



**CARE International in Honduras  
United States Agency for International Development (USAID)**

***Title II Food Security Program FY 2001 to 2005***

***Final Qualitative Evaluation***



**Tegucigalpa, Honduras**

**October 2004**

Kirsten Johnson  
Aida Maradiaga  
Nelson Mejia

## **Acknowledgements**

The evaluation team would like to thank the CARE staff for their assistance and commitment to the goals of this evaluation, as well as the dozens of project participants and counterparts who dedicated their time, ideas and enthusiasm during our interviews and workshops. We would especially like to thank the CARE field staff who accompanied us for their unfailing support, good humor and above-standard driving skills.

## Acronyms and Terms

<i>Aldea</i>	Rural village
CAP	Community Action Plan
<i>Caserio</i>	Outlying settlements of an <i>aldea</i>
CHV	Community Health Volunteer
CODECO	Community Development Council
<i>Comision de Proyectos</i>	Commission that coordinates community projects
DAP	Development Assistance Proposal
EXTENSA	Food Security Extension Project
FFW	Food For Work
FSP	Food Security Program
GOH	Government of Honduras
HOGASA	Community Based Health Services Project
<i>Mancomunidades</i>	Clusters of municipalities
PAC	Community Action Plan
<i>Patronatos</i>	Community organizations
PODER	Rural Employment and Development Project
PP	Producer Promoter
<i>Regidor/a</i>	Municipal official
UCS	Community health center
UPS	Government health post

# Executive Summary

## Introduction

CARE Honduras has hired an evaluation team to conduct a final qualitative evaluation of a Title II Food Security Program (FSP) implemented from FY 2001 to 2005. CARE's purpose for this evaluation is to measure impact and change as seen from the perspective of project participants. The findings of this qualitative evaluation are meant to complement those of the quantitative evaluation based upon a survey of 1800 households in the project area.

The evaluation team, comprised by an expert in sustainable agriculture and resource use, an expert in health and an expert in local governments, designed a field evaluation methodology emphasizing semi-structured in-depth interviews with participants and counterparts. Group interviews and (in the case of PODER) workshops complemented individual interviews. The team spent a total of eight days visiting project sites in the three departments where the FSP is implemented.

## Background

The overall goal of the CARE Honduras Security Program is:

“To improve, in a sustainable manner, the food security of vulnerable populations -- at the household, regional and national levels -- in the extremely poor municipalities of western and southern Honduras.”

CARE implements its FSP in the Departments of La Paz, Lempira and Intibuca, selected because of their high levels of poverty, infant malnutrition and food insecurity.

To accomplish the overall goal, CARE carries out three separate, but complementary, component projects: community health, agricultural extension and municipal capacity building.

- (i) *Community Based Health Services Project (HOGASA)*. HOGASA's main objective is to improve access to and availability of health services by establishing community based health centers (UCS) that provide volunteer services to rural populations who are extremely vulnerable to malnutrition and infectious disease and where access to health services is extremely limited.
- (ii) *Food Security Extension Project (EXTENSA)*. EXTENSA's main objective is to increase agricultural production and diversification by: training 'model farmers' (PPs) who, in turn, pass on their knowledge to other local farmers; channeling agricultural materials and equipment to farmers by means of community-based

revolving banks; and by promoting appropriate technologies and practices such as agroforestry, soil conservation and low cost improved grain storage.

- (iii) *Rural Employment and Development (PODER)*. PODER's main objective is to strengthen the capacity of local governments and civil society organizations to improve livelihood security by organizing at municipal and community levels, food security committees; providing food for work (FFW) opportunities (improved roads, local markets, reforestation, rural housing, and cook stoves).

## **Major Findings for HOGASA.**

**Significant Changes.** The great majority of parents, community health volunteers (CHVs) and government health workers interviewed, state that there have been positive changes in the health and nutrition situation of mothers and infants.

Those interviewed identify other changes, such as greater knowledge among mothers about the care of their children, greater access to health services and better housing, that result in improved overall family health and nutrition.

Changes in childcare practices are focused primarily on personal hygiene, clean food preparation, and clean dwellings. In addition, exclusive breast feeding until six months, and appropriate weaning food preparation, such as soft foods and more frequent feedings, are seen to have contributed to healthier babies.

In the minds of those interviewed, these changes can be directly attributed to CARE's program.

**Benefits.** HOGASA beneficiaries are families with children under two, pregnant women and breastfeeding mothers. In program communities nearly 100 percent of qualifying families participate in HOGASA. Those interviewed report that children are the main beneficiaries, but also say that women benefit since mothers have acquired new knowledge about childcare.

Participants identify food assistance and a system of health attention based on CHVs as the two most important elements in the program since these have brought about improvements in their children's health and nutrition.

Parents state that they can feed their children better and improve their nutritional status with donated food. Parents also report that CHVs provide opportune attention and health advice result in their babies recovering from illnesses more rapidly and in fewer deaths.

**Sustainability.** All those interviewed consider that, given low incomes and inadequate agricultural yields that prevail in the project area, not all households will be able to achieve food self-sufficiency without the food donations provided by the program. Food assistance is considered indispensable to maintain adequate child nutrition. The overall message from parents, CHVs and government health workers is that CARE should not leave the region.

Those interviewed believe that the community health service based on CHVs is sustainable, even without a CARE presence. However, they think that health volunteers need active community and Health Ministry support in order to continue. Health volunteers are also motivated by additional training. Parents say that they plan to support their health volunteers by continuing to attend meetings and by providing moral support.

**Program Integration.** The evaluator was unable to find very much of a linkage between HOGASA and the activities of the other two projects in CARE's Food Security Program. For example, households with children under two are not involved with EXTENSA sponsored food production, nor do they receive support from organizations working with PODER.

### **Major Findings for EXTENSA.**

**Significant Changes.** By an overwhelming majority, farmers report and describe changes in their agricultural practices, farm assets, crop yields and cash income resulting from their participation in EXTENSA. It can be concluded that the technical and loan package promoted by the project is appropriate in that it responds to farmer's needs and their circumstances.

EXTENSA's strategy to address both short-term household needs, such as basic grains, and long-term investments in farm assets, such as agroforestry systems with high value perennials, has been a success. The revolving credit mechanism designed to underwrite this dual-track approach to agricultural intensification, has met with widespread farmer acceptance. Farm assets have increased significantly and risk has been reduced by means of diversification, soil conservation and micro-irrigation.

The end result, as reported by farmers, has been in significant improvements in household grain self-sufficiency, lower rates of out-migration, greater availability of vegetables and (some) fruits for household consumption, more case income, and the expectation of future income streams when fruit trees mature.

**Benefits.** Male farmers have been the principal beneficiaries of EXTENSA training, extension advice, organization and material resources. Among this group, model farmers, who represent approximately 25 percent of project participants, have benefited from the largest share of the training, over half of the material resources and a key role in group decision making.

Women represent a very small percentage of total project participants and farmer's wives do not appear to take an active role in project activities, including training. Family members do, however, benefit from increased and more diverse food availability, a key consideration in a food insecure region.

EXTENSA appears to have generated few spread or multiplier effects in the larger community, thus it cannot be said to have clearly benefited more than its own membership.

**Sustainability.** Most EXTENSA participants who were interviewed have achieved changes in their farming practices, productive assets, and organizational capabilities that promise to increase their productive capacities and standards of living over time.

The prospects for some farmers and groups are somewhat more fragile. These include: those who depend exclusively upon chemical fertilizers to increase yields; cash cropping in *aldeas* located far from markets or on FFW feeder roads; and BRHIS groups who depend on CARE to purchase and/or transport materials.

The EXTENSA extension and revolving credit model based upon model farmers and small participant groups has achieved significant change for a limited number of farmers. EXTENSA staff has been directly involved in service delivery for these groups, who, in many cases, have become dependent upon them. CARE extensionists have not conveyed the concept that EXTENSA, like any project, has a clear beginning, middle and end.

### **Major Findings for PODER.**

**Significant Changes.** PODER has helped bring about important changes in community organizations and municipal governments. In general, CODECOs and *Patronatos* organizations have improved their planning and project implementation capacities, coordinate more with one another and communicate more effectively with municipal governments. The latter now dialogue with community organizations and take Community Action Plans (CAPs) into account.

CODECO and *Patronato* are now less politically oriented and more focused on technical planning criteria. Municipal governments, having improved their management capabilities, (vision, strategies, the use of legal mechanisms to promote citizen participation, office equipment) are now in a position to carry out genuine municipal development.

**Benefits.** The main beneficiaries of these changes have been community organizations, (the general membership and the directories) municipal governments, (authorities and staff) and ordinary households (insofar as families form part of community organizations such as women's groups, parent associations, water user committees).

**Sustainability.** Food security plans do not exist, as such, at the community or municipal levels. Nevertheless, community leaders and municipal staff possess the capabilities and knowledge to develop municipal food security plans. Despite this, the program's municipal exit strategy does not include such a plan. Therefore, it is difficult to guarantee the actions promoted by CARE in this regard.

The main processes providing sustainable change include: training in organizational strengthening; technical advice and support to improve municipal management; and inter-municipal support and shared experiences within the framework of *mancomunidades*.

## **Recommendations.**

### **HOGASA**

**Recommendation 1.** CARE should continue with its current approach to community health outreach since this model has succeeded in bringing health services closer to populations that are the most distant from health centers and, moreover, beneficiaries consider these services to be important and are satisfied with the results.

Trainings given to mothers on food preparation, especially in communities where the program is close to leaving, should put more emphasis on recipes using local foodstuff and less on donated foods, since the latter will be available for only a short time.

**Recommendation 2.** HOGASA should continue to target mothers and children under two, given that these are the groups that are most vulnerable to malnutrition. CARE should reinforce its messages in reproductive health, since participants mention changes in this area less frequently.

**Recommendation 3.** CARE should strengthen efforts to promote income generation and food production, involving as many families as possible, in particular, the poorest households.

**Recommendation 4.** CARE should ensure Health Ministry and community support for the community-based health model. Continued trainings, supervision and training materials for CHVs are particularly important in this regard. It would be useful for CARE to include a module on the right to health care in HOGASA training, so that parents and volunteers are more informed as to what they can demand from government health services.

**Recommendation 5.** Activities of the three component projects should be more integrated at the community level. Families with children under two should be included in EXTENSA food production activities, thereby benefiting this vulnerable group. PODER should also work with and provide more support to health groups.

### **EXTENSA**

**Recommendation 1.** The basic EXTENSA technical and loan model should be retained in the upcoming DAP. The menu of specific agricultural practices and crop varieties should remain flexible in order to adapt to the different agroecological conditions that exist in its large and diverse project area. Project management should consider a small livestock component featuring chickens and pigs. The solar stove and pump pilot should be evaluated to determine whether costs outweigh benefits.

**Recommendation 2** EXTENSA should retain and build upon its current model. Small-scale drip irrigation systems should continue to be promoted where feasible. However, EXTENSA should continue to emphasize agroforestry and soil conservation solutions for rainfed fields since these (i) have been demonstrably successful in the current DAP and (ii) remain the principal resource base of the majority of farmers in the project area.

**Recommendation 3.** One of CARE's top priorities for the upcoming DAP should be to design clear and effective measures to increase community access to EXTENSA's benefits, either through expanded membership or explicitly designed measures to enhance spread or multiplier effects. EXTENSA should also reduce the benefit gap between model farmers and other farmers. Most importantly, EXTENSA needs to design effective pathways for significant numbers of women to become actively involved in project activities and thereby enjoy a share of its benefits.

**Recommendation 4.** During the final year of the current DAP, EXTENSA should take steps to assist dependent BRHIS groups to purchase their own inputs. CARE should also conduct a study of options for farmers who depend exclusively on chemical fertilizer and herbicides to increase yields. Integrated pest management techniques for grain and vegetable and fruit crops should be an integral part of EXTENSA's technical extension package. Marketing should be a central theme in the final year of the present DAP. These more sustainable alternatives should be incorporated in the upcoming DAP design. EXTENSA should also coordinate with PODER to ensure that municipal governments commit to the future maintenance of FFW roads.

**Recommendation 5.** EXTENSA needs to use the final year of the current DAP to focus on steps that help BRHIS groups make a successful transition to independent operations. This will require planning with groups slated for a final year. It will also require CARE staff to deploy different attitudes and skills given that CARE extensionists need to step back from tasks that participants will need to accomplish by themselves and become more facilitators than doers. CARE should also build into the following DAP a straightforward three phase project cycle design and make it the centerpiece of its on the ground operations.

## **PODER**

**Recommendation 1.** CARE should continue its support for CODECOS and Patronatos, focusing on standardizing their regulations. It is also important to advise municipal governments on mechanisms that will ensure that Community Action Plans are included within Municipal Strategic Plans.

**Recommendation 2.** Strengthen the technical capacity by developing a technical guide summarizing the methodologies and procedures that CARE has formulated over the course of the project. Continue to support municipal management, in particular, instruments for agreements, planning and municipal administration.

**Recommendation 3.** It would be worthwhile for municipalities to inform the wider population of the important actions undertaken by their community organizations and municipal governments on behalf of the general population.

**Recommendation 4.** Undertake sessions at the municipal level focusing on a transition plan to prepare for CARE's withdrawal. The plan should include an integrated food

*security program encompassing HOGASA, EXTENSA and PODER activities that can be carried out after CARE leaves.*

***Recommendation 5.*** *CARE's organizational strengthening should have a better focus. This requires differentiating among different groups and municipalities according to their strengths and weaknesses. PODER should also take the mancomunidades into account since these are important to future municipal management.*

## Table of Contents

1. Introduction		1
2. HOGASA Findings and Recommendations		3
3. EXTENSA Findings and Recommendations		16
4. PODER Findings and Recommendations		32
5. Notes on Program Integration		45
Annex A	List of Evaluation Sites	50
Annex B	HOGASA Interview List	51
Annex C	HOGASA Interview Guides	53
Annex D	EXTENSA Interview List	56
Annex E	EXTENSA Interview Guide	57
Annex F	PODER Interview List	
Annex G	PODER Workshop Summaries	
Annex H	PODER Analytic Matrices	

## **1. INTRODUCTION.**

In September 2004, CARE Honduras hired an evaluation team<sup>1</sup> to conduct a final qualitative evaluation of its Title II Food Security Program (FSP) implemented from FY 2001 to 2005. CARE's purpose for this evaluation is to measure impact and change as seen from the perspective of project participants. The findings of this qualitative evaluation are meant to complement those of the quantitative evaluation based upon a survey of 1800 households in the project area.

### **1.1 Evaluation Goals and Methodology.**

The evaluation team, comprised by an expert in sustainable agriculture and resource use, an expert in health and an expert in local governments, designed a field evaluation methodology based upon five broad questions of interest to CARE Honduras:

- What changes has the program brought about?
- What has been the magnitude of these changes?
- Who experienced or benefited from the changes?
- Will the changes last?
- What key (program promoted) processes have sustained the changes?

Taking these broad questions as a starting point, the evaluation team developed a set of intermediate level questions and themes to explore in the field, along with methods that would enable the team to elicit the views and opinions of project participants in an open and highly participatory manner.

Field investigation emphasized semi-structured in-depth interviews with participants and counterparts. Group interviews, observation of fields and homes, as well as workshops (in the case of PODER) complemented individual interviews. The team spent a total of eight days conducting interviews and workshops in project sites in the three departments where the FSP is implemented.<sup>2</sup>

### **1.2 Background.**

The overall goal of the CARE Honduras Security Program is:

---

<sup>1</sup> Kirsten Johnson has a Ph.D in small farmer resource management and has worked in rural development in Latin America, Asia and Africa for the past twenty years. Aida Maradiaga is a nutritionist who has worked for more that 10 years with the Ministry of Health. Nelson Mejia is a social anthropologist with 15 years experience working in Honduras.

<sup>2</sup> See Annex A for a list of sites.

“To improve, in a sustainable manner, the food security of vulnerable populations, at the household, regional and national levels, in the extremely poor municipalities of western and southern Honduras.”

The benchmarks measuring this goal include:

- (i) Reduce indigent households in the target population by 20 percent;
- (ii) Improve the caloric adequacy of target household food consumption by 10 percent; and
- (iii) Reduce the rate of malnutrition in children 12 to 23 months by 30 percent in the target population.

The program’s strategic objectives are to:

- (i) Increase availability of basic foods and high value crops in the most vulnerable households, communities and regions;
- (ii) Increase access to nutritious food by those households which have a high degree of food insecurity;
- (iii) Improve, in a sustainable manner, the biological utilization of food by the project’s target population; and
- (iv) Improve the institutional capacity of local governments and communities to plan and implement community development interventions and manage resources devoted to improve livelihood and food security.<sup>3</sup>

CARE implements its FSP in the Departments of La Paz, Lempira and Intibuca, selected because of their high levels of poverty, infant malnutrition and food insecurity.

To accomplish the overall goal, CARE carries out three separate, but complementary, component projects: community health, agricultural extension and municipal capacity building. Currently, CARE implements all three projects in 60 percent of program communities; the remaining 40 percent of communities have at least two projects.

- (i) *Community Based Health Services Project (HOGASA)*. HOGASA’s main objective is to improve access to and availability of health services by establishing community based health centers (UCS) that provide volunteer services to rural populations who are extremely vulnerable to malnutrition and infectious disease and where access to health services is extremely limited.
- (ii) *Food Security Extension Project (EXTENSA)*. EXTENSA’s main objective is to increase agricultural production and diversification by: training ‘model farmers’ (PPs) who, in turn, pass on their knowledge to other local farmers; channeling agricultural materials and equipment to farmers by means of community-based

---

<sup>3</sup> The quantitative evaluation measures the benchmark and other indicators related to the overall goal and strategic objectives for the population in the program area. The present qualitative evaluation is meant to provide insights from the participant’s perspective.

revolving banks; and by promoting appropriate technologies and practices such as agroforestry, soil conservation and low cost improved grain storage.

- (iii) *Rural Employment and Development (PODER)*. PODER's main objective is to strengthen the capacity of local governments and civil society organizations to improve livelihood security by organizing at municipal and community levels, food security committees; providing food for work (FFW) opportunities (improved roads, local markets, reforestation, rural housing, and cook stoves).

## **2. HOGASA FINDINGS AND RECOMMENDATIONS.**

### **2.1 Introduction.**

CARE's principal counterpart for HOGASA is the Ministry of Health whose staff provide health care services at either local health posts, *Unidad Productora de Servicios*, (UPS) or community-based centers. *Unidad Comunitaria de Salud*, (UCS). These facilities serve as food distribution centers and, in the case of the UCS, also as the community-based sites where Ministry of Health staff and CHVs provide health services and training for parents.

Three important changes were incorporated in the FY 2001-2005 design for HOGASA. The first was to change from an individual ration for malnourished children to a family food ration distributed to families with children age 6 to 23 months as well as pregnant women and mothers breastfeeding children under age 6.

The second change involved training CHVs in an expanded set of technical areas within the Integrated Management of Childhood Illness focus. HOGASA assimilated health volunteers in health nutrition previously working within EXTENSA thereby tripling the total number of CHV in the program area.

The third change was to stop directing training and material resources towards traditional midwives and to focus efforts on the CHVs, a number of whom, in any case, are traditional midwives.

Currently, HOGASA reaches 7137 beneficiary families with children under two years old, and/or pregnant or lactating mothers, located in 106 *aldeas* in 19 municipalities in the Departments of La Paz, Intibuca and La Esperanza.

***Selection of Sites and Interview Subjects.*** Site selection was done in coordination with CARE Honduras, however, the evaluator made the final choice of interview sites. HOGASA interviews were conducted in six municipalities, two in each of the program departments. One *aldea* was visited in each municipality. The choice of *aldeas* was based

on three criteria: (i) include *aldeas* with UCS and without; (ii) accessibility; (iii) *aldeas* where HOGASA has been working for five years or more.<sup>4</sup>

Information for HOGASA was elicited from three different groups: mothers and fathers, health volunteers, and staff in local government health facilities. A total of 32 mothers and 10 fathers were interviewed. All mothers, except for one pregnant woman, had children under two years old and were HOGASA participants. In the case of fathers, not all had children under two. A total of 13 CHVs, seven men and six women, were interviewed. All those interviewed are currently active in the CARE program. Two auxiliary nurses, sector medical chief and the technical assistant contact between CARE and the Health Ministry were interviewed for the counterpart perspective.

**Interview Methods.** The evaluator used two techniques to gather information: (i) small group interviews; and (ii) individual interviews.

Interviews were carried out in each of the municipalities visited with groups of mothers, fathers and health volunteers who had been convened by CARE staff. Interviews were conducted in community facilities such as UCSs, churches, schools, or, in some cases, private homes. Non-participating community members and CARE staff were excluded from the interviews in order to allow those interviewed to feel that they could express their opinions freely.

Groups were comprised of four to five people. The evaluator both facilitated the dialogue and recorded the responses. Some groups were comprised of all women and others all men, and yet others were mixed women and men. The purpose was to ascertain whether mothers would express different opinions when they were alone than when they were in the presence of men. A total of four group interviews were conducted with mothers, two with a mixed group of mothers and fathers, one with fathers and three with health volunteers.

Individual interviews were conducted with women to ascertain whether they would express different opinions alone than when they were interviewed in a group setting. At the same time the evaluator took the opportunity to observe how children were taken care of in the mother's home. A total of four individual interviews were conducted with mothers and one with a health volunteer. Interviews with government health staff were all individual, sometimes conducted in their offices and sometimes in their homes, on their days off.

An interview guide, containing key themes of interest, was developed for each of the three groups, both for group and individual interviews.<sup>5</sup> The interviews were open-ended, semi-structured conversations wherein the evaluator followed through on particular topics, depending on the flow of the dialogue.

## **2. 2 Have things changed?**

---

<sup>4</sup> See Annex B for a list of the *aldeas* where HOGASA interviews were conducted and the names of persons who participated in the interviews.

<sup>5</sup> See Annex C for HOGASA interview guides.

**Fewer undernourished children.** Reduction in the number of malnourished children is one of the achievements mentioned by most fathers and mothers. Parents think that while there still may be malnourished children, these are now fewer than before. Others mention that when children are sick they lose weight but that they recover it because parents now know how to care for them better, especially concerning their feeding, when they are ill.

*"Eight years ago, there were more malnourished children because when we took them to their doctor appointments we did not receive any education; now they explain to us about nourishment and the children are less malnourished."*

A mother, Aldea Sta Lucia, Mpio Santa Ana

Mothers say that they know when their children are not undernourished when they are weighed and they see that they are gaining weight. Two mothers were of the opinion that the fact that pregnant women are receiving food assistance helps their babies to be born well nourished and

"pretty." Yet two mothers said that the majority of children are malnourished because they get sick a lot and, because of a lack of food, there are few days in which children are healthy "*alentados*." Despite this, one of them said that before there were many more undernourished children. As far as illnesses, fathers and mothers report that these always happen but that the severity is less because children are attended to sooner.

Health volunteers and government health workers also state that there has been a reduction in overall malnutrition, especially its severe forms and that child growth rates have improved. One of the volunteers said that they had almost reached their target since the majority of children are now gaining weight. Some volunteers are of the opinion that, although there are still malnourished children, this is because there are mothers who do not take care of them and do not follow their advice.

One government health worker stated that nutritional problems continue in the area and that there is no difference between 1996 and the present and that the difference between program and non-program communities is only about three to four percent. However, this worker thinks that this might be because CARE works in the poorest communities.

**Lower infant mortality.** Government health workers and some volunteers and parents report that, in recent years, there has been a decline in infant mortality among children under five. The auxiliary nurse in Guajiquiro stated that before HOGASA an average of five children under five died. Last year only one died. Government health workers also confirm that mortality rates among mothers have gone down.

*"Before, children were killed by diarrhea, nausea (vomiting). Now the mothers have their children there; they don't die. They still do die in the womb, or during childbirth. That hasn't changed much."*

A mother in Aldea Semane, Mpio Yamaranguila

Lower infant mortality is a high priority for CHVs. One volunteer reported that the government health workers have told him/her that infant mortality has declined because of the work the volunteers are doing. And one mother stated that before more children died because they did not have CARE's help.

*"Our commitment is to not let children die. This year no child has died. Only in childbirth do some die. There used to be many deaths due to pneumonia; now it is cared for in the community, and if it is very bad we send it to the doctor."*

A health volunteer, Aldea San Jose, Mpio San Marcos de la Sierra

*"There used to be many deaths due to pneumonia; now it is cared for in the community. If it is very bad we send it to the doctor."*

A health volunteer, Aldea Quezungal, Mpio Gualcince

**Health services are closer.** Another of the changes noted by parents is that health services for children under two are much closer now, something they consider very beneficial. Parents believe that this has contributed considerably to a reduction in infant mortality.

Despite the fact that parents state that their children always get sick, they greatly appreciate the presence of a health volunteer who has medication to treat pneumonia and diarrhea and who has an elementary knowledge of these illnesses. This means that parents do not have to travel great distances to find medical attention and it also means that they get earlier assistance for their children thereby reducing the probability that the child will become very sick or die.

### **Mothers speak about the health volunteers**

*"Eight years ago it was more difficult; we used to go to the health center in Guajiquiro. It used to take us two hours' walking, and now we go to the volunteer right there in the village."*

Aldea Ingrula, Mpio Guajiquiro

*"Eight years ago we used to go to Yamaranguila, hours on foot, because there was no health center or volunteers."*

Aldea Semane, Mpio Yamaranguila

*"There are always diseases, but we are fortunate because there are volunteers in the communities; they have medicines and, if it is something serious, they refer it to the health center."*

Aldea San Jose, Mpio San Marcos de la Sierra

*"With my older children I suffered a lot; they became gravely ill from pneumonia, their little chest and ribs would jump, but now with the little ones I haven't had that problem."*

Aldea La Arada, Mpio Candelaria

All parents interviewed stated that when their children are sick they first go to the health volunteer who not only provides medicines but also advice as to how to care for children and how to feed them.

Some government health workers also report that the number of diarrhea cases has gone down since many are being treated by CHVs who give parents advice on how to prevent this problem. As for pneumonia, according to the mothers, there is still the same number of cases, but their children do not become so ill since they are seen sooner.

Government health workers say that with the help of CARE's program, mothers go to the health centers on a more regular basis for prenatal check-ups, vaccinations and growth monitoring. One of the nurses mentioned that in her health center they now see more pregnant women before their second trimester than they did previously.

*"In the card we see that the child gains weight; they demand that the weighing be monthly. It is an advance for us."*

A father, Aldea La Arada, Candelaria

Another of the services that is appreciated by parents is monthly growth monitoring of their children, an activity carried out by volunteers when mothers in the neighborhood bring their children to be weighed and to receive advice on the care and feeding of children according to their age group. Generally, the auxiliary

nurse of the health center also attends these sessions.

Many parents like to know that their children are gaining weight, which for them is a sign that they are not malnourished. In addition they appreciate the fact that when their child is not gaining weight, the volunteer provides advice on how to care for her so that she will recover.

**Parents know more about how to feed and care for their children.** CHVs' educational activities are oriented to promoting the adoption of adequate hygiene, breastfeeding, weaning practices, as well as the care of sick children and reproductive health. Those interviewed reported that one of the gains of the project is that they have acquired more information about how to feed and take care of their children from the health volunteers.

Parents consider this activity as a key contribution to their children's improved health and nutrition. Parents report that the most significant changes as far as the practices being promoted are those related to hygiene, in particular, hand washing before meals, bathing and the use of clean clothing. In addition, they report that they keep their homes cleaner and, as one father said, they teach their children to live better.

#### **Parents talk about improved hygiene**

*"Now everything is more orderly because the children don't eat on the floor any more; they are given their food with a little teaspoon."*

*A father, Aldea Santa Lucia, Mpio Santa Ana*

*"One doesn't live like in the city, well-polished, but we don't live as we used to; we have a change of lifestyle, not disordered as it used to be; the chickens used to sleep in the same place as the people, now we have a henhouse, we sweep the house twice a day."*

*A mother, Aldea Semane, Mpio Yamaranguila*

*"Previously we lived without cleanliness, by God's Hill; we were not careful, we didn't care about the flies, we still have problems but I have observed changes."*

*A father, Aldea Semane, Mpio Yamaranguila*

Parents state that there have also been changes in weaning practices, including:

- ◆ Mothers grind and mash foods, such as beans, before giving it to their small children; before, children would be given whole beans and other foodstuffs that had not been broken up into smaller pieces;
- ◆ A few mothers mention that they feed their small children at more frequent intervals;

- ◆ Weaning is delayed until children are six months old; before, weaning began at three to four months;
- ◆ Mothers vary children's diet a little more, giving them a little more fruit, vegetables yucca and donated food;
- ◆ They prepare a thick soup of beans, using ground up beans instead of just the water that beans were cooked in;
- ◆ Some mothers also mention that they now set aside time to take care of their child when s/he eats. Some fathers say that they also help feed children when they are at home;
- ◆ All mothers mention that they include donated foods, including CSB, in their children's meals.

Parents think that HOGASA's recommendations are very useful because they are easy they have seen that their children are doing better. Parents state that they will continue to do the practices

A smaller number of mothers also report that they now space their pregnancies and do not have as many children as before.

Health volunteers agree that mothers have adopted hygiene practices, feed and care for their sick children, keep their homes swept and their children clean. One of the CHVs stated that mothers no longer give children *aceite de zorrillo* for coughs nor do they use alcohol for their children's fevers.

Some fathers participate in HOGASA sponsored educational activities, especially when they accompany their wives to food distributions. However, most fathers do not attend these activities because, as they state, they are busy at work and do not have time for such things. In most communities, health education has focused mostly on mothers. Of the fathers who were interviewed, only a few had attended educational sessions. However, in some communities there has been more of an effort to find the times to involve fathers in educational activities, for example, with men who participate in the FFW roads projects, in *patronato* meetings, or when men arrive for food distribution.

Some parents state that husbands help their wives in childcare and housekeeping, especially sweeping, or taking care of children when the mother is out. Some men said that many of them feel ashamed if someone sees them doing housework. Although gender roles still prevail, (As one mother put it, "*The fathers are of the fields, the mother is the one who remains with the children.*") some mothers think that men now help around the house more than they did before.

**Better housing.** Although this activity is sponsored by PODER, it was mentioned by a small number of parents who think that it is a very important aspect of family health because it reduces the risk of illnesses transmitted by insects. Parents consider that

*"There are no more little houses of straw; there is no danger of chinche picuda (Chagas bug); the children no longer play in the dirt, and there aren't as many fleas in the house."*

A father, Aldea Semane, Yamaranguila

more solid roofing has been particularly important.

Some health volunteers think that it is necessary to include a latrine program since many homes do not have one and this means that there is a continued risk of pollution. Others suggest that the home improvement activities should be expanded to reach more families.

### **2.3 Who Benefits?**

HOGASA targets families with children under two years, pregnant women, or mothers who breastfeed. All those interviewed stated that almost 100 percent of families in this category are receiving attention and advice from CHVs, as well as donated food. A few families do not receive food assistance because they do not want it; others because they have missed an appointment at the health center. However, once they do make their appointment, then food assistance is renewed.

Those interviewed think that the project's main beneficiaries are the children. However, they also state that the whole family also benefits, especially mothers who now have better knowledge about childcare. Not one of the parents interviewed said that a CHV has denied them attention.

### **2.4 What processes have sustained changes and benefits?**

**The CHV network.** Parents consider that the work that health volunteers do in communities is very important and has made a real difference in their children's health. Parents report that the volunteers will come to their home when their children are ill, that the CHV holds monthly meetings where children under two are weighed and their growth is tracked and where the volunteer gives them advice and talks about different topics related to childcare. Parents value this information and say that they put it into practice at home because it has proven effective.

One of the advantages mentioned by parents is that the CHV is always available, whether it's day or night, a weekday or weekend, or holiday. This is not the case with the health posts.

CHVs all state that they feel great satisfaction in the work they do, despite the fact that they do not get a salary. They believe that their work is valuable and are willing to help families who need them even if it is nighttime. As one volunteer put it: *“When one sends a person with a referral, one saves their life.”*

*“Eight years ago there were no people in the community to orientate us about hygiene, which is the base for the healthy growth of the children.”*

A mother, Aldea Ingrula, Mpio Guajiquiro

*“We are lucky because we have a volunteer in the community.”*

A mother, Aldea Sta. Lucia, Mpio Santa Ana

According to the CHVs who were interviewed, the incentives they find in their work is the knowledge they gain as a result of the training they receive; the fact that they feel useful and important when they are sought out by parents with sick children; and the recognition they win in their communities. Government health workers value the contributions made

*“We like that we are sought out by other institutions to ask us for information; we feel important, we feel ‘black tie’.”*

A health volunteer, Aldea Quezungal, Mpio Gualcince

by CHVs to maternal child health care. They also give priority to the cases CHVs refer to them and provide them with information on follow-up. All these elements, make health volunteers respected leaders in their communities.

Some CHVs, especially younger ones, would like to have more training so that they can attend other community health needs, such as first aid and other types of illnesses.

One important point mentioned by CHVs is that, thanks to CARE’s program, the number of volunteers has increased from the original one per community to two to four. CHVs say that they now receive more training through the project than than CHVs who only work with the Ministry of Health.

Some Health Ministry staff stated that the CHVs in HOGASA have received much more training and supervision than those who are not. CHVs working in CARE’s program also receive other incentives such as: backpacks, caps, flashlights, and when they attend trainings CHVs are given meals. They also are provided with much more educational materials, especially in nutrition than the CHVs working only with the Ministry of Health.

CHVs state that one of the difficulties they encounter is when a volunteer withdraws from the program, thereby greatly increasing the workload of those who remain. However, they

do not find that, under normal circumstances, their work as volunteers is too time consuming.

CHVs say they do have problems when they run out of medicines. Another issue for them is that volunteers are not reimbursed for travel expenses when they attend Ministry of Health sponsored training sessions.

**Food Assistance.** All parents, CHVs, and government health workers agree that donated food is the main factor in improved child nutrition. Most state that in the absence of food rations, children would have less to eat and that malnutrition rates would go up.

Food rations are used for household consumption. Although there were some initial problems with CSB and oil, those interviewed report that after the training they have received, they now know how to prepare the food ways that most families accept. Mothers say they now prefer the oil they get from the program to the lard they used to eat.

Nonetheless, in some cases, some of those interviewed mentioned that some donated food is sold, primarily for cash to buy other foodstuffs such as bread or sugar.

Donated food contributes in an indirect way to improve and diversify households' diets since, as parents explain, they do not have to buy staple foods such as rice and beans and can use their scarce cash to buy other products such as vegetables, pasta, chicken or meat at least once a week. Some fathers also report that they can now also use the money they do not spend on food to buy fertilizer.

Government health workers use food as a way to make families attend health centers for vaccinations, growth monitoring, and prenatal care. When families do not make their appointments, then they are told that their rations may be cut. This usually ensures full attendance.

## **2.5 Will the changes last?**

It is vitally important to development agencies to have the processes that have been promoted at the community level to sustain themselves over time. Therefore, the views of those who are directly involved in these processes about their future, provide useful insights into the prospects of sustainable change.

Everybody recognizes that food assistance is a key element in CARE's maternal child health care program. Almost all those interviewed think that without donated foods, the changes promoted by HOGASA will falter and that there will be a return to the situation before the program when families, especially children, had less to eat.

Parents state that household incomes are too low to be able to buy the same amount of foodstuffs, especially rice, which to them is a highly valued and much accepted food, especially by children. Other parents state that people are too lazy or that there isn't enough rain for more than sparse and uncertain harvests.

### **Mothers speak about the end of food assistance**

*"People are accustomed to that food. If it were taken away, it will be felt in the children. It might be purchased, but it would be more costly. There would be more suffering and they would have to work more."*

Aldea Sta Lucia, Mpio Santa Ana

*"I think it is sad that they leave. Some days we would get food and other days we would not. There is no work and there is no money."*

Aldea Semane, Mpio Yamaranguila

*"We would be left like before. We wouldn't eat rice. The money isn't enough to buy it because we also have to buy manure. If we don't lay manure, there is no harvest."*

Aldea Semane, Mpio Yamaranguila

*"For everyone it is better that the institutions remain, that if only they wouldn't leave so we don't have the children like before, not keep suffering. Where are we going to go to ask, that they never leave."*

Aldea Semane, Mpio Yamaranguila

Some mothers and government health workers think that if there is no food assistance mothers will no longer attend meetings at the health posts nor will they bring their children in for growth monitoring since they will not think them worthwhile. Only one of the groups (with both mothers and fathers) interviewed think that if food assistance ends, they would find a way to make up the difference.

### **A minority opinion**

*"The children are not going to return to what was, we have to live as if HOGASA always were there, that the children do not lack food, that they keep growing."*

A father, Aldea La Arada, Candelaria

CHVs and government health workers also think that food assistance is a necessity for families because the limited resources in the communities mean that families will not be able to make up the difference once food assistance is withdrawn. One nurse reported that health workers have been

raising awareness among people that food assistance is temporary, however, families are very dependent on food donations so they will be missed.

**CHV networks.** Most of those interviewed thought that the community-based health volunteer system has a good chance of continuing after CARE withdraws. Parents state that they would like it to continue because it is very beneficial and that they would support the volunteers and seek support for them from the Ministry of Health. Other mothers state that they will help their CHVs by attending their meetings and not criticizing them. Some fathers think that the CHVs will continue working but they will receive less support and that the government should give them an economic incentive.

CHVs also think that they will continue their work in the same manner even if CARE is no longer present. However, some think that in the absence of food assistance, mothers will

no longer come to have their children weighed. Other volunteers think that the Ministry of Health supports them, values their work and provides them with the medicines they need.

The head of the Marcala health district report that the Ministry of Health is replicating the HOGASA model in four communities, three of which receive food assistance and one that does not. In this community mothers are bringing their children to checkups and to be weighed. The municipality has fixed up a center and two other mayors are requesting UCS for their communities, offering to build and maintain the necessary buildings. These examples provide some insights into the possible sustainability of project sponsored changes.

## 2.6 Conclusions and Recommendations.

**Conclusion 1.** The great majority of parents, community health volunteers (CHVs) and government health workers interviewed, state that there have been positive changes in the health and nutrition situation of mothers and infants. Moreover, they identify other changes, such as greater knowledge among mothers about the care of their children, greater

*"Eight years ago there were more malnourished children because when we took them to their doctor appointments we did not receive any education; now they explain to us about nourishment and the children are less malnourished."*

A mother, Aldea Ingrula, Mpio Guajiquiro

access to health services and improved dwellings, leading to better overall family health and nutrition. In the minds of those interviewed, these changes can be directly attributed to CARE's program.

Changes in child care practices are focused primarily on personal hygiene, clean food preparation, and clean

dwellings. In addition, exclusive breast feeding until six months, and appropriate weaning food preparation, such as soft foods and more frequent feedings, are seen to have contributed to healthier babies.

**Recommendation 1.** CARE should continue with its current approach to community health outreach since it has been able to bring health services closer to populations that are the most distant from health centers and, moreover, beneficiaries consider these services to be important and are satisfied with the results.

*Trainings given to mothers on food preparation, especially in communities where the program is close to leaving, should put more emphasis on recipes using local foodstuff and less on donates foods, since the latter will be available for only a short time.*

**Conclusion 2.** HOGASA beneficiaries are families with children under two, pregnant women and breastfeeding mothers. In the program communities nearly 100 percent of qualifying families participate in HOGASA. Those interviewed report that children are the main beneficiaries, but also say that women benefit since mothers have acquired new knowledge about childcare.

**Recommendation 2.** *HOGASA should continue to target mothers and children under two, given that these are the groups that are most vulnerable to malnutrition. CARE should reinforce its messages in reproductive health, given that changes in this area are mentioned less frequently by participants.*

**Conclusion 3.** Participants identify food assistance and a system of health attention based on health volunteers as the two most important elements in the program since these have brought about improvements in their children's health and nutrition. Opportune attention and health messages parents receive from the health volunteers contribute to more rapid recovery from illnesses and a reduction in deaths. Donated food means that parents can feed their children better and improve their nutritional status.

**Recommendation 3.** *CARE should continue its trainings and support for health volunteers in order to strengthen their technical capabilities. Training is also one of the main incentives for health volunteers to participate in the project. CARE should consider expanding the volunteers' trainings to include other topics in community health care.*

**Conclusion 4.** All those interviewed consider that, given low incomes and inadequate agricultural yields in the project area, not all households will be able to achieve food self-sufficiency without food donations provided by the program. Food assistance is considered indispensable to maintain adequate child nutrition. The overall message from parents, health volunteers and government health workers is that CARE not leave the region.

*"We see no possibility in the near future that we will not need foodstuffs. The harvest is not attained."*

A father, Aldea Semane, Mpio Yamaranguila

**Recommendation 4.** *CARE should strengthen efforts to promote income generation and food production, involving as many families as possible, in particular, the poorest households.*

**Conclusion 5.** Those interviewed believe that the community health service based on health volunteers as sustainable, even without CARE presence. However, they think that health volunteers need active community and Health Ministry support in order to continue. Parents state that they plan to support their health volunteers by continuing to attend meetings, providing moral support and not criticizing them.

**Recommendation 5.** *CARE should ensure Health Ministry and community support for the community-based health model. Continued trainings, supervision and training materials are particularly important in this regard. It would be useful for CARE to include a module on the right to health care in HOGASA training, so that parents and volunteers are more informed as to what they can demand from government health services.*

**Conclusion 6.** The evaluator was unable to find very much of a linkage between HOGASA and the activities of the other two projects in CARE's Food Security Program. For example, households with children under two are not involved to any great extent in food production, nor do they receive support from organizations working with PODER.

**Recommendation 6.** *Activities of the three component projects should be more integrated at the community level. Families with children under two should be included in EXTENSA food production activities, thereby benefiting this vulnerable group. PODER should also work with and provide more support to health groups.*

### **3. EXTENSA FINDINGS AND RECOMMENDATIONS.**

#### **3.1 Introduction.**

EXTENSA's main goal has remained consistent over the ten year period spanning its first and second FSP planning cycles: to increase food availability by promoting increased agricultural crop diversification and productivity. EXTENSA does this by (i) training 'model' farmers who establish demonstration plots and teach other farmers about crop diversification, agroforestry and soil conservation techniques; (ii) providing agricultural inputs (tools, improved variety seeds and fruit saplings, chemical fertilizers, irrigation materials and equipment) by means of a community based revolving credit system; (iii) helping participants establish drip micro-irrigation systems; (iv) promoting appropriate technologies such as grain storage silos and (on a pilot basis) solar cookers, solar-powered pumps, solar driers, and household rainwater harvesting; and (v) advising farmer groups on marketing farm surplus.

Currently, EXTENSA works in 19 municipalities, 84 *aldeas* (villages) with 3400 in the departments of La Paz, Intibuca and Lempira. The majority (92%) of project participants are male heads of household. Some farmers have participated in EXTENSA activities since the first FSP DAP began in 1996; others have joined more recently.

**Selection of Sites and Interview Subjects.** Site selection was done by the evaluators in coordination with CARE Honduras. CARE wanted interviews conducted in sites in all three departments where the FSP operates. Given that this is a large, often poorly communicated, area and the allotted field research time was limited to six days, it was imperative that the evaluation team select sites with an eye to time and logistical efficiency, as well as build in an element of randomness. Moreover, the choice of *aldeas* for EXTENSA needed to reflect a range of geographic conditions (resources, elevation, access to markets) characteristic of the diverse conditions within which EXTENSA operates. The evaluator made the final choice of six *aldeas* in six municipalities (two each for the three departments) reflecting all the above criteria and constraints.

The interview subjects of most interest to EXTENSA were: ‘model’ farmers (*Productores Promotores*), ‘student’ farmers affiliated to EXTENSA’s revolving fund banks (BRHIS), their wives, and farmers in same *aldea* who are not members of the EXTENSA group. In all, the evaluator conducted 18 individual and 6 small group interviews and visited farmer plots and BRHIS storeroom/meeting rooms in all six *aldeas*.<sup>6</sup> It should be stressed that the information derived from these interviews is illustrative and detailed, but by no means representative of the entire EXTENSA participant population.

**Interview Methods.** The SOW calls for an evaluation of change and impact as seen through the eyes of the FYP’s principal beneficiaries. Thus the purpose of the field methodology was to place an emphasis on the perceptions and stated views of EXTENSA’s participants. The objective of the interview was to establish a fluid dialogue on the basis of a semi-structured, open-ended question format and record the result in the most direct, verbatim manner possible.

Most of the interviews were in-depth, one on one exchanges lasting between 45 minutes to two hours and were complemented by visits to the farmer’s field where follow-up questions were made depending on topics observed in the setting. Group interviews were conducted with three to four participants in BRHIS storerooms and focused primarily upon their views on the effectiveness of their revolving banks.

Interviews were organized around themes judged to be measures of change significant in participants’ own terms. These include: (i) perceived changes and improvements in production, access to inputs, farm assets, income and household wellbeing; (ii) equitable return for effort and distribution of benefits and risks; (iii) sustainability of changes and benefits.

For the purpose of structuring the flow of an open-ended interview format, these themes were expressed in terms of simple ‘generative’ questions and their respective follow-on question sequences. Care was taken to avoid leading questions and to trigger an open ended dialogue, rich in detail and narrative that spoke to issues of change, equity and sustainability in terms that are real and significant to those being interviewed.<sup>7</sup>

### 3.2 Have things changed?

When asked whether they are doing things now that they did not do five to eight years ago, farmers almost uniformly state that, indeed, they are doing things differently and that

*“Before they threw the grass away and burned it. Now nobody does that because it is forbidden. Now we can have trees, mango, orange, avocado trees. We eat them and we will sell them when there are more.”  
(smiles)*

Jose Felix Echeverria Aldea Gualcea, Mpio Gualcince

<sup>6</sup> See Annex D for a list of *aldeas* and individuals who were interviewed for EXTENSA.

<sup>7</sup> See Annex E for the EXTENSA interview guide.

EXTENSA has been instrumental in changing their *agricultural practices* and *farm assets*. Farmers readily described numerous, vivid examples and gladly displayed these to the evaluator in their gardens and fields.

Perhaps the most widespread changes in agricultural practices result from EXTENSA farmers' decision avoid the traditional practice of burning weeds and crop residues in their fields before planting. Farmers who no longer burn their fields, can deploy a range of alternative management techniques that enhance soil fertility and humidity. This, in turn, leads to higher yields and more secure harvests. When farmers stop burning their fields they are also able to invest in higher value perennial tree crops, protected woodlots, windbreaks and fishponds.

*"Look, now I have stone and wooden barriers. I make curves with my A level. I have irrigation channel and live barriers of valerian grass, pineapple, and izote, which they come to buy from me from San Pedro. I make compost heaps and bocash manure. I don't cut the grass anymore and I don't burn the stubble. I have my drip irrigation for my fruit trees and for the vegetables. I planted new varieties of bananas, mangoes, and lemons. I have yucca and plant tomato, bell pepper, and onions. Now, every year my soil is improving. Not like before."*

Pedro Vazquez Aldea Semane, Mpio de Yamaranguila

EXTENSA farmers typically adopt hillslope soil conservation measures such as dead and live barriers and infiltration ditches. They practice contour planting and, in some instances, minimum tillage. They grow high value fodder grasses, pineapples and *izote* palms along contours as live barriers. They erect live fences to protect their fields from livestock and then establish plots blending a wide variety of annuals (corn, beans, yucca, *malanga*, potatoes, vegetables) with perennials and subsistence with commercial crops in agroforestry configurations suited to their particular elevation and rainfall conditions.<sup>8</sup>

Farmers report planting a large number of high value, grafted fruit saplings and perennials including: mangoes, oranges, lemons, grapefruits, tangerines, apples, peaches, bananas, coffee, cacao, avocados, coconuts, pineapples, papayas, *nances*, *jocote* and *marañon*. Farmers enhance their investment by planting saplings in small, well-spaced, individual terraces with organic fertilizer. Saplings observed by the evaluator were weeded and pruned and free of insect pests and disease.

Two things that traditional field burning accomplish is to control weeds and to provide plants with nutrients derived from ashes. Farmers who stop burning must find alternative ways to rid their fields of weeds and enhance soil fertility. EXTENSA farmers resort to different approaches, some capital intensive and others labor intensive. Some farmers prepare their own organic fertilizer. Others use chemical fertilizers. Others do both.

---

<sup>8</sup> The FSP area is quite diverse in elevation and rainfall. Higher area farmers tend to grow more vegetables than farmers in lower, hotter areas who, on the average, grow a greater variety of fruit species.

### **Two Views from Aldea San Jose, Mpio Guajiquiro**

*“Chemical fertilizers are very expensive. It is better to use organic ones produced here. It is better for the soil. It is better for the plant. It is healthier and more inexpensive. I prepare compost heaps with animal manure.”*

Antonio Sanchez Gomez

*“CARE gave us chemical fertilizer and urea as an incentive. The partners of the BRHIS revolving fund bank appreciate it more and are more motivated. We learned that corn needs more chemical fertilizer and we learned to use more. The BRHIS revolving fund bank buys large quantities and then the partners take out loans.”*

Luis Hernandez Gomez

Most EXTENSA farmers now use chemical fertilizers for their grain crops such as maize and beans. Farmers also incorporate crop residues and other organic material that would otherwise have been burned into the soil. Some farmers make organic fertilizer and apply it on their high value crops or use it in seedbeds. Shade provided by the canopies of agroforestry plots tends to cut down somewhat on weeds. However, farmers now must invest more time in hand weeding their field crops. Others report using herbicides such as gramoxone and 2,4-D.<sup>9</sup>

In addition to improved rainfed farming systems, EXTENSA farmers with access to local water sources have been able to introduce drip micro irrigation systems used primarily for high value, marketable vegetables. The evaluator observed a variety of vegetables, including cabbage, onions, lettuce, radishes, green beans, chilies, potatoes and flowers being grown with drip irrigation systems. Farmers also report growing melons, watermelons and tomatoes. Drip irrigation is also important for growing certain fruit trees. Greater water availability also allows some farmers to build small fishponds and raise tilapia.

The great majority of farmers who were interviewed associate their new farming practices and improved farm assets with larger harvests (mainly of maize and beans, but also vegetables and potatoes) and the potential to grow a greater variety of new crops for home consumption or sale. As will be described in more detail in the section below, farmers believe that *increased production* of basic grains, along with *diversification* into cash crops, is translating into significant changes in their household livelihoods.

All farmers state that these livelihood improvements were made possible new knowledge provided by CARE field staff and also by *access to inputs* (improved seed varieties, high quality saplings, chemical fertilizer, tools, irrigation equipment) made available by their local revolving credit banks, the BRHIS.

---

<sup>9</sup> Farmers also say they use parathion to control leaf-cutter ants. It should be noted that CARE does not provide or promote the use of pesticides or herbicides.

About one third of those interviewed report that they have had contact with other rural development organizations and thereby were somewhat familiar with a number of the practices promoted by EXTENSA. Nevertheless, most farmers state that EXTENSA's trainings and extension advice have been worthwhile and that CARE extensionist's recommendations have been *widely adopted* by EXTENSA participants. People find this to be the case both in terms of agricultural practices as well as those dealing with group organization and BRHIS administration.

All persons interviewed stated that rural credit of the type afforded by the BRHIS associations is simply unavailable to small farmers. Everyone interviewed had taken out at least one loan from their banks; most members had taken out and repaid three to four loans. The availability of key production inputs on fair terms has made it possible to implement EXTENSA field staff recommendations.

*"Yes, I've taken loans out from the bank: tools and vinyl pipe and improved seeds. It is good because payment is in installments. It is excellent because it is a bank in the community and we manage it ourselves. We also provide a service of purchase (not in installments) to others who aren't members."*

Jose Maria Vazquez Aldea Semane, Mpio Yamaranguila

### **3.3 How significant have these changes been?**

The majority of those interviewed state that they have experienced *very significant changes* in their farming practices, their assets and harvests and wellbeing. The pivotal change has been their decision to take the necessary steps to intensify their production systems and to risk debt in order to increase farm assets and (for some) to grow new cash crops.

Rainfed agroforestry plots established on hillslopes with soil conservation structures, and a diverse mix of annual crops and improved variety fruit trees represent *important investments* both in terms of agro-ecological knowledge and farm assets. Drip micro irrigation systems have opened a range of new possibilities for market production as well as home consumption. When they have access to markets or to local buyers, EXTENSA farmers who grow vegetables and potatoes on small, irrigated plots *have been able to boost their cash income sufficiently* in order to cover both their loans and basic household requirements.

Very significantly, a dramatic increase in chemical fertilizer use, coupled with the adoption of high yield varieties of maize and beans, has made many farmers largely *self-sufficient in maize and, to some extent, in beans*. Some farmers report that they are now able to sell maize and beans.

Many farmers now have planted between one dozen to two dozen high value fruit saplings (some have planted up to 40). Production for most of these tree crops is between two to five years away, thus, in a sense, *significant returns are yet to materialize*. Nevertheless, all saplings observed by the evaluator were located in protected agroforestry plots or located close to homesteads, a sign that *farmers value their new assets and have high expectations for good returns on their investments*. In the short term, farmers now are able to harvest products, such as grasses (for fodder) and pineapples, from live barriers established at the outset of the project.

Another significant change is related to *group experiences* with revolving bank associations. Although group cohesion and success with loan repayments vary across

### **EXTENSA farmers talk about their crop yields**

*"Now we produce more (than five years ago) through staggered crops. We have crops of potatoes, kidney beans, lettuce, and cabbage and other vegetables."*

Luis Hernandez Gomez Aldea San Jose Mpio Guajiquiro

*"In a good year, we have corn enough for expenses. It depends on the rain. But before, life was tighter."*

Evaristo Vazquez Aldea Sta Lucia Mpio Sta Ana

*"In good years we have enough, on others we don't. It was more complicated, five years ago. We used to harvest less because there was no fertilizer."*

Jose Ernesto Vazquez Aldea Sta Lucia Mpio Sta Ana

*"Before the harvest wasn't enough because we didn't have fertilizer. Now it does. Because of the loans of the BRHIS."*

Martin Sanchez Aldea Sta Lucia Mpio Sta Ana

*"We don't buy fruits, tubers for our consumption. Corn, up to a certain point. It lasts us between eight and twelve months. It depends on the winter. We sell malanga, plantain, yucca to buy corn and beans that we need. Before, we could hardly get our produce out because there were no roads. Now we can, because of PODER. Before, we sold the best and ate the worst. Now we eat the best. I no longer have to go out to do journey-work."*

Pedro Vazquez Aldea Semane Mpio Yamaranguila

*"Yes, I produce everything my family needs for the year: corn, beans, pineapple, chayote, yam, yucca, oranges, coffee, and plantain. I used to sell coffee to buy corn and beans. I don't go out to do journey-work as I used to."*

Jose Ma Vazquez Aldea Semane Mpio Yamaranguila

*"No, we don't have enough for more than five months. But before it used to be worse. I sell pineapple from my live barriers."*

Cristobal Pineda Aldea San Jose, Caserio El Horno, Mpio San Marcos Sierra

*"Having the harvest suffice for the whole year is difficult. But now I have silos and I sell them. I took a course in EXTENSA and I learned to make them. Now I've sold about 600 silos that PROSOP Project buys from me."*

Ramiro Gomez Aldea San Jose, Caserio El Horno, Mpio San Marcos Sierra

*"It doesn't suffice for the whole year. Corn and beans do, but not sorghum. Eight years ago it was worse. The corn didn't suffice and beans were scarce, and we had to buy. My wife sold chickens and pigs and I used to go do journey-work."*

Alejandro Cantarero Aldea San Francisco Mpio Candelaria

*"It's been two years now that I haven't had to buy corn. I have enough. Before, corn was very scarce. I used to do needlework to earn some money so I could buy corn and beans."*

Fermina Garcia Aldea San Francisco, Mpio Candelaria

*"Now I harvest enough. I don't buy but neither do I sell. Corn used to last only five months. I used to do journey-work near here."*

Jose Felix Echeverria Aldea Gualcea Mpio Gualcince

*"Yes, now I harvest about 50 quintals of corn for consumption. I also sell corn, sorghum, and beans. I used to only harvest for sustenance and I had to go do journey-work to earn money."*

Camilo Avilez Aldea Gualcea, Mpio Gualcince

banks, the farmers interviewed were uniformly positive about this form of credit and the possibilities afforded them to access key inputs. Many consider their BRHIS to be the crucial element in EXTENSA.

According to participants and (the few) spouses interviewed, changes in production and income have resulted in *improved family wellbeing*. Most frequently mentioned are: (i) maize self-sufficiency means that family members no longer need to seek off-farm work; (ii) surplus maize and beans are sold to cover the cost of fertilizer and also household cash needs; (iii) vegetables and fruits are consumed by children and other family members (the

evaluator observed this to be the case); (iv) vegetables, potatoes are sold and provide needed cash to cover loans and household needs.

*"Five years ago we did not produce enough. Corn only lasted us some two to three months. Crops of corn cobs and beans were bad. The children were malnourished with their bellies distended and their hair falling out. Three of my siblings died. My father used to do journey-work in coffee farms. Now the corn lasts us all year and we have surplus to sell. We have vegetables and fruits and coffee. The beans don't last us all year but we sell coffee and buy beans. We don't go out to work anymore."*

Angela Manueles Aldea Semane, Mpio Yamaranguila

### 3.4 Who benefits?

EXTENSA works in 84 aldeas (villages) with groups of 28 farmers, seven of whom are 'model farmers' (Productores Promotores) and 21 who are 'student farmers.' Model farmers receive more intensive training provided by the project and are charged with selecting and advising three student farmers. The PPs also serve on the directory of their aldea's BRHIS. All 28 farmers carry out activities promoted by EXTENSA and also constitute the total membership of the BRHIS.

*The PPs are seen to have benefited the most from the changes brought about by EXTENSA over the years. Although the PP's work is voluntary, they have received significantly more training, and have more contact with project extensionists, and enjoy greater access to materials (both donated and sold) provided by the project.<sup>10</sup> In addition, because of their positions in BRHIS management, PPs are in a position to influence key group decisions.*

The 'student farmers' consider that EXTENSA *has benefited them as well*, primarily because of the chance to learn new agricultural techniques and acquire agricultural inputs on credit. Some also state that they enjoy being members of a group organization and believe that this has helped them improve their farming and helped them get ahead.

There is, however, *a difference between the benefits for EXTENSA farmers who own land and those who must rent or sharecrop land.* The former are able to adopt a full range of agricultural practices and inputs and thereby increase the value of their farm assets. The latter do not. Aside from planting a limited number of perennials and some vegetables around their homestead landless EXTENSA farmers, at most, are able to benefit from the boost in maize and sorghum production that results from high yield variety seeds and chemical fertilizer. Access to these inputs by means of their BRHIS becomes the prime benefit for these farmers.

---

<sup>10</sup> Project records indicate, for example, that while PPs represent 25 percent of total EXTENSA participants, they account for 52 percent of total drip irrigation system beneficiaries.

EXTENSA participants are *overwhelmingly male*. Only eight percent of EXTENSA participants are women. Men who were interviewed state that when they are unable to attend BRHIS meetings their wives go, yet it is unclear to the evaluator to what extent wives share in key decisions, either in the banks or in the homesteads. Wives who were interviewed were generally positive about EXTENSA, but were unable to provide specifics and always referred the evaluator to their husbands for more information. Given EXTENSA's lack of emphasis on gender considerations, combined with women's evident subordination in rural Honduras, *wives can only be seen as dependent beneficiaries* (in the same manner as their children) of a general improvement in overall household consumption patterns.

*"In 2000 there was a women's organization that included the wives of the partners in the BRHIS revolving fund bank. Their objective was to obtain new knowledge on animal raising, new recipes, education on hygiene. But it failed. Women can participate in the BRHIS because they are members of the family, they work in the orchard, they get ashes from the wood-burning stove for the vegetable garden."*

Menesio Manueles BRHIS Coordinator, Aldea Semane, Mpio Yamaranguila

The evaluator was able to interview three women members of EXTENSA, two of whom clearly takes an active role in project-sponsored activities and have been rewarded with considerable success (see box). However, it would appear that this woman is the exception that proves the rule.

*"The reason I am a member of EXTENSA is that I always like to be organized. I join groups and if I like them then I stay. I did like it (EXTENSA). Ever since it started, I've always liked it. They teach and one practices and one sees what is good. There is a lot of practice and there are many who are harvesting. There are some women who would like it as well, but there are some who don't have the land or their husband works it."*

Fermina Garcia Aldea San Francisco, Mpio Candelaria

EXTENSA involves only 28 farmers in *aldeas* that usually have considerably larger populations, typically between 60 to 220 households. While new members are recruited when a farmer drops out of the group, *the latter has not increased in size over the years* in response to demand. EXTENSA members explain that other farmers aren't interested in what EXTENSA promotes or that they do not want to risk taking out loans or perhaps that they are not altogether trustworthy. However, when pressed, most acknowledge that they can think of farmers who are interested and potentially good candidates for BRHIS membership. When asked whether they think that the BHRIS could be expanded to include more people, most think that it would be possible except for the fact that current regulations stipulate that the banks should have 28 members.

*"Yes, there are families who want to join but the funds are not sufficient. But as the funds increase, more could be allowed to participate. The CARE extensionists say no more than 28."*

Camilo Avilez Aldea Gualcea, Mpio Gualcince

Some farmers report having sold some of their new products to their neighbors. However, it is unclear whether this is a wide-spread phenomenon. Overall, *it cannot be said that the changes promoted by EXTENSA and benefits accrued to its*

*members have had any significant spread or multiplier effects.*<sup>11</sup> EXTENSA farmers think that some of their neighbors have adopted a few of the practices promoted by the program. The most commonly mentioned is contour planting. Others include such practices as not burning fields and the use of chemical fertilizers. The evaluator was unable to determine whether these were planted as live barriers. With the exception of two farmers who reported that they have sold pineapple shoots and vetiver grass to their neighbors, no one interviewed described an example of a transaction in which an EXTENSA activity required participants to buy something from their neighbors or sell them products they required for their own economic activities.

---

<sup>11</sup> Spread effects refer to non-members replicating practices they observe and which results in a horizontal spread of a particular activity, as, for example, the adoption of a particular crop or innovation. Multiplier effects refer to up-stream or down-stream benefits generated as part of a larger value chain resulting in a more complex and interdependent pattern of economic activity.

*Farmers talk about their plans for the future*

*"In future, I will grow strawberries with drip irrigation."*

Antonio Sanchez Gomez Aldea San Jose Mpio Guajiquiro

*"One must get ahead in life. In two years I will have a peach crop. We will think of another project. CARE helps us form a trading committee for selling in the best market. There is also an irrigation group project."*

Luis Hernandez Gomez Aldea San Jose Mpio Guajiquiro

*"I will grow more grass because it sells well."*

Evaristo Vazquez Aldea Sta Lucia, Mpio Sta Ana

*"I will grow more in the ground-plot: cinnamon and cocoa in the shade."*

Marcos Granados Hernandez Aldea Sta Lucia Mpio Sta Ana

*"I will look after the variety of corn. The hybrid is good to trade with but the indigenous is the best."*

Pedro Vazquez Aldea Semane Mpio Yamaranquila

*"I'm not going to plant corn anymore, just a little. I will cultivate mangoes, oranges, and tangerines. I have 80 mango trees, 40 orange trees, and 30 tangerine trees."*

Ramiro Gomez Aldea San Jose, Caserio El Horno, Mpio San Marcos Sierra

*"I will make more organic fertilizer. I will increase the grass barriers. I will increase my parcel for corn and beans."*

Alejandro Cantarero Aldea San Francisco, Mpio Candelaria

*"I will work my parcel more. I will enlarge it and add to it a windbreak curtain."*

Felipe Leyva Aldea Gualcea, Mpio Gualcinca

*"I will plant more fruit trees: mango and orange trees. Traders already come here to buy corn and beans. In the future they may buy other products."*

Jose Felix Echeverria Aldea Gualcea, Mpio Gualcinca

### **3.5 Will the changes last?**

In the eyes of farmers interviewed for the present evaluation, many of the changes set in motion by the EXTENSA project *are here to stay*. When asked about their future plans, farmers all describe steps that they will take to consolidate their gains and enhance their productive assets. Virtually all these plans point to the next logical steps down a path of further agricultural intensification and (for many) increased engagement with market economies.

From an evaluator's perspective, there are some elements of change that would seem to be *more sustainable* than others. Among the former are:

- (i) *Highly diversified hillslope agroforestry systems.* As described above, most EXTENSA farmers interviewed have adopted key practices that enable them to intensify their production, increase harvests, and lower their risks.
- (ii) *Farm assets such as soil conservation structures and high value perennials.* EXTENSA farmers have made a commitment to agroecological sustainability by investing in structures and practices that enhance (rather than mine) their soil and biomass resources. They have invested in fruit trees and retain valuable wood species, both of which represent long-term investments.

- (iii) *Small scale drip irrigation systems with market access.* Approximately 400 EXTENSA participants now operate drip irrigation systems. Those who are located in reasonable proximity to market towns on all-weather roads have excellent chances to make a transition to small scale cash crop farming.
- (iv) *Organic fertilizer practices linked to cash crop production and seedbeds.* Enhanced soil fertility is necessary for systems that make a successful transition out of slash and burn agriculture to more intensive farming. Most farmers interviewed understand that increasing organic composition of their soils is crucial for plant growth and humidity retention and have adopted one or more organic fertilizer techniques.
- (v) *BRHIS that have been consolidated and are able to acquire their own materials and equipment* (see section 6 below).

Changes promoted by EXTENSA that *may not endure* in the longer term include:

- (i) *Increases in maize production dependent on chemical fertilizers.* In view of medium term trends in the price of oil, the price of chemical fertilizers will continue to rise. This may not be the case for maize, in particular, if trade agreements increase US grain imports. EXTENSA maize farmers will then be caught in a scissors effect of rising input costs and depressed market prices. Beyond economics, chemical fertilizer use that is not accompanied by investments in hillslope soil conservation will accelerate erosion, silting and flooding. EXTENSA tenant and sharecropper maize farmers who depend upon them will not be able to sustain their production gains over the long term. The use of hazardous herbicides such as Gramoxone and 2,4-D under poorly controlled conditions, add another element of risk to the enterprise.
- (ii) *Micro irrigation of cash crops in aldeas located far from markets or on FFW feeder roads.* EXTENSA works in many *aldeas* that are either too distant or very poorly communicated. Some *aldeas* are too isolated to make it economically feasible to engage in cash cropping on any significant scale. While FFW road construction and repair have alleviated the problem for some of these *aldeas*, allowing farmers to get their crops out or (more frequently) intermediaries in to buy them at farm gate. However, unless municipalities take over the responsibility for road maintenance, this will be a short-lived phenomenon.
- (iii) *BRHIS that have not been consolidated and are dependent upon CARE to acquire materials and inputs or whose focus is primarily upon chemical fertilizers* (See Section 6 below).
- (iv) *Benefit streams limited to a small number of total aldea households* (see Section 6 below).

- (v) *Benefit streams that emphasize women's dependant status.* Few women are active participants in EXTENSA. Many agricultural projects in Latin America and elsewhere successfully involve women in homestead gardening and horticulture, thereby helping them to improve both their economic situation and social status. EXTENSA has not learned from those rich experiences and thereby not been able to leverage meaningful change for women.

### **3.6 What processes will sustain changes and benefits?**

The EXTENSA model is based on two key interrelated elements. The first is an *agricultural extension model* based upon direct CARE staff involvement in training, follow-up and guidance focused upon 'model' farmers and their three 'students.' The second is a *revolving credit mechanism* that allows *aldea*-based groups to access agricultural inputs on credit. In the opinion of most of those interviewed, both have played a role in bringing about and sustaining the changes and benefits they now experience.

***Extension Model.*** When asked what advice they would give CARE to improve EXTENSA, farmers invariably stated that CARE should continue to provide training and materials. Many of those who give this advice have been working with CARE for six to eight years. Aside from expressing a genuine feeling of appreciation for the organization, the outside evaluator also detected an undercurrent of uncertainty, even dependency, among those who responded to the question.<sup>12</sup> Despite their tangible accomplishments, none of the farmers expressed a sense of completion or autonomy.

As a group, the 28 EXTENSA farmers now possess a wealth of know-how and experience as well as farm assets that have, by their own report, improved their current production as well as expectations of future returns. Many have gained experience marketing their products. Although most complain that prices paid for their crops have been low, none reported an outright failure.

In summary, (despite its participants' apprehensiveness) in the evaluator's view, the EXTENSA model has contributed towards significant change and sustainable benefits for the majority of the farmers involved. However, as described above, these changes have affected a somewhat narrow slice of total farmer population. The EXTENSA model is predicated on model farmers and small participant groups. Changes appear not to have diffused beyond a somewhat 'encapsulated' beneficiary group, thereby limiting project impact and, in some cases, creating resentment among other community members. Moreover, as described above, the guy-to-guy 'model' farmer approach has bypassed women and thus been unable to harness the energies, talents and imagination of the entire household.

---

<sup>12</sup> It should be noted that the question posed was not whether or not EXTENSA should continue to work with the group, but rather advice as to how to improve project performance. However, all responses gravitated to the issue of continuity.

**Revolving Credit Mechanism.** Community-based revolving credit systems promoted by agricultural development projects experience high failure rates after the sponsor leaves. The factors and circumstances resulting in revolving bank failure are endemic to the risks experienced by small-scale farmers enmeshed in market systems over which they have no control, and to the myriad economic and social pressures affecting fragile community solidarity groups.

In this regard, the BRHIS groups visited in six EXTENSA *aldeas* present a mixed picture. Two out of the six groups appear consolidated (as measured by reported high loan repayment rates,<sup>13</sup> low membership turn-over, construction of storage and meeting facilities). Moreover, these groups report that they now administer the entire cycle of input purchases and distribution. In both cases, the *aldeas* are located on reasonably good roads close to market towns. All those interviewed in these towns now produce vegetables and other products for sale in these markets.

The other four BRHIS groups exhibit varying degrees of weakness. Perhaps the most significant is a dependence upon CARE project staff to purchase inputs. In these cases CARE acts a wholesale buyer of materials and equipment that group members order. In one case, CARE purchases materials and transports them to a warehouse in the municipal center, from where they are picked up by BRHIS representatives and taken to their *aldea*. In another case, the CARE extensionist transports inputs to the *aldea* in a project vehicle. This is clearly unsustainable. Other BRHIS groups serve mainly as a conduit for chemical fertilizers. If these become too expensive, then the BRHIS may no longer serve a purpose and their membership will probably disband.

### 3.7 Conclusions and Recommendations.

**Conclusion 1** By an overwhelming majority, farmers report and describe changes in their agricultural practices, farm assets, production levels and (current or expected) cash income

*"We used to say that we are poor, and we were just sitting there saying that we are poor and that the land is poor. Now we know that the land isn't that poor but that you have to know how to work it."*

Ramiro Gomez Aldea San Jose, Caserio el Horno, Mpio San Marcos de la Sierra

that have resulted from their participation in EXTENSA. It can be concluded that the technical and loan package promoted by the project is appropriate in that it responds to farmer's needs and their circumstances.

---

<sup>13</sup> It should be noted that the evaluator did not examine BRHIS inventory or loan records since this would have sent mixed messages to project participants. She did have opportunity to view facilities in all six sites.

**Recommendation 1.** *The basic EXTENSA technical and loan model should be retained in the upcoming DAP. The menu of specific agricultural practices and crop varieties should remain flexible in order to adapt to the different agroecological conditions that exist in its large and diverse project area. Project management should consider a small livestock component featuring chickens and pigs. The solar stove and pump pilot should be evaluated to determine whether costs outweigh benefits.*

**Conclusion 2.** EXTENSA's strategy to address both short-term household needs, such as basic grains, and long-term investments in farm assets, such as agroforestry systems with high value perennials, has been a success. The revolving credit mechanism designed to underwrite this dual-track approach to agricultural intensification, has met with widespread farmer acceptance. Farm assets have increased significantly and risk has been reduced by means of diversification, soil conservation and micro-irrigation. The end result, as reported by farmers, has been in significant improvements in household grain self-sufficiency, lower rates of out-migration, greater availability of vegetables and (some) fruits for household consumption, more case income, and the expectation of future income streams when fruit trees mature.

*"The best of EXTENSA is the knowledge I acquired because I believe I am better off than I was before. They have broadened my mind so I can think about the best for the future. Today I have many dreams for furtheron and may God allow me to fulfill them."*

Ramiro Gomez Aldea San Jose, Caserio el Horno, Mpio San Marcos de la Sierra

**Recommendation 2** *As with recommendation #1, EXTENSA should retain and build upon its current model. Small-scale drip irrigation systems should continue to be promoted where feasible. However, EXTENSA should continue to emphasize agroforestry and soil conservation solutions for rainfed fields since these (i) have been demonstrably successful in the current DAP and (ii) remain the principal resource base of the majority of farmers in the project area.*

**Conclusion 3.** Male farmers have been the principal beneficiaries of EXTENSA training, extension advice, organization and material resources. Among this group, model farmers, who represent approximately 25 percent of project participants, have benefited from the largest share of the training, over half of the material resources and a key role in group decision making. Women represent a very small percentage of total project participants and farmer's wives do not appear to take an active role in project activities, including training. Households do, however, benefit from increased and more diverse food availability, a key consideration in a food insecure region. EXTENSA appears to have generated few spread or multiplier effects in the larger community, thus it cannot be said to have clearly benefited more than its own membership.

*"There is only one woman who is a member of the group. Perhaps we have failed."*

Jose Felix Echeverria  
Aldea Gualcea, Mpio Gualcince

**Recommendation 3.** *One of CARE's top priorities for the upcoming DAP should be to design clear and effective measures to increase community access to EXTENSA's benefits, either through expanded membership or explicitly designed measures to enhance spread or multiplier effects. EXTENSA should also reduce the benefit gap between model farmers and other farmers. Most importantly, EXTENSA needs to*

*design effective pathways for significant numbers of women to become actively involved in project activities and thereby enjoy a share of its benefits.*

**Conclusion 4.** Most EXTENSA participants who were interviewed have achieved changes in their farming practices, productive assets, and organizational capabilities that promise to increase their productive capacities and standards of living over time. The prospects for some farmers and groups are somewhat more fragile. These include: those who depend exclusively upon chemical fertilizers to increase yields; cash cropping in *aldeas* located far from markets or on FFW feeder roads; and BRHIS groups who depend on CARE to purchase and/or transport materials.

*"I have nice plans for the future. I want to fill the maize-field with trees and buy the neighboring land for a maize-field. With what I sell, I can send my son to La Esperanza for secondary education. I have four daughters. We all work. They should study so they don't just have to depend on their husbands."*

Angela Manueles Aldea Semane, Mpio Yamaranguila

**Recommendation 4.** *During the final year of the current DAP, EXTENSA should take steps to assist dependent BRHIS groups to purchase their own inputs. CARE should also conduct a study of options for farmers who depend exclusively on chemical fertilizer and herbicides to increase yields. Integrated pest management techniques for grain and vegetable and fruit crops should be an integral part of EXTENSA's technical extension package. Marketing needs to be a central theme in the final year of the present DAP. These more viable alternatives should be incorporated in the upcoming DAP. EXTENSA should also coordinate with PODER to ensure that municipal governments commit to the future maintenance of FFW roads.*

*"We want another five-year plan. We want more CARE extensionist visits. We always desire technical assistance from CARE and the help of the loans."*

BRHIS group members.  
Aldea San Francisco, Mpio Candelaria

**Conclusion 5.** The EXTENSA extension and revolving credit model based upon model farmers and small participant groups has achieved significant change for a limited number of farmers. EXTENSA staff has been directly involved in service delivery for these groups, who, in many cases, have become dependent upon them. CARE extensionists

have not conveyed the concept that EXTENSA, like any project, has a clear beginning, middle and end.

**Recommendation 5.** *EXTENSA needs to use the final year of the current DAP to focus on steps that help BRHIS groups make a successful transition to independent operations. This will require planning with groups slated for a final year. It will also require CARE staff to deploy different attitudes and skills given that CARE extensionists need to step back from tasks that participants will need to accomplish by themselves and become more facilitators than doers. CARE should also build into the following DAP a straightforward three phase project cycle design and make it the centerpiece of its on the ground operations.*

## 4. PODER FINDINGS AND RECOMMENDATIONS.

### 4.1 Introduction.

The aim of the methodology for the PODER project evaluation was to use techniques and events that would allow the evaluator to approach key actors in order to identify the changes resulting from the project as well as identify its limitations and weaknesses, and generate recommendations to improve future actions.

To this end, the evaluator chose two techniques: semi open ended interviews using a question guide that allowed for follow through questions derived from responses. There were three kinds of interviews depending on the person being interviewed: (i) leaders of community organizations (CODECOS, *patronatos*, water user groups, etc.);<sup>14</sup> (ii) leaders of the *Comision de Proyectos* and participants and HOGASA and EXTENSA representatives;<sup>15</sup> (iii) mayors, members of municipal councils and municipal functionaries.<sup>16</sup> Almost all interviews were tape recorded.<sup>17</sup>

The second technique used was that of evaluative workshops, carried out with community leaders and municipal officials, to identify and assess the changes brought about by PODER.<sup>18</sup>

---

<sup>14</sup> Leaders of CODECOS, of the *patronatos* of Guajiquiro, and others groups in Yamaranguila were interviewed.

<sup>15</sup> It should be noted that HOGASA and EXTENSA representatives always were present during the interviews with community leaders in Guajiquiro and Yamaranguila.

<sup>16</sup> Mayors of Guajiquiro, Yamaranguila and Gualcince were interviewed. The mayor of Santa Ana participated in the workshop carried out in her municipality and the vice mayor of Candelaria participated in the one carried in that municipality.

<sup>17</sup> The evaluator also interviewed two CARE field staff: the PODER field coordinator and one field extensionist.

<sup>18</sup> See Annexes \_\_\_ and \_\_\_ for summaries of the workshop results and analytic matrices, respectively.

### **Community leaders talk about coordination**

*"There is good communication with the groups." Candelaria*

*"They relate through leaders and equitable projects through the integration of municipal organizations." San Marcos de la Sierra*

*"The relationship between CODECOs and other groups is that we involve all the live forces in the community and other organized groups within and outside the municipality for an exchange of experiences" Santa Ana*

In addition, the evaluator visited roads projects, housing, municipal infrastructure and community organization headquarters that have received PODER project support.

## **4.2 Have things changed?**

Honduras has a long tradition of food assistance linked to works projects that improve community well being. It is undeniable that, in one way or another, these have had positive results insofar as they have helped impoverished families and communities to resolve their food availability problems. However, some critics of FFW point to the distorting effects food rations have on community initiative.

CARE's FFW strategy focuses on promoting and strengthening the underlying elements of a community development process: knowledge, organizational structures, attitudes and new practices, interactions between citizens and officials, and synergies among community organizations, health, production and roads.

The changes promoted by PODER are many and these have been generated at different levels and with diverse actors.

***Changes in community organizations.*** In five of the six municipalities, leaders have remarked on the coordination roles of *patronatos* and CODECOS, not only to organize group activities related to CARE's FSP but also to organize overall activities that are carried out in a community.

Members of community organizations believe that these have grown internally in terms of how they function and their capabilities to plan and implement projects.

### **Community leaders talk about improved organizational capacities**

*"Training on human resources and good management, recognition of the investment made by the organization, the people are organized... planning of time, administration of money and materials, availability of time." Candelaria*

*"Change in personal and community life, through gender and by means of education and training in different areas... it is projected through its direct participation in the direct construction of prioritized projects. Prioritization of community needs and preparation of community plans, as well as requisition of budgeted products, has been learned." San Marcos de la Sierra*

*"The CODECO organization functions 80 per cent better than five years ago, with the trainings and technical and financial support. We involve men, women, youths, projects committees and CODECO. To carry out the planned project we perform the execution through the municipal corporation and PODER." Santa Ana*

Community organizations tend to view their relations with their municipality in a positive light and report these as greatly improved given that they see the latter as more responsive and more open to dialogue.

### **Community leaders talk about their relations with municipal officials**

*"There is communication, the groups get together and follow through, there is good administration." Candelaria*

*"It has improved through communication in open town meetings, municipal forums, and in joint works." San Marcos de la Sierra*

*"Five years ago there wasn't a constant relationship with the municipal corporation and CODECO; now there is a better relationship between CODECOs, municipal corporation and PODER as to the projects presented to the institutions within the municipality. We relate even more with the municipal corporation based on the internal policy and guidelines obtained from CARE-PODER." Santa Ana*

*"Average... the corporation considers us very little." Gualcince*

Participants in the evaluation workshops reached a number of conclusions about the difficulties of the community organization process and identified weaknesses that need to be addressed.

CODECO, *patronato*, *comision de proyecto* and HOGASA and EXTENSA representatives identified the following difficulties:

- irregular and low participation by members
- scarce new leadership and few women in leadership roles
- low levels of schooling
- insufficient educational materials for HOGASA

Community organization representatives identified the following areas to improve:

- organizational structure
- participation and forming new leaders
- basic sanitation and selection of CHV (HOGASA)
- expanding BRHIS membership and taking women more into account in agriculture

Community leaders demonstrate insights into the dynamics of their organizations. Some of the difficulties, such as participation and responsibility issues, should have been overcome in mature organizations. Nevertheless, others, such as the search for new leadership talent and the recognition that leaders need to multiply knowledge and skills is a signal of strong organizational development. Suggestions of areas of community organization that need to be improved are all valid, in particular, those related to EXTENSA coverage and monitoring of household sanitation.

***Changes at the municipal level.*** There are also changes that have been generated at the level of municipal officials and municipal structures.<sup>19</sup> (see box below)

The evaluator considers that the answers and testimony of the mayors and *regidores* are eloquent about the changes that have taken place. Moreover, it is possible to identify improvements in municipal management and administrative capacities according to the following measures:

- (i) An increase in social and human capital in organizations and communities that has helped increase their self esteem and capacity to express their demands;
- (ii) Methodological and operational assistance to develop municipal long term strategic plans (2004-2015);<sup>20</sup>
- (iii) Provision of equipment and training to municipal staff for better data management;
- (iv) Strengthening of a capacity to dialogue, negotiate and reach agreements between municipalities and *patronatos* and CODECOS;
- (v) Increased internal capacity of municipal corporations in management due to delegation of authority and the competencies of *regidores*;<sup>21</sup>
- (vi) Strengthened capacity to coordinate and establish inter-institutional links at the inter-municipal, departmental, regional, national, and in some cases, international, levels.

---

<sup>19</sup> Underline emphasis in box by the evaluator.

<sup>20</sup> Guajiquiro, Santa Ana, San Marcos de la Sierra and Candelaria expressed wholehearted satisfaction with the participatory planning process facilitated by PODER.

<sup>21</sup> Except for Santa Ana where the mayor, due to internal disagreements, has a weak relationship with the *regidores*, and the mayor of Gualcinse who stated that he has been unable to delegate functions to the *regidores*, the rest of the municipalities visited show an optimal integration between *regidores* and mayors.

Municipal government representatives in the evaluation workshop identified the following difficulties in the municipal strengthening process:

- political party influences
- scarce economic resources
- isolation of some areas within the municipalities
- non-functioning municipal development councils (in 3 out of 6 municipalities)

Municipal government representatives identified the following areas that can be improved:

- bring technical skills up to date
- gender equity
- relations among *regidores*
- closer citizen relations
- delegating functions to community leaders in isolated areas
- follow up on staff training
- delivery of food rations in *aldeas* and *caserios*
- monitoring of work
- expand coverage in communities (EXTENSA)

It should be noted that municipal government representatives have identified complex problems such as political sectarianism, which require long term solutions and can only change insofar as Honduras' political culture changes. Likewise, the lack of economic resources is contingent on central government policies that support local development. Other issues, such as improving the municipal development councils, can be handled at the local level. It is encouraging to see that some municipal representatives mention gender equity. Likewise, concern over citizen participation, delegation of authority and monitoring of activities, shows a commitment to community empowerment.

### **Municipal officials talk about change**

*"I think that the previous corporations did not have their work areas defined. Thus, if they manager a small program empirically, it had no technique, nothing prepared with correct logical order. And we are developing through an organization, supported by CARE... It is the systemizing of data in our municipal offices pertaining to Secretaryship and Land Tax Office... We have a computer system with capable people... In the Land Tax Office, that it weren't a person purely empirical in accounting, more than anything, and that is progress for the municipality, because, leaving aside that our financial part is small, control is needed." Council Member of Guajiquiro*

*"Now the Municipal Corporation designates responsibilities. There is a council member in charge of health, in charge of education, infrastructure and so on, and then facilitates that. Truly we are working based on a municipal plan; we know where we're at and how far we're going to go." Municipal Council Member of Guajiquiro*

*"We continually visit the communities of the municipality, 42 villages. We are emphasizing that, logically our people need support, and this support in food comes to reinforce, rather, the desire to work. This results in stimulating these people to form part of the projects. However, at the Corporation we are emphasizing that our people not only grow accustomed to that but that they are scrupulous that these projects are properly of the community and and that they are the ones who must carry out those projects with no payment required. In this aspect we at the Corporation are doing all that is possible so that our people take the projects for their own." Municipal Mayor of Guajiquiro*

*"When CARE came to the municipality there were no development processes or community participation. At present the change at community level has ben observed. Support in municipal strengthening, training the employees in different areas, office equipping, how to follow through projects with different institutions, sharing experiences with institutions of other countries (Caritas Nicaragua), coordination with the institutions, long-term strategic plan, trainings, exchange of experiences with the northeastern micro-region of Morazan, El Salvador." Mayoress of Santa Ana*

*"Training was given to respond to the realities that are lived. Planning is created to solve needs that are felt. Values and self-esteem are recovered. The citizens tend to express their ideas." Vice-Mayor of Candelaria, Municipal Secretary and leader teacher*

*"Change of attitudes in the family and communities, improvement of the living conditions, analysis of experiences. Many things have been achieved that were ignored.the education and the capability to solve problems have been improved." Municipal Secretary of Gualcince*

*"We have acquired knowledge on infrastructure, EXTENSA and HOGASA, trainings received for better administration." Vice-Mayor and Council Members of San Marcos de la Sierra*

*"Support the aspect of institutional coordination. We haven't gone to exhaust resources. Efforts have not been duplicated with who is working. There is no competitiveness either." Mayor of Yamaranguila*

***Changes at the household level.*** Based on opinions expressed during interviews made with members of HOGASA and EXTENSA on the *Comision de Proyectos*, the evaluator recorded a number of changes at the household level (see box below).

The key changes at the household level relate to: (i) membership in FFW teams to carry out communal activities that result in direct benefits to families or communities; housing, roads and increased knowledge about nutrition, health and agriculture. Learning about aspects related to opening and maintaining roads; (ii) the opportunity to become involved in organizational processes afforded by PODER, EXTENSA and HOGASA.

### **Members of the FFW *Proyectos* Committee speak**

*"Participation of each one of the families. Monthly meetings are held to make clarifications to all the participants on the work methodology. The opening and maintenance of roads is development for the communities. The people who work should be 15 years of age and older, two persons per family are accepted at the work... How to maintain the streets, how to make sewage systems."* Santa Ana Projects Committee

*"We have had formation of leaders and drawing near between families and persons from other municipalities, carrying out road opening and sewage system works for the improvement of dwellings, lessons on management of resources, on infrastructure, on supplies."* Projects Committee of Candelaria and Gualcinse

*"In the neighborhood of Los Mangos there are eight dwellings that were built. It is a joy for us. I have three children and am a woman who has no husband, but I am happy with my children living in my house."*  
Leader of the Los Mangos project committee in Semane

*"Preparing community plans, carry out drainage works, learn to work organized."* San Marcos de la Sierra

*"We have been trained in integral care of children in the community and on the integrated offering of health services."* Members of HOGASA in Santa Ana

*"We have been trained in seed diversification, soil conservation, handling of stubble, horticulture, pesticides Market and production registration."* Members of an EXTENSA BRHIS

### **4.3 How significant have these changes been?**

According to PODER's operational manual, the projects overall objective is to "improve in a sustainable manner institutional capacity at departmental, municipal and community levels to plan, manage and implement development activities to improve household livelihood security, with emphasis on food security, of the most vulnerable populations."

The results of the evaluation workshops in the three municipalities show that this overall objective has been met.

- (i) As a rule, *patronatos*, as such, have not enjoyed any support or strengthening in Honduras. PODER developed a process of organizational capacity building, planning and management that has increased the functional capacities of community organizations, and, moreover, has restored a coordinating role to diverse community groups.
- (ii) With support for establishment of the CODECOS, in many communities there are now greater and better levels of coordination among all community groups, without overshadowing any existing entities, given that all are involved in projects. There remains the matter of the relationship between the CODECOS and *patronatos*, wherein there are still some tensions, especially on the part of the *patronato* leadership.
- (iii) A significant point is that both entities play roles in community management based on technical operational criteria, rather than political lines characteristic of *patronatos* in the past. The vehicle for joint activities has been the Community Action Plans (CAP).

- (iv) Municipal authorities have played an important role in articulating community groups. Honduras history of citizen participation is relatively new, beginning in the 1990's. Until recently, it was not usual for community groups to identify projects and, much less, come to agreements with municipal authorities. Now it is a common occurrence and established within CODECOS and *patronatos*, resulting in a culture of citizen participation.

Municipalities that are encompassed in PODER's project area are those classified in category C and D according to the Ministry of Interior. These municipalities are characterized by having simple administrations that requires considerable institutional strengthening. Therefore, support and strengthening of these governments represents a significant advance. The principal changes that have been achieved are:

- (i) Support for municipal governments in formulating a strategic vision of municipal development by means of 2004-2015 municipal strategic plans.
- (ii) Reactivation of mechanisms for citizen participation such as municipal development councils, (which function well in some municipalities such as Yamaranguila, Candelaria, Guajiquiro) open town meetings, and plebiscites.<sup>22</sup> These mechanisms have been widely adopted by municipal authorities and are accepted by the population.
- (iii) The use of community action plans as a means for budget implementation is becoming more frequent in municipalities. This helps municipalities to orient their interventions according to community priorities.
- (iv) Donated equipment to municipal offices has helped improve administrative processes and management. Municipal staff has improved its capacities, a development that should be monitored over time.

#### **4.4 Who benefits?**

The changes promoted by PODER have been focused primarily on the members and leaders of the CODECOS and *patronatos*, along with the mayors, *regidores* and municipal functionaries.

Moreover, communities have benefited, directly or indirectly, from the changes given that organizational strengthening and municipal management has been reoriented to benefit communities and their constituent households.

---

<sup>22</sup> According to the mayor of Yamaranguila, PODER provided important assistance to carry out a plebiscite over prohibiting alcoholic beverages. Preparations took six months at the end of which citizens voted on the issue.

### Participants talk about what has been learned

*"We have acquired knowledge on infrastructure, EXTENSA and HOGASA, trainings received for improved administration."* Municipal government in San Marcos

*"Education and the capability to solve problems have been improved."* Municipal government in Gualcinse

*"Better execution and vision."* CODECOS in Candelaria

*"How to make organization processes preparation of the PAC."* CODECOS in San Marcos de la Sierra and Yamaranguila

*"Management of resources, about infrastructure, about supplies, about coordination and planning."* Project Committees in Candelaria and Gualcinse

*"Carry out drainage works, learn to work organized."* Project Committee in San Marcos

*"The preparation of the PAC and the work plans of our communities. How to maintain the streets, how to make drainage ditch systems, how to make sewage systems, fords, and bridge boxes"* Project Committee in Santa Ana

*"We have been trained on management of internal policy, registry of funds, reforestation of microwatersheds and preparation of the microwatershed management plan."* Members of water user committee in Santa Ana

Families have also benefited, insofar as some of their members form part of community organizations (women's groups, parent associations, water user committees) that have participated in trainings and have increased their knowledge about aspects of community life: project design; planning; management and relations with municipal officials.

Families have also benefited directly from FFW activities, such as roads, either by working on them or by enjoying better communication, by housing improvements.<sup>23</sup>

#### 4.5 Will the changes last?

Whether or not the changes documented in this investigation last, depends in great measure on the learning that participants have acquired by participating in PODER or in the other two projects of CARE's FSP. PODER and the other two projects have created a knowledge base linked to functional structures of thematic groups, such as the *comision de proyectos*, the CHV network, the BRHIS members, that are articulated by the CODECOS and *patronatos* (where there are no CODECOS). It is clear that the knowledge and skills acquired are now applied in household and groups settings,. However, these depend on the *existence of projects*, such as CARE's, that have material, human and institutional resources, a shared operational base and are able to generate synergies. This implies a serious difficulty in terms of sustainability because, although there are elements to establish municipal food security programs, these are still unlinked pieces. It is uncertain whether municipal food security programs can be based on local initiative since, although there is talk of an exit strategy, CARE is the only one that promotes and knows about it.

---

<sup>23</sup> In Santa Ana, the housing program carried out in the township and in nearby neighborhoods, has mainly benefited single mothers.

This is a key point in terms of whether or not changes can be sustained through time. Workshop participants and others interviewed had decidedly mixed opinions (see box below). In their responses, many people believe they have capacities, skills and motivation needed to take on the required tasks, yet reveal that there is still an enormous need for continued external support, from CARE, not just PODER.

#### **Participants talk about whether they can carry on alone**

*"Some projects can be carried out alone, others can't."* CODECOS from Candelaria and Gualcinco

*"We cannot advance in the development of the municipality and of the community; we always need the support of institutions and of the municipality because of the scarce economic resources because the entire population is not prepared education-wise."*  
CODECOS and patronatos from San Marcos de la Sierra

*"Through training, they have told us about the sustainability of projects, but we need institucional support to cover 100% the planned long-term projects and to fulfill the goals; we as CODECO need to learn to follow through and learn how to train others."*  
CODECOS from Santa Ana

*"Yes we can but we need more support from the technicians."* EXTENSA representatives

*"We cannot yet because we are lacking knowledge and economic resources and we will need the SSP."*  
HOGASA representatives from Candelaria and Gualcinco

*"Yes, we can continue alone in some aspects; for example, in sustainability of the organization, sustainability of the funding obtained, raw materials, human resources and responsibility. We cannot continue alone if we do not receive more training."*  
HOGASA and EXTENSA representatives from Santa Ana

*"At present the capability does not exist, but we count with some trained personnel (the Corporation) and some other professionals. We do not sufficient economic resources."* Candelaria Municipality

*"Speaking of sustainability since perhaps in the organizational aspect it would not be the difficulty as much as, if we look at the rest, the support we receive, we won't have food anymore, if we value that it is millions. In this we cannot say that for us it is easier. We will have problems because we will not have all those aids."* Mayor of Guajiquiro

*"There is no capability for sustainability, follow-up, monitoring, and execution of projects."*  
Gualcinco Municipality

## **4.6 Conclusions and Recommendations.**

**Conclusion 1.** The processes advanced by PODER have brought about important changes in community organizations, municipal authorities and households. CODECOs and patronatos coordinate better with other groups. In general, organizations have improved their planning and project implementation capacities and communicate more effectively with municipal governments. The latter now dialogue with community organizations and take into account the community priorities in Community Action Plans.

**Recommendation 1.** CARE should continue its support for CODECOS and patronatos, focusing on standardizing their regulations consistent with municipal norms. It is also important to advise municipal governments on mechanisms that will ensure that Community Action Plans are included within Municipal Strategic Plans.

**Conclusion 2.** The changes achieved in the CODECOS and *patronatos* are important for community and municipal development because both structures are oriented to play a role in community management based on operational technical criteria, as distinct from the more political issue orientation characteristic of the past. In the case of municipal governments, these are characterized by rudimentary administration that required much strengthening. Thus when afforded this support, they have improved their management capabilities (vision, strategies, the use of legal mechanisms to promote citizen participation, office equipment) and are now in a position to carry out genuine municipal development.

**Recommendation 2.** *Strengthen the technical capacity of community organizations to undertake social management by developing a technical guide summarizing the methodologies and procedures that CARE has formulated over the course of the project. Continue to support municipal management, in particular, instruments for agreements, planning and municipal administration.*

**Conclusion 3.** The main beneficiaries of these changes have been community organizations, (the general membership and the directories) municipal governments, (authorities and functionaries) and households, given that household members (both men and women) form part of community organizations (such as women's groups, parent associations, water user committees) that have participated in trainings that have increased their knowledge about these aspects of community life.

**Recommendation 3.** *It would be worthwhile to inform the wider population of the important actions undertaken by their community organizations and municipal governments on behalf of families and communities.*

**Conclusion 4.** Currently, there are community leaders and municipal staff who possess the knowledge and institutional expertise to develop a municipal food security plan. Despite this, the program's municipal exit strategy does not include such a plan. Therefore, it is difficult to guarantee the actions promoted by CARE at an integrated level.

**Recommendation 4.** *Carry out sessions at the municipal level focusing on a transition plan to prepare for CARE's withdrawal. The plan should address elements of an integrated food security program encompassing HOGASA, EXTENSA and PODER. The plan should identify real local capacities, as well as areas that remain to be strengthened, as well as the minimum conditions necessary for municipalities to continue to operate alone.*

**Conclusion 5.** The main processes that help provide sustainability to the changes include: training in organizational strengthening; technical advice and support to improve municipal management; and inter-municipal support and shared experiences within the framework of *mancomunidades*.

**Recommendation 5.** CARE's organizational strengthening should have a better focus. This requires differentiating among levels of organizational needs exhibited by different groups and municipalities. These will require different types of support in order to foster the kinds and pace of change most suited to their situation. In this regard is the support that can be afforded to mancomunidades, since these are key

## **5. NOTES ON PROGRAM INTEGRATION.**

Aside from evaluating of the FSP's three principal projects, the evaluation team also addressed a number of crosscutting themes relevant to a transition period of an evolving integrated program. These themes include: (i) overlaps among projects that might generate potential program synergies; (ii) strategies that determine sustainable changes; and (iii) CARE's policy priorities to be taken into account in the upcoming DAP.

### **5.1 Project overlaps.**

**EXTENSA production and the diets of HOGASA households.** Despite the fact that some families participate in both projects, these appear to be in the minority and there is no significant overlap between the two populations. Interviews with HOGASA parents do not reveal much of an impact on their diets, since almost none had participated in EXTENSA trainings. In two of HOGASA group interviews, criticisms were made about the limited number of participants allowed in EXTENSA groups. Parents said that they would like to see EXTENSA expand to include more members.

The few HOGASA beneficiaries who had participated in EXTENSA said that increased production had enabled them to diversify their diet with foods such as pineapple, yucca, and bananas. In other cases, HOGASA parents state that they have purchased foodstuffs such as fish, bananas and tomatoes from EXTENSA farmers.

**PODER organizational and planning assistance to EXTENSA and HOGASA groups.** PODER expertise in organizational strengthening might be relevant to groups in the other two projects. This role is still in the future; currently it does not happen systematically.

**FFW roads and EXTENSA and HOGASA.** This has turned out to be an area of important synergies. The roads promoted by PODER have resulted in significant benefits for EXTENSA farmers, several of whom reported that they or members of their families had worked on the roads. However, more important than this, the majority of EXTENSA farmers stated that the FFW roads have played a key role because roads now permit them to sell their products, either by transporting their crops directly to markets or because intermediaries now are able to travel to their communities to buy them.

Those interviewed for HOGASA, report that the new roads now allow patients to be transported to health centers in a timely manner thereby reducing mortality. Roads also

allow government health staff to reach communities to provide assistance and carry out vaccination campaigns.

***FFW food rations in household economies.*** A number of those interviewed report that they receive rations both from HOGASA and for work on roads. These foodstuffs contribute significantly to the household's economy given that families do not have to spend money on basic foods and are able to allocate their scarce cash resources on other priorities (such as food products that provide a more varied diet or fertilizer).

## **5.2 Determinants of sustainable change.**

***Volunteer-based community health services.*** The community health system based on volunteers would appear to be sustainable to the extent that these continue to receive additional support in the form of training, supervision of their activities and contributions of materials. Health volunteers are extremely motivated by their work and to continue to serve their communities. Support from Ministry of Health and from municipalities is critical to sustain their efforts.

Beyond this, there are important unexploited opportunities for coordination between HOGASA and EXTENSA given that many CHVs are also members of EXTENSA. Health volunteers could play a key role in future joint HOGASA and EXTENSA programming, as for example trainers for homestead gardens, grafting, integrated pest and pesticide management, etc. for which they might receive remuneration either in cash or kind.

***Producer Promoters' multiplier capacity.*** PPs have played an important role promoting agricultural practices to EXTENSA members and also as members of the BRHIS directorates. However, their impact outside this circle appears to be quite limited. However, their *potential* (as that of their EXTENSA member 'students') to influence greater numbers of farmers is very great. One of the measures that EXTENSA can take is to 'graduate' EXTENSA's student farmers (especially women) who demonstrate that they can master the main agricultural practices promoted by the project so that they can, in turn, become teachers and thereby expand services to more community members.

***An integrated organizational strategy.*** Currently, CARE acts as an articulator among projects, activities and organizations at the municipal level. If CARE withdraws it will leave a vacuum. The program lacks an integrative strategy that will enhance and sustain food security activities among the three projects after the organization leaves. CARE should make this a priority during the final year of the current DAP and focus upon helping municipalities involve CODECOS and *patronatos* in the design of municipal food security programs.

## **5.3 CARE's policy priorities.**

***Gender.*** In HOGASA health volunteers are approximately 60 percent male and 40 percent female. This distribution reflects an excellent gender balance as well as a commitment by

men to improve health in their communities. Furthermore, some fathers have attended HOGASA educational activities and take a role in childcare in their homes.

Women's participation in EXTENSA is quite limited, especially at the PP level. Nevertheless, there are a small number of women who participate actively in the project and who have benefited significantly from the changes promoted by the project. In the case of one *aldea*, at least, a BRHIS is expanding its membership to include wives.

There is a strong potential to integrate HOGASA and EXTENSA activities focused on homestead gardens, including vegetable gardens, improved fruit trees and small livestock. This would generate opportunities to increase and diversify household diets for HOGASA and more active involvement of women in EXTENSA.

PODER has stimulated participation by women in CODECOS, *patronatos* and other community-based organizations. However, women usually do not occupy leadership positions, such as presidents of directorates. One exception is in Sta Ana where three women are presidents of CODECOS; yet this is probably the result of the fact that Sta Ana's mayor is a woman.

It should be noted that out of PODER's 27 extensionists there is only one woman. If CARE wants to promote more participation and gender equity in the organizations it supports, then it would be important to promote the same among its own team, and thereby project a more consistent image.

***Empowerment and rights-based programming.*** During interviews, some HOGASA parents mentioned the issue of their rights to health care in relation to government health services. This is a theme that has considerable potential to become part of trainings given to parents and health volunteers during the final year of the current DAP. If this theme is successful during this period, then it can be introduced as a regular part of the HOGASA training curriculum for the upcoming DAP.

In EXTENSA, the central rights based issue is access to the services provided by the project itself. It is important, therefore, to emphasize the rights of women to participate actively in project-sponsored trainings, to be members of BRHIS directives, and to close the gap between benefits received by the PPs and other EXTENSA members. It is also important for the project to identify sustainable strategies to favor farmers who have little or no land. Moreover, it is important (at the same time maintaining standards of technical excellence) to find ways to expand EXTENSA group membership and/or find multiplier and replication strategies that will benefit households who cannot become group members.

In general, community groups have increased their capacity to formulate and present their demands to municipal governments. They are also more able to oversee the activities of municipal authorities.

***CARE's facilitator rol.*** Currently, there is a tendency in all three projects for CARE to take center stage and own the process. In the case of HOGASA, CARE's active role in education and trainings could be reduced by giving health volunteers more training and

responsibility and by expanding their coordinating role with EXTENSA. Options for pay for services should be explored in order to remunerate this increased responsibility. The EXTENSA project should also explore ways of delegating more extensionist responsibilities to PPs and veteran farmers, and devise pay for services options through the BRHIS.

In both cases (CHVs and PPs) it would be advisable to test pay for services options on a pilot basis in mature sites during the final year of the current DAP.

In the case of PODER, the existing levels of organization and leadership within communities would permit CARE to transition to a facilitator role in the last year of the current DAP in most mature project sites. Existing levels of planning and project management knowledge allow for a systematic transfer of responsibilities to community leaders. They could be responsible for organizing training activities (finding venues, hiring instructors, organizing logistics, identifying participants) and supervising follow-up activities.

## ANNEX A: LIST OF EVALUATION SITES.

### HOGASA

Aldea Ingrula, Municipio Guajiquiro, La Paz  
Aldea Santa Lucia, Municipio Santa Ana, La Paz  
Aldea Semane, Municipio Yamaranguila, Intibuca  
Aldea San Jose, Municipio San Marcos de la Sierra, Intibuca  
Aldea La Arada, Municipio Candelaria, Lempira  
Aldea Quezungal, Municipio Gualcince, Lempira

### EXTENSA

Aldea San Jose, Municipio Guajiquiro, La Paz  
Aldea Santa Lucia, Municipio Santa Ana, La Paz  
Aldea Semane, Municipio Yamaranguila, Intibuca  
Aldea San Jose, Municipio San Marcos de la Sierra, Intibuca  
Aldea San Francisco, Municipio Candelaria, Lempira  
Aldea Gualcea, Municipio Gualcince, Lempira

### PODER

## ANNEX B: HOGASA INTERVIEW LIST.

### INGRULA, GUAJIQUIRO, LA PAZ

MOTHERS	FATHERS	VOLUNTEERS
1. María Esmelda Hernandez 2. Rosario Marroquín 3. Rosa Idalia Marroquín 4. Lucila Corea 5. Doris Orbelina Hernandez		1. Juan Alonso Corea 2. Dora Esmeralda Vásquez 3. Maura Antonia Gomez 4. Santos Pedro Martinez 5. Elsa Perez

In Guajiquiro, Georgina Lopez, nursing auxiliary at the CESAMO in that community, was interviewed also.

### SANTA LUCIA, SANTA ANA, LA PAZ

MOTHERS	FATHERS	VOLUNTEERS
1. María Petrona Granados 2. Ana Emérita Vásquez 3. Macaria Ventura 4. María Velásquez 5. Santos Margarita Vásquez	1. Efraín Vásquez 2. Cristóbal Lopez 3. Franciso Sanchez	

### SEMANE, YAMARANGUILA, INTIBUCÁ

MOTHERS	FATHERS	VOLUNTEERS
1. Emelda Ramos 2. María Ambrosia Manueles 3. Evangelista Gomez 4. Priscilia Vásquez 5. Rumalda Vásquez	1. Emiliano Manueles 2. Mario Manueles 3. Eusebio Rodríguez 4. Dionisio Lorenzo 5. José Cruz	

In Yamaranguila, Daysi Margarita Pineda, nursing auxiliary at the Yamaranguila CESAMO, was interviewed also.

## SAN JOSÉ, SAN MARCOS, INTIBUCÁ

MOTHERS	FATHERS	VOLUNTEERS
<ol style="list-style-type: none"> <li>1. Marina Sanchez</li> <li>2. Sandra Hernandez</li> <li>3. Digna Bautista</li> <li>4. Margarita Molina</li> <li>5. Silveria Díaz</li> <li>6. Pentecostés Lopez</li> <li>7. Maria Santos Díaz</li> </ol>		<ol style="list-style-type: none"> <li>1. Esteban Cabrera</li> <li>2. Manuel Lopez</li> <li>3. Francisca Hernandez</li> <li>4. Cipriana Pineda</li> </ol>

## LA ARADA, CANDELARIA, LEMPIRA

MOTHERS	FATHERS	VOLUNTEERS
<ol style="list-style-type: none"> <li>1. María Arminda Díaz</li> <li>2. Valeria Amador</li> <li>3. Mercedes Lopez</li> <li>4. Teresa Flores</li> </ol>	<ol style="list-style-type: none"> <li>1. Fermín Gomez</li> <li>2. Martín Martinez</li> </ol>	

Dr. Lizeth Maribel Alfaro, sector chief for the Ministry of Health at Candelaria, was also interviewed.

## QUEZUNGUAL, GUALCINCE

MOTHERS	FATHERS	VOLUNTEERS
<ol style="list-style-type: none"> <li>1. Saturnina Melchor</li> <li>2. Selvia Martinez</li> <li>3. Rufina Marinez</li> <li>4. Digna Cruz</li> <li>5. Reina Vicenta Gomez</li> <li>6. Concepción Castillo</li> </ol>		<ol style="list-style-type: none"> <li>1. Matias Castillo</li> <li>2. Samuel Cartagena</li> <li>3. José Gabriel Henriquez</li> <li>4. José Luis Ortiz</li> </ol>

## ANNEX C: HOGASA INTERVIEW GUIDES.

### MOTHERS AND FATHERS

1. In this community, do you think that there are many children with a malnutrition problem? Do the children here get sick a lot? Do small children, or mothers during childbirth, die?
2. Are there more or less children with malnutrition than 8 years ago? Do the children get sick more or less than 8 years ago? Change in mortality.
3. What activities have been carried out in the community to improve the health and nutrition situation of the children and mothers?
4. Do you think the CARE program has helped improve the situation in some way? In what, especially?
5. Have you received advice about the feeding of children and mothers? From whom? Have you done at home what is recommended? If not, why? What has been the result? Do you think the advice you are given is useful? Why? Have there been changes in the way of feeding the children? Have you seen results in the health and nutrition of your children?
6. Do the fathers participate in the educational activities and in caring for the children? How do they participate? Have there been changes in that?
7. Is the provision of foodstuffs of help in your nourishment? If you did not have the ration of food, would you have enough food for the family? What would you do if you did not have this ration? What do you plan to do when this is not given any more? Besides eating them, do you use them in any other way?
8. Do you know the CARE program health volunteers? Have you visited them? Have you taken your children to a volunteer for growth control or when sick? What do you think of the work they do? Is the work that they do at all useful to you? In what, especially? Do you think they can continue working even though CARE is no longer present?
9. Do you believe the community's health program may continue working without CARE? In what way? How could the fathers support this program?
10. Are the products that are harvested in the parcels utilized in the family's food? Or are some for sale only? Which, and why? Has the food changed in the last 8 years? What changes?
11. In general, what have you liked the most about CARE's program; what has been most useful to you? Why? What things have you not liked or you think have not worked well? Why? Suggestions or changes you would like made in the program.

## HEALTH VOLUNTEERS

1. How long have you been in the program?
2. In this community, do you think that there are many children with a malnutrition problem? Do the children get sick a lot here? Do small children, or mothers during childbirth, die? Are there now more or less malnourished children than 8 years ago? Do the children get sick more or less than 8 years ago? Change in mortality. What are the things that have most helped to improve the situation / what things have not allowed an improvement?
3. How do you feel within the program? Do you think that the activities carried out contribute to improving the health and nutrition conditions in your communities? Why yes, why not? In what way?
4. What has been the families' response, do you receive support, acceptance, do you believe that the community thinks your work important?
5. How does the time that you dedicate to volunteering affect being able to carry out other activities of interest to you?
6. What do you like most of participating in this program (benefits), what have you not liked or difficulties you have in carrying out your activities.
7. Do the actions that CARE performs in the other 2 components (EXTENSA and PODER) contribute in some way to what is done for the health and nutrition of the children and mothers? Is what is produced in the parcels used in the families' food? (diversification of diet).
8. Do you think that the food given to the families are a lot of help to them?
9. Could you continue working in this community health program even when CARE is no longer in the zone? If not, why? What would be the difference?
10. What is the relationship that you have with the staff of the health centers like; do they think your work is important? Do they support you in your activities, in what way?
11. Do you think that something in the Project should be modified, what aspects? Why?
12. In general, what do you think have been the main benefits in the health of children and mothers with the CARE program?

## HEALTH PERSONNEL

1. As health personnel, have you been involved in the activities of the HOGASA component of CARE? In what actions, specifically?
2. Do you think that there has been a change in the health and nutrition situation of the maternal-infant population of this zone, from 1996 to this date? Why do you think yes or no? What factors or processes would be influencing this situation?
3. Do you think that CARE's work has had some favorable result on the improvement of the health and nutrition situation of the population that has been tended? Considera usted que el trabajo de CARE ha tenido algún resultado favorable en el mejoramiento de la situación de salud y nutrición de la población atendida? En que se ha visto el resultado?, si no porqué cree que no se ha logrado? Cómo podría mejorarse la obtención de resultados?
4. Como visualizan el trabajo de los voluntarios y el sistema de salud comunitaria como tal, como contribuye a la situación de salud y nutrición de los niños y madres, por qué, qué dificultades observan, qué aspectos podrían cambiarse o mejorarse.
5. Continuidad de las acciones sin CARE, como lo visualizan, desde el punto de vista de Salud, los voluntarios, las comunidades.
6. Qué piensa usted de la ayuda alimentaria que se da a las familias, existe mucha necesidad todavía de esta ayuda, es un complemento importante a la dieta?, Cómo sería la situación en cuanto a la alimentación de madres y niños si ya no se diera esta ración?
7. Que sugerencias podría hacer para el programa de Seguridad Alimentaria de CARE para mejorar la obtención de resultados a nivel de la población?

## ANNEX D: EXTENSA INTERVIEW LIST.

### Aldea San Jose, Municipio Guajiquiro

Antonio Sanchez Gomez

Luis Hernandez Gomez

### Aldea Santa Lucia, Municipio Santa Ana

Maria Teresa Vazquez

Jose Ernesto Vazquez

Evaristo Vazquez

Jose Cruz Granados

Martin Sanchez

Marcos Granados Hernandez

Juan Pablo Bazan

Antonio Granados Bazan

Efigenio Sanchez

### Aldea Semane, Yamaranguila

Angela Manueles

Pedro Vazquez

Jose Maria Vazquez

Nemesio Manueles

### Aldea San Jose

Cristobal Pineda

Ramiro Gomez

Cipriana Pineda

### Aldea San Francisco, Candelaria

Alejandro Cantarero

Fermina Garcia

Jose German Quintero Diaz

Genaro Callejas

Diego Martinez

Martin Diaz Callejas

Julio Martinez

### Aldea Gualcea, Gaulcince

Felipe Leyva

Jose Felix Echeverria

Calixto Leyva

Camilo Avilez

## ANNEX E: EXTENSA INTERVIEW GUIDE.

*Le alcanza lo que produce su finca para lo que necesita su familia todo el año?*

(follow-up questions, as required by response to determine household food security situation)

*Hace 5 años su situación era igual?*

(follow-up questions to determine specific changes in household livelihood.)

*Cultiva de manera diferente ahora que 5 años antes?*

(follow-up questions and visits to fields)

*Vende parte de su cosecha?*

(follow-up questions about marketing, roads, prices as required by response)

*Y hace 5 años?*

(follow-up questions as required by response to determine changes in cash income)

*Tiene usted planes para su parcela/finca para el futuro?*

(follow-up questions as required to determine specific changes farmer has in mind as well as insights into sustainability; best done on site in the farmer's field)

*Saca usted créditos de su banco (BRHIS)?*

(follow-up questions as required by response; also questions about group size and member turnover and women participation, depending on response)

*El proyecto EXTENSA le ha ayudado en algo?*

(follow-up questions to determine specifics as required by response)

*Que le recomendaría para mejorar al proyecto EXTENSA?*

(follow-up questions to determine specifics as required by response)