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A FAMILY PLANNING PROGRAM  
FOR THE HONDURAN CAMPESENO

A Report Prepared By:

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## A FAMILY PLANNING PROGRAM FOR THE HONDURAN CAMPESINO

### I. CONSULTATION BACKGROUND, FINDINGS, AND RECOMMENDATIONS

#### A. BACKGROUND

Honduras is a poor agricultural country with most of the population living in the countryside. The population growth rate of Honduras (3.5 to 3.7%) makes it the fastest growing country in the Western Hemisphere. With the country's population thus doubling in less than twenty years, the increased demands for adequate housing, education, health care and employment that will result will be difficult, if not impossible, to meet.

Current problems within the health care system are already considerable. There is a shortage of medical personnel (particularly nurses), supplies and facilities. Existing facilities are often underutilized, partly because of fear and distrust of the government medical establishment among some of the population. Adequate septic facilities and safe water supplies are scarce, particularly in the countryside. As a result, there exists a very high rate of mortality and morbidity from intestinal parasitism. Widespread problems of malnutrition and gross nutritional deficiencies reduce the resistance of the population to respiratory infectious diseases. These preventable diseases account for the great majority of deaths among the rural population and severely reduce the work output of the infected survivors.

The Honduran Ministry of Health has recently initiated a "rural penetration" program designed to bring health services to the rural population. Though family planning services are theoretically included, as a practical matter the campesino must travel to the urban areas to receive assistance. USAID is supporting the government health and family planning program through the establishment of six training centers and the training of Honduran paramedical and medical personnel both in-country and in the U.S. Finally, the Honduran Family Planning Association offers family planning services through its urban-based clinics, and this year has initiated an ambitious community-based distribution program in the countryside. Yet laudable as these efforts are in their intent, it can be fairly stated that they have had little real impact on reaching the great majority of campesinos potentially in need of family planning services.

In recent years campesinos have organized and begun to take effective action to improve their economic and social conditions. An important land reform act gives campesinos the right to form cooperatives and take over non-producing land under their own ownership. Campesino

unions have formed to help their members carry out this process and to provide further assistance in securing bank credit, marketing, technical assistance, human resource development, education and project development. An equally important, and increasingly effective, union role is lobbying for campesino benefits at strategic levels within the national government.

By far the largest and most powerful union in Honduras is the National Association of Campesinos of Honduras (ANACH). Of the nearly 200,000 Honduran workers belonging to one of the numerous recognized unions, fully one-half are members of ANACH (Appendix A). ANACH has over 500 local cooperatives (sub-seccionales) located throughout the country. Each cooperative comes under one of nine ANACH regional offices (Appendix B). ANACH headquarters is in San Pedro Sula, Honduras' second largest city and industrial capital. The majority of the membership is located in this area and on the north coast. The August, 1976 issue of ANACH's "Voz Campesina" (Appendix C) contained several articles descriptive of ANACH's philosophy and programs. ANACH is democratic in philosophy and operation. The large majority of the national leadership are themselves campesinos. All are elected by the membership. Major policy decisions are made by the seven-man National Executive Committee. A recent important addition to the ANACH structure is the Women's Community Development Council which now has a membership of over 8,000 women engaged in various self-help enterprises at the local level.

The ANACH leadership is well aware of the ill effects unwanted and unchecked fertility has upon its membership. For them the problem means much more than cold statistics in government reports. For the campesino who produces children at an average rate 50% higher than the urban dweller, with few of the latter's other resources, the result is often hunger, deprivation, illness and premature death. At the least, it means little or no opportunity for economic self advancement. Deciding to take action on this important problem and convinced that little assistance would be available by working through the established public medical care system, ANACH this fall requested assistance from the USAID Mission in establishing and funding a family planning program for its membership. In November, a family planning consultant was sent by USAID to Honduras to assess the situation and report his findings and recommendations.

## B. FINDINGS

The following are the results of information and impressions gained during the consultant field visit outlined in Appendix D:

1. Uncontrolled fertility is perceived as a major problem by a large number (if not most) of Honduran campesinos.
2. Knowledge of family planning methods (especially the pill) is widespread, even in remote areas.

3. Access to low-cost services (or often services at any price) is not readily available. A great deal of motivation is thus often required to obtain family planning services, which is beyond the capacity of many campesinos.
4. "Paper services" often differ markedly from reality. For example, the Comayagua Regional Hospital is supposed to have an ongoing family planning clinic. Yet when the consultant questioned ten young campesino women who had delivered there during the past year, none had been offered information or services in family planning. However, all told the consultant they wanted such information and services.
5. There exists a deep level of suspicion and mistrust on the part of the campesino over the willingness and ability of the government and other established institutions to meet his needs.
6. The ANACH organization has been increasingly successful in helping its member campesinos improve their economic and social position. The leadership is liked, respected and listened to by the membership.
7. Because of (4) and (5) above, any family planning program designed for ANACH should be included as an integral component of the organization's existing structure and activities. A family planning program not controlled and directed by ANACH will have little chance of success. On the other hand, the chances for success of an ANACH-sponsored program are high indeed.
8. Conditions now exist which are conducive to the rapid implementation of a family planning program through ANACH. Such a program would benefit a large number of non-ANACH campesinos as well. Undue delay might have the effect of alienating certain members of the ANACH leadership, not all of whom are sold on family planning.

### C. RECOMMENDATIONS

The consultant has discussed these recommendations with representatives of ANACH, the Honduran Family Planning Association, and the USAID Mission in Honduras, all of whom agree that they would be adopted.

1. That Family Planning International Assistance, with support from USAID Washington, be asked to fund a pilot family planning project to be conducted by ANACH in the Comayagua Region.

2. That this project be initiated no later than February, 1977, and be funded for a period of not less than three years. Further, that in November, 1977, a comprehensive evaluation of the project be undertaken with the objective of expanding the program to other ANACH regions throughout the country, beginning January, 1978.
3. That this project be developed in accordance with the suggested project proposal which comprises Part II of this report, key elements of which are as follows:
  - a. Mr. Roque Flores, member of the ANACH National Executive Committee, as Project Director.
  - b. An agreement with the Honduran Family Planning Association to train ANACH project personnel. Also included is a training program for promoters of the ANACH Women's Community Development Council.
  - c. A research/evaluation component designed to measure success as well as the potential for expansion to other areas.

#### D. CONCLUSION

This project is unique in that the problem of excess fertility among Honduran campesinos, and the decision to do something about it was recognized and acted upon by a large and powerful grass-roots organization without any outside prodding or intervention. This fact, when considered in light of the considerable influence and credibility ANACH enjoys with its membership, speaks well for the success of the project. This is truly a model for "people helping themselves" which USAID would be well advised to promote.

## II. THE COMAYAGUA FAMILY PLANNING PROJECT

### A. PROJECT GOAL

The long-range goal of this project is to improve the health and economic condition of the Honduran Campesino through a program of voluntary family-size limitation. The intermediate-range goal of the project is to test the effectiveness of this approach to family planning service delivery in the Comayagua Region, to the end of expanding the program throughout the country in 1978. The short-range goal of this project is to make available during the year 1977 free family planning information and services to all eligible members of the National Association of Honduran Campesinos (ANACH) in the Comayagua Region who desire such information and services.

### B. PROJECT DESCRIPTION

This project is designed to bring family planning information and services to the ANACH membership in the Comayagua Region. Other non-ANACH campesinos in the area will also be eligible for services. It is proposed that the project be funded for a period of three years, the minimum time necessary to evaluate the true impact of the program. The first year is seen as basically the pilot phase of the project, which lays the groundwork for solid program development and operation during the succeeding two years. Furthermore, it is hoped that a positive first year experience in Comayagua will provide justification for expanding the program to the other eight ANACH regions throughout the country in 1978.

The following describes the operational features of the project; coverage area, scope, organization and approach:

1. Area. The area chosen by ANACH to launch this project includes the city of Comayagua and surrounding area roughly within a forty (40) kilometer radius. It is a rural area containing several small villages and scattered settlements. Most of the area lies in a valley which is extensively cultivated. Total population is estimated at roughly 120,000 persons. There are over 9,000 ANACH members, of which between 1,700 to 2,000 are estimated to be potential acceptors of family planning services during the first year. In addition, the project is expected to attract between 300 and 500 campesino users who are not members of ANACH. Thus, the total projected acceptor population after the first year is between 2,000 and 2,500.
2. Scope. The following family planning methods will be offered: pills, condoms and IUD's. Although it is anticipated that the vast majority of users will choose the pill, it is important to offer another effective method (IUD) to those women who for medical or other reasons the pill is not suitable. Preferably,

the project coordinator (a nurse) will be trained to perform IUD insertions. If this is not possible, contract arrangements will be made through local medical facilities.

The project will also offer a comprehensive educational program which deals not only with family planning, but with other important health issues facing the campesino today. For example, much can be done to reduce the high rates of mortality and morbidity from intestinal parasitism and respiratory infectious diseases through education in proper sanitation, use of safe water supplies and proper diet.

This proposal also includes another element which is not properly a part of the Comayagua project at all, yet is very important to the future development of a nation-wide ANACH family planning program. This element consists of a family planning training course for the National Coordinator and eight area promoters of the Juntas Feminia de Desarrolla Comunal, ANACH's women's organization. The National Coordinator is herself a nurse with a strong personal commitment to family planning.

3. Organization. The ANACH organization is described in Part I of this proposal and in Appendices C and E. It is intended that this project be integrated fully into the ANACH structure, with ANACH exercising full control over project operation, within the guidelines of the approved grant.

The organizational plan for the project itself is graphically illustrated in Appendix F.

The selection of Mr. Roque Flores Ramirez as project director is an extremely fortunate circumstance that speaks well for the probable success of the project. As a long-standing member of the ANACH National Executive Committee, Mr. Flores is a voice of authority and influence within the ANACH leadership. Furthermore, Mr. Flores was responsible for organizing most of the ANACH cooperatives in Comayagua and is well known, liked and respected by the membership in that region.

Mr. Flores has agreed to devote full-time to the project during the initial period of organization and operation (estimated six months). Thereafter, he will devote an estimated one-quarter of his time to the project until the end of the first year. At that time, should the project be expanded to a nationwide program, Mr. Flores could very well play a major role in its implementation.

The primary responsibility of the project director is to implement the program as quickly and efficiently as possible.

He is responsible for hiring and supervising project staff and management of the project budget. He coordinates activities of the Comayagua Family Planning Advisory Committee and with the Honduran Family Planning Association. He will promote effective and open communications with the community at large and other related institutions and organizations. It is anticipated that he will do much of the community education work himself, while delegating other program activities to other staff. He will report to ANACH headquarters and the project funding agency on his project activities and make appropriate recommendations for change. In short, he will give overall guidance and direction to the project in whatever is necessary to make it succeed.

The staff working under the project director will consist of a half-time secretary, a project coordinator and ten project promoters.

The project coordinator position is also very important because it is she who will be responsible for most of the day-to-day activities of the project. She should be a person of administrative ability sufficient to speak for the project director in his absence and to assume complete direction of the project after the first year. She should be a well-trained nurse who could be further trained to perform IUD insertions for women enrolled in the project. Her activities would also include ongoing supervision and training of the promoters, gathering information and preparing reports and community education. The project coordinator will spend at least 75 percent of her time working out of the office in the field.

Promoters would be selected from among mature local women who have had at least one child and are presently (or have been) users of family planning methods. They should be able to read and write and have good verbal communication skills. Above all, they should demonstrate an abundance of energy and enthusiasm for the project.

The Comayagua Family Planning Advisory Committee is the local volunteer policy advisory group for the project. It would consist of one elected representative from each ANACH cooperative in the project area. The Committee would meet once a month with the project director and other staff as appropriate to discuss various aspects of the project and make suggestions for change or improvement. Members of the Committee might also volunteer to carry out certain activities of the project itself.

The Honduran Family Planning Association has agreed to develop a three-week training program for project staff to begin upon approval of the grant. The Association has had several years of successful experience in family planning

program development in Honduras and expects to work closely with ANACH in an advisory and coordinating capacity. ANACH expects to utilize some of the forms and procedures now being used by the Association in its own community-based contraceptive distribution program.

The final element in the project organization plan is a medical advisor. It is anticipated that the medical advisor, a physician trained in family planning, will meet regularly with the project coordinator (and promoters as appropriate) to answer questions and solve problems of a technical medical nature. He/she would also be available to see project enrollees with unusual or serious method-related complications.

4. Approach. The basic approach envisioned for this project is that of a household contraceptive distribution program. However, this project differs from that usual approach in at least two important respects: It plans systematic coverage of ANACH households only (though it allows non-ANACH persons in the program), and it makes available another method (IUD) besides pills and condoms. Furthermore, its community education emphasis is probably broader than most other household contraceptive distribution programs.

The system would work roughly as follows: The project director, coordinator and secretary would be based in Comayagua where they would have use of existing ANACH offices. Project promoters would be distributed throughout the region, each covering a geographical area small enough for them to walk to most households within a half hour. The project director and project coordinator would develop detailed maps and coverage schedules for each promoter. The coordinator would make regular visits to each promoter, keeping her supplied with contraceptives and other supplies, gathering information for reports, seeing potential users in very remote areas, making arrangements for referral of persons needing IUD's or other care and generally making sure that the promoter's work is being carried out according to plan. Both the coordinator and project director would be meeting with representatives of ANACH cooperatives and other groups carrying out educational and promotional activities.

Public transportation in this area is extremely limited or non-existent. Furthermore, roads, where they exist, are often in very poor condition. Telephones are even more scarce. It is, therefore, absolutely essential that a four wheel drive vehicle be included in this project. A vehicle will allow the director and coordinator to maintain contact

and provide needed training and supervision to promoters in the field. It will allow for transporting bulky supplies and information and educational equipment and materials to remote areas, as well as reach potential patients in those areas. It will allow for the transport of clients to medical facilities for IUD insertions or other treatment. In sum, it is a vital logistical support element, without which personnel supervision will be extremely difficult; Information, Education and Communication efforts minimal; supply systems inadequate; referral services severely restricted; and numbers of projected acceptors far below that currently anticipated.

#### C. PROJECT IMPLEMENTATION

It is hoped that the project will be funded by February of 1977 and well under way by March. The proposed project director, Mr. Flores, is already spending some time in the Comayagua Region discussing the project concept with local ANACH groups and keeping an eye open for potential project staff. The Honduran Family Planning Association is working on the ANACH training program which they will initiate in Comayagua once the project is funded. Appendix G illustrates a detailed project implementation plan as currently envisioned. (The "consultant" referred to in the implementation plan is the author of this report and project proposal. He is included in the plan at the expressed opinion of USAID in order to ensure continuity with previous actions.)

It is assumed that in 1978 the Comayagua Region family planning project will be included in the countrywide ANACH effort. Therefore, only first-year activities are described in the plan.

#### D. PROJECT COSTS

Project Costs are illustrated and explained in some detail in Appendix H. Cost per acceptor during the first year seems high (between \$15-\$18) but drops to a very favorable (\$6-\$9) rate during the second year of operation, which assumes an acceptor growth rate of approximately 50%. The reason for this disparity (in addition to the fact of more acceptors enrolled in the program) is, of course, the fact that first-year operating expenses decrease by nearly 50 percent as one-time start-up costs are eliminated. Cost per acceptor over the total three-year life of the project is also estimated at between \$6-\$9 per year, not including contraceptives. This, of course, is little better than an educated guess at this point. But if it should prove to be accurate, the project would have to be considered a major success. at least from the cost standpoint.

## E. PROJECT EVALUATION

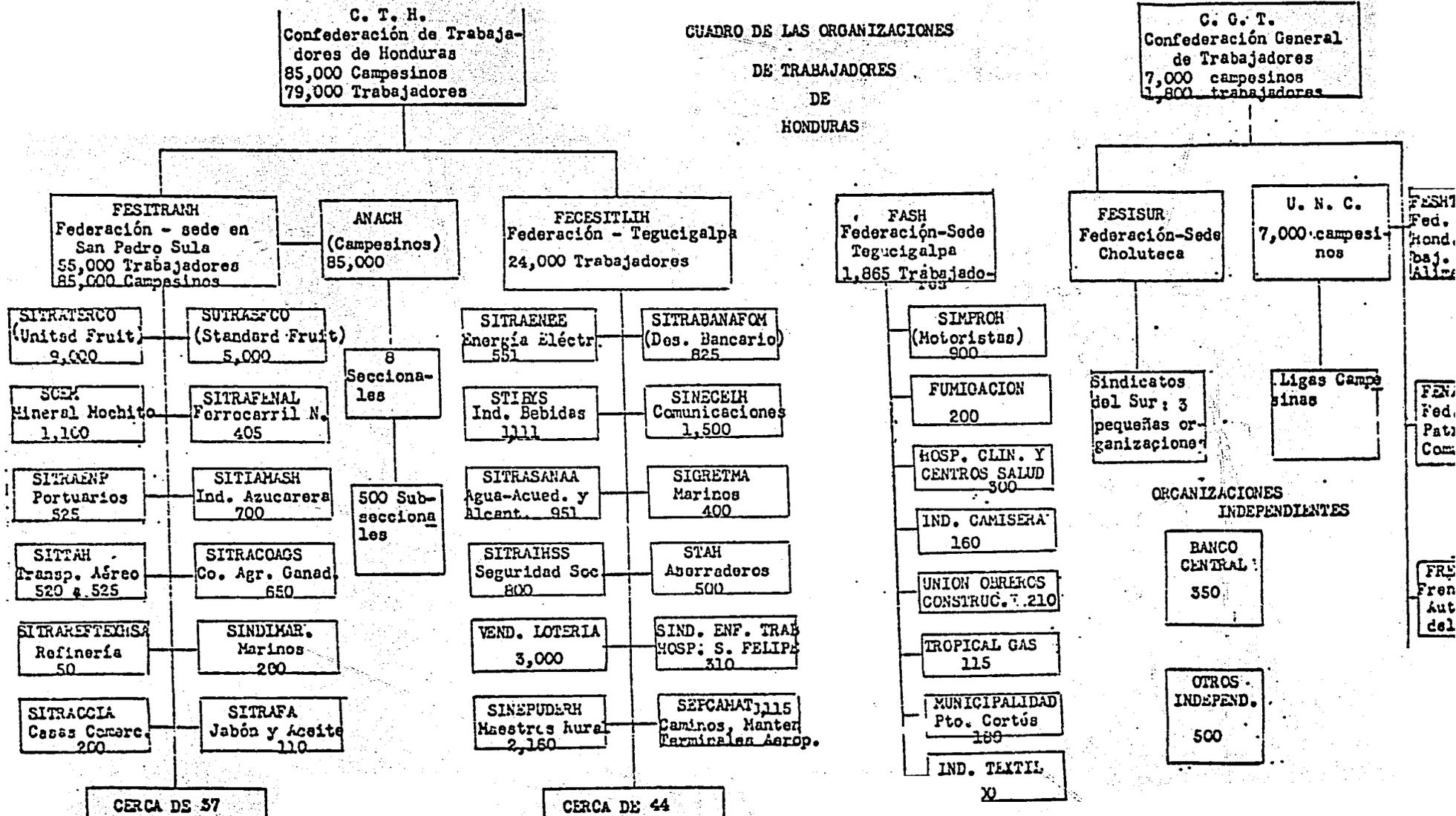
Evaluation of this project will take place at two levels and will be carried out systematically and rigorously. The first level of evaluation can be described as ongoing program evaluation. The purpose of this type of evaluation is to give the project director the information he needs to make necessary adjustments in the operation of the project. Examples of instruments to be developed for this type of evaluation include periodic employee performance evaluations, periodic data scans to measure achievement of actual as against planned objectives (i.e. acceptor rates, groups visited with educational programs, etc.) and periodic acceptor surveys to measure satisfaction or dissatisfaction with the project and to solicit suggestions for improvement.

The second level of evaluation may be described as long-term project impact evaluation. This type of evaluation will be carried out primarily by the funding agency and will, in turn, be conducted at two levels. The first will develop base-line information on fertility knowledge attitudes and practices at the beginning of the project and measure change in these parameters through the life of the project. The second type will be designed to measure the effectiveness and efficiency of the project after the first year in terms of its potential for expansion throughout the rest of the country, beginning in 1978.

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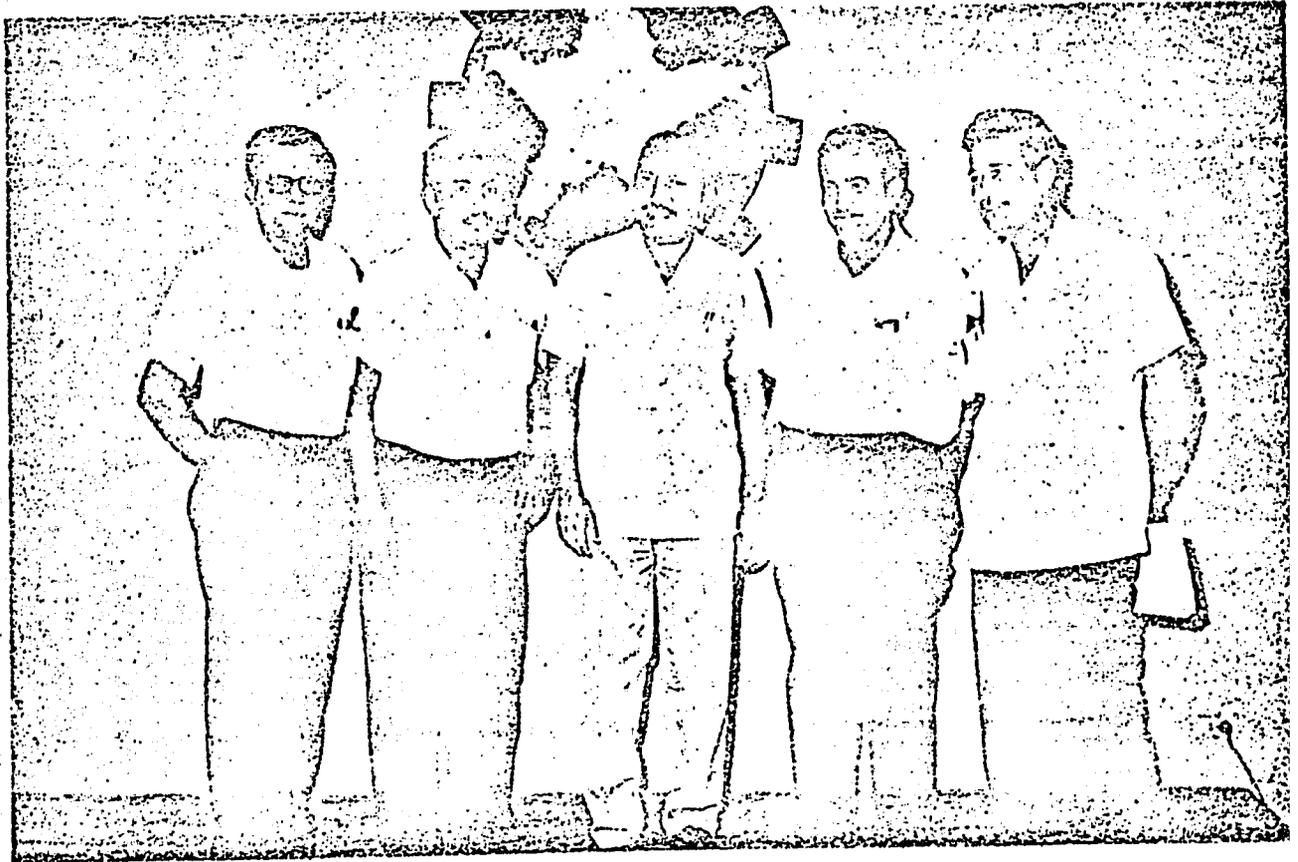
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Órgano Oficial de la Asociación  
Nacional de Campesinos ANACHI.  
San Pedro Sula - Agosto - 1976

# CAMPESINA



## Los Grandes del Sindicalismo Hondureño



En la presente foto nuestros lectores pueden apreciar a nuestros compañeros: Víctor Artilles, Reyes Rodríguez Arévalo, Oscar Galvarela y Céleo González, luchadores infatigables en el sindicalismo hondureño y organizaciones campesinas, acompañados al licenciado Rigoberto Sandoval Corea, Director Ejecutivo del Instituto Nacional Agrario.

lea en éste número.

- ⊙ CARTA A LOS LECTORES. ⊙ LA RECUPERACION DE TIERRAS ES URGENTE.
- ⊙ EL NOMBRAMIENTO DEL LICENCIADO SANDOVAL COREA.
- ⊙ LA MUJER CAMPESINA SE ORGANIZA Y MUCHOS ARTICULOS DE INTERES.

CONSULTANT ITINERARY  
HONDURAN FIELD TRIP  
(November 9 - November 21, 1976)

- NOVEMBER 9 - Arrive Tegucigalpa. Confer with John Peabody, USAID Mission Population Officer
- NOVEMBER 10 - Continuing consultation with USAID Mission staff and review of background documents on Honduran health/family planning situation and ANACH. Meet with Dr. Nuñez and Mr. Flores of Honduran Family Planning Association.
- NOVEMBER 11 - A.M. conference with Acting USAID Mission Chief and Staff. P.M. rent car and drive to San Pedro Sula, ANACH Headquarters.
- NOVEMBER 12 & 13 - Confer with Executive Committee of ANACH National Directive Council. Select Comayagua Region as pilot area for first phase of family planning program. Make site visit to Honduran Family Planning Association clinic at Leonardo Martinez Hospital in San Pedro Sula.
- NOVEMBER 15, 16 & 17 - Visit to Comayagua area with Mr. Roque Flores, Secretary for Organization and member of ANACH National Executive Committee. Visit campesino cooperatives El Coquito, Nuevo Palmerola #1, and with the Junta Feminina de Desarrollo Comunal.
- NOVEMBER 17, 18, 19 & 20 - Return to Tegucigalpa. Confer with USAID Mission personnel (including the Director) and Executive Director of the Hondurian Family Planning Association. Draft preliminary project design.
- NOVEMBER 21 - Leave Tegucigalpa. Arrive Washington, D. C.
- NOVEMBER 22 - Washington, D. C.. Confer with Larry Eicher and other USAID Population Office personnel. Agree on preliminary plan to initiate ANACH family planning program in February or March, 1977.

F O L L E T O

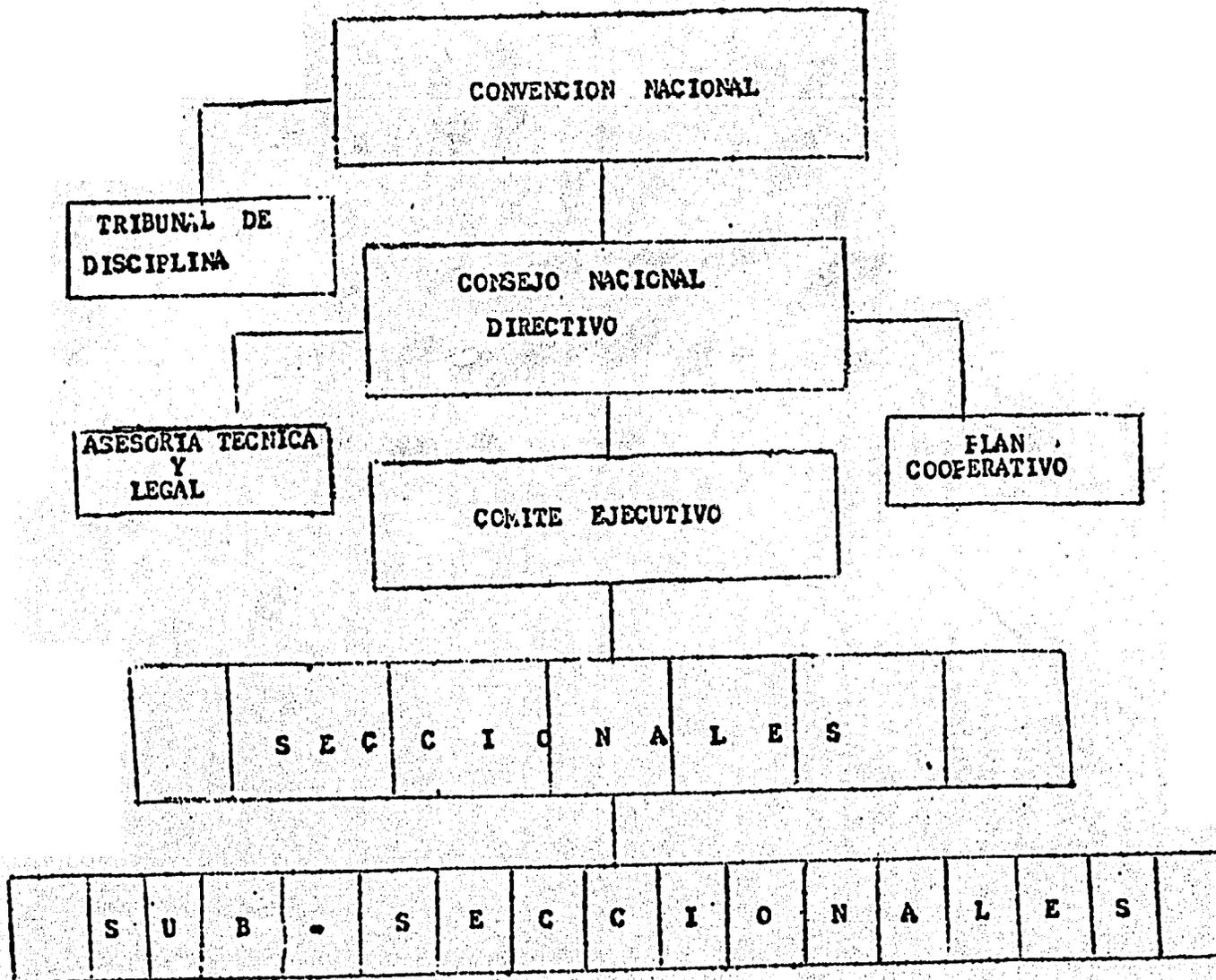
S O B R E L A



ESTRUCTURA INTERNA DE LA "ANACH"

Julio 2 de 1975

ORGANIGRAMA DE LA ANACH



/ozdel.

## DEFINICION DEL ORGANIGRAMA DE LA ANACH

### A.- LA CONVENCION NACIONAL

Es la autoridad suprema de la Asociación, sus decisiones son inapelables y de cumplimiento obligatorio, tanto para los organismos como para los afiliados en general. Se integra por los miembros del Consejo Directivo Nacional y todos los delegados debidamente acreditados.

La Convención Nacional Ordinaria se reúne cada dos (dos) años, durante la segunda quincena de Septiembre y se reúne en Convención Ordinaria intermedia cada año.

### B.- El Consejo Directivo Nacional

Es un órgano de Dirección, deliberante y de ejecución y está integrado por veinte y cinco (25) miembros que son electos por la Convención Nacional, se procura que entre ellos figure por lo menos un representante de cada seccional. Duran en sus funciones por el término de dos (2) años, pero pueden ser reelegidos.

Este Consejo sesiona ordinariamente cada seis (6) meses. Sus atribuciones principales son: estudiar todos los problemas económicos y sociales que confrontan la Asociación y dictar las resoluciones pertinentes; estudiar para su aprobación los proyectos de presupuesto que elabore el Comité Ejecutivo, así como la rendición de cuentas que este organismo deba presentar al final de su período y dictar las medidas necesarias para corregir los errores y deficiencias que se comprueben y orientar la política social de asociación de conformidad con los lineamientos de la Convención.

### C)- El COMITE EJECUTIVO:-

Esta formado por los primeros siete (7) miembros del Consejo Nacional Directivo, es la suprema autoridad ejecutiva y de acción de la ANACH, mientras no esten reunidos el Consejo Directivo Nacional o la Convención Nacional.

Esta integrado por un Presidente, Vice-Presidente, Secretario General, Secretario de Organización, Secretario de Finanzas, Secretario de Actas y Correspondencia y el Fiscal.

Estos cargos son desempeñados por aquellas personas electas por la Convención Nacional para desempeñar los mismos cargos en el Consejo Directivo Nacional y duran en sus funciones por igual período.

### D.- LAS SECCIONALES:

La ANACH puede tener una Seccional en cada Departamento de la República. Cinco o más sub-seccionales pueden constituir una Seccional Departamental.

Toda seccional está dirigida por un Comité Seccional integrado así: Secretario General, Secretario de Organización y Cooperativas, Secretario de Asuntos Legales y de Trabajo, Secretario de Actas y Secretario de Finanzas.

Los miembros de los Comités Seccionales son electos en Asamblea General constitutiva por la totalidad de Delegados que acrediten las sub-seccionales de la Jurisdicción respectiva.

**E).- LAS SUB-SECCIONALES:**

Las Seccionales constituyen sub-seccionales en todos aquellos lugares donde existan núcleos de población campesina, que forme comunidades en un número no menor de treinta (30) afiliados. Esta disposición sin embargo, ha sido alterada por el Decreto Ley N° 8 que contempla se puede formar un Asentamiento con un número no menor de doce (12).

**F.-** El Tribunal de Disciplina, es un órgano de Dirección, sino que su estructura se establece para conocer las fallas en los distintos niveles y para operar las medidas disciplinarias que los casos ameriten, El Tribunal de Disciplina no es un Órgano permanente, sino que sus funciones son eventuales en relación con las circunstancias que se presenten.

La Asesoría Técnica y Legal, esta integrada por compañeros que no son miembros ejecutivos, pero que sí están plenamente identificados en la lucha para encontrar los éxitos que demanda nuestra Organización, ellos como los Miembros Ejecutivos laboran constantemente en función de la ANACH.

El Plan Cooperativo se organizó como una necesidad imperativa para crear la fuente económica que demandan los principios y finalidades de la Organización.

Adjunto encontrará el Organigrama que indica la estructura del Plan Cooperativo que opera como un Departamento de Trabajo Socio-Económico de la ANACH.

La ANACH se fundó el 29 de Septiembre de 1962. La Asamblea constitutiva se realizó en la Villa de la Lima, Depto de Cortés, y en el Edificio Social del SITRATERCO. Esta Asamblea estaba integrada por 137 Delegados en representación de 4.489 campesinos. La ANACH se considera como un Sindicato Agrario, pues su Personería Jurídica fue otorgada por el Ministerio del Trabajo. La ANACH esta afiliada en el Campo Nacional a la FESITRANH y en el campo internacional, a la Federación Internacional de los Trabajadores de las Plantaciones Agrícolas y Similares FITPAS, del grupo de Secretariados profesionales internacionales que integran la Confederación Internacional de Organizaciones Sindicales Libres (CIOSL), que tiene su sede en Bruselas, Bélgica, con 64.000.000 de afiliados.

La ANACH tiene organizado el Plan Cooperativo de servicios múltiples que esta formado por todas las Cooperativas organizadas a nivel nacional, para mayor información damos a conocer el Organigrama del Plan Cooperativo, adjunto, ya que esta rama representa la parte esencial sobre el desarrollo económico de las sub-seccionales, y de la Organización en general.

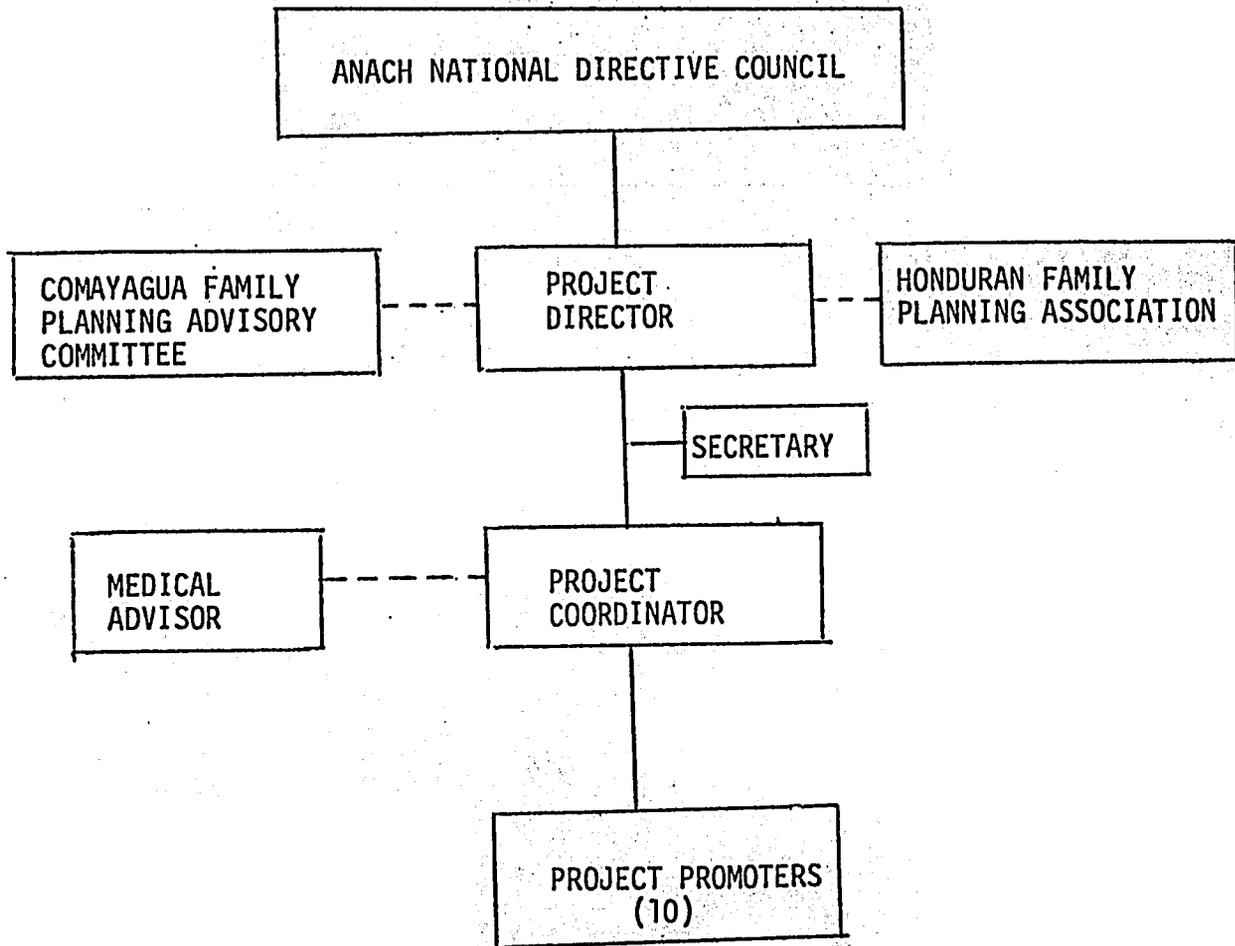
Las proyecciones de la ANACH consisten en la creación de las Empresas de Producción y Servicio.

La creación de los Silos Rurales para facilitar el almacenamiento de granos en los Sectores de más producción y población, la creación del Banco de Desarrollo Agrícola; la promulgación de Leyes que garanticen el seguro de cosechas de los campesinos. El desarrollo de Proyectos de Irrigación en todos los sectores que la superficie le permita.

La capacitación de cuadros administrativos y direccionales para ejecutar los aspectos técnicos que demanden sus proyecciones.

San Pedro Sula, Diciembre de 1975.

### PROJECT ORGANIZATION PLAN



PROJECT IMPLEMENTATION PLAN

COMPLETION DATE

ACTION UNDERTAKEN

PERFORMED BY

11/21/76

Preliminary Project Design

Consultant

12/15/76

Submission of Final Draft of Project Proposal to FPIA, USAID and ANACH

Consultant

1/15/77

Review and Comment by FPIA, USAID and ANACH

FPIA, USAID, ANACH

2/1/77

Final Project Authorization

FPIA, USAID

2/15/77

Hire Project Staff

Project Director

3/1/77

Develop detailed project work plan, job descriptions, financial system, logistical network and reporting and evaluation system

Consultant, Project Director, FPIA

3/21/77

Initiate Project

ANACH

11/15/77

Full-scale project evaluation

Consultant; FPIA

12/15/77

Submission of expanded nationwide ANACH project proposal to FPIA & USAID

Consultant; ANACH; FPIA

1/15/78

Initiate ANACH nationwide family planning project

ANACH

COMAYAGUA  
PROJECT BUDGET (U.S.\$)

ITEM	YEAR 1 (10 MO)			YEAR 2			YEAR 3		
	FPIA	ANACH	USAID	FPIA	ANACH	USAID	FPIA	ANACH	USAID
Salaries:									
Director	\$ 2,100			\$ 0			\$ 0		
Coordinator	2,000			3,000			3,360		
Promoters (10)	7,000			9,600			10,560		
Secretary (½ time)	600			840			924		
Fringe Benefits (15%)	1,755			2,166			2,383		
Indirect Management Expense (3%)	404			498			548		
Office Rental		300			360			360	
Utilities		100			120			120	
Supplies	500			600			600		
Equipment	1,500			300			500		
Educational Supplies/Equipment	2,000			500			500		
Medical Supplies/Equipment	750			400			600		
Contraceptives			?			?			?
Vehicle Purchase	7,000			0			0		
Maintenance	50			150			300		
Fuel	500			600			720		
Other Travel	1,000			900			900		
Training	3,225			0			0		
Other Contract Services	1,000		6,000	1,200		0			
TOTAL	\$31,484	400	6,000	\$20,754	480	0	\$21,895	480	
GRAND TOTAL		<u>\$37,884</u>			<u>\$21,234</u>			<u>\$22,375</u>	

Appendix H(1)

BUDGET EXPLANATION (1ST YEAR - 10 MONTHS)

<u>Category</u>	<u>Explanation</u>
Salaries-Director	\$175/mo (authorized ANACH Executive member Comm. rate) + \$125/mo travel & relocation expense for 6 mo.; 1/4 salary for remaining 4 months.
Coordinator	\$200/mo. for 10 months
Promoters	\$70/mo. for 10 months
Secretary	\$60/mo. for 10 months @ 1/2 time
Office Equipment	\$1500 - Large 1st year investment in typewriter, file cabinets, etc.
Education Supplies/ Equipment	\$2000 - Large 1st year investment in audio visual equipment
Medical Supplies/ Equipment	\$750 - May be necessary to purchase limited amount of medical equipment for IUD insertions
Contraceptives	\$0 - Assume supplied by USAID at cost
Vehicle purchase	\$7,000 - One-time indispensable purchase. Should be 4-wheel drive capable of carrying 6-8 passengers
Other travel	\$1,000 - Includes funds for possible training of project coordinator in IUD insertions. Also short-term travel/orientation sessions for project director and coordinator and occasional promoter travel
Training	\$3,225 - Honduran Family Planning Association estimate (enclosed) for training ANACH Comayagua project staff and members of the Junta Feminina Women's Organization.
Other Contract Services	\$1,000 FPIA - 20 sessions at \$50/session for Project Medical Advisor  \$6,000 USAID - 2 three-week consultant site visits at current salary + travel (Note: Cost of FPIA consultant not included, but estimated to be at approximately the same rate.)

PRESUPUESTO PARA ADIESTRAMIENTO DE 30 PROMOTORES EN UN PROYECTO DE DISTRIBUCION COMUNITARIA DE ANTICONCEPTIVOS:

LUGAR : Comayagua

DURACION: 13 Días ( Incluyendo el Tema de Nutrición con 2 días)

PARTICIPANTES : 30

VIATICOS DE INSTRUCTORES : ( 11 personas ) L. 1.400.00

TRANSPORTE : (traslado de participantes de toda la República a Comayagua, gasto de combustible para traslado de Instructores y movilización en el área de trabajo) 700.00

ALIMENTACION Y HOSPEDAJE PARA 30 PARTICIPANTES : 3.900.00  
(13 días a L.10.00 diarios x 30 participantes)

MATERIALES : 250.00

OTROS GASTOS : 200.00

Alquiler de local 60.00 Total L. 6.450.00

Moviliario 40.00

Refrigerio para 2

recesos diarios 50.00

Actividades de cla-

sura 50.00

A FAMILY PLANNING PROGRAM  
FOR THE HONDURAN CAMPESINO  
(A Supplemental Report)

A Report Prepared By:

TERRENCE P. TIFFANY, M.P.H.

During The Period:

FEBRUARY 20 THROUGH 28, 1977

Under The Auspices Of The:

AMERICAN PUBLIC HEALTH ASSOCIATION

Supported By The:

U. S. AGENCY FOR INTERNATIONAL DEVELOPMENT  
OFFICE OF POPULATION, AID/PHA/C-1100

AUTHORIZATION:  
Ltr. POP/FPS: 1/31/77  
APHA Assgn. No. 1100-055

A FAMILY PLANNING PROGRAM  
FOR THE HONDURAN CAMPESINO  
(A Supplemental Report)

I. INTRODUCTION AND BACKGROUND

The following is intended to supplement the report prepared in November, 1976 entitled, A Family Planning Program for the Honduran Campesino, (APHA No. 1100-050). This report updates and expands the previous report and makes no attempt to repeat information; such as the organization and operation of the National Association of Honduran Campesinos (ANACH), which is necessary for a complete understanding of the proposed family planning program.

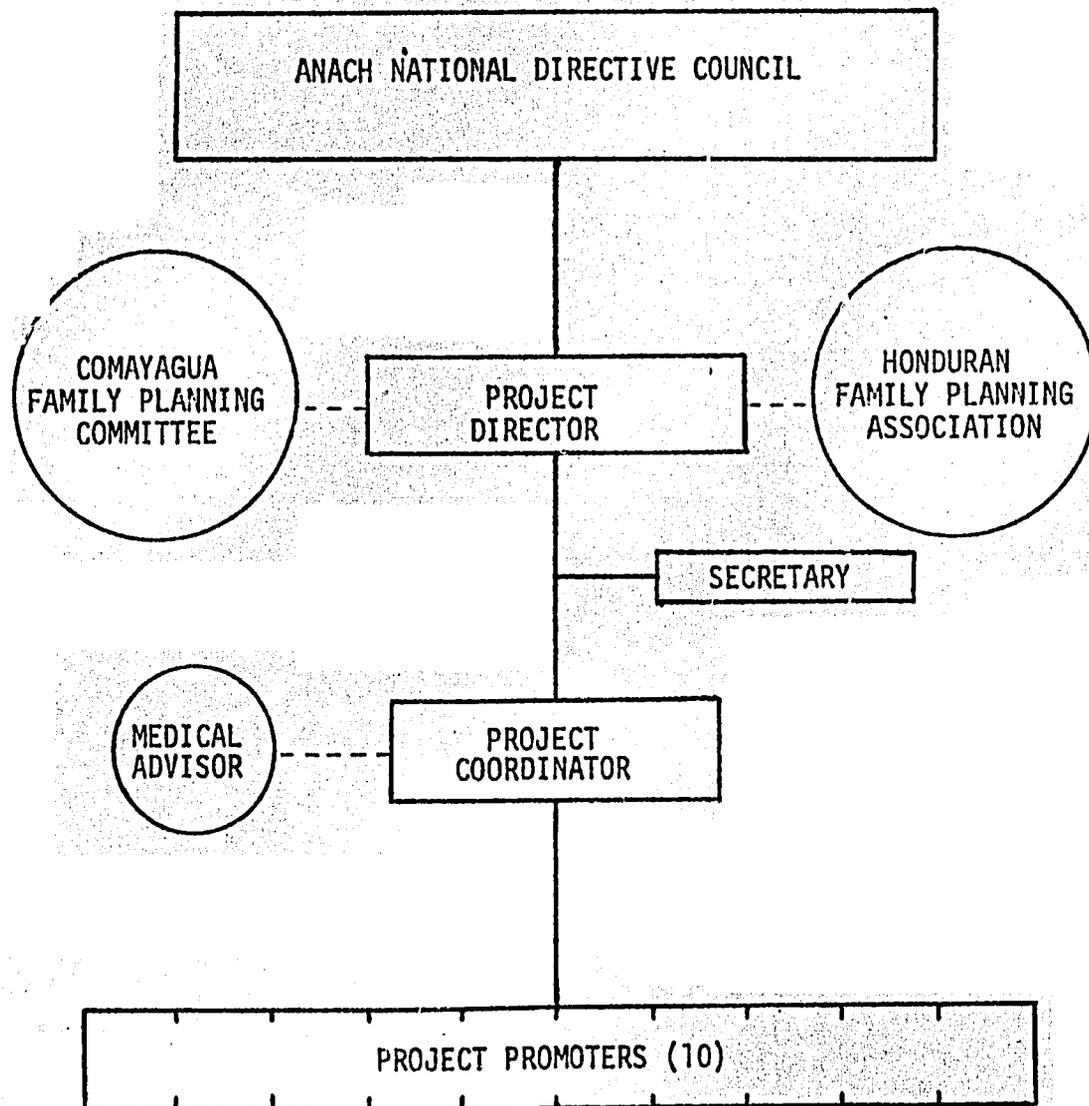
Described herein are the major findings of a field assignment to Honduras during the period of February 20 through February 28. (See Appendix A). Since the primary objective of this assignment was to assist in the finalization of the proposed Campesino Family Planning Project to be funded by Family Planning International Assistance (FPIA), the consultant was accompanied by Anna Nowakowska, FPIA's Acting Regional Representative for Latin America. Ms. Nowakowska is responsible for writing the final project proposal which will be submitted by FPIA to AID by the middle of March, 1977. Ms. Nowakowska's project paper is, therefore, much more detailed, though the information herein covers the major elements of the proposal agreed to by all relevant parties in Honduras.

Despite the fact that Honduras has perhaps the fastest population growth rate in the hemisphere (between 3.5 - 3.7), with an economy woefully inadequate to keep pace, the government has thus far refused to commit itself to a vigorous program of voluntary family planning service delivery. Recognizing the limited effect of a bilateral program in this situation, the USAID Mission has given increasing attention to promoting assistance through AID supported intermediaries to non-government entities in Honduras, such as the Honduran Family Planning Association (HFPA).

Particularly promising from the Mission's point of view has been the request by Honduras' largest and most powerful union (ANACH) for assistance in developing and implementing a family planning program for its members. This request is highly significant in that: (1) it was unsolicited, thus demonstrating an important prior organizational concern and commitment over problems of unwanted fertility. (2) The size and political strength of ANACH make government or other institutional interference unlikely. (3) In terms of direct impact, the program has the potential of reaching a very sizeable number of all Hondurans in need of family planning services. One out of six Hondurans has a family member who belongs to ANACH. (4) The success of such a program would be impossible for the government to ignore; thus, its own presently inadequate efforts in family planning would be given a strong push forward.

In November, 1976, the consultant assisted ANACH in its program planning, an effort which resulted in a family planning project proposal entitled, A Family Planning Program For The Honduran Campesino. Family Planning International Assistance (FPIA) agreed to fund the proposal, pending satisfactory on-site review by Anna Nowakowska, FPIA's Regional Representative for Latin America. In February, 1977, Ms. Nowakowska and the consultant visited Honduras to finalize the ANACH proposal and the results are described in the following sections of this report.

### PROJECT ORGANIZATION PLAN



## II. FINDINGS

The ANACH leadership remains committed to a program of family planning for its members. This commitment is exemplified by the fact that the National Organization Secretary and the Comayagua area ANACH President and Secretary General will be included in the project staff on a part-time basis.

All relevant support agencies and institutions; such as the Honduran Ministry of Health, the Honduran Family Planning Association, and the USAID Mission, are supporting the program. Only the Comayagua Region V Ministry of Health Director had reservations. It is not expected that this will present serious obstacles to program implementation.

It was felt advisable to modify or expand the proposed work plan and budget in the following significant areas:

- a) Junta Feminina. The number of promoters in ANACH's women's organization to be trained in family planning will be increased to seventeen. They will each give a minimum of two educational sessions per week to ANACH groups throughout the country.
- b) Male Motivation and Services. Two male promoters will be added to the project in Comayagua. They will give educational lectures and distribute condoms to male campesinos.
- c) Training. The Honduran Family Planning Association will do the training for project staff. Training is scheduled to begin on April 13, 1977.
- d) Methods. IUD's will be offered, however, definite procedures for this service remain to be worked out. Patients will initially be referred to the Comayagua Regional Health Center. Sterilization services, though not part of the project, will be available through referral to Honduran Family Planning Association Clinics.
- e) Medical Backup and Supervision. The Medical Director of the Honduran Family Planning Association will serve as Medical Advisor for the ANACH project. This is quite fortuitous, given Dr. Nunez's excellent reputation in Honduras. The Ministry of Health Medical Center will provide medical backup for the project in Comayagua.
- f) Project Vehicle. The need for a four-wheel drive project vehicle, stressed so strongly in the previous report, was confirmed by the FPIA representative. However, restrictions regarding purchase, which may mean unacceptable delays, make it imperative that arrangements be made for local purchase as soon as possible.

- g) Project Evaluation. The FPIA representative will develop measures for evaluation based upon such factors as number of new acceptors and continuation rates. On the basis of the first year evaluation in Comayagua, it will be determined how fast the service program can be expanded to other areas of the country.
- h) Budget. Though the budget remains to be finalized by FPIA, the total first year cost will probably not exceed \$40,000, resulting in a per-patient cost of approximately \$12-\$14. This is quite acceptable for the first year, especially given the fact that it does not include the thousands of potential acceptors outside of Comayagua to be reached through the ANACH Women's Organization's family planning education program.
- i) Technical Support. Ms. Nowakowska has indicated her plan to be present for part of the initial April training session and beyond to assist in project implementation. Thereafter she will be available as necessary and feasible.

#### PROJECT IMPLEMENTATION PLAN

<u>COMPLETION DATE</u>	<u>ACTION UNDERTAKEN</u>	<u>PERFORMED BY</u>
11/21/76	Preliminary Project Design	Consultant
12/15/76	Submission of Final Draft of Project Proposal to FPIA, USAID and ANACH	Consultant
1/15/77	Review and Comment by FPIA, USAID and ANACH	FPIA, USAID, ANACH
2/1/77	Final Project Authorization	FPIA, USAID
2/15/77	Hire Project Staff	Project Director
3/1/77	Develop detailed project work plan, job descriptions, financial system, logistical network and reporting and evaluation system	Consultant, Project Director, FPIA
3/21/77	Initiate Project	ANACH
11/15/77	Full-scale project evaluation	Consultant; FPIA
12/15/77	Submission of expanded nationwide ANACH project proposal to FPIA & USAID	Consultant; ANACH; FPIA
1/15/78	Initiate ANACH nationwide family planning project	ANACH

### III. CONCLUSION AND RECOMMENDATION

Rarely does one see a proposed family planning project with such a high potential for success as this project with ANACH. It has the enthusiastic and committed support of ANACH from the leadership to the potential acceptor in the fields. The organization itself is strongly and relatively free from outside pressure that might otherwise hinder its efforts. Technical support is readily available from experts, both from within the country (HFPA) and from international sources (FPIA).

The USAID Mission gave its approval to this project prior to the departure of the consultant and Ms. Nowakowska from Honduras. Project staff have been selected and arrangements finalized for training to begin on April 13. It is highly recommended that AID/Washington approve this final project proposal, to be submitted by the middle of March, 1977, without delay.

## FEBRUARY

## FEBRUARY 20 THRU FEBRUARY 28

- February 20 - Arrive Tegucigalpa. Confer with John Peabody, USAID Mission Population Officer.
- February 21 - Continue conference with John Peabody and Anna Nowakowska, Acting Regional Representative for Latin America, Family Planning International Assistance.\* Review of proposed ANACH Family Planning Project proposal.
- February 22 - Confer with Alejandro Flores, Executive Director of Honduran Family Planning Association, regarding FPA's role in ANACH project. Continue project discussions with USAID personnel.
- February 23 - Travel to San Pedro Sula. Meet with Antonio Julín, Secretary General of ANACH and other members of ANACH Executive Committee. Confer with Rolando Leonard, Director of American Institute of Free Labor Development.
- February 24 - Confer with ANACH National Executive Committee. Finalize project work plan and budget, pending final pilot project site review.
- February 25 - Travel to Comayagua for final site review with Roque Flores, Project Director. Meet with other proposed project staff members. Confer with Ministry of Health, Region V (Comayagua) Director of Health Services.
- February 26 - Return Tegucigalpa. Finalize working arrangements between ANACH and FPA with Alejandro Flores; FPA to provide training and Medical Advisor to ANACH.  
  
Report final project proposals to USAID Mission Director and staff.
- February 27 - Return Washington.
- February 28 - Debriefing in AID/Washington.

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\*All consultant activities from February 21 through February 26 undertaken jointly with Ms. Nowakowska.