participation without providing a meal.

All four schools were part of the SF program. All had sufficient storage space for the E-P project, three had established gardens, all had boreholes to provide water, two had established poultry raising, one had started rabbit raising, and all four had established fields for crops. One school was attempting to cultivate a full three hectares with only 113 students. All the inspectors and teachers interviewed agreed that the Cathwel E-P project was of great benefit to the schools and should be continued. They were, understandably, hesitant to predict the final outcome i.e., whether or not the schools could become self-supporting. They did feel there was that potential if project support continued. The only reservation came from those teachers at the school where parent support was lacking.

All four schools expressed satisfaction with the support received from the GOBF's technical services in water, agriculture, and livestock. When vaccinations of poultry or rabbits were required or when advice on the use of fertilizer or seeding techniques was sought, government personnel came directly to the school and provided the needed service. Some of the teachers pointed out that they were not themselves "experts" in agricultural activities. Thus, they emphasized the importance of this back-up support.

The teachers felt that the E-P activities contributed to nutrition education. The children not only learned the proper foods to eat, but had the chance to grow these foods as well. The teachers hope that as food is produced children can be taught to prepare balanced meals based on the foods they themselves have grown rather than on purchased or imported foods. It should be noted that the project paper on which current activities are

based, mentions nutrition education as one component but does not actually include specific activities directed toward that end. Apparently, nutritional benefits are expected to accrue on the side and specific curriculum development awaits joint action on the part of Cathwel and the Ministries of Health and Education.

In visits to schools not included in Tenkodogo E-P project activities it was interesting to note that both school inspectors and directors had heard of the E-P project (one inspector had actually visited the project). They were interested in its results and hoped that they might be included should the project be expanded. The review team encountered enthusiasm everywhere for primary school production efforts. Frequently the team saw concrete evidence of production efforts without the direct intervention of an outside agency.

All primary school inspectors and teachers agreed that the SF program was an incentive to enrollment and that, without it, enrollment would drop. When inspectors were asked separately, however, if nonparticipating schools faced problems with enrollments, none were mentioned. Indeed, the inspectors insisted that enrollments were growing across the board.

At the national level an official of the Ministry of Education stated that parents sent their children to school in order that they might become government employees and provide support to the family. This official felt that a food program was not a major factor in either school enrollment or attendance. Provincial educators agreed that the desire for education was the major motivation, however, they still felt the SF program supported attendance despite the lack of hard evidence.

All agreed that the meal served to the students was an important factor in alertness during class and teachers felt that the SF program was beneficial to the general level of health of their students. Educators pointed out that, particularly in the rural schools, many students walk as many as 10 kilometers each day to school and are unable, unwilling, or too tired to return home during the lunch break. If a lunch were not provided they would stay at school eating nothing. Furthermore, of those who returned home, many would have little to eat as it is not traditional in Burkina to serve a mid-day meal. The school lunch program and FFW projects are exceptions.

The 1981 evaluation of SF (16) reported a significant positive nutritional impact from school feeding. It is assumed such an impact continues. Although the desire to improve family welfare may result in increased enrollment and attendance regardless of SF, such pressure cannot guarantee mental acuity. On the other hand, it is difficult to estimate what proportion of the students would indeed not receive any meal at all or very little food at home should the SF program be terminated.

Contributions to cover the costs of transport from Cathwel warehouses to the schools was a subject of considerable discussion. Cathwel charges a flat rate per ton, which effectively means that the closer schools subsidize delivery to the more distant schools. Two years ago that rate was nearly tripled (3,750 FCFA/ton to 9,090 FCFA/ton). While the flat rate did cause some irritation, school directors generally understood that the more distant schools were generally poorer and could not afford high transport rates, and further that Cathwel had been losing money at the lower rate. Reactions were mixed, however, when asked what the effect might be if the contribution was again raised (examples given were 12,000 and 20,000 FCFA per ton). Parents would have to be asked for larger contributions and it was felt that at a certain point they would refuse or fail to pay.

The main problem with transport contributions is collecting the necessary funds from the parents. They are represented at the school level by the Association des Parents d'Elevés. Despite the fact that, even at the new rate, food was delivered to the school at a cost of about 15% of that bought in the local market, and despite the fact that the required contribution averaged only about 500 FCFA (\$1.40) per student annually, most schools had difficulty collecting contributions from parents.

When asked what the results would be should the SF program be terminated abruptly and completely, all educators agreed that this would be a programmatic disaster. The idea was strongly opposed at all levels. After so many years of SF, a sudden termination would not be understood by the people and would result in a great deal of confusion and anger. It would also directly harm those students who depend on school feeding for a significant portion of their daily diet.

When asked what the results would be should the SF program be phased out over a 5-year period, educators agreed that this would be preferable to a sudden termination, but they wondered what would replace the program. Teachers and school directors agreed that if food was to be reduced without eliminating specific schools, the ration would have to be cut in order to feed all students. The school staff could not, and would not determine which students were in need.

When asked what the results would be should the SF program be phased out as food production for self-sufficiency is introduced, educators agreed that this was potentially a feasible solution. At all levels educators agreed that a SF program represented an unhealthy dependence and that local foods should replace imported food when possible. They also agreed that even if a school could not produce enough to become completely self-sufficient, it might become self-supporting with contributions from families after a good harvest. They stressed the need for planning this "phase-over" (as opposed to simply a "phase-out") carefully with the full participation of educators at all levels and with the parents of the students.

All schools seemed to have sufficient storage capacity and equipment for preparation of meals. In general, food deliveries were made on time, although there was the occasional delay.

A survey of student dietary habits was beyond the scope of the review; however, anecdotal evidence and the experience of those concerned with this type of program suggests that the SF program does provide a supplement to the normal diet in most cases. When it supplants a home-prepared lunch, for example, it is likely to be a better balanced and more nutritious substitute.

3.3.4 Strengths and Weaknesses

The Cathwel school feeding program appears to be operating reasonably well from a logistical viewpoint. The food usually gets where it is meant to go, it is prepared properly, all students receive their ration and the schools seem pleased with the results. Beyond the simple delivery of food and its use, however, the current Cathwel program fails to make any measurable impact on the development process. Until the program can be monitored regularly and until Cathwel and the GOBF have a clear understanding of the developmental objectives of the program, this is likely to be the case.

3.4 Food for Work. "Investissement Humain" (FFW)

FFW operates in a special context in Burkina. It is the use of human labor resources to create infrastructure required for development. It has been an important component of the development plans of successive governments and is especially emphasized by the present government. FFW activities are organized by government bodies, churches, NGOs and village groups. Individuals working on the projects are drawn from the local area and generally receive no remuneration. In recognition of their contribution, meals may be provided at the work site, and efforts are often made on projects to provide commodities for this purpose either from local or external sources. This system of labor organization derives in part from traditional work arrangements found among a number of ethnic groups in Burkina. Cathwel has supplied Title II commodities to support FFW activities since the 1960s. This component of the program, however, has always received a minor portion of resources and program attention.

Despite the small size of past and current programs considerable attention was given to the FFW component by the review. A number of factors contributed to this decision. Firstly, both the GOBF and Cathwel want to use food resources to support development activities which have the potential to increase local food production. Cathwel wished to know whether there was any

potential for using FFW to support agricultural production activities and whether an FFW mode of operations could be used in the FNP and SF components.

Secondly, 5,000 of the approximately 20,000 tons of commodities Cathwel distributed for the 1985 emergency programs supported FFW activities. Evaluations have reviewed these activities favorably and in 1985 there was a sharp increase in commodity support for FFW activities (the World Food Program has also used this mode of distribution for a substantial portion of its emergency commodities). The use of emergency food commodities, however, also resulted in more controversy with certain NGOs and the GOBF concerning the impact of food use to support FFW (i.e. did it serve as a disincentive for future community efforts which would have to be carried out without food support). More information was needed on exactly what was happening with FFW activities before these questions could be answered.

Finally, Cathwel had evaluated the operation of its FFW activities in 1985. As a result, a new set of criteria for projects and new operating procedures had been developed and implemented beginning in January, 1986. The review provided an opportunity to assess how the new system was operating. Information on the review process and its results are presented in the following sections of the report.

3.4.1 Description of the FFW Program

Cathwel has supported the FFW activities of a variety of organizations and groups over the past few years. A review of past projects indicates that a substantial portion of commodities were allocated to Catholic Missions and parishes, especially in 1981 and 1982. Thereafter, there was a shift in approach, and other NGOs were also assisted. In the last three years there has been a marked increase in support given directly to "Groupement Villageois" (GV). These village committees have also been supported by the Ministry of Rural Development and by several development projects. The promotion of GV is an attempt to create new channels for supplying resources and services, and to ensure broad based participation at the local level. Some of the GV have operated for a number of years and are taking a larger role in local development and management of projects such as cereal banks.

Cathwel utilizes both Title II commodities and commodities from the European Economic Community for FFW. With respect to Title II commodities, the ration is calculated on the basis of 4 kilos of cornmeal and .5 kilos of oil per worker per month plus 5 rations for the worker's dependents. This results in a ration of 24 kilos of cornmeal and 3.0 liters of oil per month. In almost all cases, the food is consumed by the workers at the site.

In recent years, regular FFW activities have been a small element of the Cathwel program. FFW received only minor inputs of Cathwel staff time, and was primarily managed by one Burkinabe staff member who had other responsibilities. As a result, very few of the projects were visited either before or after commodities were delivered. In September, 1985 it was decided to suspend further FFW projects and to conduct an evaluation of the projects which had been supported during the year. The evaluation found both substantial achievements in some cases and a lack of any appreciable results in others. In December a decision was made to restart the program, but to establish specific criteria for projects and their management. The projects must:

1. focus resources in areas which have been experiencing production deficits; [In 1986 support would only be provided to areas affected by the 1984/85 drought.]
2. support agricultural production and soil conservation; develop water projects including wells, water retaining structures and dams; or support the construction of medical centers or schools;
3. be prepared at the local level; and be approved by the local Prefect, the provincial High Commissioner, and the necessary technical personnel to ensure proper planning;
4. include essential information such as the population involved, the number of workers per day, the number of days to be worked in a week, the length of time the activity is expected to last, the amount of money required to realize the project, the source of financing and evidence of community involvement in the activity; [It should be noted that village or project organizers pay a management fee of FCFA 4800 per metric ton and an empty bags and container charge to Cathwel. In addition they pay all transportation costs involved in moving the commodities to the work site.] and,
5. be visited before the allocation is made. [A second visit will be made after the project is finished or when work is concluded for the year.]

By coincidence, the new system and criteria developed by Cathwel in late 1985 correspond very closely to a "Program Framework for Successful Use of FFW as a Development Resource" which was developed by a Workshop held in December, 1985 (15). The Program Framework suggested by the workshop is included in Annex D.

Information on the number of projects in the FFW program supported by sector in 1986 is shown in Table 7, Annex A. Table 8, Annex A indicates the tonnage of commodities provided by province from January-June, 1986.

As can be seen, the program is more concentrated and is focused in areas severely affected by the drought (although certain drought stricken areas, notably Soum and Oudalan, are receiving little). It is noted that these figures relate to the provinces managed out of the Ouagadougou office. The operation of FFW from the Bobo-Dioulasso office follows the same pattern but is on a much smaller scale. Through March, seven projects were supported involving a total of 45 tons of commodities.

3.4.2 Review Process: Method and Summary of Results

METHODOLOGY

It was apparent from a preliminary review of FFW projects that the food element was a minor cost item and that the use of food would be difficult to measure given the importance of other aspects of project activities (i.e. technical direction, material support, etc.) Accordingly, the approach taken was to attempt to establish the role which food was playing in the process of realizing projects. The review further attempted to establish who was receiving the benefit of the food commodities and to provide perspectives on who would benefit from the projects.

A questionnaire was developed which later proved impossible to administer in initial field trials. As a result a short list of topics was developed which interviewers memorized. Thereafter on visits to villages, they engaged villagers in conversation and made notes immediately after leaving the village.

The sites of a portion of the projects Cathwel had supported in 1986 were visited as well as certain villages which had requested but not yet received support. The two Burkinabe FFW staff from Cathwel served as interviewers. In the case of villages which had been supported, the staff member who visited and interviewed the villagers was the individual who had not made the first visit to the site. In the case of both types of villages, the villagers were not told until the end of the discussion that the visitors were from Cathwel. Instead, they were advised that we were from a NGO interested in learning about the types of activities they had undertaken or completed and the methods used to organize their projects.

Approximately 28 project sites were visited and 18 project descriptions prepared (certain of the visits were made in the course of the initial trials, and in other cases, multiple sites of the same project were visited). No attempt was made to develop a random sample but rather to visit a reasonable number of project sites in the limited time available for the review. The interviewers were accompanied by Judy Bryson to approximately half of the villages. A selection of the results of the village interviews are included in Annex F.

It is recognized that the sample is biased because some villages were sufficiently organized and informed to be aware of and request Cathwel assistance. This is certainly not true of many villages. It is suggested that the sample be viewed as a "best case" situation; that is, the potential for and constraints on the realization of development infrastructure of the best organized and motivated villages.

While the review was progressing, Cathwel invited a group of NGO representatives and a representative of the World Food Program to discuss the pros and cons of FFW. The review team attended as observers. The team also met with several government officials (prefects, a secretary general of a province and individuals from the technical ministries). Finally, evaluations of the emergency FFW program were reviewed.

SUMMARY OF RESULTS

Village Organization: Substantial organizational structure exist at the village level. Certain villages have a longer history of formal organization but all villages now have or are in the process of building formal structures.

Number and Type of Projects: The lists of activities which villages have realized are impressive. They include cereal banks, schools, dispensaries, reforestation, water retaining structures and dams. In most of these cases, the community at large benefits from the new facilities. The construction of schools and health facilities is extremely important in increasing access to these services in rural areas.

Collection of Money: Villages have a variety of means of collecting money for their projects. They may require all adults in the village to pay a small fee, or a sub-group of the village to pay. At other times, fund raising efforts such as the farming of a collective field or the collection and sale of materials (e.g. gravel) may be used. Individuals who have left the village and moved to urban areas often stay in contact with the village and engage in fund raising activities. Villages also have access to concerned outsiders who may assist in providing money.

Arrangements for Materials: Most materials used on the construction projects are freely available in the countryside (gravel, sand, rocks and water) but labor is required to collect them. Villagers often use their donkeys and carts to transport rocks and sand. In addition, where large projects are underway, the "prefecture" or a technical ministry will also send transport to move materials once villages have assembled them.

Organization of Work: Villages are generally divided into "quartiers". These may be made up of individuals who are related, however distantly. Arrangements are made for rotations of working by "quartier" at the site to spread the burdens and allow workers to discharge their other responsibilities. There is generally a division of labor between men and women with each

sex undertaking certain tasks. When food is prepared at the site, it is always women who do it. Where skilled labor is required, such as masons, arrangements are generally made to pay these individuals.

Arrangements for the Food: Efforts are often made to provide food at the work sites. Requests may be made to Cathwel or to government bodies administering the World Food Program commodities. In other cases, villagers may collect food for the workers or outsiders associated with the village may provide food.

Use of the Food: The food is generally consumed at the work site by the workers. In cases where women are working on the site they also consume the food. They may also eat it if they have prepared the food. Food is almost never divided among the workers to take home. In the unusual case where take home rations are provided, there is generally an outside individual such as a priest who distributes the food. In one case where the village organizers were attempting to divide food on the basis of number of hours worked, disagreements were reported.

Importance of the Food: The importance of food was generally described in terms of its contribution to the achievement of work. Villagers indicated that when food was not available at the site, workers generally became hungry and weak at midday and work would stop at that time. This is understandable, particularly as Burkinabe seldom eat breakfast before leaving home. The importance of a full day's work in minimizing the demands made on rural work time must be placed in the perspective of the time required for the workers to walk the distances to the site. That time is the same each day, regardless of the time worked.

In some food deficit areas it is difficult to realize projects. For example, construction of buildings is generally carried out in the rainy season because water is more readily available for mixing concrete and preparing mud bricks. This is, however, a period of food shortage and heavy agricultural labor requirements. These problems may combine to create a severe labor/food shortage which may be alleviated by FFW activities. An illustration is provided by one village visited during the review.

The village was in an area which experienced a poor harvest last year. A school needed to be built by October. The villagers were hoping an outside agency would supply food for the work. They described how several men had already left the village to look for money to buy food for their families. Those left behind were faced with the double demands of production and construction on a limited food supply. The villagers indicated that if food was provided, the men would be able to return and all productive activities could proceed more effectively.

Similar situations were found in the evaluation of the emergency programs [(3),(1),(12)]. In most cases, Cathwel provided commodities to other NGOs who had project activities under way for use on the work sites. In many of these areas, large scale migration had taken place and projects were at a standstill. Once food arrived in the area, even though it was inadequate for the whole population, many of the men and families returned. Whole families came to work and to share in the food. At the end of this period, the agencies also found that a majority of project goals were realized. Further discussion of the development aspects of the food is included in the next section of the paper.

3.4.3 Developmental Aspects of Food Support to FFW

Food provided for FFW is used to create development infrastructure. It does not increase the incomes of workers because it essentially represents energy replacement, and has a lower value than the total input provided by workers. The development returns from the food accordingly derives from its role in supporting the realization of projects, in fostering village organization and in sustaining the development process. Analysis of the information collected during the review resulted in two principal findings concerning these matters.

1) **Food is a critically important resource in the mobilization of labor to realize development infrastructure.**

This finding is at odds with much of the previous analysis of FFW and of similar FFW activities in other countries. For example, the evaluation of the Cathwel program during 1980 expressed concern "over the role of FFW commodities in stimulating community action at the village level (16)". The evaluators pointed out that "If villages have anything to contribute to a community development effort it is their own time. The more critical needs are financing for materials and technical assistance". The current review indicates this analysis is incorrect.

Most construction materials are freely available provided labor can be found to collect and prepare them. Village groups can often cover the costs of materials required (e.g. cement and roofing) by collecting small fees from every member of the group or from fund raising efforts. Technical assistance can often be found from governmental and private sources. The critical constraint is the ability to mobilize sufficient labor to realize the activity.

Traditionally, there was a well developed system for organizing labor. When any large work was to be done, villagers could request their leaders to announce the requirement. These leaders could call upon neighbors and even relatives from distant villages to come and work. Such requests would be honored and labor would be provided. It was incumbent on those asking for

assistance to provide a meal for workers at the work site. This is still true particularly when there is a large demand for labor and a desire to complete the project in a short period of time. It should be understood that workers are responding to demands for mutual assistance, but that the realization of the work requires the inputs of individuals who may not perceive any personal benefit from the work to be accomplished, e.g. the male laborers on a maternity block.

When village groups attempt large building projects, for example the construction of dams requiring thousands of person days of labor, work is difficult to sustain without an energy replacement. Although the provision of food is a very low wage for the worker (.5 kilos of cereals and a few grams of oil costing on the order of FCFA 100 or \$.28), it is the minimum necessary to support and ensure the labor force. Many times villagers cannot collect sufficient food or money for more than a short period of time. As a result, work proceeds on a start/stop basis and may take many years to complete.

The concern expressed by many NGOs and the GOBF over the provision of food derives from a recognition that food resources will not be available to cover all the activities they wish to realize. Accordingly, when food is provided for some of the activities, work progresses on those activities, while projects not receiving commodities proceed even more slowly. These concerns are valid; however, the present evaluation indicates that the NGOs and the GOBF should be aware of what they are really requiring of people, many of whom are poor and malnourished. Changing that condition requires the accomplishment of the developmental work the GOBF and NGOs are promoting. Despite this fact, it must be recognized that assuring the availability of food at work sites is a low cost way of ensuring labor can be made available. Village contributions and commitment can be most appropriately arranged by requiring their involvement in raising the funding for material inputs and possibly in providing a portion of the food supply.

2) Projects can be organized which create village level rotating food stocks to accomplish development work.

This finding derives from review of the results of an Oxfam agro-forestry project (PAF) which has been supported with limited quantities of Cathwel food. The PAF has operated in Yatenga Province since 1979. Over time, the project developed a system of terracing and other agricultural practices (including interplanting of trees and agricultural crops) which demonstrably increases the fertility and returns from the land. The PAF has four components: creating public awareness of the problems of erosion and the possibilities for solving them; training villagers in the use of these techniques; developing a class of trained villagers who can supervise the work in their areas; and, monitoring the progress of activities in the field.

The value of the techniques are easily seen and villagers are increasingly interested in the practices. At present, PAF is assisting 96 village groups who have completed terraces on at least 642 hectares (it is difficult to determine the exact area covered as many individuals are building stone terraces without assistance from the project). The project director recognized that many farmers wished to build stone terraces on their fields, however, they needed a large labor force to complete the work.

In 1984 the project director requested and received from Cathwel a small stock of food which was given to the village PAF groups to manage. The villagers were told that the commodities were to form a rotating stock to be used in establishing the terraces. Individuals could withdraw food from the stock and use it to mobilize and feed laborers working on the terraces. They were to repay the stock at harvest time. The foods could also be used to support work on communal fields. These fields are often used as a demonstration-training ground so the farmers can learn the techniques at no risk to their own production. In these cases, a portion of the harvest is used to replenish the rotating stock.

The PAF is in the process of evaluating its entire project and will soon have precise data on the results of this experiment. The drought and poor harvest in 1984 strongly affected project activity. In addition the area was a cereals-deficit region in 1985. PAF has evidence that considerable work was realized and some villages have maintained and even increased their original stock. As a result, PAF requested and received a further allocation of 53 tons of commodities from Cathwel in 1986.

The results of this analysis were compared with information from reviews of other village-level projects. These indicate success is achieved when village groups are given sufficient information to make participant decisions and when they are fully involved in making subsequent decisions and in managing activities. Success is even greater when activities become self-generating after the initial investment. The PAF experience indicates food resources can play a useful role in projects with these features while providing a security stock of food in deficit areas. Food resources play a negative role when villagers have not been adequately consulted and as a result, they are working only for the food.

3.4.4 Strengths and Weaknesses of the Current Program

STRENGTHS

1) A major strength is Cathwel's ability to respond to village, church and NGO initiatives.

The current Cathwel program provides a flexible resource which can be quickly mobilized. It has been used in creative ways (e.g. the commodities provided to PAF) to support community efforts and

the work of NGOs. Cathwel is a valuable resource for such groups who can expect sympathetic consideration of their requests for assistance.

2) Another strength is the apparent benefit of the new system in assuring achievement of desired results and technical quality of work.

Cathwel has resolved a considerable portion of the management problems of its FFW program through the establishment of its new criteria for projects and the new management system. As both government officials and the large number of NGOs in the country are informed of the possibilities for support, NGOs are approaching local government officials for approval of their requests. This may be fostering greater government assistance to project activities (e.g. the lending of prefecture trucks to move commodities on condition that the NGO/village buy the fuel and thus economize on the normal ton/kilometer charges).

At the same time, the government representatives are serving as a useful filter when they do not forward requests for project activities that are ill-conceived or from areas that are well supplied with food stuffs. Local government officials informed the reviewers they were making these decisions. At the same time, they were concerned to find support for certain priority activities, especially those which were making heavy labor demands on an area and/or requiring workers to travel long distances to the work site.

The project sites which were visited generally had sufficient technical support to achieve reasonable standards of work. Dams in particular have been a troublesome area, but those visited were receiving technical inputs from a variety of groups including Cathwel. In all cases, whether it was dam or building construction, substantial, good-quality work had been accomplished.

WEAKNESSES

1) A major weakness is the lack of a project cycle. The large number of requests and activities results in management problems for the program.

Although the new system is helping to insure that Cathwel receives well-supported and conceived projects to consider, in many cases there is a substantial time lag between the preparation of a request in a village and its receipt by Cathwel. By the time Cathwel can arrange to visit the project it may already be complete or the season in which the work could be accomplished is past. Such abortive project preparation and appraisal efforts are costly to Cathwel, to the village groups as well as the GOBF. Even when project activities are still possible, there are further delays involved in the subsequent communication process which has a negative impact on the timely delivery of commodities to the work site.

2) Another weakness is the lack of any relationship between the ration size and the use of the food.

The current method of calculating the ration is not valid in terms of the use of the food. A method needs to be developed for calculating reasonable quantities to be provided in terms of using the food as meals on the work site. A valid commodity ration would be one which was based on providing one quality meal for the number of person days of labor required on a project (plus some excess in the expectation that additional labor will turn up on some days).

3) The impact of transport costs on distant and more deficit areas is another problem area.

The current system which requires that villages or NGOs receiving commodities pay Cathwel a management fee, cover empty container costs and, in addition, pay all transport costs is a constraint for many villages. It also falls most heavily on distant areas with poor road systems. In general, these are areas which are most cereals deficit.

These charges also create constraints on commodity use and on achievement of development benefit. For example, the PAF would have requested up to five times the quantity of commodities Cathwel provided to them this year if the expenses had been lower. Commodities were only requested for one-third of the villages participating in the project, and larger amounts were also desired for some areas. Because the PAF operates on a very small budget, expenses associated with the 53 tons of commodities required that the project charge the village groups a total of FCFA 630,000 (\$1,770). The PAF knew that many of the other village groups it wished to include in the distribution could not meet the costs. The costs involved are far lower than the value of the work which could be accomplished, and the benefits which can be realized, but they represent a barrier to the use of the commodities.

4) Cathwel generally is not involved in the realization of subsequent development benefits from projects.

The review team was asked to determine how Cathwel could be more fully involved in the development process. Cathwel does support some small additional inputs to the development activities, e.g. tools or other inputs to complete a reforestation project. As a general rule, Cathwel's role is that of a commodity provider and manager. While this is a useful role, and one which the review has found to be critical in assuring a labor force, it may not be ultimately satisfying to Cathwel.

4.0 OPTIONS FOR FUTURE PROGRAM DIRECTIONS

Before turning to a global assessment of program options for Cathwel in Burkina Faso, each of the three program areas will be examined separately in order to make apparent the manner in which changes may be introduced on the village level. In view of the calorie and lipid shortfalls in Burkina cited by Haggblade (7) and discussed above, it seems prudent to consider options which have a potential for developmental impact without endangering the precarious nutritional status in the country through precipitous food reduction policies.

4.1 Food and Nutrition Program

An overriding factor in any consideration of the future role of Cathwel in MCH is the attitude of the government agencies responsible for health and nutrition programs in the country. At the policy planning level, these agencies appear to be uniformly opposed to the present way Cathwel is using food distribution in its MCH centers. It is doubtful Cathwel can continue to ignore this attitude if it intends to cooperate with the Burkina government in other areas. The fact they wish to collaborate is apparent in the proposed Cathwel-GOBF project to introduce the new growth surveillance cards in the MCH centers, with its associated personnel training component.

It is also difficult for Cathwel to defend a program based on food distribution for which no concrete measures of success exist, in spite of impressions by team members that program activities do make positive contributions to MCH in Burkina. Rational means must be found to redirect the MCH program into useful channels which fulfill measurable objectives of improving child and maternal nutrition and health while removing the difficulties raised by the food distribution activities. The review team offers some options which have been suggested by the review process.

OPTIONS

An initial option which may be considered is the redirection of Title II foods presently utilized in the FNP away from the MCH centers and toward an integrated village-level rural development model which includes health-related activities. This might be achieved in the following way.

About 21% of Cathwel food and nutrition centers are in villages with access to a GOBF MCH program. These centers should have priority in a pilot program which selects villages with active village groups willing to take on the responsibility for using Title II foods in a development strategy which uses an FFW approach. In this manner, villages would not lose the food presently being distributed through the MCH centers, but would

be able to shift the food distribution out of the health sector into a village setting, thus responding to one of the major criticisms of the health department.

These selected villages could be assisted by Cathwel in the design of a development strategy based on the needs of the community with priority for projects which contribute to food production and village health. These might include FFW projects in erosion control, well digging, cultivation of community fields, or the provision of food to support animators in a quarterly child-weighing, vaccination, health education and child nutrition program carried out in cooperation with health officials. It might be that the village would choose to use part of the food (a third perhaps) to motivate mothers to attend quarterly health and education activities by making the food available to supplement food supplies during four months of the leanest season when child nutrition is at its worst. Or, it could be used in a similar manner as a way of gradually closing out the present food distribution in the MCH setting instead of abruptly shifting it to other projects.

Should the pilot program show promise in redirecting the Cathwel programs in MCH centers, it could be extended to all 162 FNP: presently in operation, beginning with those centers which have been operating for the longest period of time. Centers opened before 1981 should be considered for immediate redirection, with others given up to 5 years from the date of their original opening in order to benefit fully from the educational components of the present FNP.

FNP villages which are not interested in a redirected program could be phased out of the system in a manner similar to the one described above where the feeding program changes to a quarterly weighing, with an option to receive the food during the hungriest months. It is suggested that, in the event Cathwel decides to close out nutrition surveillance activities in an area, that some coordination be established with the MOH to prevent the abrupt dismantlement of nutritional surveillance in regions not yet covered by the MOH program. Thus, closing of some center programs might be delayed until appropriate MOH surveillance takes over. It is also suggested that areas with the lowest percentage of children below 80% be closed out first and those with higher malnutrition later.

The problem of financial support for program animators involved in educational or health activities could be solved if the village as a whole approves the plan and considers those activities of their development project as being important. This will depend on the ability of outreach workers to explain the importance of health to development. Village support of health workers does not contradict GOBF strategy as may be seen in the plans for the PSP (Poste de Sante Primaire) system, where village health workers are to be supported by the villages themselves.

Regardless of what options are ultimately adopted by Cathwel and the GOBF, it is important the nearly 400 animators trained over the years by Cathwel are not lost to the country. These people represent a natural resource to be used in any nutrition surveillance program, and many have other skills as well. To abandon them in a switch-over to another surveillance system would represent an unfortunate administratively-created braindrain. The envisioned collaboration on training in the use of the new national weight surveillance cards is a place where Cathwel village-level animators could assist the MOH in expanding its system.

Cathwel might also wish to contribute to MCH efforts in Burkina by helping to develop and distribute appropriate nutrition rehabilitation rations to CREN units which rehabilitate severely malnourished children while educating mothers in proper child nutrition. These centers might benefit from Cathwel's past experience in food distribution and their access to appropriate Title II food commodities which could form the basis of a rehabilitation ration (e.g. corn-soy-milk). Financing the importation and distribution of the limited rations might be piggy-backed onto larger food imports related to FFW projects.

4.2 School Feeding

The major suggestion for the SF program is that it be gradually reduced in size and reoriented based on criteria developed in close cooperation with the relevant GOBF ministries. Sudden significant reduction of the program in the coming year should be avoided.

It is clear that the current 1,468 schools (public and private) covered by the Cathwel SF are too numerous to allow for the kind of effective programming that PL 480 legislation requires and that Cathwel also clearly desires. A combination of Cathwel's tradition of widespread coverage and the explosive growth in the number of schools in recent years has conspired to render the current Cathwel program primarily a shipping and logistics effort. Anything beyond this, e.g., special nutrition education programs, agricultural production efforts, etc., are administratively beyond the capacity of Cathwel to implement over even a relatively small percentage of the total program. Cathwel staff readily agree that current operations are extremely difficult to maintain efficiently as they stand. Staffing and financial resources for a program reorientation on the current scale are simply beyond the resource availability of either Cathwel or the GOBF.

Although a reduction in size is thus suggested, there is no rationale for a reduction based solely on an arbitrarily selected percentage. To the extent feasible, the reduction should be implemented on the basis of criteria that support the overall objective of increased developmental and nutritional impact.

TARGETING ON DEFICIENCY

A simple and straight-forward option would be to target food to provinces that regularly fail to be food self-sufficient. Table 5, Annex A provides an indication of cereal food self-sufficiency for each of the nation's 30 provinces. This approach would likely reduce program concentration in some regions, particularly in provinces such as Comoe and Houet, which are traditionally food self-sufficient. Although such an option would not be readily accepted in the provinces to be reduced, discussions with educators in the different regions --including the southwest, which includes some of the most agriculturally productive areas-- indicated the rationale for such a policy would be understood.

The above approach is provincial in implementation. Within it, however, are two approaches that could allow for targeting based on schools rather than province:

- 1) The first of these is to direct food only to "rural" rather than "urban" schools. This approach has three apparent weaknesses: it is already policy in many urban areas and thus would lead to few reductions; it presents the problem of defining "rural" versus "urban"; and it assumes that all rural schools are equally in need.

- 2) A second approach is that only schools that supported agricultural production activities associated with a nutrition education curriculum be allowed to receive food. The fact that most of the schools visited and, according to the school inspectors, many additional schools, already have initiated at least some basic agricultural activities is suggestive that such an approach is workable.

Should this option be adopted, consideration might be given to an approach used in the Tenkodogo E-P project. In that project, schools have been allowed a "special" one time allotment of food for the summer break between school years in order to provide an additional incentive to both students and their parents to provide labor over that period.

A reorientation of the sort described here would bring many aspects of "food for work" to the school feeding program. It rewards hard work in agriculture, an area of great developmental concern, promotes school self-sufficiency, aids the educational process in a direct way, encourages improved nutritional status and moves the nation closer to a point where foreign-donated foods, such as those provided under PL 480, cease to be required or where the nation is capable of meeting its own food needs.

The team was not able to tour the northern provinces as teachers were not available because of exams and parents were away most of the time on their farms due to the start of the rainy season. However, by reviewing pre-established data and armed with lessons

learned from the field by representatives of USAID and the Ministry of Planning, the team concluded this region represents a special case when designing a new reorientation policy. Indeed, the northern region, covered by the provinces of Yatenga, Soum, Oudalan, Bam, Sanmatenga, Namentenga and Seno presents peculiar features and therefore calls for particular attention.

The severe climatic conditions which prevail in the north (poor rainfall, depth of groundwater, shortage of pasture, poor communication infrastructure) require more emphasis on specific activities which will not necessarily be productive in the near future. These include reforestation, anti-erosion sites for soil improvement and the construction of dams.

Other factors are important in assessing the role of SF in this region. First of all these provinces are where school attendance is low and needs to increase. Four of these provinces have the lowest rate of attendance in Burkina: Oudalan (3.9%), Namentenga (7.5%), Soum (7.7%) and Seno (10.8%). The province of Yatenga which is relatively more developed than the other northern provinces, has a rate of attendance of 13.8% compared to the national rate of 21.6%.

Furthermore, the above mentioned provinces experience chronic food deficits. School feeding as a supplementary food component is likely to improve both the nutritional status and the liveliness of children attending school.

Finally, these two factors are joined by a new phenomenon: the drop in the northern populations' purchasing power as a result of the decimation of livestock after the 1984 drought. This downward trend in purchasing power cannot be reversed in the near future. More attention must be given to these provinces. It is important that any SF reorientation policy not be implemented in the same way in the northern regions as in the southern/south-western regions.

A time-frame for an overall consideration of phasing out urban SF, phasing rural SF to a development mode and sustaining SF in food-deficit areas is:

- Continue current SF program through FY 87 to allow time for planning and the preparation of a multi-year (5-year) development-oriented operational plan.

In non-deficit areas:

- phase out urban SF by end FY 89;
- shift all existing rural schools to agricultural development/nutrition status by end FY 90;
- start new rural SF only where an agricultural development/nutrition education component is included; and
- put all SF on a 5-year program (from phase over or startup).

In deficit areas:

- phase out all urban schools by end FY 92;
- accept new schools in numbers equal to phase out;
- introduce agriculture or agroforestry/nutrition education in at least 50% of new startups; and,
- put all SF on a 5-year program, renewable once.

Cathwel currently plans to meet with GOBF representatives from the Ministries of Plan, Health, Education, Water, and Agriculture during September, 1986 for detailed discussions of a reorientation of the total Cathwel/Burkina Faso program. This would be an ideal time to discuss a general reorientation of the SF program in detail.

4.3 "Investissement Humain"

The review process indicates the FFW program has the potential to provide substantial development benefits and recommends that it be increased in size. Two suggested options for the program are described below.

CONTINUATION OF SUPPORT TO LARGE NUMBERS OF PROJECT INITIATIVES

Under this option, Cathwel would continue the current FFW program and follow the new project criteria and system. A project cycle, however, would be established to minimize management problems. An example of how such a system might work is:

1) Cathwel would decide on a certain level of support which it would provide (possibly as a given percentage of the estimated food deficit in the country). This would be used for budgeting procedures (e.g. Annual Estimates of Requirements).

2) In September of each year, when data is generally available on the crop condition in the country, decisions would be taken on the areas in which FFW activities would be supported in the coming calendar year (i.e. those areas which were expected to be food deficit).

3) Planning meetings would be held with government officials and NGOs operating in those areas to establish lists of projects which are planned and funded for the coming year. Thereafter Cathwel would visit the areas and take decisions concerning a final list. Agreement would be reached by December 31, on the total program for the coming year.

4) The project system would be supported by arrangements to subsidize transport costs, especially to the most remote and/or poor areas. To improve program management, FFW activities would cease to operate out of the Bobo-Dioulasso office. Sourou Province would be added to the Ouagadougou operation because it can be more effectively served from that location.

FOCUSING THE PROGRAM ON A LIMITED NUMBER OF VIL'AGE LEVEL ACTIVITIES

Under this option, Cathwel would leave the support for widespread activities to the World Food Program which operates on a government to government basis. Cathwel, however, would maintain an unprogrammed portion of its commodities to support the initiatives of communities, churches and NGOs. This portion of the program would operate on the basis of a project cycle such as that outlined above. The balance of the program would operate on the basis of Integrated Food for Development which is described below.

4.4 Integrated Food for Development

The various options discussed above for reorienting the current Cathwel programs in Burkina respond to a single imperative --the movement away from the use of food as aid to the use of food as a stimulus in the development process. The difference is more than rhetorical in that food for development is productive beyond the calories it brings into a country. If used properly, food has the potential of becoming a managerial tool which governments on the national and local levels can use to attain development goals, while meeting shortfalls in food availability caused by drought or other circumstances presently beyond control.

These dual functions of food have only been partially utilized by Cathwel in Burkina. The SF program has probably been the least developmentally productive use of food commodities in terms of volume. Only recently has SF begun to move towards activities which link food with education and production, as in the Tenkodogo Project cited above. The MCH program has the merit of linking educational sessions and nutrition counseling to food distribution. The most positive apparent feature of the food

package is that it provides the motivation for participants to attend weighing and education sessions, and the money to pay for the animators and infrastructure. This function of food aid in the MCH sector differs little from its function in FFW projects, where it also serves to provide motivation and financing to get work accomplished.

But many people do not view the work of health in the same light as projects such as building dams, dispensaries, erosion dikes, cultivating community fields, and the like. Positive health behavior is considered to be its own reward, and therefore no other enticement should be needed to motivate people to take good care of themselves and their children.

Food used at work sites to feed workers has an immediate and measurable effect witnessed by the physical changes wrought on the environment by the workers. Any positive changes in health and nutrition at the village level are subtle and difficult to measure. The utility of the food distribution program cannot be demonstrated with the same ease as that of a FFW program. It is perhaps for these reasons, more than a real difference in the function of food in health versus development work projects, that a reorientation of the MCH program is necessary.

An acceptable use of food in the Burkina context appears to be a program which integrates the goals of SF, MCH and FFW into a model which operates in a manner similar to the present FFW projects. The various options discussed above show similarities and overlapping ideas which could be best dealt with in a single approach to development, instead of the present tripartite system.

VILLAGE-LEVEL CONTROL OF FOOD COMMODITIES

One element of an integrated food for development approach which appears important is village- or community-level decision-making. Without the involvement and commitment of the target population, development activities invariably founder. Therefore, villages should be given the opportunity to choose from among a number of project options, previously agreed to by donors and the GOBF as having potential for development. When it is decided what the food will be used for, it must be decided who will get the food and under what circumstances. Again, the target population must participate in these decisions and take responsibility for distribution of the food among eligible recipients.

INTEGRATED OPTIONS

Using the FFW model, villages could decide to distribute donated food to participants in various projects they felt were important to the village. These could include education-production projects for school children, similar to the Tenkodogo project mentioned above, MCH activities (vaccination, weighing, education) and straightforward FFW projects for increasing village production and infrastructure. For example, a combination

project in an integrated format could be envisaged: a FFW project to clear land for a school agricultural production scheme, or FFW to dig wells near maternities or other health facilities.

A food allotment, the size and targeting of which could be decided on the basis of regional food production and needs (related to drought, crop failure, etc.), might serve a single village for several projects simultaneously over a multi-year period. This would allow support of both short-term work projects and long-term education-production projects, or periodic ongoing projects such as nutrition surveillance, vaccination, or other MCH activities.

In the case of projects where food is not feasible for attaining development goals (e.g., purchase of farming equipment, building materials, medical equipment, financing education and training in health, agriculture and nutrition etc.), Cathwel may wish to monetize food as a way of generating cash. If foods were sold locally, this option would continue to assure food stocks were available to supplement local production in food deficit areas or in times of emergency. Care must be taken, however, to prevent depressing local markets for coarse grains with this option (c.f. "Food for Development" [6]). The FFW option also assures food already in the country for FFW projects is available for transport to the neediest areas on a priority basis without having to wait for processing of emergency food requests. Cathwel already has experience in this area.

It is clear an important element in an integrated program is the creation of a special unit within Cathwel to serve as liaison to the GOBF, other NGOs, and villages and other groups requesting food for development. The role of this unit would be to accept requests, evaluate them according to program guidelines, make site visits to discuss projects with village associations, monitor progress of the project on a regular basis, provide evaluation criteria, participate in ongoing evaluations of all projects and coordinate with the GOBF 5-Year Plan. This would necessitate skills in research and development which may not be currently available in Cathwel. Without some feedback on project success and failure, planning for future development projects cannot be done on a rational basis.

TITLE II AND INTEGRATED FOOD FOR DEVELOPMENT

During the review process, it was brought to the team's attention that recent changes in PL 480 Title II legislation may facilitate the kinds of program options suggested above in areas where Cathwel uses Title II foods. Quoting from a recent State Department cable (#073360, 11 Mar.'86): "...PVOs are encouraged to conceptualize their programs in other than the traditional Title II feeding categories of Maternal-Child Health, Food for Work and School Feeding, especially as they begin new programs or projects....it may be appropriate to plan on the basis of an integrated rural village development approach making use of some of the spigots mentioned above while incorporating elements of

food for work and child survival. Missions and PVOs are encouraged to propose non-traditional and creative uses of Title II resources."

Some of the "spigots" referred to above are:

- multi-year agreements (annual approval not required);
- monetization of non-emergency food (Title II and Section 416); and,
- assistance funds to support new projects using surplus dairy products.

These new directions, and the options suggested by the review team, provide Cathwel with an opportunity to bring about changes in its Burkina program. These changes might not only still some of the criticisms to which the program has been subjected concerning its use of food aid, but orient the program more firmly towards development projects which will have the potential to strike at the roots of poverty, malnutrition and disease.

5.0 CONCLUSIONS

5.1 Previous Reviews of the Cathwel Program

The 1981 Evaluation of Cathwel (16) suggested several new directions for the program. In the area of MCH, it recommended the phasing out of food distribution in centers over a 5 year period and the strengthening of the educational component through better training of animators and supervisors. Cathwel took steps to improve the health and nutrition education program by increased training of animators. However, they chose to continue to operate an MCH program with food distribution, and in fact extended the program to new areas, while stopping food to some urban centers.

In SF the evaluation recommended several ways of reducing costs in order to expand the program into food deficit areas and keep up with increasing school enrollment. Strengthening nutrition education in schools was also recommended. Cathwel has found it necessary to reduce SF coverage, primarily in urban schools, because of increasing enrollment. Improvements in the educational component have been accomplished in the Tenkodogo Project, if not elsewhere.

The first recommendation of the 1981 evaluation for FFW was to discontinue the program. Barring that, several changes in running the program, some of which Cathwel has adopted in their present program were suggested.

A 1983 consultancy (8) gave a list of recommendations for incorporating increased nutrition education activities into the Cathwel programs and for strengthening existing ones. Cathwel has continued with essentially the program they had at the time the recommendations were made.

5.2 Cathwel at the Crossroads

The present review of the Cathwel program in Burkina Faso has taken place in a different context than those briefly mentioned above. It is no longer possible to suggest ways of fixing up parts of the Cathwel program while continuing with essentially the same format. Cathwel in Burkina is at an unusual conjunction of circumstances which requires, and facilitates, broader changes in the way it attains its major goals. Three of these circumstances should be mentioned.

Host government policy: The GOBF has become increasingly critical of the use of food as aid. The government wants development projects which raise productivity, thus decreasing dependency. Food as aid appears to the GOBF to dilute any gains by increasing dependency along with productivity.

Donor policy: Recent changes in PL 480 and Title II regulations open up new ways of using food to support development activities, multiyear programs, monetization and new sources of commodities (dairy) which demonstrates a desire on the part of Washington to make some changes.

Cathwel policy: Discussions with Cathwel staff suggest upcoming changes in the way Cathwel-Africa will be functioning in developing countries. Essentially, Cathwel will be seeking local counterparts to take a greater role in the management of food aid programs. While the effects of these changes are not yet clear for Cathwel/Burkina, they will probably influence the structure of the program in important ways.

5.3 The Challenge

Cathwel in Burkina Faso must bring together the different, and sometimes contradictory, goals and objectives of these three key organizations --GOBF, the donors, and Cathwel itself-- and mold them into a coherent set of measurable objectives which respond to the health, nutrition, and development needs of the people of Burkina Faso.

To do this, it is imperative that clear communication among the principals is maintained so that everyone understands each others' positions. It also seems necessary to form a special design team composed of people from the three organizations concerned in order to work out objectives for the Cathwel program. These people should devote their full energies to such a project. This team should be financed by the three

organizations to do the job in a way which does not interfere with the present functioning of the Cathwel program and should be given sufficient time to produce concrete results.

5.4 Final Word The options presented in section 4 above may or may not prove practicable when examined in detail by a design team or put to the test by Cathwel in the field. They represent the product of the team's view of Cathwel as it now operates in Burkina Faso. Changes in direction will make new options apparent and others unworkable.

What is important for Cathwel at the present time is to decide to accept the challenge with sufficient energy and courage to make the necessary adjustments in their Burkina program.

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Table 1
Catholic Relief Services
Yearly Malnutrition Rates
By Provinces, 1984 - 1985
Burkina Faso

Percent of Children < 80% WT/Age

Province	1984 (1)	1985 (2)	Change
1 Bam	51%	50%	-1%
2 Bazega	-	47%	-
3 Boulgou	55%	57%	2%
4 Boulkiemde	39%	60%	21%
5 Comoe	34%	30%	-4%
6 Ganzourgou	37%	44%	7%
7 Gnagna	53%	57%	4%
8 Houet	35%	36%	1%
9 Radiogo	-	52%	-
10 Kossi	37%	36%	-1%
11 Kourittenga	-	33%	-
12 Mou-houn	33%	35%	2%
13 Namentenga	48%	54%	6%
14 Ouhritenga	48%	54%	6%
15 Passore	60%	50%	-10%
16 Sahel	74%	-	-
17 Sangue	-	35%	-
18 Sanmatenga	48%	49%	1%
19 Seno	-	75%	-
20 Sissili	51%	52%	1%
21 Sourou	40%	39%	-1%
22 Yatenga	42%	40%	-2%
23 Zoundweogo	53%	59%	6%
Average	46.9%	47.7%	1%*

Source: Catholic Relief Services, Food and Nutrition Program, Ouagadougou.

(1) Yearly totals for 71,945 children in 132 centers in 18 provinces.

(2) January - June 1985. Total children: 36,913 in 162 centers in 23 provinces.

* weighted average

Table 2

SF Program Evolution:
 Numbers of Recipients, Commodity Tonnage, and Ration Size*, 1977-1986

Year :	# Rec.	# Months :	Cornmeal :		Milk :		Oil :		Other :		Total	
:	:	Dist. :	MT	(Ration)	MT	(Ration)	MT	(Ration)	MT	(Ration)	MT	(Ration)
1977 :	50,000	9 :	2,294	3.50			145	0.25			2,439	3.75
1978 :	110,000	9 :	3,465	3.50	990	1.00	297	0.30			4,752	4.50
1979 :	130,000	9 :	3,510	3.00	1,170	1.00	585	0.50	1,170	1.00	6,435	5.50
1980 :	150,000	12 :	5,400	3.00	3,600	2.00	1,800	1.00	1,800	1.00	12,600	7.00
1981 :	190,000	12 :	6,840	3.00	4,560	2.00	2,280	1.00	2,280	1.00	15,960	7.00
1982 :	215,000	9 :	5,805	3.00	1,935	1.00	1,035	0.50	1,335	1.00	10,710	5.50
1983 :	230,000	9 :	6,210	3.00	2,070	1.00	1,035	0.50	2,070	1.00	11,385	5.50
1984 :	245,000	9 :	8,820	4.00	2,295	1.00	1,103	0.50			12,128	5.50
1985 :	230,000	9 :	8,280	4.00	2,070	1.00	1,035	0.50			11,385	5.50
1986 :	240,000	9 :	8,640	4.00	2,160	1.00	1,080	0.50			11,880	5.50
Total :	1,790,000	:	59,264		20,760		10,395		9,255		99,678	

Source: Extent of Cathwet SF Program

* Rations are in kilograms.

Table 3
SF Program Coverage by Province, 1986

Provinces	Inspections	# Schools Recorded by GOBF	# Schools Served by CRS/BF	% Coverage	# Religious Schools Served
1 Bam	Kongoussi	30	26	86.67%	9
2 Bazega	Kombissiri	75	63	84.00%	3
3 Bougouriba	Diebouyou	57	50	87.72%	2
4 Boulgou	Grango	43	34	79.07%	2
	Tenkodogo	56	43	76.79%	
	Total	99	77	77.78%	
5 Boulkiemde	Koudougou I	39	33	84.62%	3
	Koudougou II	59	51	86.44%	
	Total	98	84	85.71%	
6 Comoé	Banfora	62	34	54.84%	2
7 Ganzourgou	Zorgho	33	26	78.79%	
8 Gnagna	Bogande	40	30	75.00%	
9 Gourma	Fada I	19	16	84.21%	2
	Fada II	36	11	30.56%	
	Total	55	27	49.09%	
10 Houet	Bobo I	32	0	0.00%	0
	Bobo II	30	1	3.33%	
	Bobo III	57	54	94.74%	
	Bobo IV	32	29	90.63%	
	Total	151	84	55.63%	
11 Kadiogo	Ouaga I	46	5	10.87%	1
	Ouaga II	53	4	7.55%	
	Ouaga III	50	7	14.00%	
	Total	149	16	10.74%	
12 Kenedougou	Orodara	41	36	87.80%	2
13 Kossi	Nouna	43	40	93.02%	10
14 Kouriterga	Koupela	48	39	81.25%	1
15 Mouhoun	Dedougou	72	64	88.89%	3
16 Nahouri	Fo	21	20	95.24%	2
17 Namentenga	Boulssa	24	16	66.67%	1
18 Ouhritenga	Ziniare	65	59	90.77%	4
19 Oudalan	Dori	10	10	100.00%	1
20 Passore	Yako	53	48	90.57%	3
21 Poni	Gaoua	82	66	80.49%	1
22 Sanghaie	Reo	58	55	94.83%	2
23 Sanmatenga	Kaya	76	53	69.74%	6
24 Seno	Dori	18	17	94.44%	3
25 Sissili	Ieo	59	57	96.61%	
26 Soum	Djibo	20	18	90.00%	4
27 Sourou	Tougan	62	56	90.32%	6
28 Tapoa	Diapaga	24	23	95.83%	
29 Yatenga	Ouahig. I	69	57	82.61%	15
	Ouahig. II	68	60	88.24%	
	Total	137	117	85.40%	
30 Zoundwéogo	Mataga	27	27	100.00%	
Total		1789	1338	74.79%	130

Table 4
Annual Increase In Primary School Enrollment
Public and Private

Year	PubTotal	% Increase	PriTotal	% Increase	Pub+Pri Total	% Increase	% Schools in SF
1976	131,189		9,710		140,899		
1977	138,330	5.44%	10,623	9.40%	148,953	5.72%	N/A
1978	147,081	6.33%	12,594	18.55%	159,675	7.20%	N/A
1979	157,049	6.78%	13,395	6.36%	170,444	6.74%	N/A
1980	170,482	8.55%	14,015	4.63%	184,497	8.24%	97.86%
1981	184,734	8.36%	16,687	19.07%	201,421	9.17%	92.48%
1982	203,566	10.19%	20,181	20.94%	223,747	11.08%	89.03%
1983	229,661	12.82%	20,876	3.44%	250,537	11.97%	82.47%
1984	253,927	10.57%	22,805	9.24%	276,732	10.46%	78.57%
1985	287,545	13.24%	25,975	13.90%	313,520	13.29%	74.79%

Source: Enrollment data from GOBF; % schools derived from Cathwel records.

Table 5
Percentage of Primary School Aged
Population Enrolled

Province	Pop of School Age	Pop in School	% School Age Pop
1 Ban	31,561	4,924	15.60%
2 Bazega	46,463	12,165	26.18%
3 Bougouriba	39,768	9,305	23.40%
4 Boulgou	64,628	13,697	21.19%
5 Boulkiemde	73,525	19,155	26.05%
6 Comoe	39,346	10,339	26.28%
7 Ganzourgou	26,986	4,227	15.66%
8 Gnagna	27,550	3,743	13.59%
9 Gourma	43,139	5,910	13.70%
10 Houet	78,934	38,090	48.26%
11 Kadiogo	79,955	47,925	59.94%
12 Kenedougou	22,142	6,249	28.22%
13 Kossi	45,612	7,004	15.36%
14 Kourittenga	22,975	8,036	34.98%
15 Mou-houn	44,865	12,060	26.88%
16 Nahouri	16,163	4,315	26.70%
17 Namentenga	36,451	3,095	8.49%
18 Oubritenga	46,803	10,825	23.13%
19 Oudalan	16,496	1,173	7.11%
20 Passore	46,485	8,941	19.23%
21 Poni	39,653	9,275	23.39%
22 Sanguie	37,553	10,677	28.43%
23 Sanmatenga	61,442	9,641	15.69%
24 Seno	32,191	2,091	6.50%
25 Sissili	26,351	8,615	32.69%
26 Soum	29,344	2,610	8.89%
27 Sourou	52,121	12,076	23.17%
28 Tapoa	20,648	3,011	14.58%
29 Yatenga	113,784	19,850	17.45%
30 Zoundweogo	20,528	4,488	21.86%
	1,283,462	313,512	24.43%

Table 6
Cereal Production - Consumption Balance by Province 1985-1986
 All units in Metric Tons

Provinces	Consumption*	Total Production	Losses and Seedgrain	Net Production	Excess or Deficit
1 Bam	33701	40955	6243	34712	1011
2 Bazega	49808	81163	12174	68989	19181
3 Bougouriba	42800	59334	8900	50434	7634
4 Boulgou	69960	101925	15209	86716	16756
5 Boulkiemde	73598	79969	11995	67974	-5624
6 Comoe	42344	82262	12339	69923	27579
7 Ganzourgou	28816	46463	6969	39494	10678
8 Gnagna	29649	56257	8439	47818	18169
9 Gourma	46426	50853	7628	43225	-3201
10 Houet	87461	134432	20165	114267	26806
11 Kadiogo	95027	5291	794	4497	-90530
12 Kenedougou	23829	43113	6467	36646	12817
13 Kossi	49088	87350	13102	74248	25160
14 Kourittenga	24532	27882	4182	23700	-832
15 Mouhoun	48284	77910	11686	66224	17940
16 Nahouri	17360	18060	2709	15351	-2009
17 Namentenga	38922	21528	3229	18299	-20623
18 Oubritenga	49976	71212	10682	60530	10554
19 Oudalan	17683	12181	1827	10354	-7329
20 Passore	49442	47403	7110	40293	-9149
21 Poni	42591	52860	7929	44931	2340
22 Sanguie	42639	46446	6967	39479	-3160
23 Sanmatenga	65608	67433	10115	57318	-8290
24 Seno	34508	37127	5569	31558	-2950
25 Sissili	28441	39444	5817	33627	5186
26 Soum	31456	10603	1590	9013	-22443
27 Sourou	56093	58605	8791	49814	-6279
28 Tapoa	22221	33467	5003	28464	6243
29 Yatenga	121259	60480	9072	51408	-69851
30 Zoundweogo	22093	31324	4699	26625	4532
Total	1385615	1583332	237401	1345931	-39684

Source: Ministère de l'Agriculture et de l'Élevage. Rapport sur la campagne agricole 1985-1986. Dec. 1985.

*190 kg/per capita from projected population based on 1975 census

Table 7
1986 Program
Project Activities for January-June
Supported by type

Water Development	30
Conservation	3
Construction:	
Health Facilities	10
Schools	40
Cereal Bank	5
Combined Activities*	13
Total	101

*Involving a number of projects in water development, conservation, and/or construction.

Table 8
1986 Program*(January-June)
Tonnage of Commodities Provided by Province

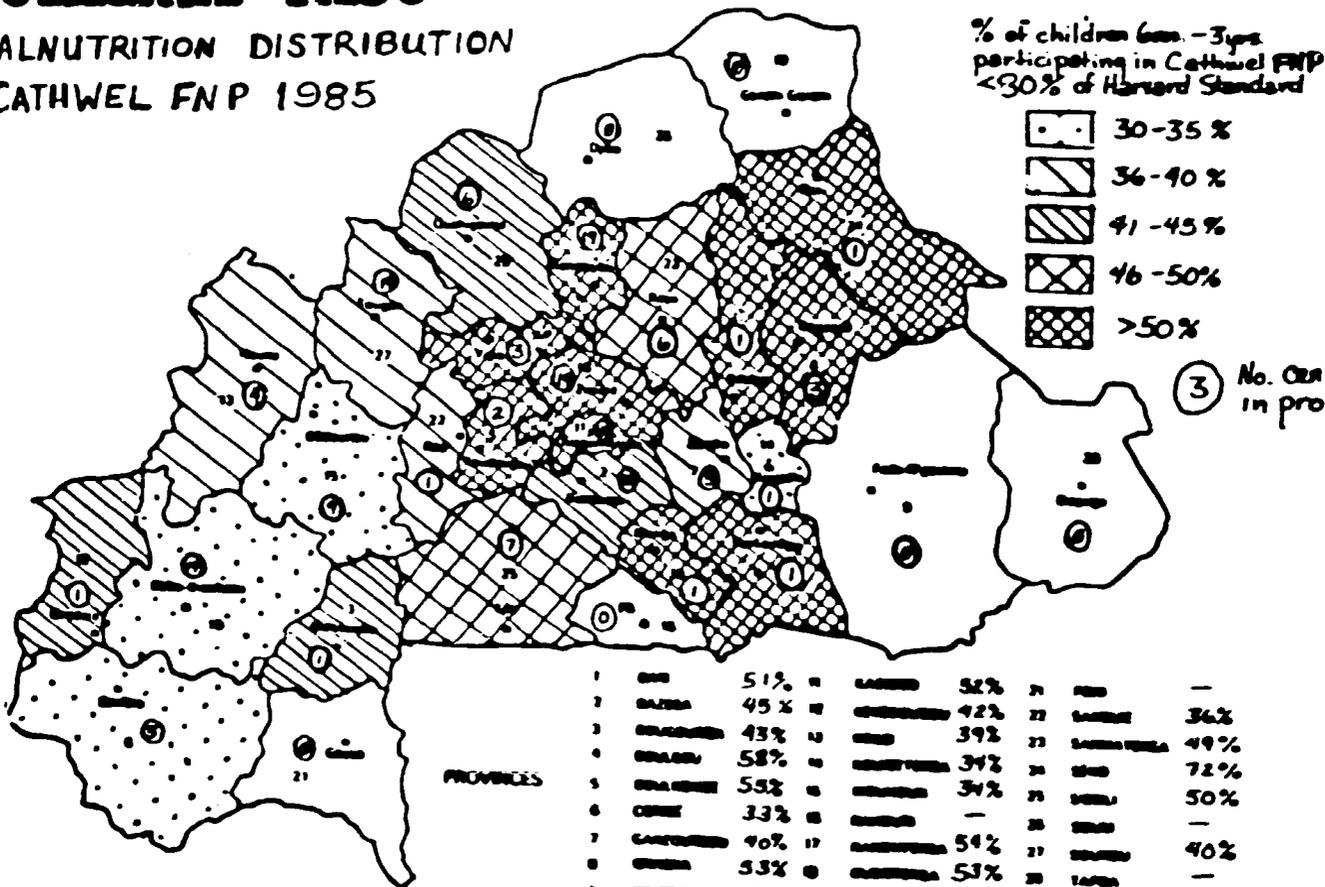
Centers/ Provinces	Cereals MT	Oil MT	Total	% of Total
Ban	48.5	5.8	54.3	15.6%
Bazega	21.3	2.6	23.9	6.8%
Boulgou	23.2	2.3	25.5	7.3%
Boulkiemde	14.7	1.8	16.5	4.7%
Ganzourgou	5.8	0.7	6.5	1.9%
Gnagna	3.8	0.4	4.2	1.2%
Gourma	3.6	0.4	4.0	1.2%
Kadiogo	3.9	0.5	4.4	1.3%
Kourittenga	12.6	1.6	14.2	4.1%
Nahouri	3.4	0.4	3.8	1.1%
Namentenga	9.1	1.1	10.2	2.9%
Oubritenga	13.2	1.6	14.8	4.2%
Passore	7.7	0.8	8.5	2.4%
Sanguie	3.8	0.5	4.3	1.2%
Sanmatenga	25.1	3.0	28.1	8.1%
Soum	3.5	0.4	3.9	1.1%
Tapoa	3.8	0.5	4.3	1.2%
Yatenga	104.4	12.9	117.2	33.6%
Zoundweogo	0.3	.0	0.3	0.1%
Totals	311.5	37.5	349.0	100.0%

*Food For Work

BURKINA FASO

MALNUTRITION DISTRIBUTION CATHWEL FNP 1985

MAP 1



PROVINCES

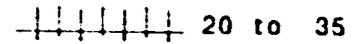
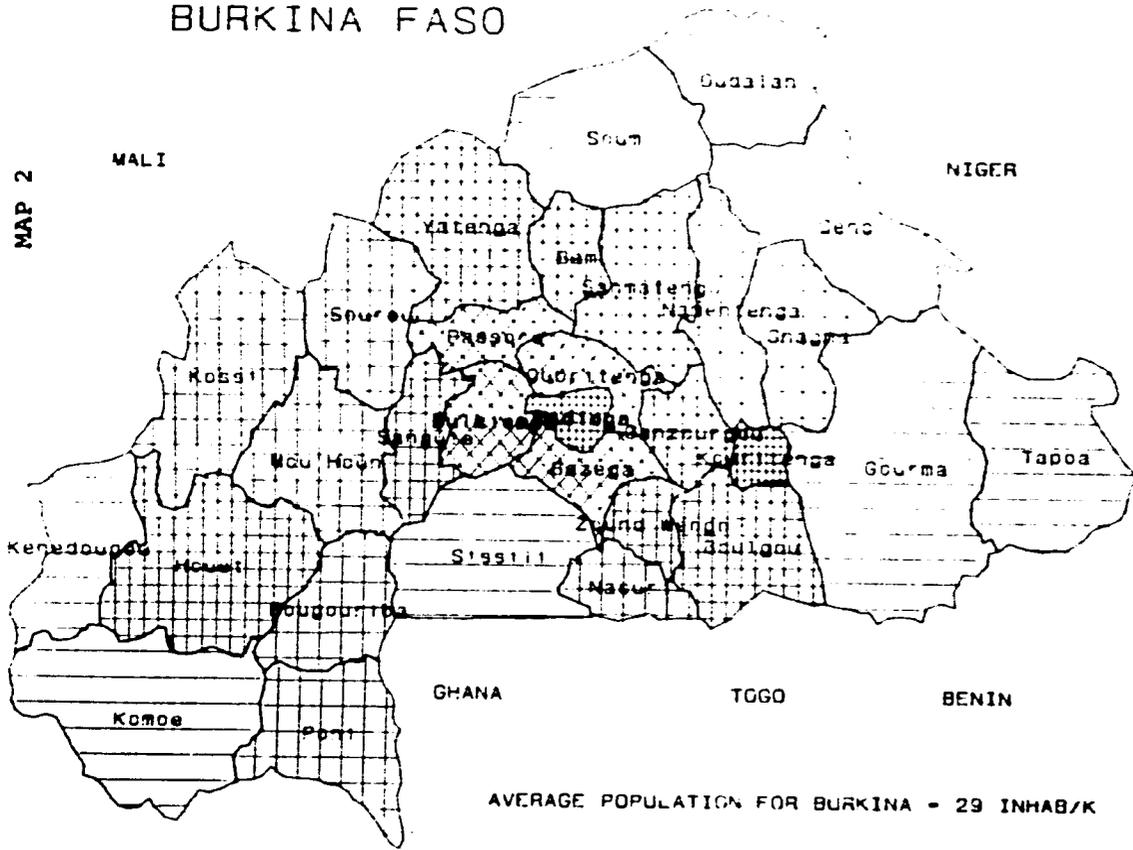
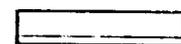
1	BAN	51%	11	KANHI	52%	21	MOU	—
2	BALTA	45%	12	KOMPILO	42%	22	SAHLE	36%
3	BALGASSA	43%	13	KOU	39%	23	SANMATA	49%
4	BANWA	58%	14	KOURTIN	34%	24	SOU	72%
5	BANWANG	55%	15	KOUSSA	34%	25	SOUBA	50%
6	BORE	33%	16	KOUSSO	—	26	SOUBO	—
7	CANDELI	40%	17	KOUSSOU	54%	27	SOUBOU	40%
8	COUPE	53%	18	KOUSSOU	53%	28	TAKA	—
9	COUPE	—	19	KOUSSOU	—	29	YAKO	44%
10	COUPE	34%	20	KOUSSOU	56%	30	YAKO	58%

Date: Cathwel Burkina Faso

Population Density for Burkina Faso by Provinces (1985)

BURKINA FASO

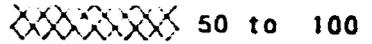
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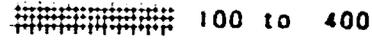
20 to 35



35 to 50



50 to 100



100 to 400

AVERAGE POPULATION FOR BURKINA = 29 INHAB/K

MAP 2

ANNEX C

BASIC POPULATION AND HEALTH INDICATORS

Area	274,122 sq km (8)
Resident population (1985 preliminary).....	7,919,895 (6)
Resident population (1975).....	5,638,203 (5) *
Percent urban (1983).....	11% (2)
Percent under 15.....	45% (1)
Percent over 64.....	3% (1)
Total fertility rate.....	6.5 live births per women (3)
Rate of natural increase.....	7.6% (1)
Population doubling time.....	27 years (1)
Crude birth rate.....	48 per 1000 pop. (1)
Crude death rate.....	22 per 1000 population (1)
Life expectancy at birth (rural area).....	33 years (4)
Life expectancy at birth (urban area).....	45 years (4)
Maternal mortality rate	
for unassisted delivery (80%).....	6 per 1000 live births (4)
Infant mortality rate.....	180 per 1000 live births (4)
Proportion of children dying before	
age 5.....	30% (5)
Population per physician (1984).....	38,382 (4)
Population per registered nurse (1984).....	10,724 (4)
Population per midwife (1984).....	28,661 (4)
Population per hospital bed (1984).....	1,104 (3)
Percent of population with access	
to safe water.....	25% (5)
Average daily per capita calorie supply.....	79% of required standard (2)
Average daily per capita protein consumption.....	5% grams (100% of standard) (10)
Average daily per capita animal protein	
consumption.....	4 grams (as of late 1970s) (5)
Average daily per capita fat consumption.....	17 grams (34% of standard) (10)
Male literacy rate (1984).....	11.4% (8)
Female literacy rate (1984).....	3.6% (8)
Percent enrollment in primary	
school (1984).....	20.4 (3)
GNP per capita (1983).....	US\$210 (9)
Government and other Donors per capita	
expenditures in health (1981).....	US\$9.00 (7)
GOB expenditures in health as percentage of	
national budget (1981).....	6.6% (7)
Exchange rate (early 1986).....	US\$1 = 300 F CFA

* There is evidence of an undercount in the 1975 census

SOURCES :

- (1) 1985 World Population Data Sheet, Population Reference Bureau, Inc. 1985
- (2) World Development Report, World Bank 1985
- (3) Annuaire Statistique du Burkina Faso - INSD, Ministry of planning, Dec. 1985
- (4) Five Year Health Plan, 1986-1990, Ministry of Health, July 1985.
- (5) Upper Volta Health and Nutrition Sector Review, World Bank, November 1982
- (6) Preliminary 1985 census figure, Ministry of Planning, 1986
- (7) Directorate of Planning and Health Statistics
- (8) National Institute for Statistics and Demography, Ministry of Planning
- (9) 1984 World Development Report and World Bank Social Indicators Data Sheets (June 1984).
- (10) Enquete anthropometrique et de consommation alimentaire dans l'ORD de l'Est Fada N'Gourma, 1981, Ministry of Rural Development

ANNEX D

A Program Framework for Successful Use of FFW as a Development Resource

In a plenary session at the close of the first full day of the workshop (12/04/85), participants focused on what characteristics were necessary for FFW to fulfill its potential as a development resource.

The following list groups the responses for which there was general consensus with respect to this question: "If FFW is to fulfill its potential as an integrated part of overall national development strategies, then it must:

RELATE TO HOST COUNTRY GOVERNMENT (HCG) PRIORITIES

- Involve HCG in planning and approval

INVOLVE LOCAL COMMUNITIES

- Utilize popular participation to identify specific activities
- Maximize the use of community resources
- Seek to harness community initiatives

BE APPROPRIATE TO LOCAL CONDITIONS

- Be sensitive to local economic conditions
- Consider and justify the appropriateness of using a food resource as well as the activity itself
- Relate to the agricultural calendar if local farmers are FFW workers
- Take adequate consideration of its impact on the poor
- Minimize negative environmental consequences.

BE WELL-PLANNED

- Be part of a project whose size and timeframe are identified in advance
- Establish clear priorities and definite plans which are subject to evaluation
- Work in targeted geographic areas with specific activities related to the development priorities of those areas.
- Provide for long term maintenance and sustainability
- Be designed and coordinated with use of other food sources

HAVE ADEQUATE RESOURCES

- Be backed by adequate management and technical capacity and complementary resources
- Encompass a timely, orderly and regular food delivery system
- To the degree that external management resources are used, include a training element (to transfer skills)

Annex E

Some Examples of Cultural Practices Influencing Child Nutrition.

The Mossi Culture

1.0 SOCIO-ECONOMIC ASPECTS

The areas inhabited by the Mossi people are subjected to very difficult ecological conditions. The lack of rainfall and over-population have contributed to degrading the environment through intense deforestation, soils which are less and less fertile, and the desertification of the region. Cultivated areas are often covered by a lateritic cap on which very little grows.

1.1 Goods and income

There are few consumer goods in the Mossi countryside. Radios, bicycles, and motorbikes are considered luxuries which only the richest can afford. Cash income is rarely provided by crop surpluses and one often notes crop deficits in such provinces as Sanmatenga where millet is usually in short supply. Cash income usually comes from animal raising (cattle, sheep, goats, poultry), from cash transfers from sons who have emigrated to the Ivory Coast and also from cash crops such as tobacco and peanuts.

Regardless of the ethnic group in Burkina, women contribute about 50% to family revenue. Men earn money with the sale of crops and generally reinvest it to increase production or use it to buy personal items or consumer goods. An amelioration of men's income does not necessarily mean an amelioration in the quality or the quantity of food available to the family.

However, women in the rural setting earn little money but usually devote a large part of their income to feeding the family. Thus, the improvement of child nutrition is more closely related to an increase in the mother's income than to the global family income.

1.2 Women's Roles and Status

Women participate in many activities. In addition to taking care of crops, they gather wood and water, prepare the family meals, and clean the houses and compounds, all of which gives them an average 15 hour work day (as opposed to 8 hours for men).

Women do not benefit from complete rural rights. They do not inherit major goods from their own or their husband's families and own few goods themselves (small animals, cooking utensils).

Men control more of their own fields than do women. Also, everyone must spend most of their time (from 9 A.M. to 4 P.M.) cultivating the common family fields. One can only cultivate one's own field early in the morning or late in the afternoon. When women work in the fields they do so after having taken care of the children and the meals.

2.0 CHILD NUTRITION

Almost all women say they begin giving complementary food to children between 6 months and 1 year. Sometimes children under 6 months want to eat, but they are given nothing but milk. Women maintain that breastfeeding should last from 2 to 3 years and that a child is weaned after the 3rd year in a progressive manner so that the child becomes accustomed to adult foods.

Children between 4 and 10 years can complement the food they receive by scavenging (reptiles, birds, grasshoppers, fruit, etc.) because it is sometimes difficult for them to satisfy their hunger eating in the common family plate.

Generally, women say the way they feed their children is influenced by the advice they receive at the Cathwel FNF centers. However, it is rare that women manage to give enriched weaning foods to their children at home, even in places where they are easy to prepare because of local products.

2.1 Some Barriers to Following Center Advice

Food taboos--e.g, giving eggs to children turns them into thieves; some mothers avoid letting their children have any food other than breastmilk before the appearance of the first teeth.

Lack of time--the traditional division of labor assigns women to domestic tasks (cleaning, cooking, wood gathering, water carrying). Besides these tasks, women constitute a labor force in family fields and in the house gardens which supply condiments. Women process foods as well, grinding grains, making condiments and oils. In the rural milieu, women's calendars are very full. They are overworked by domestic and agricultural tasks. In this context, it is difficult to expect women to be able to follow advice given at the centers.

Power of older women--In a society where each family has its own house and autonomous life space, a woman's power is challenged only by the power of her husband. However, in some ethnic groups in Burkina (Mossi, Samos, Gurunsi), the married son stays with his father, near his mother, and it is to his mother that he entrusts his wife. In addition, his sisters share the same roof before they are married, or when widowed or divorced. Faced with this situation, a woman of childbearing age, capable

of arousing masculine desires, is considered to be an outsider, a stranger who may cause trouble, who is without experience, not free in her behavior, and who can be sent back to her father's home. Thus, many women encounter the disapproval of the old women who are the guardians of tradition.

An example taken from the Mossi culture illustrates the problem this may pose for a young mother. According to Mossi tradition, it is imperative for a nursing mother to abstain from sexual intercourse with her husband for the duration of the period of breastfeeding. Sexual relations may pollute the mother's milk and cause the infant to have fatal diarrhea. Only when a child is old enough to begin solid foods is it safe for a wife to return to her husband. Thus, giving solid foods to a child is also a sign to the household that the mother is ready to return to her husband. The early introduction of special weaning foods, such as those suggested by the MCH centers, raises the suspicion among household members (the husband's family it should be recalled), that the wife is ready to sacrifice her child's health to satisfy her own sexual appetites. And this is unacceptable to the older women who are responsible for keeping an eye on the health of their sons' children.

Seasonal variations---It is during the rainy season that family food stocks are at their lowest and that certain illnesses are most frequent (malaria, diarrhea). Women have little time to prepare weaning foods and there is only one family meal a day. This is the period when the children are most malnourished. It is the period of the greatest number of miscarriages. Because mothers are very tired from agricultural labor, there is a noticeable premature reduction of breastfeeding because the breastmilk of overtired women is not considered to be nourishing.

Such beliefs and practices give some examples of the kinds of problems faced by women in the application of new child-raising practices introduced in the MCH centers.

ANNEX F

F.F.W. QUESTIONNAIRE

- 1) How does the village organize itself to carry out Food for Work Projects?
- 2) How many projects have they realized? What types of projects? What profit do they make? Who are the recipients? Who initiates these projects? How many people participate when FFW is provided? How many people participate when FFW is not provided?
- 3) When money is required, how do they get it? If the village contributes, who contributes in the village?
- 4) How are workers fed in the absence of FFW? When food is provided by the villagers, who gives instructions?
- 5) How is this food used? Is it consumed on the site by the workers? Do the workers' families come for their meals on the site with the workers? Do the workers take this food home? If yes, how is it distributed? by whom?
- 6) How is the work on the site organized? Who works? Who does not work? Who is the supervisor?
- 7) What is the impact of food on the effectiveness of the projects?

Based on the above questionnaire examples of village interviews concerning FFW projects are given below.

BOURA / GARANGO / 6/26/86 BOULGOU

- 1) A sister city agreement was set up with a French town by this village 11 years ago. In 1986 the village structures changed. Now 7 sectors are involved in the construction of the dam and the dyke. The work has been divided into 8 parts --7 for the sectors and 1 for civil servants. Each group must organize itself to fulfil its task.
- 2) The following projects were carried out without FFW:
 - construction of a maternity in Komtoega and Boussouma
 - extension of 2 isolation wards at Garango Hospital
 - repair of Garango hospital
 - repair of the health building
 - construction of dams
 - construction of a school in Sanogo
 - digging of five large wells
 - reforestation in Linga, Boussouma, Ouansigou, and Garango.

In 1984 a vaccination lot was constructed in Dango with Cathwel food aid. In 1984-85 they received food supplies from PAM and Cathwel for the construction of a dam.

The Sister City Committee holds a general meeting to initiate projects. They select priority projects. When the projects are approved, they write to the sister city which in turn allocates money for the project. The whole population in the department benefits from the projects.

3) Villagers have never been asked for any financial contribution.

4) Without food, workers make arrangements to have meals served to them on the site. The leaders did not know that Cathwel or PAM could provide food for work. This was the first time that they asked for food.

5) In 1985, villagers came with their kitchen utensils and each village was given a task. One team had to cook and women went to the store to get the food required. Each village organized its cooking on the site. After the work, each participant joined his group to have his meals. All participants were served with food and the food left was taken home for those who didn't come.

6) The work is supervised by an AVV engineer and the committee treasurer makes out a schedule for the work on the site. CDR delegates sensitize the population to the impact of the work.

7) Food supplies are incentives to work. When there is a food shortage, they don't easily turn out. When there is a food distribution there is a good turnout.

COMMENTS

Mobilization for the tasks enabled the dam work to be completed. What is left now is the collection of gravel to fill a small part upstream from the dyke. At the moment there is no water in the dam. On June 19, 1985 a rain caused the dams to overflow.

BOULYAGIN 6/26/86 DIABO GOURMA

1) There is an association which was created 3 years ago in this village. However, there was one that had been established 8 years ago. The old association has stopped functioning since the creation of the new association. 7 villages are called for any work to be done.

- 2) The villagers' association has already carried out some reforestation and has been looking after some community farms. Their friends in Ouagadougou help them by purchasing equipment, plows and oxen needed for the work. They were not supplied with food. The association has already constructed a school and a dam. The school was supplied with sorghum by some friends, while Cathwel provided food for the construction of the dam.
- 3) Each member of the association must contribute to the project. These contributions enabled them to provide food for the technicians from Ouagadougou for the supervision of the work.
- 4) They prefer "food for work", but when there is a food shortage, they depend on their families for food.
- 5) When food is delivered the CDR and the leaders invite the 7 villages to the distribution. Each village returns with its ration. According to the leaders, they avoid cooking meals on the site because they believe this disturbs the work.
- 6) The dam work has now stopped because of the rainy season. The top of the dike needs to be packed down and gravel collected. Women, men and children participate, in the work.
- 7) Because of the food supply all 7 villages participated in the work until its completion and each village complied with the work schedule.

In Gourcy in the Province of Yatenga the farmers have planted a community farm--1.5 ha--with small-size dikes. Seven village associations together with all the district women's associations are working hard on this site which they regard as a training school.

In Zogoro in the Province of Yatenga the construction of a dam has been delayed because no technical survey has yet been conducted. The 959 bags of flour and corn and oil supplied for this project, however, have been consumed though the work has not yet started.

In Kiembara, ONBAH is working hard to build a dam. A heavy rain washed away the gravel that had been piled up, but it was found about 8 kms away. Now about 50 farmers regularly help gather up the gravel.

Comments by the people we met

Gourcy:

The ORD agent drew our attention to the fact that the anti-erosive sites are very important for the increase in production. The lack of equipment and a basic food supply is delaying the work. The leaders of the Revolutionary Village Association that is made up of women's and men's associations from 7 villages made the same comment. A farmer added "even if it doesn't rain, and we are short of equipment; we are never tired of working the land".

Naogo

(Department of Namissiguima). The group leader pointed out that this village which had several associations met with 5 neighbouring villages to establish a Revolutionary Village Association. Food aid is necessary for the effective realization of community work. Many people are willing to work with the other villagers, but since the food issue at the family level remains unsolved they are unable to participate in the work. Cathwel food aid provided for the construction of small sized dykes has been stored by the leaders and will be used as a stock to enable each villager to supply food to those who work for him.

Ouahigouya

The PAF officer reported that food supplies were distributed in the villages concerned and the contribution of each village to the various expenditure was FCFA 300 for each ration of rice, FCFA 200 for each ration of flour and FCFA 300 for each box of oil. Each village formed a twelve member committee for the management of the stock. Each village has its own organization. Gourcy, for example, has a quantity of the cereals (4 bags of corn flour and a box of oil) for the community farm. They must replenish the stock after the harvest. In some villages, the stock will be distributed to those who want to receive cereals on a loan basis and the stock will be replenished after the harvest. Each village is given a register. Village group trainers and leaders are involved in the management of these stocks, with an audit to be conducted by the CDR in the villages concerned.

VILLAGE OF KOUMENTOU/BORO 6/19/86

1) A village association was established in this village a year ago. The Catholic Mission has so far supervised the operations initiated by the villagers. As regards the work carried out with a food supply, the organization is as follows: The Mission and each worker agree on a work contract. Small teams are formed. They can work for food or money. At the end of the work those who want food are given 2 bags of flour and a can of oil per

person per month. Some groups of workers prefer to be paid in cash so as to be able to purchase equipment for other activities. They work 6 days a week.

2) All projects are initiated by the villagers, but the Catholic Mission supervises them. In this way, they have already built a dispensary, a large tree nursery, a maternity, and accommodations for the school master and the nurse. These projects were realized with financial aid by Caritas Austria for FCFA 5 million. All these projects were launched without food supplies. The food by Cathwel was supplied during the work, but most of the human investment had already been made. The leader regretted the fact that the food was delivered late. Because of the short period (2 months) devoted to community activities, he wishes that food could be delivered on time. They can not stock the food for more than four months because of insects.

The village also built a large bridge with technical support from the mission, and without food. This work mobilized 600 workers --men, women and children. All local materials were collected and head-loaded by the villagers. It seems that there was a greater turn out in the morning and that the work was quickly done. At noon the workers stopped because there was nothing to eat. Had food been provided, the work could have continued until 4 p.m.

3) The villagers have a cashbox and often contribute to it. The CDR delegate is in charge of the cashbox. The contributions of the village enable them to assume transport charges for the bricks and the salaries of the bricklayers. They asked the Prefet for a vehicle and provided funds for fuel. The mission often provides material but never gives cash for the realization of projects. A maternity and village pharmacy are in the process of being built. The mission's contribution is limited to the supply of iron-sheets and cement.

4) When food is not provided, each worker manages with his family.

5) Until now food has never been cooked on the work site. Each worker is given 2 bags of flour and 1 can of oil that he takes home. The mission and the CDR supervises the management of the food stock. There is also a supplementary supply of millet.

6) Everybody works on the site--men, women and children. The mission supervises the work, 6 days a week.

Comments

It must be pointed out that this village has been hit by famine for the last two years. This year the harvest was good and some villagers have refused food. They prefer money, because they have had difficulty selling their cereals.