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Analysis of Nutrition-Related Activities in Honduras

COMMUNITY SYSTEMS FOUNDATION

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PREFACE

This report is a summary of the work being done in Honduras concerning multisectoral nutrition planning. Due to the nature of the consultancy which provided this report, the focus is on the analyses which have already been done by Honduran agencies, the AID Mission and INCAP. The purpose of the consultancy was to help synthesize suggestions for improving multisectoral nutrition planning in Honduras and to help SAPLAN, AID and INCAP define some concrete steps which might be taken in the near future to improve this type of planning and project implementation. The goal is to assist SAPLAN and other Government of Honduras nutrition-related agencies to develop an analytical basis in the area of nutritional interventions in order to improve decision-making and delivery of services.

The Statement of Work for the consultancy was originally defined in three parts:

- A. A comprehensive, detailed description of all current supplementary feeding programs (including non-P.L. 480 Title II) in effect in Honduras, establishing guidelines for standardizing and centralizing within SAPLAN all pertinent information related to these programs;
- B. An executive analysis of existing analyses of reports about nutrition related problems and programs in Honduras (including recommendations for future collaborative programming between the Government of Honduras and AID); and
- C. An analysis of nutrition problem identification and response (including surveillance, nutrition education, supplementary feeding and recuperation) at the CESAMO, CESAR and community health worker levels.

Since the three parts are interrelated and require much of the same background information and analysis, the final report which follows first considers the tasks outlined under Part B of the Statement of Work (Section I of this report) and contains much of the background information and analysis

for the other two parts as well. Section II addresses the issue posed by Part A and Section III deals with Part C.

Due to the short amount of time spent in Honduras, the team, composed of James Eckroad, David Sahn and David Stanfield from the Community Systems Foundation, greatly benefited from the contribution of various individuals in Honduras much wiser in the problems and potentialities of Honduran development than short term visitors can ever be. Paul Hartenberger of AID was particularly helpful in summarizing the nutrition projects in which he has been involved. It became clearer during our visit, from the comments of numerous people working in the nutrition field, that Paul has been one of the major reasons for the success which these projects have had. Cristiana Figueroa of CONSUPLANE provided us with invaluable insights into the nutrition planning process in Honduras. Aldo Pineda from SAPLAN made intelligent and in-depth comments on the history of SAPLAN, its failures and achievements, and was frank in his appraisals and open in his self criticisms. The work of Rolando Godoy in SAPLAN pertaining to the extent and causes of malnutrition in Honduras was insightful and productive. The capabilities of Emirto Raudales in SAPLAN and his extensive experience in guiding the institution and building it into an effective nutrition planning agency provided invaluable orientation in the history and perspectives of the agency. The work of Roberta Palma of SAPLAN and Maria Teresa Menchú from INCAP with the nutrition surveillance system and their experiments with community diagnosis and analysis showed us where future efforts could have high probabilities of success.

The work done concerning the supplementary feeding systems was greatly facilitated by Santiago Valladares of AID, Margaret Gorecki of CARE, Carole Atonich of CRS, Roberto Rodriguez of the WFP, and Norma de Sierra of CONSUPLANE.

The section of the report concerning the Ministry of Health was made possible through the efforts of Dr. Gustavo Corrales, Moises Sanchez, Dr. Danilo Velasquez and Dra. Armada Estrada of the Ministry, Irma de Diaz of CONSUPLANE, Anita Siegel, George Moore and Thomas Hyslop of AID.

The input of Juan del Canto and Cesar Talvera of INCAP about the achievements and limitations of technical assistance concerning nutrition planning was fundamental. The comments of Jimmie Stone and Julio Schlatauer of AID about the long range inputs of AID into nutrition planning provided an interesting context within which to interpret the actions of the Mission, past and future.

In order to put the nutritional problem in Honduras in some perspective, we present the data on nutritional status, as shown in Table 1, which comes from various studies of children five years old or younger in a number of locations around the country. The sample sizes in each study are significant and the results are challenging for the nutrition planners. Second and third degree malnutrition ranges from 8% in one location to nearly 50% in another. The bulk of the areas studied showed this serious malnutrition to be above 34%! The present estimates are that some malnutrition affects nearly 75% of the pre-school population and nearly 50% of the school age population. More precise estimates of acute and chronic malnutrition are needed, but the available data indicate that malnutrition is of significant proportions.

The institutional and technical responses to this challenge are extremely important. What follows is a discussion of some of the current and proposed responses.

Table 1

Incidence of Protein-Calorie Malnourishment in Children Under Five in Diverse Localities

Source	Year of Study	Number	Percent Normal Weight	Percent with Deficient Wt/Age	Percent with Moderate or Severe Malnourishment
Francisco Morazán					
Tegucigalpa, Nueva Suyapa 1/	1975	213	19	81	42
Tegucigalpa (barricos marginales) 2/	1978	792	32	68	24
Colón					
Zona del Bajo Aguán 1/	1975	773	22	78	34
Cortés y Yoro					
Catorce comunidades 3/	1977	1,628	27	73	25
Santa Bárbara					
Santa Bárbara (Cabecera Municipal) 1/	1972	413	29	71	34
El Naranjito (Cabecera Municipal) 1/	1972	394	10	90	46
Copán					
Trinidad (Cabecera Municipal) 1/	1972	396	9	91	42
Ocotepeque					
Nueva Ocotepeque (Cabecera Municipal) 1/	1972	156	13	87	49
Intibucá					
Colomoncagua 1/	1974	104	7	93	34
Jesús de Otoro 1/	1977	434	27	73	46
Comayagua					
Siguatepeque, 6/ Minas de Oro 5/	1976	293	43	57	8
Valle de Comayagua (8 Mpos.) 7/	1976	1,614	32	68	21

Source: 1) Ministerio de Salud Pública.

2) Godoy R., "Estudio del Nivel de Salud del Niño Preescolar del Area Marginal de Tegucigalpa" Departamento Medicina Preventiva/UNAH. 1978.

3) Zúniga, Maricela, Evaluación del Estado Nutricional de la Población Menor de cinco años de la Región Sanitaria No.3 INCAP/USCG. Guatemala 1977.

4) Sánchez, O.R. Doctor en Medicina y Cirugía. UNAH 1977.

5) Donaire A., Tesis Doctor en Medicina y Cirugía UNAH. 1976.

6) Salgado Gilda, Tesis Doctor en Medicina y Cirugía UNAH. 1976.

7) Godoy R., Informe del Programa de Crecimiento y Desarrollo en Comunidades del Valle de Comayagua. Departamento Medicina Preventiva. UNAH. 1977.

MULTISECTORAL PLANNING IN HONDURAS

The creation of an institutional capacity to manage and impel the development process is a prerequisite for a country to alter its state of "under-development." This creative process may be part of a drastic revolution or it may be more evolutionary, but it undoubtedly is fundamental to the curing of social ills.

In Honduras an admittedly erratic process has been underway which has involved the creation of numerous development management agencies. In 1976 a new approach was undertaken by organizing a planning agency (Sistema de Análisis y Planificación de la Alimentación y Nutrición, SAPLAN) whose purpose is to plan and stimulate the implementation of programs to reduce the malnutrition rate in the country. The SAPLAN model is interesting not only because it is oriented toward the problem of malnutrition, but also because the planning system attempts to be "multisectoral." This means, in practice, that SAPLAN has attempted to coordinate the activities of a number of agencies (including ministries of agriculture, health and education, and agencies dealing with social welfare and agrarian reform) in the complex task of addressing the specific problem of malnutrition.

The development of this multisectoral nutrition planning approach in Honduras corresponds to a search during the late 1960's and early 1970's in a number of countries for a more adequate response to the nutrition problem. Several countries have introduced multisectoral planning, including Guatemala and El Salvador in Central America, with varying degrees of success.

While only a short time has passed since the creation of SAPLAN, perhaps it is not too early to inquire into the achievements and problems of multisectoral planning under Honduran conditions. This report can only begin that inquiry in the hope that some of the constraints identified and solutions suggested will stimulate those who are wise in the ways of institution-building in Honduras, and that these people will contribute to the improvement of program planning and implementation, and to the improved nutritional status of people in Honduras and elsewhere.

As an institutional innovation featuring multisectoral planning, SAPLAN has faced a number of challenges. A fundamental problem has been its struggle to interpose itself in a coordinating position with ministries which plan, finance and implement programs and which often have relatively great independence of central planning agencies. The introduction of the planning function in fundamentally capitalistic countries -- where such a role for the state is historically recent and widely suspected -- is understandably difficult. Such an agency can derive its power to influence ministries from a number of mechanisms, including budgetary control, high technical competency, and from structurally being in a position to be consulted about the utilization of state resources.

Budgetary control in some form is of obvious importance, but inserting SAPLAN into national budgetary processes during its creation proved to be difficult. The allocation of national resources followed already defined procedures which meant that changing these procedures would take some time. In order to begin the experiment, international resources were called upon, including financial support from AID* (with substantial commitment of national counterpart resources) and technical assistance from INCAP** to help fortify the human resources to be requested by the SAPLAN innovation.

The problems that SAPLAN has had in seeking out the collaboration and support of national and international institutions are symptomatic of a multisectoral planning agency attempting to establish itself. This creation of an institutional niche occurs in an environment which at times is relatively supportive, at other times not as supportive as it might be. The environment of SAPLAN is a complex one, composed of various Honduran ministries, themselves interlocked in complex ways, and numerous international agencies which have programs and capabilities of varying relevance to SAPLAN's mission. The success of multisectoral planning

*A grant of \$950,000 was developed to accompany a nutrition loan of \$3,500,000.

**INCAP has provided one advisor on a permanent basis to SAPLAN and numerous person/months of short term assistance under a grant from ROCAP.

depends in large part on how well SAPLAN intersects with this institutional environment. Some of the responsibility lies with SAPLAN and some with national and international support agencies. The first section of this report attempts to identify some of the achievements and problems encountered with each of these institutional arrangements, specifically the linkages among SAPLAN and other national agencies, the association between SAPLAN and AID, and the joint efforts of SAPLAN and INCAP.

Sections II and III of the report focus on particular planning issues, namely the coordination and control of food resources donated by foreign countries and the capacities of one national agency, the Ministry of Health, to become more heavily involved in nutrition projects at the community level. Both of these topics provide further insights into the problems faced by a multisectoral planning agency which attempts to introduce its criteria to institutions which traditionally and structurally are powerful and independent agencies.

SECTION I:

Achievements and Constraints of Multisectoral Nutrition Planning

1. The Growth of Institutional Capabilities for Multisectoral Nutrition Planning

1.1 The History of the Establishment of SAPLAN*

During the early 1950's in Honduras, as part of the growing public sector concern for the development of the country, the first attempts were made at identifying and trying to resolve the nutritional problems of the country. During that period, public awareness of the nutritional problem was heightened by a series of studies done in conjunction with INCAP which led to the creation of the Unidad de Nutricion within the Ministerio de Gobernacion, Formento y Salubridad. The principal concerns of that unit were for the delivery of nutrients to school age children and for nutrition education programs. It was during this period that the CARE school feeding program was initiated to help support this effort.

During the mid-1950's, the Unidad de Nutricion was transferred to the Secretaria de Salud Publica y Astencia Social, thereby creating the Department of Nutrition within this Secretaria. The school feeding programs were continued and special feeding programs created in hospitals and clinics for the children who were detected as having nutritional deficiencies. This detection and treatment of malnourished children by the health centers became the predominant approach toward the nutrition problem in Honduras through the 1960's.

In 1968 the "First Seminar on National Food and Nutrition Policy" was conducted which had a significant impact on the definition of the malnutrition syndrome. At that Seminar the results of the 1966 Nutritional Evaluation conducted jointly by the Government of Honduras and INCAP were presented. The results of that survey made two conclusions readily

*Based on the "Estrategia Para la Implementacion del Plan de Alimentacion y Nutricion," presented by SAPLAN to the seminar at Jicaro Galan in September 1979.

apparent: (1) that the nutrition problem in Honduras was an extremely serious one from the point of view of the proportion of the population affected; and (2) that malnutrition results from the interaction of a number of factors in addition to the traditional interpretation of disease as being the fundamental causal factor.

Partly as a result of the 1966 Survey and the 1968 Seminar, in late 1968 the Consejo Nacional de Nutricion y Alimentacion (CNNA) was created to begin to mobilize public resources to combat the nutrition problem. The Consejo was composed of the President of Honduras, the head of the Junta Nacional de Bienestar Social (the wife of the President), the Jefe de las Fuerzas Armadas, the president of the Banco Nacional de Fomento, and the ministers of Economia y Hacienda, Salud Publica, Educacion Publica, Recursos Naturales (Agriculture), and Trabajo y Prevision Social.

The first efforts of the CNNA were oriented toward community development through the Junta Nacional de Bienestar Social (JNBS) and also involved the publication of educational material concerning nutrition. The CNNA also stimulated the creation of some recuperation centers through the JNBS and the Ministry of Public Health. During this same period the Hospital Materno Infantil constructed a special unit for the treatment of malnourished children. Due to the widespread problem with goiter, the CNNA also initiated a program to iodize salt.

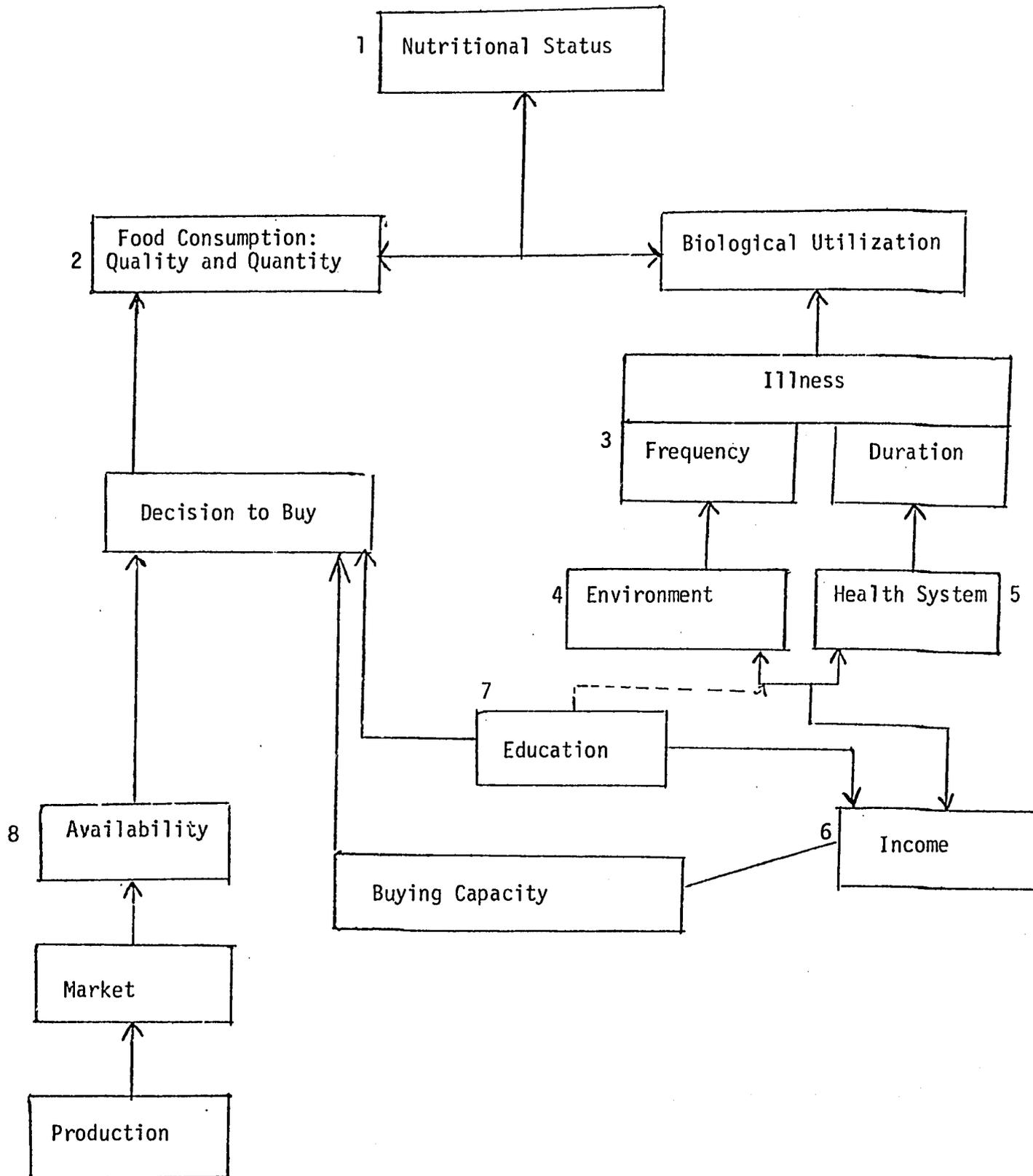
Since the primary function of the CNNA was to develop public policies concerning food and nutrition, in 1971, in conjunction with INCAP and the Consejo Superior de Planificacion Economica (CONSUPLANE), CNNA worked out a set of policies with the health sector institutions concerning food and nutrition, and helped define the responsibilities of the agricultural sector. In the 1974-78 National Development Plan, with the active cooperation of the Ministry of Public Health, CNNA and CONSUPLANE developed a number of explicit food and nutrition policies to be implemented during that five year Plan.

As a result of this work in the early 1970's, and the growing awareness of the multicausal nature of the nutrition problem, in 1974 the Ministry of Public Health sponsored a "Second Seminar on Food and Nutrition Policy" primarily in order to bring the various agencies together which managed projects with some impact on nutrition. After this Seminar the Ministry of Health again took the initiative and stimulated the discussion of the means to implement the policies outlined in the 1974-78 Development Plan. During the resulting discussions, the basis was developed for the creation of a multi-sectoral "Sistema de Planificacion de la Alimentacion y Nutricion." In 1975 the decision was made to carry out a study of the nutrition problem in Honduras and attempt to locate the geographical foci of the problem and its socio-economis bases. The technical assistance of INCAP, the financial assistance of AID and the commitment of various Honduran ministries and CONSUPLANE enabled that assessment, published in 1976, to be one of the more detailed and extensive studies of the nutrition problem in Central America. A number of conclusions were reached.

First, the development of a conceptual model to guide analysis and planning was shown to be highly useful. The methodology of the assessment was based on the use of a simplified diagnostic model of the principal factors which condition and create malnutrition. Although highly simplified (see Figure A), the model enabled the study team to draw on several specialities while maintaining a certain coherence to the inquiry. The model also demonstrated the necessity of a multi-factor approach to the nutrition problem and enabled the study team to define the central conditioning factors as follows:

- a. The inadequate distribution of income within Honduras.
- b. Inadequate production of foodstuffs traditionally consumed in Honduras.
- c. Inefficient marketing of these foodstuffs, especially the basic grains (corn, beans and rice).
- d. Weak public sector development programs and institutions.
- e. Inadequate access by the population to health services and the low level of environmental sanitation.

FIGURE A
 Diagnostic Model Used in the 1975 Nutrition Assessment



Source: CONSUPLANE, "Evaluacion de las Areas Prioritarias del Problema Nutricional de Honduras Y Sus Posibles Soluciones" 1976, p. 13.

- f. Lack of people trained in the field of food and nutrition.
- g. Inadequate awareness and information about the nutritional problem and its network of causal factors within the governmental ministries and other agencies.

The study team concluded that these factors produced a situation where the nutrition problem -- which was defined as serious in 1966 -- had not improved in 10 years: "The percapita food availability was not increased, and the access to health services continues to benefit only a small proportion of the population" ("Evaluation de las Areas Prioritarias del Problema Nutricional de Honduras y Sus Posibles Soluciones," SAPLAN, Honduras, 1976, p. 276). Around 75% of preschool aged children are malnourished and nearly 50% of the children in school do not reach standard weight for age measurements.

Given the complex set of conditioning factors and the continued severity of the nutrition problem of the population, the team concluded that the nutrition problem would have to be addressed by simultaneously developing programs in a number of sectors which would be targeted toward the most vulnerable groups. In order to develop a national nutritional strategy to coordinate and stimulate these multisectoral programs, the formal creation of a Sistema Analisis y Planificacion de la Alimentacion y Nutricion (SAPLAN) was proposed. Partly as a result of this recommendation and partly because of AID's conditions for a nutrition loan (i.e., that an agency be established to administer the loan), in early 1976 CONSUPLANE created a new department called the Departamento de Alimentacion y Nutricion within its Global Planning office (See Figure B for a partial organizational chart of CONSUPLANE and Figure C for the structure of SAPLAN). This Department acts as the administrative link between CONSUPLANE and SAPLAN. The coordinator of SAPLAN also functions as the chief of the Departamento de Alimentacion y Nutricion in order to directly link these two agencies.

As originally envisaged in Acuerdo 144 which legally created SAPLAN in October 1976, the new "System" is composed of six institutions: the

Figure B

Partial Organizational Chart of CONSUPLANE

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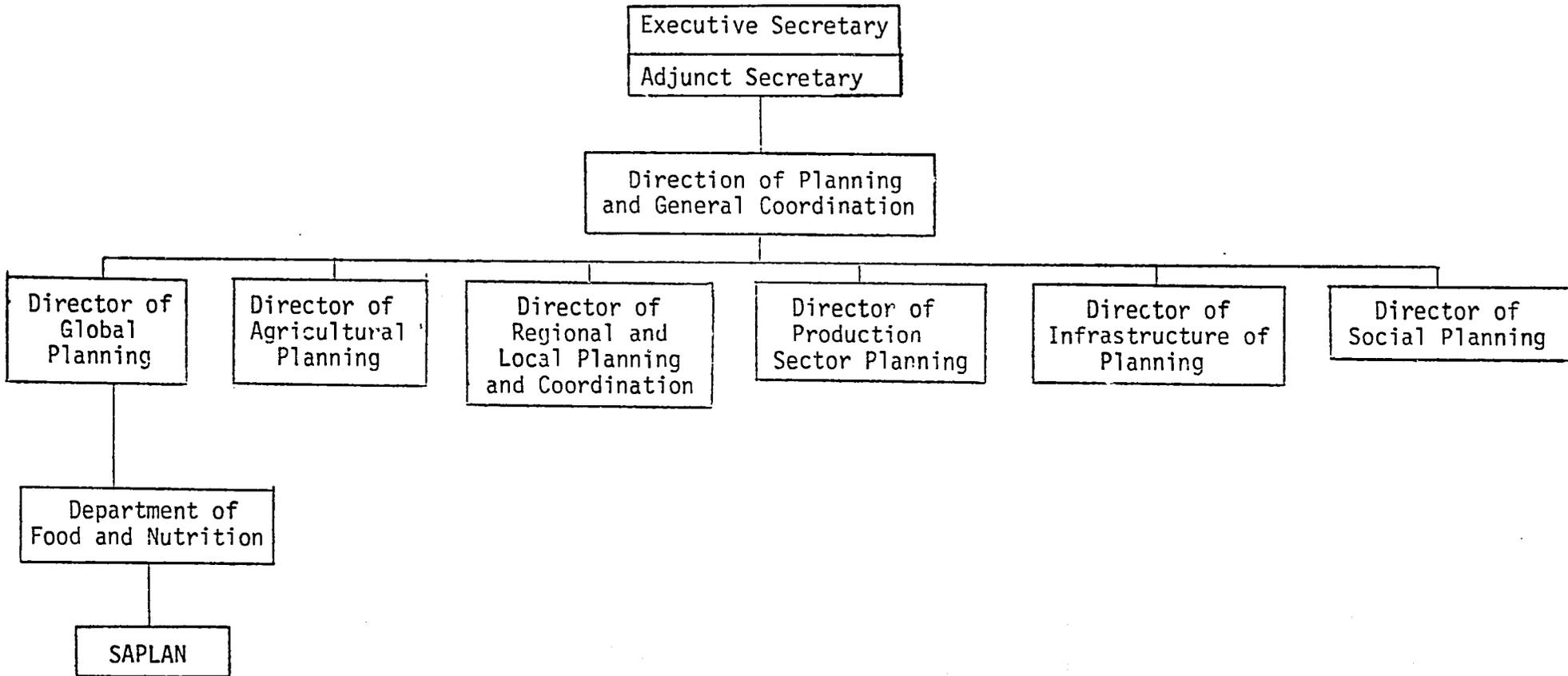
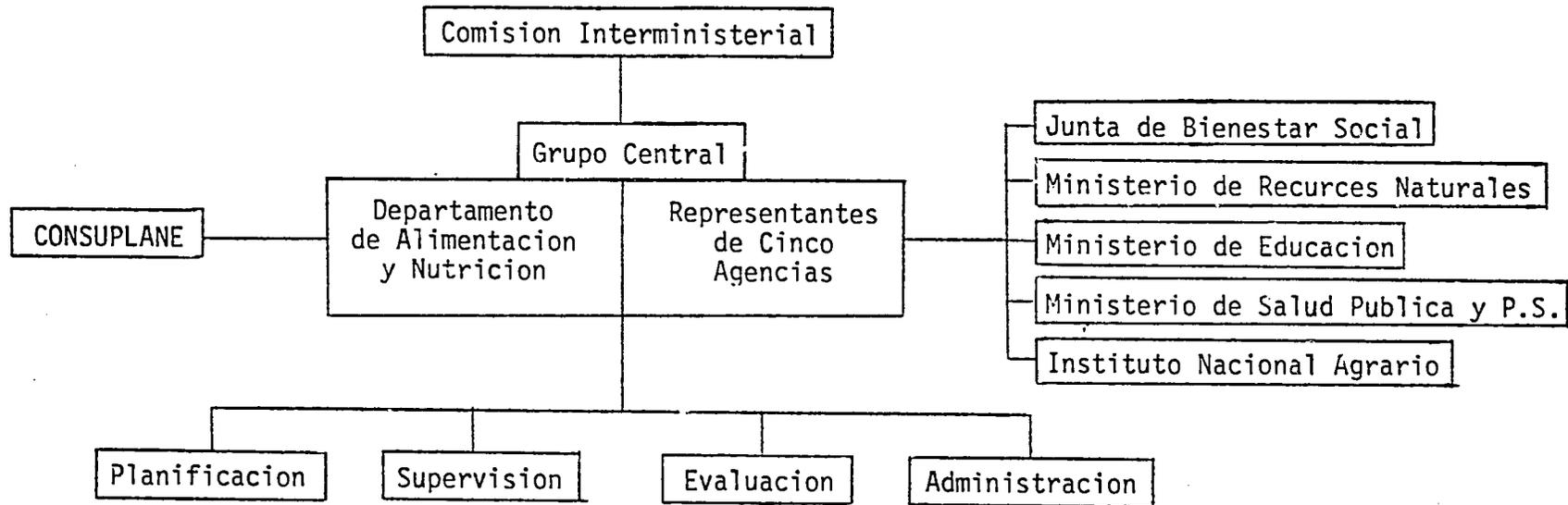


Figure C
Organizational Chart of SAPLAN



Ministries of Public Health, Education, Natural Resources, the National Agrarian Institute (INA, responsible for the agrarian reform), the National Social Welfare Junta (JNBS), and Department of Nutrition of CONSUPLANE. Each of the three ministries, the JNBS and INA nominate a representative to SAPLAN who works with the technical personnel from the Department of Nutrition of CONSUPLANE; this team comprises the Central Group of SAPLAN. The Central Group and the six cooperating institutions constitute the "System" called SAPLAN.

The principal functions of SAPLAN as a nutrition analysis and planning system are as follows:

1. Define a national food and nutrition policy.
2. Formulate national food and nutrition plans within the national development plans.
3. Analyze and make the sectoral policies and programs corresponding to the general objectives which define a strategy for solving the nutrition problem.
4. Coordinate the public sector programs related to food and nutrition.
5. Stimulate research in the field of food and nutrition.
6. Evaluate policies, plans, programs and projects, both existing and proposed, related to food and nutrition.
7. Identify and channel sources of funding for priority projects.
8. Stimulate the training of people in the field of food and nutrition.

In summary, SAPLAN is a unique institutional structure in Honduras which is composed of six separate agencies and which is charged with policy definition, planning, coordination of institutional interventions, evaluation of these policies, plans and interventions, and stimulation of research and training, all within the food and nutrition field. The effort which has gone into the creation of this institutional structure has been significant, and to date the increasing awareness of the nutrition problem at intermediate levels in the public sector is one of the major achievements of those who

recognized the importance of multisectoral analysis and planning for reducing the level of malnutrition in Honduras. Of critical importance for the creation of this new institutional structure are the technical support offered through INCAP and the financial support of AID. INCAP has provided numerous person/months of assistance; AID has provided over \$4 million in grants and loans. Parts 2 and 3 of Section I will discuss these supporting programs.

With the creation of a new institution, new programs are expected, and several have in fact been instituted as envisioned by Acuerdo No. 144. The first program was the preparation of the National Food and Nutrition Plan which was completed in early 1979 and incorporated into the National Development Plan for 1979-1983.

1.2 The National Nutrition Plan (1979-1983)*

The Nutrition Plan resulted from adopting a new focus for the nutrition problem rather than continuing with the essentially public health orientation of past efforts. This new focus has evolved from three main assumptions:

- a. The nutritional status of the population is the result of the complex interaction of factors which produce and maintain the country in a state of underdevelopment. The determining factors, therefore, are not easily isolated from broader structural conditions, and in fact are an essential part of that structure.
- b. The origins of the nutrition problem are multiple, but this does not mean that the conditioning factors are all of equal importance; some are more important than others.
- c. The deficient nutritional state of the population in turn affects the social and productive character of the country as a whole.

Building on these assumptions, the model in the Plan presents the behavior and interrelationships among distinct social and economic

*This section is a summary of the Plan de Alimentacion y Nutricion 1979-1983.

variables which affect the nutritional status of the Honduran population.

1. The social structure. The Plan notes that the social structure of Honduras has long been characterized by a high degree of concentration of wealth, which produces a situation where approximately 80% of the population have a very low standard of living and a high degree of malnutrition. This concentration of wealth in a small proportion of the population is determined by the productive apparatus of the country, particularly land tenure and the methods of land use, as well as the organization of production and other factors which, in turn, are conditioned by Honduran internal history as well as by external forces. These internal and external factors include the level and type of investment, conditioning of financing, technology available, exportation quotas, etc.
2. Public sector policies and structures. The above mentioned socio-economic factors are part of the complex social fabric which also is reflected in the political sub-system. This sub-system determines the orientation of the state towards the change (profound, moderate or superficial) of the conditions or factors which produce the worsening nutritional state of the population. The political system produces programs and projects of the state institutions which, in turn, affect the decisions about the production of goods and services of that public sector as well as the private sector.
3. Level of income of the population. The interaction of the internal and external sub-systems of the economy influence the amount of goods and services which are available in general, as well as the distribution of goods and services among the various strata of the population. The availability of basic foodstuffs, health and educational services, housing, social security and other social infrastructure, the rate of employment and the rate of return of the factors of production are the principal determinants of the level of income of the population.

4. Malnutrition. The consumption and use of goods and services (including the biological utilization of foodstuffs) is a function of the social position of the family (its purchasing power especially) and its access to these goods and services (principally health, housing and education). In turn, this capacity to consume determines the nutritional state of the members of the nuclear family.
5. The vicious circle. The nutritional state of the individual influences his capacity to work, his intellectual and his physical productivity. The malnourished individual is unable to participate fully in the economy and thereby unable to acquire the goods and services which are available. Nor are the malnourished able to modify the social structure which historically has determined their low level of living. Malnutrition, then, is not only the result of inequities in the social system but also is a factor that contributes to the maintenance of these inequities.

On the basis of this admittedly simplified model of the socio-economic and political processes within which malnutrition is imbedded, the Plan outlines the expected contributions of the different social and economic public sectors in the food and nutrition field in Honduras:

- Agriculture: Produce the basic foodstuffs which will assure their availability for all of the population, and increase the productivity of the sector in order to improve the purchasing power of the low income strata involved in agriculture.
- Health: Develop activities oriented toward family health, nutrition education and improvement of sanitation, so that the at-risk population can better utilize the food which they consume.
- Education and information: Create improved food consumption customs, disseminate knowledge concerning nutrition, and train human resources for the development of programs and projects in nutrition.

- Commerce: Improve the marketing of basic foodstuffs.
- Industry: Utilize food products in their entirety and encourage the development of new technologies for improving the nutritional quality of food.
- Economy: Define and apply nutritional criteria in the implementation of public policies relating to prices, exportation, importation, donations, subsidies, bonuses, economic stimuli and costs of production of basic foodstuffs.

These sectors should act in a coordinated manner in order to solve the country's nutritional problems. These problems are given the following priority: protein-caloric malnutrition, nutritional anemias, Vitamin A deficiency, goiter and other nutritional diseases.

Within the population of Honduras, rather than dealing with isolated malnourished individuals, the strategy is to focus attention on families or groups at high risk of malnutrition. These social groups are given the following priority in the Plan:

1. Children less than two years old
2. Pregnant and lactating mothers
3. Children between two and four years of age
4. Children between 5 and 14 years of age
5. Adults

The Plan gives higher priority to people in rural areas and to marginal population groups in rural and urban settings.

In terms of food resources, the Plan gives higher priority to: the production of basic foodstuffs over the rest of agricultural products; the internal supply of basic foodstuffs over the exportation of food;

the orientation of natural and capital resources toward the internal production and supply of basic foods rather than other uses of these resources; the crops which supply at the least possible cost the most calories and proteins in relation to other agricultural products.

With these orientations and priorities, the Plan develops short and long range strategies as well as specific programs and projects designed to achieve nutritional objectives within the priority guidelines. The principal strategy of the plan is based on the integrated and simultaneous attack on the basic causes which determine the deficient nutritional state of the majority of the population. It is hypothesized that a planned development will accelerate the improvement of the nutritional condition of the population, and that such an approach will show more rapid effects if the structural causes of malnutrition are eliminated, especially the external dependencies characteristic of Honduras. The three-pronged attack is aimed at: (1) the factors which condition the insufficient availability of food; (2) the low purchasing power for the consumption of nutrients for the majority of the population; and (3) the deficient biological utilization of the nutrients consumed. Planned development activities require the harmonious and coordinated action of the institutions responsible for the various interventions in order to utilize rationally the available resources and achieve a greater nutritional impact.

Another achievement of SAPLAN is the experience acquired in the coordination of various agencies which implement projects relevant to nutritional status of the population. Three major types of projects have been developed with some SAPLAN input. The first is the environmental sanitation work being done through the Ministry of Public Health which is attempting to build over 5,000 shallow wells and nearly 29,000 latrines as well as some small aqueducts. This project in itself represents over 50% of the resources presently being managed as part of the nutrition program financed by AID, if the food-for-work projects are not included. While there have been problems with this project, as in any project, substantial work has been accomplished and,

perhaps more importantly, useful lessons have been learned about the programming of multisectoral projects.

The second major type of project has been the production of food. The JNBS has been involved in community projects which attempt to help rural community residents organize themselves and, with some financial, material and technical assistance, improve their incomes. The Ministry of Natural Resources has carried out projects dealing with the production and local consumption of soybeans, sorghum, and the construction of fish ponds. These projects have had some impact on the local availability of foodstuffs, although full evaluations have not been made and the initial stages of these projects have, in some cases, not been too encouraging. Experience has been gained, however, and such experience can be invaluable in the future design and implementation of projects which emerge from the 1979-83 Five Year Plan.

Another kind of educational activity is oriented toward improving the processing plant which is to produce a mixture of corn and soybean meal that could be used as a food supplement. A number of agencies have combined to do the feasibility study and to collect the necessary resources to construct the plant. The success of such a venture depends on the market for the product, which under present conditions is largely in the public sector (especially the Ministry of Education's school feeding program and the feeding programs in the Ministry of Health). Due in part to the increased availability of donated food from the U.S., the administrative costs of substituting the maisoy blend for the donated food are sufficiently great, especially for the Ministry of Health, that the public sector market cannot be guaranteed. This lack of commitment from a key ministry has delayed the approval of the project indefinitely, although the soundness of the idea may stimulate its eventual approval. The project itself was developed through the collaboration of a number of agencies with the close participation of personnel from SAPLAN's Central Group, and is an example of both the advantages and difficulties of multisectoral nutrition planning.

(See Section II for more details on the Supplementary Feeding programs and their impact on Honduras' food and nutrition problems.)

A third type of program which has been carried out with SAPLAN input is nutrition education. One kind of education program is that which attempts to raise the salience of the nutritional component of many public sector programs. There is a short supply of public functionaries who are trained in community development, community health programs, the design and implementation on a regional level of social services and delivery systems of various kinds (particularly those which have a direct impact on nutrition). SAPLAN has sponsored a number of courses and workshops aimed at these public sector functionaries, including a successful seminar in 1977 on the nutritional problem and possible solutions.

Another kind of educational activity is oriented toward improving the information and knowledge levels of the population as a whole concerning the proper use of foods in order to maximize their nutritional contribution. The Ministries of Education and Health have been involved in the diffusion of nutrition information, mostly by way of radio programs.

Again, evaluations of these educational programs have not been carried out, and their precise effects are unknown, but at least the subjective feeling is that the work with courses and seminars has led to a greater awareness of nutritional problems and a growing willingness to work with SAPLAN in developing programs to combat these problems, although the extent of this willingness is not as great as might be desired.

In summary, the principal achievements of SAPLAN in the three years following its initiation are: (1) the successful formulation of a Food and Nutrition Plan as a part of the National Development Plan for 1979-83; (2) the launching of a series of food and nutrition projects by the implementing agencies which comprise SAPLAN; (3) the heightened awareness of public sector functionaries of the nutrition

problem; and (4) SAPLAN's improved capabilities to design and manage programs which may have a favorable impact on the nutritional status of the Honduran population.

2. Constraints Which Limit the Effectiveness of Multisectoral Nutrition Planning

While the achievements of the first three years of the SAPLAN experience have been significant, problems have been encountered which have made those achievements less than they might have been. To describe these deficiencies, this report has to depend on the existing analysis of SAPLAN and associated agencies and, therefore, little will be presented here that is not already being discussed among the agencies of SAPLAN and the supporting groups.

The intent of this report is to summarize these discussions and to give them some analytical and programatic framework. However, as in any summary, the subtleties of the various arguments will likely not be reflected. Such subtleties are extremely important where a number of institutions are attempting to collaborate on creating a new approach to development planning. The reader of this report should interpret the following discussion of "deficiencies" somewhat liberally and in the spirit of constructive comment in which they are made.

2.1 Deficiencies in the Administration and Formulation of the First Set of Nutrition Projects During 1976-1979

2.1.1 Administrative background

At various times since its inception, SAPLAN has become involved in conflicting activities which made heavy drains on its scarce human resources. One such activity is the resolution of innumerable administrative and organizational questions which arise during the creation of a new administrative structure and the maintenance of that structure over time. Staff has to be selected and the standard

operating procedures of a new government agency have to be learned. Perhaps more importantly, as an administrative layer between AID and numerous Honduran agencies, SAPLAN's administration has had to adapt to the peculiar procedures of both types of institutions. SAPLAN has continually had difficulty in the processing of administrative matters, from securing the payment of salaries to the processing and approval of bids from contractors and sellers of materials. The funds flow from AID to the various agencies, but first pass through the administrative apparatus of SAPLAN. As presently constituted, SAPLAN must approve all expenditures of the various implementing agencies which compose the system. The dual nature of SAPLAN -- on the one hand, a system composed of six implementing agencies (really five since CONSUPLANE is fundamentally a coordinating institution and not one which actually implements projects) and on the other, as an independent agency with its own dynamic and requirements -- is a fertile ground for institutional confusions and jealousies. Having to deal with numerous national agencies and AID under this dualistic administrative mandate does not simplify matters for SAPLAN.

One of the constraints during this initial period has been the administrative situation in which SAPLAN has been constructed. The implementing agencies and AID as the funding agency rub against the SAPLAN interface, and SAPLAN has to bear the criticisms of both sides as they pertain to "administrative inefficiency." Although some of these criticisms are warranted, certainly further thought should be given to the structural situation in which SAPLAN has to operate as this situation is one of the principal constraints to effective administrative action. At the same time, an ongoing search should be conducted for ways to improve the internal administrative structure and procedures of SAPLAN itself.

2.1.2 Administrative problems

One immediate result of this general administrative dilemma for SAPLAN has been the inability of the Honduran and AID bureaucracies to operate smoothly and to reach agreement on the minimum set of

administrative procedures which satisfy the legal requirements of both governments. The difficulty in merging the administrative apparatus into functioning field programs is not unique to multi-sectoral planning projects; nevertheless, this complex dilemma is only exacerbated in such projects where the number of agencies is large and the necessary administrative linkages great.

The bureaucratic difficulties have resulted in logistic problems, such as in getting the necessary supplies, material as well as personnel into the field and into the local communities selected for action. These difficulties have hampered both the environmental sanitation project and the community development projects of the JNBS. As a result of administrative delays, instead of there being widespread grassroots support for SAPLAN and the agencies which compose the system, there is a certain anti-SAPLAN sentiment which derives from promises being made and then not delivered. Of course a certain amount of this sentiment is to be expected, and what exists may dissolve when the administrative procedures get resolved, but some attention should be paid to these negative social consequences of action designed to alleviate social problems.

A second problem, related in part to administrative difficulties but also deriving from a "pilot project mentality," has to do with the slowness and cost of the projects which are designed as small scale pilot projects. These tend to become the focus of inordinate administrative, logistic and intellectual resources, in order to learn from the project as well as to guarantee its success. This overcommitment of resources and time to such projects makes their cost very great and probably prohibitive from the point of view of program administrators who make the decision about expanding a pilot project into a regional or national one. While a pilot project may be effective in reaching its goals, it may result in a decision to not implement it on a wider scale due to the great human and financial expense. To a certain extent this danger is apparently plaguing the highly significant and potentially useful

Nutritional Surveillance Project in Danli, and care will have to be exercised to build administrative bridges out of the "pilot project island."

2.1.3 Planning as foresight or response

In a country such as Honduras where the central planning function is of relatively recent origin* and has been introduced into the governmental structure gradually, there is an understandable tendency to build up a national plan from the institutional responses of the agencies which have traditionally had a great deal of autonomy. A common result is what some people have called the "shopping list" approach to planning, or the "staple gun" technique, where the desires of the various ministries are simply collected by the central planning agency and collated into a national plan.

Of necessity, SAPLAN's first three years did not have the framework of a developed five year nutrition plan within which to operate. The historical constraints on central planning and the particular difficulties of not having an approved planning framework within which to operate produced a tendency in SAPLAN to embark on projects suggested by individual agencies, without there being a clear ordering of such projects, little control over their geographic location and a reduced ability to make sure what projects were being complemented by actions from all relevant agencies in the proper sequence.

SAPLAN's self-evaluation** of the experiences to date with nutrition project formulation and execution summarizes the difficulties which have been encountered with these projects. These difficulties include the following:

1. In many cases, the process of project design did not sufficiently

* CONSUPLANE was formed in 1974.

** Estrategia Para la Implementacion del Plan de Alimentacion y Nutricion, 1979-83.

analyze the potential nutritional impact of these projects. While some nutritional impact was expected, the exact calculations were not sufficiently detailed so as to specify the impact. As a consequence, some projects are only experimental with a limited number of people being affected. Such a situation would be acceptable if procedures were in place to evaluate the impact of the programs on even a small number of people so that the project could be modified, but such procedures are apparently not being sufficiently implemented.

2. Although substantial effort went into the design of the projects, experience in their implementation has shown that certain regional factors that affect nutritional status were not taken into account. This probably resulted from the limited input of regional personnel who have knowledge of local conditions, and who would have the responsibilities for implementation. The limitations on the participation of the regional program people in the project design has meant that certain local conditions were not foreseen and, perhaps more importantly, that the degree of commitment of these local technical people to the projects has at times been low.
3. The projects themselves emerged from a planning and design process which was not sufficiently multisectoral. Some agricultural projects, for example, were well designed to increase the production of nutrients, which is the basic concern of the agricultural agencies responsible for their implementation. However, the on-farm or local consumption of these nutrients has apparently fallen below expectations. In order to begin with specific projects as quickly as possible -- a basically sound technique -- SAPLAN has had to incorporate projects into its nutritional logic which did not emerge from extensive, detailed multisectoral discussions, but rather from the sectoral procedures which had been the predominant methodology. An active perceptive evaluation procedure would enable SAPLAN to learn even from these initial

sectorally designed experiences, but such activities have not been as strong as they might have been.

Having a five year nutrition plan now may help to avoid some of these difficulties in the future, and it is undeniable that the projects which were begun in the first period have contributed to the experience of the individuals and agencies involved. But serious effort will still have to be expended in the future to avoid the "staple gun" errors of the past, since basic conditions favoring such an approach still exist.

2.1.4 Participatory planning

SAPLAN is at this time a central planning agency in a country where at least the common mechanisms for linking such an agency to the social groups which are in most need of state subsidies are weak and in a constant state of flux (e.g., political parties often fulfill this linkage function, as well as elected congresses, both of which are only being planned for re-introduction into Honduras). Problems of what might be called "top-down" planning creep into such a structure almost unavoidably. Without there being significant input from local groups such as unions, farmer organizations, cooperatives and the Patronatos into the planning process for which SAPLAN is responsible, then it is difficult to give an internal coherence to the resulting plans and projects; and, insufficient manpower is available for assuring that the quality of the projects and their resources correspond to the real needs of the poor, especially the rural poor who represent the pool of malnourished people targeted by SAPLAN for special consideration. Linkages between planners and poor people are never easy to construct and are especially difficult where they have not grown out of specific historical experiences. However, one of the constraints on SAPLAN as it attempts to reduce malnutrition through state-initiated projects is the fact that the initiative for the nutrition program lies with the state (in many cases), and does not emerge out of the efforts and concerns of people themselves. The decision made at the Jicaro Galan conference to develop community projects in areas of high

nutritional priority, perhaps using some of the techniques for community diagnosis and planning developed in the Danli project, will hopefully begin to forge the necessary planner-people linkages.

2.2 Deficiencies in the Organization of SAPLAN

One fundamental purpose of multisectoral planning is to coordinate the work of implementing agencies at the national, regional and local levels. This coordination is valuable to the extent that it improves the operating efficiency of these agencies and maximizes the impact of their separate programs. When properly functioning, a multisectoral planning agency can take advantage of scale economies and complementarities, and avoid the duplication of programs which tend to negate or reduce the impact of individual programs. A multisectoral planning agency such as SAPLAN provides the opportunity for the action agencies to work with each other as equals, while at the same time creating an institutional environment for resolving differences among them.

To generate these benefits is not at all easy. Institutional loyalties and desires for maximizing institutional autonomy interfere with efforts to create a multisectoral environment. SAPLAN is a system which is composed of six agencies, each with different programmatic responsibilities; nevertheless each shares some common concern for improving the nutritional status of the Honduran population. The search for common purposes and principles attempts to supercede the divisive forces.

The institutional structure of SAPLAN, however, has not proved to be as adequate for coordinating and stimulating action among these agencies as it might be. The evidence that this structural problem exists is the often cited lack of action on the National Nutrition Plan, even though the Plan has been in effect for nearly a year. The problem apparently lies in the lack of a clear strategy and organization for stimulating the proper execution of the Plan. The level of inter-agency coordination is low, the resources being moved into the field to combat malnutrition are insufficient, and the evaluations and control of the interventions which are being implemented have been inadequate.

As a partial response to these problems, SAPLAN organized the Jícaro Galán conference which called together representatives of each implementing agency and institutions offering technical and financial assistance to analyze past achievements and problems, and to attempt to devise and approve a strategy for implementing the 1979-83 National Nutrition Plan. That meeting made significant progress in upgrading the awareness of what SAPLAN has been able to do as well as of what institutional blocks apparently exist which have created difficulties for the Plan's implementation.

However, heightened awareness of the Plan and a conviction that it should be implemented in certain ways is only a partial solution. One of the concerns of the conference was what might be wrong with the organization of SAPLAN itself which might be corrected to avoid the repetition of these problems. There are a number of actions which could be taken, including the following:

1. Modify Acuerdo No. 144 so as to explicitly create a Council of Ministers which would meet periodically to review the plans and programs of SAPLAN and give their support to them, so as to explicitly commit their ministries to the task which SAPLAN has defined. The Acuerdo could also be modified to explicitly state the basic objective of SAPLAN as being to reduce the rate of malnutrition of the population through its planning, analysis and coordinating activities. This explicit statement of a programmatic nutritional responsibility might help SAPLAN to focus its energies on high impact nutritional interventions and would help justify SAPLAN's interest in the evaluation of such interventions and future program design even where other agencies actually implement the program.
2. Since SAPLAN is administratively linked to CONSUPLANE, it would seem appropriate to define the responsibilities of different persons within the central group of SAPLAN through the issuance of regulations (as would normally be done within CONSUPLANE). That some further clarification of duties and responsibilities is highly

desirable was the main conclusion of the Fortin y Lagos study and is generally recognized as a need within SAPLAN. One particular difficulty is the role in SAPLAN of the permanent representatives of the various Ministries. The definition of this role and the specification of specific duties and expectations is critical to overcome the lack of participation in SAPLAN activities which has occurred in the past, and to utilize efficiently the available human resources for nutrition analysis and planning which are in such short supply in Honduras.

3. The qualifications of the representatives are also important to consider. To date the procedure has been for each of the five agencies to name a representative from within the agency. The health sector representative is from the Human Resource Development division of the Ministry of Health; the representative of the agricultural sector comes from the administrative section of the Ministry of Natural Resources; similarly, the representatives of the Instituto Nacional Agrario, the JNBS and the education sector come from various departments and sections of their respective ministries.

Since SAPLAN is essentially a planning and analysis agency, it would seem appropriate that the representatives come from the planning section of the relevant agencies. The objective would be to have representatives who can contribute technically, on a long term basis, to the basic activities being undertaken by SAPLAN (program analysis, planning, coordination and evaluation). The separation of the institutional support function from the technical function by creating a Council of Ministers, and by incorporating representatives with specific capabilities and duties within SAPLAN, might help to bridge the gap between SAPLAN and the implementing agencies and help stimulate them to execute the designed projects and programs.

4. A certain amount of institutional jealousy surrounds SAPLAN. SAPLAN has attempted (1) not to infringe on the previously defined

responsibilities of various agencies, and (2) to contribute to the strength and effectiveness of the action agencies which presently exist. The position is strongly and widely held that SAPLAN is -- and should continue to be -- a planning and not an implementing agency. The strategy in creating SAPLAN has focused on attempting to strengthen existing organizations and, if necessary, to redefine their functions rather than create any more new actors. This strategy is commendable and probably realistic, yet at times it conflicts with the need to maximize the effectiveness of SAPLAN's nutritional mandate. It has often been observed that programming and budgeting in development planning should coincide if coordination is a desirable outcome. To a certain extent, having the AID funds flow through SAPLAN has stimulated the coordination of budgeting and programming, yet the resistance and problems which have emerged as a result of this arrangement are significant. In part this opposition can be neutralized through the success of the SAPLAN projects; at the same time, such opposition can reduce the probabilities of this success. The efforts expended at making known the SAPLAN mandate and operating within the established channels have been substantial, but continued energies are needed to explain the nutrition logic and the projects which flow from it, and to gain the support of functionaries throughout the public sector.

2.3 Problems in Maintaining an "esprit de corps" within SAPLAN

The difficulties in motivating functionaries, especially those in planning agencies whose daily work lies somewhat removed from the "real world," are found in every country. Although not as afflicted as many agencies, SAPLAN has not been immune from these problems, and some thought should be given to the possible causes and means for increasing the commitment of SAPLAN's intellectual workers to their jobs.

Public sector employment in Honduras is characterized by low salaries and, in many instances, a feeling of powerlessness. While the question

of salaries is endemic and probably unsolvable in the short run, certain measures could be taken to combat the feelings of powerlessness and frustration which, at times, afflict the SAPLAN employees.

One of the difficulties has been the lack of commitment to a philosophy of institutional learning, and a recognition that not every intervention will work, but that failures can have positive outcomes. The design and implementation of project evaluations is critical in this regard. Perhaps the periodic publication of specific project reports, and/or the devotion of certain resources to the organization of or attendance at professional conferences for SAPLAN personnel would be helpful.

In general, the model of the causes of malnutrition which SAPLAN has developed points to the interventions which have the best chance of attacking the root causes of malnutrition. But in exercising the "art of the possible," the constraints on developing social programs which really do something about these root causes -- the distribution of income, for example -- are substantial. Carrying out a really effective and extensive agrarian reform and distributing land in a more egalitarian fashion is extremely difficult. Enforcing the minimum wage law is also difficult. Increasing the access of the population to basic social services is a long process which must compete with other demands on the nation's income. When faced with these obstacles to the true transformation of the social structure, alternative programs do not affect the fundamental problems and only give the impression of action so as to defuse pressures for more substantial and profound social transformations.

A planning agency, however, has the unique opportunity to actually test some of the propositions: To what extent is it true that food distribution programs, for example, are short run solutions (palliatives for some people), and to what extent could they be interpreted as income redistribution measures? What is the ideal mix of health campaigns and services with land redistribution programs?

Certainly the margins for social experimentation are limited, but to the degree that actions are being implemented, they should be designed so as to explore their real meaning and importance. Learning on the part of the public sector institutions would be enhanced, as would the awareness of private organizations and individuals, about the nature of the basic problems on the regional and local level and what can be done to counteract them.

2.4 AID and SAPLAN

The involvement of AID in the foundation of SAPLAN has already been pointed out. The commitment of resources and technical assistance on the part of AID has been fundamental in getting the SAPLAN experiment underway. Certainly, AID's future support to SAPLAN will be critical even if alternative sources of funding are developed. The program, which was begun in 1976, has earmarked a \$950,000 grant primarily to up-grade SAPLAN and directly support SAPLAN's efforts at acquiring needed personnel and getting the organization functioning. A loan for \$3.5 million was also signed in 1976 which has been used to finance the programs.

Because AID has been, and will probably continue to be, the principal international institution which directly supports SAPLAN, an important aspect of this report is to analyze the AID strategies, structure and operating procedures. It is very difficult, however, to try to associate specific characteristics to a USAID Mission because, to a large degree, these characteristics are the result of the philosophies and objectives of different individuals who come and go with fairly high frequency. In addition, the available documents often vary in presentation depending on whether these deal with projects or with overall Mission strategies. Hence, one picture is formed by talking to a project officer and reading the Project Paper which contains all of the ideas and language that are currently "in vogue" for a particular area such as nutrition planning. On the other hand, a very different picture may emerge when Mission-wide documents are considered and officers are

interviewed who have a much broader responsibility and, perhaps, a different point of view. Likewise there exist certain inherent, conflicting objectives such as between a person whose main function is to provide the maximum level of flexibility needed to get things done in the Honduran bureaucratic structure, and a person who is responsible for insuring that disbursements are made correctly and expenditures are properly accounted for.

While these problems are not unique to AID, they do appear to be particularly relevant in the context of multisectoral nutrition planning in Honduras. The scope of this report does not permit a detailed analyses of the AID Mission's structure and programs; nevertheless, an attempt has been made to describe AID's overall strategy in Honduras in order to understand how the Mission has reacted and how it is likely to react in the future with respect to nutrition planning.

2.4.1 AID Mission strategy

The AID Mission strategy in Honduras can be summarized as three main factors:

- a. the overall Mission goal is that of helping Honduras achieve economic growth with relative equity;
- b. this overall goal derives into programs targeted on the poor and oriented to helping the poor to satisfy their "basic human needs," including sufficient food, shelter, education and health; and,
- c. the Mission is committed to collaborative planning and program implementation with various Honduran governmental agencies and the "leveraging" of scarce Honduran and foreign resources in such a way as to maximize the positive impact of AID resources on the poor.

The basis of this strategy is the attempt to work with Honduran agencies to improve their capacities for managing the development process in their country; in particular, AID emphasizes the improvement of the lot of the poorer strata of society. AID's financial

resources are limited in comparison with those of some other donor agencies and those of the Honduran government and private organizations; they are even more insufficient when compared with the needs of a country like Honduras. As a result, the Mission strives for collaboration with Honduran agencies so as to define the best use of available but limited resources, both U.S. and Honduran.

In the case of the SAPLAN project, the clear identification of the poor as the principal target group, and the willingness of the Honduran government to create a new institutional response to attack a very difficult problem, indicates a significant correspondence between the SAPLAN experiment and the Mission's basic objectives. Indeed, the fact that AID has committed substantial resources to the multisectoral nutrition planning program would seem to indicate that the Mission recognizes this compatibility of objectives.

The questions which should be addressed are: (1) what is the commitment of the Mission as a whole -- as an agency -- to multisectoral nutrition planning? and (2) how can collaborative mechanisms in the area be expanded?

The development of collaborative relationships is always a shared responsibility. As already mentioned, a certain resistance on the part of Honduran agencies to becoming overly dependent on foreign support is to be expected. However, there have also been difficulties experienced by the AID mission in developing satisfactory collaboration especially concerning multisectoral nutrition planning as well as other multisectoral development efforts being launched by the Honduran government. The Mission strategy has not given great emphasis to the SAPLAN effort nor has it given high priority to the other multisectoral planning efforts underway in Honduras.

Of course it is not possible for the Mission's policies to address all development efforts underway in Honduras. Deciding on which problems can be addressed by the Mission is a function of AID guidelines (U.S. legislated) and Honduran plans and efforts. In

trying to decide what should be the foci of Mission activities, collaborating mechanisms should play an important role. AID, like other development institutions often has difficulties in sorting out what Hondurans are trying to do to develop their country, probably in part because the Hondurans themselves are not in agreement about development priorities. The Mission is composed of functionaries, many of whom are highly perceptive and have an appreciation of the complexities of the development process in Honduras. Sophisticated and intelligent analyses of the development problems of Honduras have been done with Mission financing, such as the 1975 Nutrition Assessment and the 1978 Agricultural Sector Assessment. However, partly because of AID's limited scope and funding, basic Mission planning documents do not clearly express an overall, coherent and viable model for the development of Honduras. Nor do they specify which development activities in Honduras could be best supported by the resources, both financial and human, which AID has to offer.

To say that resource limitations are primarily responsible for not developing an overall model, however, evades the issue of how to acquire these resources, or whether they should be acquired. The fact that the Mission has not prepared in a collaborative manner an overall plan for helping in the Honduran development process perhaps is an indication of the impracticality of such documents; also, it may indicate the Mission's difficulty in defining the central themes of Honduran development. Nonetheless, without arriving at some definition with counterpart agencies, there is little basis for the collaborative style which AID hopes to develop in Honduras.

The high quality of individual projects which the Mission has developed would indicate that the collaborative mechanisms do work, at least for certain types of projects (particularly in agriculture). This fact suggests that reasons other than the difficulties with collaboratively defining a model of Honduran development may also be

important to consider when trying to describe the Mission's commitment to programs involving multisectoral nutrition planning. One problem may be the past orientation of Mission strategic thinking toward "sectoral" analysis and programming.

The sectoral focus of the Mission is clear in that the Mission gives special emphasis to sectoral planning and analysis, development management, delivery systems and human resource development.

Of course not all sectors can be equally considered, given limited resources. So the Mission has emphasized the agricultural sector because of the importance of that sector in the Honduran economy and the predominance of rural poor in the Honduran social structure. The Mission has given first priority to rural development, primarily agricultural development, but now also includes rural-based small industry.

The sectoral approach used by the Mission derives from its conviction that AID's past involvement with scattered, unrelated projects unified only by the strategy of moving resources rapidly into the country was inadequate. Serious problems were encountered in the capacity of individual agencies to absorb these resources, and what were absorbed often moved at cross purposes with one another. Policy making and operation were split and fractured to the point where they failed to be mutually supportive and slowed the pace of achievement of development goals. Under these conditions, areas of obvious need were dealt with directly by projects which placed heavy claims on scarce Honduran resources.

The sectoral approach, then, has derived from a Mission concern for targeting resources contained in a number of projects concerned with the rural poor in a coordinated manner. This programmatic logic for sectoral coordination contrasts with the earlier Mission project approach, which had a largely "resource movement" basis and was not as concerned with impact or targeting those resources.

The Mission conclusion is that, insofar as Honduras is concerned, this sectoral strategy affords better possibilities for achievement of basic human needs objectives than any other strategy which has been suggested. In particular the Mission is convinced that, at least in Honduras, this approach is preferable to a project orientation which tends to be horizon narrowing rather than horizon broadening.

The basic arguments which justify AID's sectoral approach to development planning are similar to the arguments presented earlier in this paper for multisectoral planning, namely that through coordination of activities, greater efficiency in the use of resources will be achieved and greater impact on the target group will be obtained. There is no inherent conflict between the sectoral and multisectoral approaches. However, problems may arise for AID when the Honduran government creates multisectoral coordinating institutions to subject the sectoral programs to a certain discipline, and AID continues to work principally within a sectoral logic. A country's national development plan, of necessity, has to be multisectoral, since the interrelationships among sectors is axiomatic for development planners at the national level. Agriculture productivity cannot improve without the improvement of the manufactured inputs and marketing systems as well as the upgrading of human resources in agriculture. Health programs cannot have a lasting impact where agricultural productivity and farmer incomes are low and poverty endemic. Educational programs alone may help prepare people to move out of agriculture, but only with agricultural development programs can the opportunities be created to absorb and utilize better trained farm managers and workers. Even at the community level, the interrelationships among factors which create and maintain poverty is a fundamental fact of life. In Honduras a number of multisectoral development projects are being attempted, including the SAPLAN experiment, the national planning efforts of CONSUPLANE, the regional development planning activities of the Juntas de Desarrollo Regional, the PRODERO regional development project and the Aguan River Valley

project. In these projects institutional structures and technical capacities are being constructed -- at least to a certain degree -- to manage multisectoral development efforts.

Yet in the case of those multisectoral planning efforts which the country has launched to identify, plan and coordinate development programs, in some instances the Mission has not adopted an explicit procedure for collaborating with the efforts and helping to strengthen them. The Mission's movement away from a project-by-project methodology to a sectoral approach is certainly commendable and corresponds with Honduran efforts at coordinating resources among agencies which have similar or at least compatible aims and objectives. However, in the case of multisectoral planning and coordination, the Mission could conceptually and institutionally be more explicit and active.

How can this be done? First, more explicit recognition of the importance of such efforts by AID and the re-structuring of the Mission to enable greater communication among technicians and administrators who, from a multisectoral perspective, are in fact working on related projects. This recognition would help put the Mission more into phase with Honduran multisectoral development efforts. To the extent that multisectoral development planning works, such a re-structuring could help the AID projects to achieve their goals and would channel AID's technical, administrative and financial resources so as to strengthen the Honduran institutions and management capacity, and improve their capacity to be effective developers of their own country.

2.4.2 Administrative questions

Development planning, however, involves not just decisions about "what to do" but also the knowledge of "how to do it". This "how to" problem is a complex one for AID and the Honduran agencies involved in SAPLAN to agree on. The administrative difficulties of joining a technical and financial support agency such as AID with the various Honduran implementing and planning agencies are

immense. Different administrative traditions, laws and regulations make the administrative linking of AID with Honduras a challenge. Difficulties arise on both sides of the administrative channel, and mutual adjustments have to be made. However, since AID has access to alternative management techniques and wide experience with their use under different conditions, the Mission should take the initiative to prove to the Hondurans that certain administrative procedures required or desired by AID are more effective than those used by a particular agency. Should the new procedures not be demonstrably superior, AID should attempt to adapt the procedures to one more familiar in the Honduran context, often a difficult task but one which should be attempted when warranted.

Aside from these adaptive processes, the Mission could also take some unilateral steps which would improve its internal processing of administrative matters. Despite large amounts of overtime provided by the Mission staff, it is generally recognized that the Mission lacks personnel and has not operated its administrative apparatus as efficiently as it might. The voluminous correspondence which each employee struggles to handle takes substantial time and at times retards project implementation. However, the Mission's flow of information and management of project documents has recently been somewhat de-centralized so as to make it less cumbersome and more rapid, and thus reduce the possibilities for the creation of serious administrative bottlenecks.

Centralized project management which prevailed until recently within the Mission reduced the risks of error by spreading the responsibilities for Mission actions through the hierarchy. But this centralization tended also to overload certain points in the management structure and to reduce the time Mission personnel could devote to developing collaborative relationships with Honduran counterparts. From the point of view of Honduran agencies which work with AID, technical analyses and agreements about what

is better to do, which are reached after negotiating with the AID technical personnel, at times have not carried much weight inside the Mission. The collaboration in the development and evaluation of projects as well as their implementation between AID personnel and Honduran technicians has therefore not been as extensive as it might have been. As a consequence, the technical capacities of Mission personnel were not being used or developed to their fullest potential. It remains to be seen whether recent steps to decentralize project management and spread responsibility for implementation will effectively overcome these problems.

2.5 Technical Assistance and SAPLAN

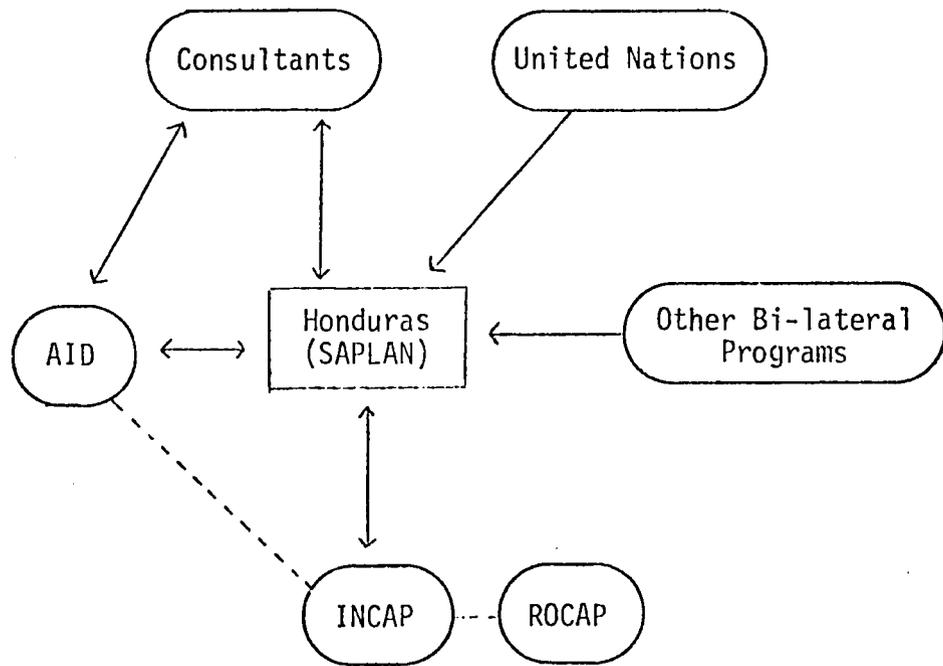
The establishment of a multisectoral nutrition planning agency in Honduras has, of necessity, involved the contributions of numerous technical agencies, of which the Instituto de Nutricion de Centro America y Panama (INCAP) is the most important. As a small country with a continuous problem of training and holding technical personnel, Honduras has traditionally called on outside agencies to provide technical guidance in the design and implementation of its development programs. INCAP is a regional center which has dealt with the nutrition problems of Central America and Panama for nearly 30 years and is strengthening its applied nutrition section which has been the arm of INCAP involved with the nutrition challenge in Honduras.

However, other agencies also provide technical assistance for nutrition programs, including AID, CARE, CRS and the United Nations agencies. The technical assistance environment of Honduras as far as nutrition is concerned is summarized in Figure D.

The INCAP program in Honduras is in part financed by a grant from the Regional Office for Central America and Panama of AID (ROCAP) and in part by the World Health Organization (WHO). Since the 1950's INCAP has been intimately involved with inquiry into the nutrition

Figure D

The Technical Assistance Environment
of Honduran Nutrition Planning



problems of Honduras and has been an active partner with Honduran governmental agencies in increasing public awareness of the seriousness and complexity of the nutrition problem. The food and nutrition planning assistance provided by INCAP is carried out through its Division de Nutricion Aplicada (DNA). The primary objective of this Division, since its inception in the early 1970's, has been to work with the six countries of the region in confronting and solving their nutrition problems.

One of the principal achievements of the DNA in the region has been the creation of a greater awareness of the interrelated factors which condition nutritional status, and of the necessity of developing comprehensive, multisectoral programs for mounting an attack on this set of complex and difficult factors. SAPLAN is a direct result of this effort at defining the nutrition problem multisectorally.

The multicausal approach leads the planner to conclude that the factors which produce or condition malnutrition should be the targets of interventions. This logic is probably correct; however, an alternative which in practice occurs quite frequently is the search for other factors or interventions which may improve nutritional status without altering the causes of malnutrition in any structural sense. For example, the inability of a farm family to have the food available which it requires can be corrected in a number of ways. One alternative is to give the family sufficient land and capital to grow more and have an increased direct supply of nutrients or sell more to be able to purchase more nutrients. Another alternative is for the state or some agency to donate nutrients to the family at least until the children are sufficiently grown to be past the critical ages when the lack of nutrients may be particularly damaging. The first intervention attacks the structural causal factors while the other does not touch the fundamental causes. The INCAP focus is in reality a discussion of the factors which influence the flow of nutrients and not so much the causes of malnutrition; the SAPLAN model as discussed earlier

is more of a causal model. The INCAP approach suggests where to look for problems in the food system while the SAPLAN model goes a step further and suggests which factors should be modified. INCAP's success in operating in a number of different national environments is probably a function of using a more flexible model to guide inquiry without focusing the discussion as much as the SAPLAN model tends to do.

But the INCAP approach and its initial objective of creating a national institutional structure for nutrition planning in Honduras have reached a critical point. The success in creating the multi-sectoral planning agency now demands a much greater commitment from INCAP to help stimulate the development of action programs on the local level. INCAP's policy is to respond to requests for technical assistance which in practice have called for short-term visits by INCAP personnel. In Honduras, unlike other countries of the region, INCAP has been able to put one technician on the scene on a permanent basis, working as a general advisor to SAPLAN but with principal focus on the nutrition surveillance system. This system has proved to be relatively successful in that progress is being made toward defining a community level diagnostic procedure which can generate the actions required for reducing the malnutrition rates in areas where malnutrition is highest. The project in Danli has not generated specific interventions as yet, which is of critical importance to judge the adequacy of the surveillance and diagnostic system which is being constructed. Moreover, the project has been carried out over a period of two years in just one area of the country, involving just six rural communities. The need is to duplicate this experience in other areas and channel the results into specific interventions which themselves will have to be supervised and evaluated.

The requirements for technical assistance in just this one program area are clearly beyond what INCAP can commit at this time. Institutional philosophies which have oriented INCAP more toward pure research and teaching in the past are still strong. The present grant from ROCAP is obviously inadequate for putting the necessary technical

personnel into the various countries of the region, including Honduras. It is becoming clear that the procedure used in the past for stimulating governments to set up nutrition planning agencies, such as in Honduras, which has been basically through short although periodic visits by INCAP personnel, has reached its limits and new arrangements* and financing must be found.

Yet another problem which INCAP has to face is the rotation of technical personnel in the nutrition planning agencies such as SAPLAN, as well as in the other relevant ministries with which the nutrition planning group works. While many people have been trained in the techniques and concepts of nutrition planning and in the procedures of project design and evaluation, INCAP consistently faces the fact of continually revolving people in key positions. As fast as it trains these key people, they leave their government jobs for the private sector or other governmental or international agencies. This difficulty has not been adequately faced by INCAP, in the sense of devoting a continuous and conscious effort at in-country training and in creating a work environment where people feel that they are involved in significant work and develop their own capacities further (in part by participating in nutrition projects).

Both the project related technical assistance and the in-country training functions require substantial commitments of professional time on a permanent basis. In turn, this commitment implies that INCAP either change its staffing and structure of activities to use its present institutional resources more for applied nutrition than is now the case, or that INCAP in some way increase its financial base so as to contract more people in its applied nutrition division. Another alternative is for INCAP to work in conjunction with other technical assistance agencies to use their resources to multiply INCAP's scarce resources. Each of these alternatives poses serious challenges for INCAP.

*Including more coordination with other technical assistance agencies, national and international.

The requirements for technical assistance in Honduras come fundamentally from the needs of SAPLAN to stimulate and advance the multi-sectoral planning process. However, other agencies associated with SAPLAN also occasionally require assistance because of work overloads or the lack of specialists on their staffs. One such agency is AID which has contracted with a number of short term consultants in the past three years to help with its nutrition programming, including the present consultancy. These short term efforts are a mixed blessing as far as the process of nutrition planning in Honduras is concerned. They may help programming, but they are frequently not adequately integrated into the ongoing work of SAPLAN and the associated national agencies. Each visitor requires substantial time from SAPLAN personnel as well from other functionaries in the ministries involved in the consultancy. If the consultant is on the scene for several days or weeks, the daily work of SAPLAN is interrupted and high priority assignments may be delayed or carried out by less qualified personnel than the one(s) assigned to work with the consultant.

This interference in the often delicate office and work environments (including local communities in which projects may be in a difficult phase and the visitor only complicates matters) may produce reactions which can inhibit the smooth functioning of the planning team far past the day when the consultant leaves.

Another difficulty which complicates the work of the short term consultant is the problem of detecting the sensitive issues or problems which may be under discussion locally at the time of his visit. Unwittingly, the consultant may include in his report some phrase which offends a particular person or group. Such errors can often negate any positive benefits the consultancy might achieve. Knowing that these pitfalls exist is often the reason why the consultant tries to say nothing in his report which might offend and, as a result, says little of any importance to anyone.

While the temptation is great to simply invite someone from the outside to help with programming, a potentially more satisfying tactic would

be to avoid short term consultants and attempt to draw on the existing technical assistance team for help. Should short-term help be necessary, perhaps contracting through the long-term technical assistance team would be better than contracting directly.

3. Recommendations For Resolving Some Of The Constraints

3.1 Needed Research

3.1.1 Institutional analysis

In the preceding discussion of some of the constraints which limit the effectiveness of the various institutional responses to the nutrition problem, we have also outlined or mentioned some of the possible resolutions of these constraining factors. One limitation in the above analysis, however, has been the necessary focus of attention on the main institutions involved in nutrition planning, namely SAPLAN (especially its Central Group), AID and INCAP. Substantially more time than was available to us should be spent in investigating the institutional capabilities of the various agencies which compose SAPLAN as well as the international agencies, especially those involved in supplemental feeding. These capabilities could be judged using some of the same criteria employed in this very preliminary analysis of AID, SAPLAN and INCAP, in terms of their institutional objectives, administrative structure and efficiency, their linkages to other action agencies, their capacities for program evaluation, and the adequacy of the technically trained people which they employ (both in terms of the degree of training which they have received and in the techniques for in-service training and institutional learning which are encouraged). Perhaps the proposed computer simulation of feeding programs could guide some of this research.

3.1.2 Another area which we have not explored is the general policies of the Honduran government in the various sectors which may have some nutritional relevance. In particular, it is urgent that the policies of the agricultural sector be examined to estimate their nutritional impact. In a country such as Honduras which depends on

agricultural exports for a significant portion of its foreign exchange, it is difficult to argue that land and resources presently used for the generation of these foreign currencies be shifted to the production of basic foodstuffs. However, the early difficulties in the Aguan Valley project, where citrus and African palm are being grown, showed the effects of ignoring the nutritional requirements of the workers settled on the project's lands. Although not involving production for export to foreign markets, practically all of the project's production was being shipped out of the area leaving few nutrients for the local residents. In other areas, the country's dependence on beef exports complicates agricultural-nutritional policy making. The nutrient opportunity costs of livestock production are well known, and yet much of the country's productive land is used for livestock.

Trade and importation policies are also critical to the nutritional status of the population. The attempt of the state to control the movement of food across its borders has, as one of its functions, the protection of the nutritional status of the people of Honduras, but a serious study should be made of the actual nutritional effects of these trade policies.

Another policy question, which will probably increase in importance in the coming months in Honduras and should be investigated, is the effects of inflation on nutritional status. In some countries such as Chile which have experienced very high rates of inflation, the standard measures taken to combat inflation can have a serious and negative impact on nutritional status for certain segments of the population. Some of these difficulties will be appearing in Honduras if present inflationary trends continue and if counter-measures are not taken.

In general, the differential impact of macro-policies on various segments of the population in terms of their nutritional status should be further researched. If the differential effects of

policies on nutritional status can be documented and presented to the agricultural or economic planners, potentially adverse nutritional impacts might be avoided and other policies developed which could have positive effects on nutritional status. Moreover, the "policy" environment of nutritional programs is of fundamental importance for the interpretation of the likely impacts of such programs. A nutrition project which hopes to stimulate the human consumption of soybeans, for example, which occurs in a region where livestock feed is being manufactured using soybeans, would probably fail to have a positive nutritional effect because of the competition for beans as cattle feed. An understanding of the policy and institutional environment in which nutrition projects function can help save resources and better interpret the assessments of the nutritional impact of such programs.

The impact of the health sector policies on nutritional status is also of particular importance. A serious effort should be expended in investigating the actual impact of the extended coverage program of the Ministry of Health on the nutritional status of the rural poor, which is a target group hardest to reach through many of the standard development programs. Several health sector policies should be analyzed, including the selection and training of mid-wives and other community health workers, the effects of accelerating investments in large hospital complexes rather than modest rural health centers, and the possible effects of having all doctors serve for a reasonable period of time in rural areas. These and other policy alternatives should be examined for their nutritional impact, in addition to evaluating the specific projects which are already underway, such as the environmental sanitation project and the recuperation centers.

3.2 Suggestions for SAPLAN

The problems which SAPLAN has experienced, as far as its own internal structure and operation are concerned, fall into two general categories:

(1) the organization of SAPLAN, its institutional basis and structure, and (2) the capabilities and motivation of its personnel, mainly of the Central Group.

3.2.1 Institutional modifications

Institutional tinkering is always a risky business, and there is probably no final answer about how to best organize human labor for the kind of tasks with which SAPLAN personnel deal in the general environment in which they work. Nonetheless, the in-depth self-evaluation which SAPLAN has undertaken the past few months has suggested some possible modifications which seem to address some of the basic problems encountered in its first three years of existence.

One modification could be the introduction of some changes into the Acuerdo No. 144 (SAPLAN's legal basis). One such change would be the identification of a Commission of Ministers which would comment on and have final approval for the five year plan and the yearly operational plans. This Council would give SAPLAN's decisions and strategies a certain weight within the ministries which compose the System, and might help mobilize the ministries' resources to get the various projects moving more rapidly and with greater coordination.

A second modification which might be considered is to include in the Acuerdo an explicit statement of SAPLAN's primary objective, which is to reduce the malnutrition rate in Honduras. Such an explicit statement of the basic reason for SAPLAN's existence might help SAPLAN to specify a limited number of projects and to justify its actions in trying to get Ministries to act and then to evaluate their actions. The necessity of knowing how malnutrition rates change over time would also require that some national nutrition surveillance system be installed as quickly as possible; this might help speed up the design of that system and its creation through the coordinated actions of the various agencies which would have to participate.

3.2.2 The composition and capabilities of the central group

The Central Group is composed of representatives of several agencies, which themselves are composed of numerous divisions and offices; the question of the qualifications of the agencies' representatives needs to be resolved. The professional nature of the representative depends on the kind of work he is expected to do in the Central Group of SAPLAN, and to date this definition has not been sufficiently precise. However, assuming that the basic work of SAPLAN is and will continue to be that of planning, coordinating and evaluating nutrition programs and projects, it would seem logical to request that the most important agency in each sector which is represented in SAPLAN name a representative to SAPLAN who is a specialist in planning, coordination and evaluation. It is most likely that the type of person who has these characteristics would come from the planning division of the dominant ministry in each sector. Perhaps this individual should be named as a permanent representative to SAPLAN and his duties defined in ways similar to the definition of the "sectoralists" in CONSUPLANE.

Due to the variety of projects being coordinated and evaluated by SAPLAN, it may also be useful to define the duties of a temporary representative. Such an individual could be assigned when needed to SAPLAN's Central Group for a specific period of time and would have special skills relevant to the project in question. For both types of representatives, CONSUPLANE should have a sufficient budget to pay their entire salaries during the period of time they work in the Central Group of SAPLAN, so as to interest the various ministries in the salary savings and to generate staff loyalties and discipline.

In terms of other personnel requirements, a determining factor will be the nature of the work which SAPLAN undertakes in the future. The experience to date has suggested that there has not been a sufficient delegation of authority and the creation of a sufficiently large administrative staff so as to efficiently process the necessary vouchers, bids, letters, etc. This difficulty has occurred under conditions when SAPLAN has acted mainly as a coordinator of projects

without much implementation authority or responsibility. Should SAPLAN find a means by which to withdraw even further from the administrative stream, some of these difficulties of system overload could be reduced. However, should SAPLAN get further involved in project administration -- such as would be the case if SAPLAN would act as the administrator of all loans, grants and other funds which have a nutrition objective -- then a much greater investment in administrative apparatus and skills would be required.

3.2.3 The development of the institutional learning style

One of the requirements of a successful multisectoral nutrition planning experiment is the continual up-grading of the technical capacities of the staff of the planning agency, in this case SAPLAN. The ability of the agency to get other implementing agencies to carry out the plans and projects is enhanced by competent project design, including the development of hypotheses well grounded in past practice and in tested theory about why a particular intervention should succeed. All of the efforts at creating an institutional structure with sufficient organizational influence to implement the plans for combating malnutrition will fail to bear fruit if the technical, scientific competence of the planning staff is not of the highest quality. This competence comes fundamentally from the continual analysis and refinement of theory and techniques through action programs. The successful planning agencies are those which carry out "scientific action planning" rather than dedicate themselves to "paper planning" or simply the elaboration of goals and objectives of programs without being intimately involved in learning from real experiences in the field.

There are two features of "scientific action planning" which we would like to stress; one is the scientific method as a basic learning tool and the second is the inductive approach for building programs from the local level to the regional and national levels.

Many of the activities which are undertaken throughout the world under the guise of nutrition planning are in fact, little more than the programming of interventions which project personnel think have an impact on the nutritional status of the population. The process for selecting interventions or designing policies are often, of necessity, based on faulty and incomplete knowledge. A methodology is needed which provides a means for making planning decisions which improve over time.

While nutrition problems in Honduras have probably existed since the beginning of time, it is only recently that there has been widespread interest in attacking the problem on a large scale and comprehensive basis. Furthermore, in its present day context, the nutrition problem is as complex as the problem of development. These two facts combine to create a situation whereby there is a lot which is not yet understood when it comes to planning for nutritional improvement. Much of what is known is of a qualitative nature and therefore is not sufficient when it comes to selecting among "good" projects in an environment of scarce resource.

What is needed in this situation is an approach to nutrition planning which provides for a rapid response to a severe problem which cannot await the outcome of long-term studies. At the same time, however, this approach must provide for continued improvement in the understanding of the problem as the programmed activities are carried out. Such learning can be difficult in an institutional context which often emphasizes continuity of action rather than change. Nonetheless, it is urgent that an environment be created for the technical staff of SAPLAN to be able to say that they are experimenting, to be able to admit that they are acting in order to learn; it is very difficult to learn if one is required at the same time to pretend to be certain.

In many different situations, the best time-tested learning model has been the "scientific method." In its simplest form, the scientific method is a process which begins with the formulation

of a theory which is based on current knowledge. Next, observations are made of certain variables identified in the theory and an action is designed which the theory predicts will cause specific changes in the variables. Finally, the action is carried out and new observations are made to determine if the predicted change(s) in the variables actually occurred. If the predicted changes occurred, then the theory is reinforced; if they did not, then the theory is brought into question and it may be necessary to formulate a new or modified theory.

Clearly the scientific method will not produce instant knowledge. What it will do is help to gradually converge on a more accurate and precise understanding of the problem. In contrast, more common methods of planning (such as reliance on expert opinion) do not provide a systematic mechanism for improving upon existing knowledge; rather, they are highly dependent on the individual involved in the planning process. In the extreme cases the only time there is a change in the body of knowledge is when there is a change of experts being consulted.

The diagnostic methodology which is very briefly described here, has its origins in the scientific method and that method makes up one of the principal characteristics of the methodology. The main purpose of this methodology, which itself must be further elaborated, is to provide a decision-making tool for nutrition planners (to serve as a guide for selecting actions) and as a framework for learning as the activities are undertaken. This methodology hopefully will satisfy both the need for immediate action and the need for constantly perfecting the knowledge on which action programs are based,

But the scientific method will not be satisfactory if it tends more toward a deductive rather than an inductive approach. Most government planning activities occur at the centralized level. They are carried out by professionals who formulate policies from offices in Tegucigalpa to be implemented in regional or local settings. This type of planning

can be characterized as the deductive approach since the policies are most often based on a few premises or a generalized description of the nature of the problem, and then conclusions are drawn with respect to specific situations.

While this deductive approach is most common in planning and is quite useful in many circumstances, there exist several important disadvantages. Often the policies in such a center/periphery system must be fairly simple and relatively uniform because there are administrative limits on the variation and complexity of policies which can be formulated centrally and implemented in the peripheral localities. A more important disadvantage with particular relevance for nutrition planning is that the deductive approach is limited in the amount and variety of experimentation that is possible.

Since policies are based on generalized premises, only those limited premises can be tested. Because interventions are formulated from a generalized theory of the problem, the deductive approach tends to discourage variety-- to not allow for testing the possibility of different causal factors being predominant in different localities. The complex nature of the nutrition problem requires a planning approach that allows decision makers the opportunity to try many different activities in a variety of different communities. This conscious experimentation would help to maximize learning possibilities.

The converse of the deductive approach to planning is the inductive approach, which begins by looking at the localities and from them draws conclusions with respect to the general situation. This approach promotes experimentation with different kinds of interventions for different localities. The general theory and overall policy would be induced from actual situations in specific communities. This inductive approach to planning provides more flexibility for learning about the complex problem of malnourishment. The output of the procedure is the diagnosis of a particular community and the

formulation of action programs tailored to the specific condition of that community.

There are several reasons why the community seems to be the appropriate level of disaggregation for carrying out inductive planning. One of the principal reasons is that it is often at the community level where policies are implemented. This is particularly true in nutrition where traditional interventions include health delivery systems (health posts), environmental sanitation (water supply and waste disposal), food supplementation (school feeding and food for work programs), and non formal education (health and agricultural extension services). Even those programs which are characteristically national in scope (such as import-export and price support policies) can be made more effective when the dynamics of their effects at the community level are better understood.

Another reason for concentrating on diagnosis at the community level is the need for defining a "workable" group. Where as it might, in some cases, be useful to make the diagnosis at the family level, experience has shown that diagnostic procedures for most communities have the necessary accuracy to disaggregate conclusions to at least groups of individual families. On the other hand, aggregating the diagnosis beyond the community level (i.e., state or regional level) often results in unnecessary loss of homogeneity. A basic assumption in the development of the scientific action planning methodology is that the causes of malnourishment can be expected to vary from one population group to another. As a result, that population group (defined as the target of diagnosis and action) should be selected which provides as much homogeneity among its members as practical; a community, loosely defined, is usually the most homogenous population group.

Using some version of this "scientific action planning" and following the inductive scientific method as described briefly here, will help up-grade the technical capabilities and commitment of the SAPLAN

team and, perhaps more importantly, can contribute to the general quality of nutrition projects which are put into practice. Such a procedure is certainly more difficult and expensive than office planning, but the investment seems justified especially when dealing with the complex set of problems immersed in multisectoral nutrition planning.

The inductive learning model of planning, however, will not automatically result in improved plans and a more involved, technically committed and competent staff. Certain procedures, which have already been used to a certain extent in SAPLAN, would have to be more greatly emphasized to achieve these ends. Assuming that community diagnoses are being carried out, one mechanism for exchanging ideas and specifying hypotheses is the organization of weekly, structured internal seminars on specific topics, where a certain preparation would be expected from each staff member and one or two people would be responsible for leading the discussion. Invitations could be extended to specialists in particular fields to attend these seminars. Short papers could be prepared and more lengthy reports presented at the seminar as a preliminary review of studies, evaluations and project plans which would later receive wider circulation. With the resulting clarification of theoretical gaps, institutions such as INCAP can be approached to provide further training.

Another mechanism for focusing the attention of the staff on specific and local problem solving, is the careful selection of communities in which to work. As was emphasized in the Jicaro Galan Seminar, an activity of high priority in the coming months is for SAPLAN to identify geographic areas of high prevalence of malnutrition. To the degree that regional development projects, such as PRODERO, are operating in areas with high levels of second and third degree malnutrition, the initial diagnostic and local planning procedures should be integrated with these projects. The diagnostic work already completed would help locate specific communities. Work could then begin with community organizations to identify the factors which

condition the nutritional problems characteristic of the community. In working with these local organizations, some effort should be expended to study the level of organization and the capacity of the local groups for diagnosis, as well as for helping implement the interventions which emerge from the diagnostic process.

3.2.4 Coordination of supplementary feeding programs

The complexity of the nutrition problem and the pervasiveness of malnutrition in Honduras make the task of doing something to reduce malnutrition highly problematic. One potential resource which SAPLAN has, as a food and nutrition planning agency, is the food donated to Honduras by several programs. SAPLAN could greatly help these programs by identifying geographic areas of high prevalence of malnutrition where these foods could be used until more far-reaching programs can be designed and implemented. Used carefully, these resources could even help strengthen the local organizations for doing the diagnoses and handling the complex interventions which will begin functioning once the inter-institutional agreements and commitments have been worked out. SAPLAN could also help these programs by advising as to the proper procedures for evaluating the different aspects of the various on-going projects; traditionally, these projects are short of resources, technical and human, for conducting a proper evaluation program.

In short, the supplementary feeding programs could provide needed resources to SAPLAN in its community diagnostic work, and SAPLAN could provide the guidance and resources for evaluation which these programs may lack. Through the more efficient use of these resources, the nutritional problems of high risk groups should be reduced. Section II of this report describes the structure and functioning of these programs, and the resources they manage.

As also urged at the Jicaro Galan Seminar, the coordination of these supplementary feeding programs requires that SAPLAN, in conjunction

with the appropriate agencies, execute a number of preliminary actions, including:

1. An evaluation of the existing programs, including the specification of periodically collected data which would be necessary for coordination. Part of this basic data is presented in Section II of this report with suggestions concerning the next steps which should be taken to complete the data gathering.
2. The preparation of a manual to guide the formulation and execution of projects which have food distribution as one element, even though nutrition may not be an explicit objective. This manual would specify some of the basic points to be included in future project design, the explicit criteria for the selection of families and communities which SAPLAN defines as necessary for getting the food to high risk groups; general norms concerning preparation, storage and supervision of food distribution programs, and mechanisms for assuring the coordination and evaluation of the programs.
3. The publication of SAPLAN's conclusions concerning the geographic areas of high malnutrition where food distribution programs should be concentrated. Implementation of the community diagnostic program in these areas would help assure that food resources would be combined with other interventions in a focussed, coordinated manner.

3.3 Suggestions for the AID Mission

Many of the problems detected in the multisectoral planning efforts of SAPLAN were also found in the development support efforts of the AID Mission. Developing collaborative mechanisms with relevant agencies is fundamental to both institutions, as is the need to coordinate and use scarce resources efficiently. Perhaps the Mission could experiment with some of the techniques which SAPLAN has also been struggling with, including the following:

3.3.1 The formation of a multisectoral team for nutrition planning within the Mission, drawing together individuals from the agricultural, education, health and engineering sections of AID. The goals of such a team would include: (1) coordination of the various projects in the different sections of the AID Mission so that nutritional concerns would be emphasized and regional overlaps of projects could be taken advantage of to maximize the effectiveness of AID's limited resources; (2) development of evaluative procedures which would be of benefit to all projects with a nutritional component (this concern with project evaluation could profitably extend to those administrative problems involved in relating AID to Honduran agencies which affect most, if not all, projects to which the Mission contributes); (3) facilitating the implementation of the various relevant projects which come under the nutrition loan or grant, including the perfection of their designs which would depend on the technical competence of the Mission staff as well as outside agencies known to the staff.

3.3.2 Create an internal planning group

The nutrition problem leads, as we have seen, into many of the fundamental issues of development. The design and implementation of nutrition projects, then, have prompted nutrition planning agencies to utilize some model, however crude, of the development process with which they are dealing. The Mission certainly is even more concerned with the specification and implementation of development projects in many sectors of the economy. With its complex mandate, it is critical for the Mission to: (1) develop a simplified model of the development process in Honduras, (2) subject that model to scrutiny and analysis in conjunction with Honduran specialists in development, and (3) utilize the model for giving priority and continuity to programs. The role of nutrition programs should be specified in that model. Internal seminars and the encouragement of staff members to prepare analytical papers for presentation at Honduran and international professional meetings would help stimulate the specification of a model (or models) of development, which in turn would give greater assurance that the actions which the Mission

undertakes are in fact most relevant to Honduran problems and conditions, and most likely to be strongly supported by counterpart agencies. The long range and short range plans of the Mission would be a major output of this group.

Another function of this internal planning group would be to undertake and/or stimulate the evaluation of the Mission's programs and procedures so that problems can be identified and corrective actions taken. A major difficulty which this consultancy encountered in studying the achievements and constraints of multisectoral nutrition planning was the absence of complete studies of the Mission. Both SAPLAN and INCAP have gone through periodic evaluations and were able to produce thoughtful assessments of their programs and prospects which provided much of the material for this report. In the case of the AID Mission, subjective data had to be relied upon which are undoubtedly less accurate and thereby less useful than the information and insights which a thorough study would produce. Whether or not such studies should be undertaken by an in-house group is debatable, but at least the planning and analysis group could coordinate and orient such a study.

3.3.3 Support of SAPLAN

The continued and improved support of the SAPLAN effort by AID is critical for the initial efforts to begin to have some pay-off. The first phase of establishing SAPLAN has been completed, and the results of the Jicaro Galan conference point the way toward resolving some of the fundamental problems which SAPLAN has encountered these past months. The form of this support and the strategy behind it are of critical importance.

One step which should be taken is to extend the loan-grant program through 1981. The time can be well used to get the community interventions and diagnostic procedures more advanced, and to carry out the needed reforms in the SAPLAN structure. The time would also be useful to attempt to create the coordination mechanisms for the

supplementary feeding programs. Since the funds for the loan at least will not be committed completely by October 1980, this extension would not signify much additional funding. Clear programmatic signposts should be defined, however, to indicate that progress is being made on the three priority themes of SAPLAN, and that the efforts to construct a clear four or five year investment program beginning in 1981 are resulting in a useful design.

As for post-1981, several alternatives are possible. One is to negotiate a new grant-loan program, taking into account any commitments of funds which may result from the IDB's growing interest in the nutrition area. Such a program would build, presumably, on the diagnosis and planning work which SAPLAN is to undertake in regions of high prevalence of malnutrition over the coming months. In other words, the diagnosis work of SAPLAN would be the basis for a request for funding from AID and any other agency which might have funds available, including indigenous Honduran agencies.

The degree of SAPLAN's budgetary and administrative involvement in the projects which emerge from this diagnostic procedure would be an important question to resolve. However, the options are almost completely open; that is, there could be relatively more or less administrative involvement of SAPLAN in the execution of the projects, depending on the conditions at the time and the capabilities of SAPLAN to continue in this area.

A second alternative is for AID to fund Honduran supplemental feeding programs and associated activities through resources generated from the sale of Title II foods as envisioned under Section 206. It is possible that almost \$5 million could be generated over a three year period. BANASUPRO already has some experience with the sale of donated commodities (as part of the EEC program), and could be the agency which would handle the commercial transactions.

However, a number of considerations would have to be resolved before this option is chosen. The first question is the capacity of BANASUPRO. Presumably that agency would take the Title II foods, distribute them throughout the country and sell them at, or slightly below, the market price. It would then turn over these funds to another agency after subtracting administrative costs, or BANASUPRO could retain the funds for constructing more storage facilities, marketing outlets, etc. The administrative capacities and plans of BANASUPRO would have to be carefully assessed. One possible agency which could handle the excess funds would be SAPLAN. In this case, there would be no question about SAPLAN's involvement in budgetary and administrative matters, since SAPLAN would have the responsibility for using the funds in the most efficient manner. Given its planning orientation, SAPLAN has not proven to be an efficient manager of funds, but that capability could be up-graded should this function be deemed sufficiently important.

Another problem would be the use of the "206" funds, which by law are restricted to improving the Honduran capacity to operate supplemental feeding programs. As seen in the previous sections of this report, the mandate of SAPLAN is much broader than simply the operation of supplementary feeding programs. Moreover, SAPLAN has had little experience with the control and coordination of the supplemental feeding programs, let alone with the operation of such programs. Rather, the major effort of SAPLAN has been in other areas, such as the preparation of the Five Year Nutrition Plan and the strengthening of its own institutional and technical capacities. It could be argued that these activities are preconditions for beginning to operate the supplemental feeding programs efficiently, but certainly this would require some clarification in order for AID to rely solely on "206" funds for supporting the very broad ranging efforts of multisectoral nutrition planning.

3.4 INCAP and Other Technical Assistance Agencies

The technical support which INCAP has provided to SAPLAN has been

oriented primarily to building the capabilities of SAPLAN in order to prepare the five year plan and to begin to coordinate projects implemented by various agencies. This assistance has been largely accomplished through short visits of INCAP personnel. The commitment of technical resources on a full time basis for carrying out the field diagnostic and project elaboration work has been limited to one person, but this experience points the way toward the kind of assistance that SAPLAN will be needing in the next phase of its work. Substantially more permanent on-site personnel will be needed in the future. Should the ROCAP grant prove to be inadequate to the task, SAPLAN, AID and INCAP should consider other alternatives, including a direct INCAP-Mission technical assistance contract as was done for the 1975 Nutrition Assessment. If INCAP cannot provide the necessary personnel, then consideration should be given to incorporating other agencies or groups with experience in the field.

The general thrust of technical assistance should, however, be toward building on the basis laid by INCAP and in accord with the lines already defined, with more emphasis on what we have called "scientific action planning." The use of short term consultants should be carefully defined to provide continuity of support and to avoid the introduction of extraneous efforts which may serve particular programming needs but which can easily overload or disturb the step-by-step strengthening of Honduran development planning.

In terms of the contribution of technical assistance to the training of Honduran technicians in-country, the nature of that assistance would depend on the final definition of future activities in SAPLAN. Three collaborators/specialists should be incorporated regardless of whether "scientific action planning" is introduced:

1. an information system specialist, with nutrition training;
2. a "nutritional economist" who would be able to carry out inquiries into the nutritional implications of macro-economic and agricultural policies and trends; and

3. a systems analyst with experience in the evaluation of food distribution systems and supplementary feeding programs.

Should the concept of "scientific action planning" become the basis for these activities, the type of technical assistance might be more methodological than has previously been envisioned. Two specialists would be needed to help with the community diagnosis and intervention activities:

1. a specialist in integrated community development with experience in agricultural projects; and
2. a similar community development specialist, but with health planning experience.

These individuals would be essentially collaborators with the Honduran technicians and the team as a whole in the construction of a planning system which is inductive in approach and scientific in method.

This in-country training could be complimented by site visits to countries which have been working with multisectoral nutrition planning procedures with a similar orientation, including Colombia (Cali) and Chile (the regional project in Talca). Such visits could be coordinated so as to permit the actual participation of the trainees in the programs already functioning and thereby to get operational experience as well as points of reference for experimentation within Honduras. However, site visits have to be carefully programmed to avoid depleting the pool of scarce human resources at critical moments (which has, unfortunately, occurred quite often in the past).

Another tactic which should be tried is to bring nutrition project ideas to Honduras along with people who have tried them in other countries. Small scale versions of these projects could be tried out under Honduran conditions. The procedure would give training to people who help set up the experiment, and would give the experienced designers of such projects more data as to the general appropriateness of their ideas and how to adapt them to other conditions.

There are several groups in Cali, Colombia which are developing and testing innovative ideas in the areas of nutrition health and community learning. The following is a list of these projects with the names of the principal contact persons:

1. Nutrition Project, Univ. of Valle - Luis Fajardo
2. PRIMOPS, Univ. of Valle - Alfredo Aguirre
3. CIMDER, Univ. of Valle - Oscar Echeverry
4. Hogar Juvenil Campesino, Buenos Aires Cauca - Oscar Bolaños
5. FUNDAEC - Farsam Arbad

SECTION II - SUPPLEMENTARY FEEDING PROGRAMS

1. Introduction

An array of supplementary food and feeding programs are presently operational in Honduras. As part of our assessment of the state of multisectoral nutrition planning in Honduras, especially as embodied by SAPLAN, we were requested to describe "all current supplementary feeding programs (including non-PL 480 Title II) establishing guidelines for standardizing and centralizing within SAPLAN all pertinent information." (See Scope of Work, Appendix I.)

The supplementary feeding programs present the basic problems with Honduran nutrition planning: (1) There is little or no coordination among the multilateral, bilateral and voluntary agencies presently donating food to Honduras and/or implementing feeding programs; and (2) SAPLAN has had little information concerning the aims and objectives of the programs, beneficiary types and geographic area of operations, selection criteria, type and quantity of rations, systems of control and supervision of the resources, and program value. Since the coordination of feeding programs represents a major concern within SAPLAN, this section of the report will give special recognition to this issue. Simultaneously, it is the intention of this report to initiate more strenuous efforts to deal with the difficulties of coordinating feeding programs.

The lack of communication about and coordination of feeding programs by SAPLAN is unfortunate, especially concerning the PL 480 Title II program in Honduras. According to Clapp & Mayne, Inc., in a 1977 evaluation which is still relevant two years later: "Almost immediately, one is struck with the apparent lack of coordination between the Government of Honduras, the Volags and AID/H with respect to the various PL 480 Title II feeding programs and other feeding programs."¹

1. Evaluation of PL 480 Title II Feeding Programs in Honduras, 1977
Clapp and Mayne, Inc. p. 82.

The authors of that 1977 evaluation continued their assessment by raising the hope that SAPLAN, which is "one of the most promising features observed in Honduras," would have the role and authority to continually monitor and evaluate feeding programs in the future. However, this consultancy did not see much evidence that the hopes expressed by Clappe and Mayne had been realized.

It is important to realize that it is not just the U.S. bilateral program about which SAPLAN does not have adequate or proper information. The same scenario, to different degrees, exists for the other major supplementary food and feeding activities: the U.N. World Food Program (WFP), La Cooperacion Hondureño Alemana Alimentos por Trabajo (COHAAT), and the European Economic Community (EEC). As a result, this section of the report will not only address the Title II program, but also the others mentioned above.

The emphasis in this section, therefore, will be on meeting the information needs of SAPLAN. Determining the magnitude and nature of the food donations and feeding programs of foreign donors was identified by SAPLAN as a high priority. Their primary concern is to know the size and quality of the resource (food) being transferred from overseas to Honduras, as an initial step in planning for and directing its utilization.

The remainder of this section of the report will be divided into two parts. The first responds to the need for information on the major food programs in Honduras. The second part results from the realization that a few days work by an outside consultant can, at best, only begin the task of identifying and collecting the relevant and necessary information for SAPLAN. Therefore, guidance is provided for SAPLAN's future endeavors concerning information collection on feeding programs.

2. Description Of Programs

2.1 Introduction

In this section we will concentrate on the following five programs* being operated or sponsored by the following institutions: (1) CARE (P.L. 480 Title II); (2) Catholic Relief Services (P.L. 480 Title II); (3) World Food Programme of the U.N.; (4) La Cooperacion Hondureño Alemana Alimentos por Trabajo; and (5) European Economic Community.

A complete assessment would include a study of the various governmental and non-governmental agencies which work as Honduran counterparts to these programs. Generally, these counterpart agencies are actually a part of SAPLAN (e.g., MOH, JNBS) which potentially facilitates communication with SAPLAN on their involvement in feeding programs. This fact, coupled with guidance from SAPLAN, suggested that the most important task is to clarify and describe the roles of non-Honduran institutions in the supplementary food and feeding activities. Such will be the focus of this report, which is based on the documentation available to us during our visit to Honduras.

2.2 P.L. 480 Title II

2.2.1 Introduction

In 1954, the Agricultural Trade Development and Assistance Act, P.L. 480, was enacted. The original intent of the general P.L. 480 (Food for Peace) legislation was to: (1) curb the cost of stockpiling farm surpluses (suplus disposal); (2) expand the markets for U.S. commodities; and (3) aid countries which could not meet their own food needs. Food aid was designed to address domestic political and economic concerns, while having a positive impact on U.S. foreign policy by helping countries which had food shortages.

Under Title II of the legislation, specific provision was made for the donation of agricultural commodities through voluntary agencies, governments and the World Food Programme to: (1) aid in disaster

*We have not included Title I sales of U.S. wheat to Honduras.

relief; (2) combat malnutrition; (3) promote economic and community development; and (4) meet various domestic political and economic objectives. These goals are usually met by using the food in Maternal and Child Health (MCH), Food for Work (FFW) and School Feeding (SF) programs. The law stresses that "...The assistance to needy persons shall insofar as practicable be directed toward community and other self-help activities designed to alleviate the causes of the need for such assistance..."

The present legislation mandates that 1.3 million, of the legal minimum of 1.6 million MT of commodities provided in the P.L. 480 Title II, be programmed by private voluntary agencies (e.g., CARE, Catholic Relief Services) and the World Food Programme of the United Nations.

2.2.2 Objectives and guidance - Washington

In a later section of this report we will provide a detailed description of the Title II programs (e.g., aims and objectives) presently being operated in Honduras as requested in the Scope of Work. However, there are some issues in the policies and objectives of P.L. 480 Title II, as they emanate from Washington, which are of special significance in light of our charge to clarify program objectives.

In the United States, groups such as the U.S. Department of Agriculture, the Department of State and the Congress have input and interest in the P.L. 480 Title II program. Accordingly, each has various concerns and formulate guidance on different aspects of program operations.

The U.S. Department of Agriculture (USDA) is largely concerned with disposing of U.S. surpluses and seeking additional outlets for commodities, with the objective of supporting U.S. domestic food prices by limiting available supply. One problem which arises due to these objectives is that, as commodity availability fluctuates from year to

year, it serves the interests of USDA to make year-to-year decisions on the quantities and types of commodities to be distributed through P.L. 480. This often results in difficulties for the program planner in a search for consistent and predictable supplies of food. The situation with CRS's rations, discussed later, will illustrate the problem.

USDA also seeks to develop markets for the U.S. products abroad. This intention is in conflict with the Title II goal of increasing a country's self-sufficiency by reducing the dependence on food imports from the U.S. If this "development" goal is realized, it would be in conflict with USDA's intention of finding and sustaining markets for the products of U.S. farmers.

The Department of State may attempt to influence the flow of Title II food to developing countries, according to political considerations. Increases or decreases in commodity donations can reflect U.S. political policy changes or serve as messages to foreign governments. The U.S. Congress, on the other hand, has mandated that P.L. 480 Title II commodities reach the "poor majority" and the Most Seriously Affected (MSA) nations. This generally directs programs to countries and individuals with low per capita incomes, as Title II is viewed as a way of improving their plight.

Finally, there is substantial guidance provided by the Office of Food-for-Peace, AID/Washington, to the various P.L. 480 Title II programs. The Office of Food-for-Peace is charged with resolving difficulties in the law and its application, while simultaneously insuring that program operations respond to the needs of the recipient countries. That Office provides guidance on priorities for beneficiaries, type and quantity of rations to be programmed and systems for their control, and supervision of the food resource. For example, MCH programs presently receive highest priority in Washington. Similarly, Washington suggests maximum per capita rates of commodity use by project category and makes suggestions on what commodities should be programmed.

It is important for SAPLAN to recognize the constraints of cooperating sponsors in Title II programs (i.e., CARE and CRS in Honduras) and the requirement that they monitor the flow of food and notify the USAID Mission of any loss, damage or misuse of commodities within the country. This responsibility may conflict with in-country desires which call for the cooperating sponsors to "turn over the food" to their respective counterpart in Honduras, once it is discharged from the port.

2.2.3 Objectives and guidance - USAID/Honduras

The strategy and views of USAID/Honduras with respect to P.L. 480 Title II are outlined in the Annual Budget Submission (ABS) for FY 1981, as well as other Mission documents. It is remarked that "SAPLAN, the nutritional planning organization of the Economic Planning Council, is playing a major role in nutrition planning, coordination and evaluation, including P.L. 480 Title II programs in Honduras." Unfortunately, SAPLAN's involvement with P.L. 480 programs is just beginning and is more an objective than a reality at this point in time.

The USAID Mission, besides having the integration of SAPLAN into Title II activities as a major, but as yet unmet objective, generally states its hopes and aspirations for the program in the same terms as the volags and GOH counterparts, emphasizing the humanitarian and development objectives. For the mission, the greatest value to the P.L. 480 program is as a tangible transfer of resources which clearly filters down to the poor and indigent in Honduras. Although it was acknowledged that leakages in the system do occur, and there is the potential for adverse results from the program (such as creating dependencies), it still remains as one of the most direct and quantifiable ways to impact on the people of Honduras, who in fact do receive and consume the food with regularity and consistency.

2.2.4 CARE Program

2.2.4.1 Introduction

In 1959, CARE began programming P.L. 480 Title II food in Maternal and Child Health (MCH), Other Child Feeding (OCF) and School Feeding (SF) programs in Honduras. As with all other Title II programs around the world, the U.S. Government (USG) provides CARE with the food at no cost, and likewise furnishes the transportation from the U.S. to Puerto Cortés, Honduras. CARE retains the responsibility for programming the food and is accountable for its use to the USG.

The CARE activities in Honduras are of two types: (1) MCH and OCF programs, in which CARE has an agreement with the Ministry of Health (MOH) of the Government of Honduras (GOH) for carrying out these programs; and (2) SF program, which exists and operates under an agreement between CARE and the Ministry of Education (MOE) of the GOH.

In the CARE-MOH programs (MCH and OCF) there are three types of centers and cooperating sponsors: (1) centers administered by the MOH (e.g., hospitals, health and recuperations centers (SERN's)); (2) centers administered by the Junta Nacional de Bienestar Social (JNBS); and (3) centers administered directly by a community or other government organization. There are also three categories of beneficiaries: (1) MCH - children under five and women of childbearing age; (2) OCF/Institution - for children in orphanages or boarding schools who are less than 14 years of age; and (3) OCF/Day Care Centers - for children attending day care centers who are under five years of age.

In the CARE-MOE program (SF), the National Service for Feeding Assistance to Children (SNAAN) is the GOH agency through which the food is supplied to the primary school children. Although community involvement is encouraged, no other GOH agencies work as counterparts to CARE in running the SF activities.

2.2.4.2 Aims and objectives

- MCH and OCF Programs - The 100% consumption of the daily ration for all 75,000 beneficiaries for a maximum of 12 months a year (depending on recipient classification) is the primary objective of CARE's MCH program in Honduras. There is an underlying and, as yet untested assumption that achieving this goal will result in the improved nutritional status of those receiving the supplementary food. Although the nutritional objective is explicitly stated in their official Operational Plan, many people at CARE consider the measurement of changes in nutritional status, which are due to their program, a precarious undertaking. Therefore, the statement of nutritional improvement as a goal is felt to be tenuous.

Presently, the goal of 100% feeding efficiency is measured triannually during CARE's fiscal year, through a random sample survey which evaluates whether project centers received commodities during designated periods, and whether the correct ration is served to the beneficiaries. The last such survey was in June 1979, and indicated 88% of the centers received commodities as scheduled and 90% used the correct ration.

- SF Program - CARE has a similar goal of 100% consumption of the daily ration for all 220,000 beneficiaries, for a maximum of eight months. Like the MCH program, the SF Program Plan also outlines other objectives including the maintenance or improvement of nutritional status and increased school attendance.

2.2.4.3 Beneficiary type and geographic area

- MCH and OCF Programs - In the MCH program there are 10,000 women and 60,000 children and infant beneficiaries in approximately 650 centers. In addition, the 30 OCF/Institutions and 14 OCF/Day Care Centers have 3,000 and 2,000 beneficiaries, respectively.

The MCH program is operating in 16 of the 18 departments of Honduras excluding the Islas de la Bahia and Gracias a Dios. The JNBS administers 294 centers in 15 departments with a total of 23,916 beneficiaries, while other community centers account for 265 centers in 14 departments with 28,467 beneficiaries (see Table 2).

The OCF/Programs are in ten departments which serve about 5,000 beneficiaries through community centers administered directly by the community or another governmental organization and the JNBS (see Table 3).

CARE/Honduras also has a complete breakdown of beneficiaries by municipality and town, category of recipient and project sponsor. This information is to be forwarded to SAPLAN on a quarterly basis. CARE's impressive ability to monitor their program's operations, which enables them to identify their beneficiaries, coupled with their initiative of sharing this data with SAPLAN, deserves special recognition. If all the food programs were equally well administered, planning and coordination of supplementary feeding programs would be a viable possibility.

- SF Program - All the beneficiaries of this program are primary school children in approximately 3,000 schools in Honduras. The program is operating in all departments except the Islas de la Bahia and Gracias a Dios. Although the exact number of beneficiaries and number of schools vary from month to month, Table 4 gives an indication of the distribution of program participants in February 1979.

2.2.4.4 Selection Criteria

- MCH and OCF Programs - The MOH, JNBS and various community groups are responsible for selecting the beneficiaries of the program. CARE plays little or no role in this process.

Table 2
 CARE MCH PROGRAM
 BENEFICIARIES (NUMBER OF CENTERS) - AUGUST 1979

<u>Departament</u>	<u>COUNTERPARTS</u>			<u>Total</u>
	<u>JNBS</u>	<u>MOH</u>	<u>Communities</u>	
Francisco Morazan	3,548 (50)	2,531 (15)	8,072 (66)	14,151 (131)
La Paz	1,305 (12)	343 (21)	114 (1)	1,762 (15)
Valle	3,821 (46)	372 (3)	2,398 (23)	6,591 (72)
Intibucá	1,295 (17)	-0-	-0-	1,295 (17)
Comayagua	2,323 (23)	1,820 (9)	1,430 (11)	5,573 (43)
Olancho	441 (6)	1,486 (11)	345 (4)	2,272 (21)
El Paraíso	3,950 (42)	1,469 (15)	4,707 (46)	10,126 (103)
Choluteca	3,785 (50)	579 (7)	3,486 (31)	7,850 (88)
Cortés	1,189 (13)	270 (3)	2,602 (33)	4,061 (49)
Copán	260 (2)	150 (1)	185 (2)	595 (5)
Santa Barbara	304 (3)	197 (3)	818 (9)	1,319 (15)
Atlántida	879 (14)	90 (1)	886 (11)	1,855 (26)
Ocotepeque	146 (3)	-0-	-0-	146 (3)
Lempira	600 (12)	-0-	145 (4)	745 (16)
Colón	70 (1)	100 (1)	584 (6)	754 (8)
Yoro	-0-	110 (2)	2,695 (18)	2,805 (20)
Total	23,916 (294)	9,517 (73)	28,467 (265)	61,900 (632)
Percent of Total	(38.6%)	(15.4%)	(46%)	

Table 3

CARE - OTHER CHILD FEEDING
BENEFICIARIES (NUMBER OF CENTERS) - August 1979

<u>Departamento</u>	<u>COUNTERPARTS</u>				<u>Total</u>
	<u>J.N.B.S.</u>		<u>Communities</u>		
	<u>Institutions</u>	<u>Day Care Centers</u>	<u>Institutions</u>	<u>Day Care Centers</u>	
Francisco Morazán	374 (4)	484 (2)	1,355 (12)	485 (4)	2,698 (22)
Olancho	-0-	-0-	170 (1)	-0-	170 (1)
Valle	-0-	-0-	24 (1)	-0-	24 (1)
Choluteca	-0-	-0-	40 (1)	-0-	40 (1)
Cortés	-0-	-0-	785 (7)	567 (6)	1,352 (13)
Yoro	-0-	-0-	140 (1)	140 (1)	280 (2)
Atlántida	-0-	10 (1)	150 (1)	-0-	150 (1)
Santa Barbara	-0-	-0-	30 (1)	-0-	30 (1)
Comayagua	-0-	-0-	30 (1)	-0-	30 (1)
El Paraiso	-0-	-0-	-0-	150 (1)	150 (1)
Total	374 (4)	484 (2)	2,724 (26)	1,342 (12)	4,924 (44)

Table 4

CARE SCHOOL FEEDING PROGRAM

NUMBER OF CENTERS AND BENEFICIARIES - FEBRUARY 1979

<u>Department</u>	<u>Number of Centers</u>	<u>Number of Beneficiaries</u>
Francisco Morazán	120	9,973
El Paraíso	217	13,824
Choluteca	342	28,227
Valle	211	23,392
Comayagua	163	9,922
Olancho	251	15,337
La Paz	165	9,404
Atlántida	119	12,484
Santa Bárbara	183	16,826
Intibucá	207	19,403
Yoro	194	15,374
Lempira	219	11,171
Ocotepeque	133	9,274
Copán	194	12,334
Cortés	196	30,559
Colón	84	11,573
TOTAL	<u>2,998</u>	<u>249,077</u>

Generally, the argument that 80% of the children in Honduras suffer from malnutrition (and that almost everyone is in need of assistance) is given to counter criticism that the selection is done on an ad hoc basis.

- SF Program - The Ministry of Education selects all schools included in the program. The stated criteria is that schools are chosen from: (1) municipalities where infant and child mortality is highest; (2) where grain production is most deficient; (3) areas bordering El Salvador; and (4) those previously active in the program. However, no explicit criteria exists for selecting individual beneficiaries within a school.

2.2.4.5 Type and quantity of rations

- MCH and OCF Programs - The size and frequency of rations provided by the MCH and OCF programs in FY 1979 vary, as seen in Table 5. In 1980, the OCF/Institutions rations will remain the same, while the OCF/Day Care Centers and MCH rations will be changed, as seen in Table 6.
- SF Programs - The daily ration for school children consists of Wheat-Soy Blend (WSB), Non-Fat Dry Milk (NFDM) and sugar, with the former (WSB) supplied by CARE and the latter two commodities by the Ministry of Education (often using NFDM donated by the European Economic Community). The actual rations for this program are also presented in Tables 5 and 6.

2.2.4.6 Systems of control, resource delivery, supervision and information

- MCH and OCF Programs - All food distributed by CARE in Honduras arrives in Puerto Cortés. The food is then shipped to the CARE warehouse in San Pedro Sula by the National Railroad which, with the MOH, assumes the cost of transportation. Subsequently, a large amount of food is trucked by the JNBS and MOH to CARE's central warehouse in Tegucigalpa.

Table 5
 CARE, FY 1979
 Food Rations for MCH, OCF & SF Programs

<u>Commodities</u>	<u>Kgs./month</u>	<u>Grams/day</u>	<u>Calories/Day</u>	<u>Proteins/D</u>
<u>MCH (30 days/month)</u>				
WSB ¹	0.68	22.68	81.63	4.54
NFDM	0.91	30.23	108.53	10.85
Soy Fortified Rice ²	0.68	22.68	80.06	4.08
All Purpose Flour	0.68	22.68	82.55	2.38
Salad Oil	<u>0.45</u>	<u>15.12</u>	<u>133.56</u>	<u>-0-</u>
TOTAL	3.4	113.39	486.43	21.85
<u>OCF/Institutions (30 days/month)</u>				
WSB	1.36	45.36	163.30	9.07
NFDM	-0-	-0-	-0-	-0-
Soy Fortified Rice	0.91	30.24	106.75	5.44
All Purpose Flour	0.91	30.24	110.07	3.18
Salad Oil	<u>0.45</u>	<u>15.12</u>	<u>133.66</u>	<u>-0-</u>
TOTAL	3.63	120.96	513.78	17.69
<u>OCF/Day Care Centers (25 days/month)</u>				
WSB	1.36	54.43	195.94	10.88
NFDM	0.91	36.28	130.25	13.02
Soy Fortified Rice	0.45	18.14	64.03	3.27
All Purpose Flour	0.32	12.70	46.22	1.33
Salad Oil	<u>0.23</u>	<u>9.08</u>	<u>80.27</u>	<u>-0-</u>
TOTAL	3.27	130.63	516.71	28.50
<u>SCHOOL FEEDING (20 days/month)</u>				
WSB	1.36	68.04	244.94	13.608
NFDM ³	0.6	30.00	108.90	10.77
Sugar ³	<u>0.2</u>	<u>10.00</u>	<u>40.00</u>	<u>-0-</u>
TOTAL	2.16	108.04	393.84	24.38

1. WSB (Wheat-Soy-Blend) is a processed food which is blended and protein fortified to provide extra protein, vitamins and minerals for weaning infants, young children and adult health cases.
2. Soy Fortified Rice is generally for older children and adults who require extra protein in their diet.
3. Food supplied by the Ministry of Education

Table 6

CARE, FY 1980

Rations for MCH, OCF & SF Programs

<u>Commodities</u>	<u>Kgs./month</u>	<u>Grams/day</u>	<u>Calories/Day</u>	<u>Proteins/Day</u>
<u>MCH (30 days/month)</u>				
WSB ¹	0.91	30.24	108.83	6.05
NFDM ⁴	0.91	30.24	108.53	10.85
Soy Fortified Rice ²	0.68	22.68	80.06	4.08
All Purpose Flour	0.68	22.68	82.55	2.38
Salad Oil	0.45	15.12	83.66	-0-
	<u>3.63</u>	<u>120.96</u>	<u>513.93</u>	<u>23.36</u>
<u>OCF Institutions (30 days/month)</u>				
WSB	1.36	45.36	163.30	9.07
NFDM	-0-	-0-	-0-	-0-
Soy Fortified Rice	0.91	30.24	106.75	5.44
All Purpose Flour	0.91	30.24	110.07	3.18
Salad Oil	0.45	15.12	133.66	-0-
TOTAL	<u>3.63</u>	<u>120.06</u>	<u>513.78</u>	<u>17.69</u>
<u>OCF/Day Care Centers (25 days/month)</u>				
WSB	1.36	54.43	195.94	10.88
NFDM	1.41	36.28	130.25	13.02
Soy Fortified Rice	0.45	18.14	64.03	3.27
All Purpose Flour	0.45	18.14	66.03	1.90
Salad Oil	0.45	18.14	133.66	-0-
TOTAL	<u>8.0</u>	<u>145.13</u>	<u>589.91</u>	<u>29.07</u>
<u>School Feeding (20 days/month)</u>				
WSB	1.36	68.04	244.94	13.608
NFDM ³	0.6	30.00	108.90	10.77
Sugar ³	0.2	10.00	40.00	-0-
TOTAL	<u>2.16</u>	<u>108.04</u>	<u>393.84</u>	<u>24.38</u>

1. WSB (Wheat-Soy-Blend) is a process food which is blended and protein fortified to provide extra protein, vitamins and minerals for weaning infants, young children and adult health cases.

2. Soy Fortified Rice is generally for older children and adults who require extra protein in their diet.

3. Food supplied by the Ministry of Education.

4. Non fat Dry Milk.

From the warehouses in San Pedro Sula and Tegucigalpa, food is released four times per year to the JNBS, MOH and community distribution centers, based on a Master List which indicates the number of beneficiaries in each center. A receipt for the commodities by the truckload is obtained at the time of release from the warehouse. The cost of transportation is then assumed by the JNBS for their centers, and by the individual centers for the MOH and community centers (see Figure E).

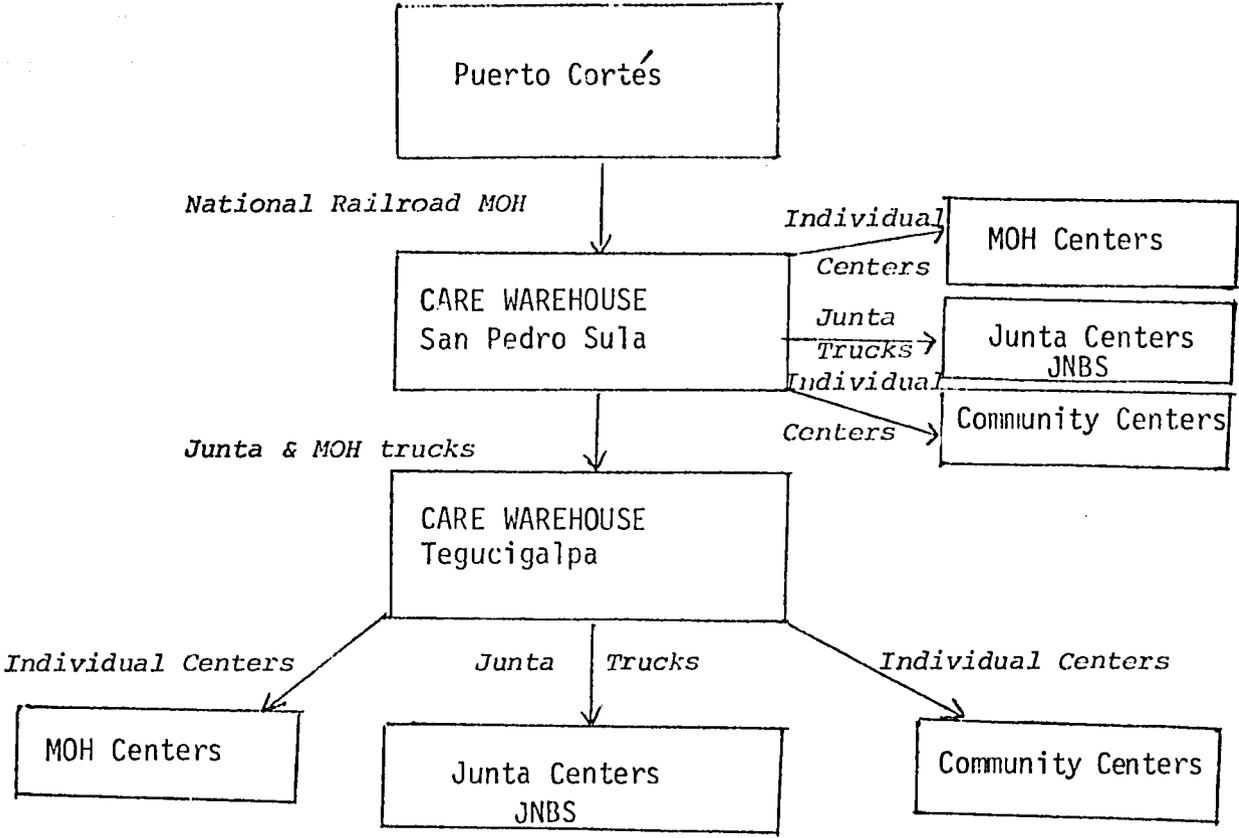
There are a series of points for monitoring and controlling the flow of the food resource through this system. The distribution begins with a report on incoming food in Puerto Cortés where a CARE Loss Advice form is filled out detailing sound, damaged, shortlanded and salvaged figures on commodities. As mentioned previously, a monthly inventory is taken at warehouses in San Pedro Sula and Tegucigalpa which includes quantities of food dispatched from the warehouse and latest indication of beneficiary levels. From this information the Commodity and Recipient Status Reports and Commodity Loss Reports are prepared and sent to USAID/Honduras.

Upon release of commodities to the individual feeding center distribution points, monthly center inventory report forms are provided. These are intended to be completed and returned to CARE on a monthly basis. In reality, they serve to detect any large breakdowns or problems in the system which would warrant a supervisory visit.

There are also eight CARE field supervisors (who spend their time visiting distribution centers) whose responsibilities are outlined in detail in a report by Nelson et al.¹

1. Nelson, David P., Miller, Roy I., A Management Information System for Food Distribution in Honduras: An Exercise in Self-Control, Community Systems Foundation, November 1978, p. 11.

Figure E
 CARE, MCH and OCF Programs
 Commodity Flows



Italics denote the institution which pays for the movement of commodities.

- SF Program - As with the MOH Program, the GOH provides for duty free entry of the food at Puerto Cortes. After the details of the shipment are recorded in the CARE Loss Advice form, the food is transported to the two principle warehouses in San Pedro Sula and Tegucigalpa by the MOE.

From the CARE warehouses in San Pedro Sula and Tegucigalpa, the MOE provides transport to about 125 district warehouses/distribution points, where the food is stored. Then the individual schools pick up the food, and assume the cost for its movement to and preparation at the school (see Figure F).

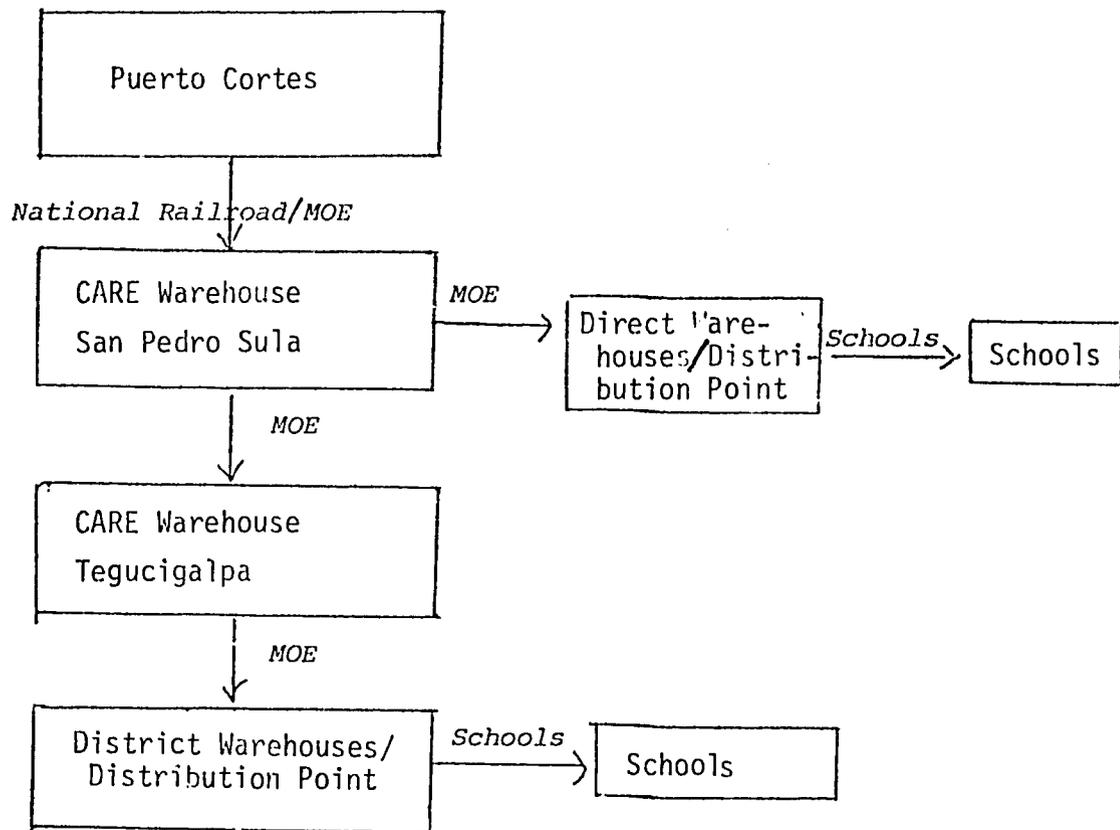
Commodity Recipient and Commodity Loss Status Reports which are derived from the information at the central warehouses are also prepared by CARE and sent to USAID/Honduras. Receipts document the distribution of truckloads of food to the MOE distribution points, and thereafter the distribution of commodities to individual schools. In addition, according to the CARE Program Plans, the MOE monitors distribution and consumption of food in the schools on a monthly basis and forwards this information to CARE. As with the MOH programs, CARE personnel also visit schools and distribution centers. Appropriate recommendations for improvement in operations are made in reports of these visits.

2.2.4.7 Costs estimates and program value

- MCH and OCF Programs - CARE's feeding activities operate under a contractual agreement with the MOH. A formal "Convenio" or contract exists between the MOH and CARE, which serves to support the image of CARE being a contractor, while overcoming ambiguities and conflicts over program responsibilities and control.

The terms of the "Convenio" delineate an amount of money that the MOH will pay CARE for their administrative activities, in

Figure F
 CARE, SF Program
 Commodity Flows



Italics denote the institution which pays for the movement of commodities.

return for an expected quantity of food to be supplied by CARE. These figures give a reasonably accurate estimate of the magnitude and costs (dollar value) of the CARE-MOH feeding programs.

For the period from July 1, 1979 to June 30, 1980, the Convenio reads that CARE MCH and OCF programs will supply approximately the following commodities: Wheat-Soy Blend - 924,500 kgs; Non Fat Dry Milk - 845,500 kgs; Soy Fortified Rice - 657,300 kgs; All-Purpose Flour - 657,300 kgs; and Salad Oil - 444,500 kgs. The value of this food, including ocean freight, is approximately \$1,593,044 according to the Convenio. In return, the MOH will pay CARE \$113,123 in four equal payments for their management and administrative responsibilities. This places the total value of the program in FY 1979 at about \$1.7 million, which includes the costs of the food, ocean freight from the U.S. and CARE's administrative recovery. Unfortunately, no figures exist on the costs incurred by the MOH, the JNBS or the Community Centers for inland transportation and the programming of the food.

Besides the approximation of program value from the Convenio, the Annual Estimate of Requirements (AER) prepared by CARE and approved by USAID/Honduras and AID/W gives another estimate (probably fairly accurate) of the actual quantities and value of food being donated and programmed each year. Table 7 presents this information from the AER for 1979 and 1980 as well as CARE's projections for 1981 for the MCH, OCF/Institutions and OCF/Day Care Centers programs. These figures reflect the magnitude of the resource being transferred from the U.S. to Honduras. This information will hopefully help guide future program planning decisions.

- SF Program - A similar agreement to the one that governs CARE's activities with the MOH exists between the MOE and

Table 7

CARE, 1979, 1980, 1981

Estimated Dollar Value/Commodities¹

Commodity	1979		1980		1981	
	Kgs ²	Dollars ³	Kgs ⁴	Dollars ⁵	Kgs ⁶	Dollars ⁷
WSB	572,000	181,324	762,000	283,464	918,000	277,236
NFDM	762,000	268,986	762,000	268,986	918,000	324,054
Soy Fortified Rice	572,000	252,252	572,000	290,004	688,500	303,628
A.P. Flour	572,000	118,404	572,000	145,288	688,500	129,438
Oil	381,000	344,424	381,000	336,042	459,000	376,839
Sub-Total	2,859,000	1,165,390	3,049,000	1,323,784	3,672,000	1,411,195
	Recipients: 70,000		Recipients: 70,000		Recipients: 85,000	
<u>OCF</u>						
A. Institutions						
WSB	49,000	15,533	49,000	18,228	48,978	14,791
Soy Fort. Rice	33,000	14,533	33,000	16,731	32,652	14,000
A.P. Flour	33,000	6,832	33,000	8,382	32,652	6,139
Oil	16,000	14,464	16,000	14,112	16,326	13,404
B. Day-Care Centers						
WSB	33,000	10,461	33,000	12,276	32,652	9,861
NFDM	22,000	7,766	22,000	7,666	21,768	7,684
Soy Fort. Rice	11,000	4,851	11,000	5,577	10,884	4,800
A.P. Flour	8,000	1,656	11,000	2,794	10,884	2,046
Oil	5,000	4,520	11,000	9,702	10,884	8,936
	205,000	80,615	219,000	95,468	217,680	82,061
	Recipients: 5,000		Recipients: 5,000		Recipients: 5,000	
<u>SF</u>						
WSB	2,394,000	758,898	2,394,000	890,568	2,721,000	821,742
	Recipients: 220,000		Recipients: 220,000		Recipients: 340,000	
TOTALS	5,458,000	2,004,903	5,662,000	2,309,820	6,610,680	2,314,998
	Recipients: 295,000		Recipients: 295,000		Recipients: 340,000	

1. Does not include the ocean freight

2. Based on 1979 AER

3,5. Based on approximate commodity values supplied by AID/Washington

4. Based on 1980 AER

6,7. Based on projections supplied by CARE

and CARE for the SF activities. The Convenio dictates that CARE will make available to the GOH 2,394,000 kgs. of Wheat-Soy Blend, with an approximate value of \$873,618 including ocean freight. In turn, CARE receives \$81,733 from the MOE in administrative recovery. No figures were available on the costs incurred by the MOE.

The AER's likewise present data concerning the magnitude of the resource transfer to Honduras (the quantity of food being donated and the actual dollar value of the food itself). Table 7 also presents this information for 1979 and 1980 as well as CARE's projections for 1981. Data (which are presently lacking) should be gathered on total program costs including administration, transport and storage within Honduras.

2.2.5 CRS/Caritas

2.2.5.1 Introduction

In 1967, Catholic Relief Services (CRS) began programming P.L. 480 Title II food in Maternal and Child Health (MCH) and Food-for-Work (FFW) programs in Honduras. CRS provides the Title II commodities to the people of Honduras under agreement with the Ministry of Health as per the 1967 Convenio which outlines the responsibilities and operating parameters for the CRS feeding program.

Caritas of Honduras is the local non-government counterpart agency which actually operates and executes programs through the Diocesan structure in the country. The central office determines program levels for each Diocese which, in turn, consults with the local Parishes to select the beneficiaries of the program.

2.2.5.2 Aims and objectives

By meeting the objective of providing a nutritional supplement to the pregnant and lactating women, infants and pre-school children, the MCH program aims at significantly improving the

nutritional status of its beneficiaries. The primary objective of the FFW program is the promotion of "rural community development work through cooperative action."²

2.2.5.3 Beneficiary type and geographic area

Pregnant and lactating women, and malnourished children are the beneficiaries of the MCH Program. Men and women who are considered needy are the beneficiaries of the FFW Program.

CRS/Caritas reported that at the national level in Tegucigalpa, there is no accurate information presently available on the numbers of beneficiaries by geographic location. However they were able to report the geographical areas covered by the program; the diocesan Caritas offices would be able to more accurately identify the number and location of beneficiaries. The five dioceses are as follows:

1. San Pedro Sula (Parishes of San Pedro, La Ceiba, Rio Lindo, Villa Nueva, Cofradia, Santa Cruz de Yojoa, La Lima, Masica, Puerto Cortes, El Progreso).
2. Comayagua (Parishes of Comayagua, La Libertad, Intibuca, Camasca, Florida).
3. Santa Rosa de Copan (Parishes of Santa Rosa, Dulce Nombre, Trinidad, Florida, Lepaera, San Marcos Ocotepeque, Corquin, Guarita, Tonlala, Valladolid).
4. Tegucigalpa (Parishes of Maria Auxiliadora, El Paraiso, Comayagueta, S. Lucas, Sabanagrande, Moraceli, Oropoli).
5. Choluteca (Parishes of Pespire, S. Lorenzo, Choluteca, Orocuina, El Truiunfo, S. Marcos de Colon).

2.2.5.4 Selection criteria

- MCH Program - There are no formal selection criteria for the program, other than the eligibility of pregnant or lactating women and malnourished children in designated communities. However, the CRS/Caritas MCH feeding activities are closely linked to Housewives Clubs which exist in rural villages.

2. CRS FY 1980 Program Plan, April 5, 1979. p. 3.

These clubs are affiliated with the Diocesan offices and meet regularly concerning various topics of interest and concern, one of which is nutrition. They are involved in selection of beneficiaries, but the exact mechanisms could not be determined.

- FFW Program - The two criteria that guide in the selection of FFW beneficiaries are that the individual must be: (1) "needy" (which remains undefined) and (2) affiliated with a community organization which has proposed a concrete project or activity aimed at improving the welfare of that community. Thereafter, a contract is entered into by the parish Caritas supervisor and the community organization.

2.2.5.5 Type and quantity of rations

- MCH Program - Distribution of rations for this program is usually on a daily basis, given out in a cooked form at a central site in the village. Occasionally, food may be distributed weekly in dry form. Tables 8 and 9 present the approved ration levels for 1979 and 1980.
- FFW Program - The distribution of this ration is in dry form, on a monthly basis. Each worker receives a daily ration for himself/herself and four other dependents, based on the number of days worked during the month. For example, in FY 1980 although there are only 5,000 workers, there are an additional 20,000 dependents resulting in a total of 25,000 beneficiaries. The ration for FY 1979 and 1980 are also found in Tables 8 and 9.

2.2.5.6 Systems of control, resource delivery, supervision and information

All P.L. 480 Title II commodities programmed by CRS arrive at Puerto Cortés, after the USG has assumed the costs for the ocean freight from the U.S. Thereafter, the food is trucked by CRS/ Caritas to the five Diocesan bodegas (storage or warehouse facilities) in Tegucigalpa, San Pedro Sula, Chomayagua, Choluteca and Santa Rosa de Copan. From there the food is distributed to one of the

Table 8

CRS, FY 1979

Food Rations for MCH and FFW Programs

<u>Commodity</u> <u>MCH (30 days/month)</u>	<u>Kgs/month</u>	<u>Grams/day</u>	<u>Cal/day</u>	<u>Protein/day</u>
CSM ¹	0.45	15.0	54.0	3.0
Rolled Oats	0.45	15.0	56.3	1.6
NFDM	0.91	30.0	108.0	10.85
Vegetable Oil	0.45	15.0	132.6	-0-
TOTAL	2.26	75.0	350.9	15.4
<u>FFW²</u>				
CSM	2.27	75.7	287.66	15.14
Bulgur Wheat	2.27	75.7	267.98	8.47
Vegetable Oil	0.32	10.6	93.7	-0-
TOTAL	4.86	162.0	649.34	23.61

1 CSM (corn-soy-milk) is a processed food which is blended and protein fortified to provide extra protein, vitamins and minerals for weaning infants, young children and adult health cases.

2 There are usually five of these rations distributed per worker: one for the worker himself and four for dependents, which equals a ration of approximately 24 kg of food/family/month.

Table 9

CRS, FY 1980

Food Rations for MCH and FFW Programs

<u>Commodity</u> <u>MCH (30 days/month)</u>	<u>Kgs/month</u>	<u>Grams/day</u>	<u>Cal/day</u>	<u>Protein/day</u>
CSM ¹	0.45	15.0	54.0	3.0
Milled Rice ²	0.91	30.0	108.00	2.01
NFDM	0.91	30.00	108.0	10.85
Vegetable Oil	0.45	15.0	132.6	-0-
TOTAL	2.72 kg	90.0	402.6	15.95
<u>FFW³</u>				
CSM	1.82	60.70	230.7	12.14
Rice	2.27	75.7	274.8	5.07
Vegetable Oil	0.32	10.6	93.7	-0-
TOTAL	4.41 kg	147.0	599.2	22.28

- 1 CSM (corn-soy-milk) is a processed food which is blended and protein fortified to provide extra protein, vitamins and minerals for weaning infants, young children and adult health cases.
- 2 CRS originally requested 0.45 kgs of rolled oats and 0.45 kgs of soy-fortified rice to be used in their program. Due to the unavailability of these commodities from the U.S., they substituted 0.91 kgs of milled rice.
- 3 There are usually five of these rations distributed per worker: one for the worker himself and four for dependents, which equals a ration of approximately 24 kg of food/family/month.

39 parish warehouses. A representative of the MCH center of the FFW program then visits the parish warehouse on a monthly basis, where (s)he receives a monthly allotment based on a distribution list (see Figure G).

From the time the food is off-loaded at Puerto Cortés until it is consumed by the beneficiaries, all inland transportation, storage and logistical activities are provided by CRS/Caritas. Through FY 1979, the GOH-MOH has provided a \$50,000/year subsidy for moving and programming the food. It is anticipated that in FY 1980, the subsidy will be increased to \$118,000.

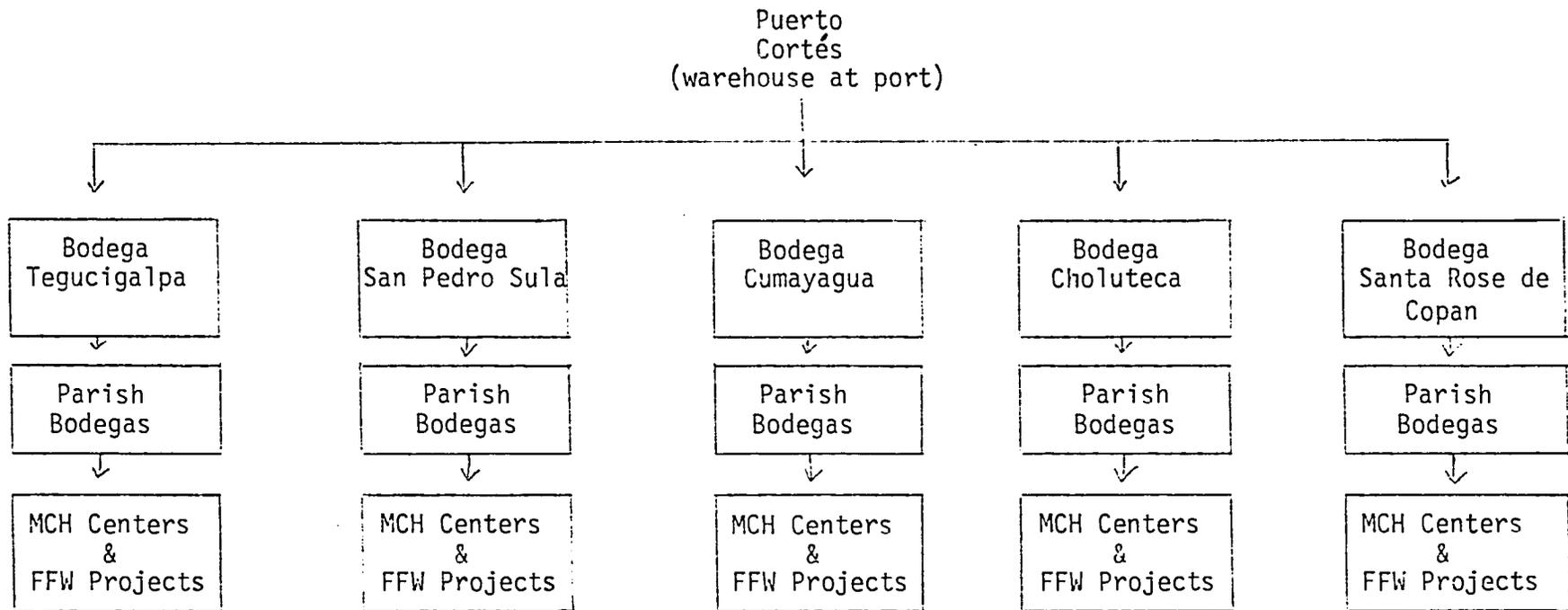
As with the CARE programs, records are made of the commodities upon arrival in Puerto Cortes, which reflect the quantity and quality of the food received. CRS/Caritas then authorizes the release of food by port customs officials to Diocesan representatives based on records of current stocks and programmed food levels. Proof of receipt of commodities is secured upon delivery to the individual Dioceses; one copy is kept at the warehouse itself and the other sent to CRS/Caritas headquarters in Tegucigalpa.

As mentioned previously, Caritas distributes the food from the warehouse to the MCH and FFW centers on the basis of a list of beneficiaries contained in a contractual agreement which allocates food to the individual projects. The Caritas centers supposedly prepare monthly distribution reports, made on the basis of food distributed and available inventory.

Ideally, CRS and the National Caritas personnel audit the distribution centers on a monthly basis, although this is not always the case. There are also a number of end-use checks made at the MCH centers or FFW sites by CRS and Caritas supervisors. Furthermore, each of the dioceses balances the commodity flows each month, using the information supplied by the parish directors. This information

Figure 3

CRS COMMODITY DISTRIBUTION



is subsequently used by CRS to determine all inland commodity losses, in addition to preparing Recipient and Commodity Status Reports, which are forwarded to USAID/Honduras.

At present, the administrative recovery of \$50,000 per year from the MOH is inadequate to meet the transportation and monitoring costs for the food. As a result, programs in FY 1979 were cut back to 50-60 percent of the authorized levels, and the ability to detect problems in the flow of commodities was severely jeopardized.

2.2.5.7 Cost estimates of program value

The total costs of the CRS/Caritas MCH and FFW programs are the sum of the value of the food commodities (excluding ocean freight), the administrative recovery received from the MOH, plus the value of the volunteer time contributed by Caritas and other community based individuals which, unfortunately, cannot be quantified.

Concerning the administrative recovery, CRS/Caritas is anticipating receiving an increase in the subsidy from the MOH in FY 1980. The projected value of the subsidy will be \$118,000, rather than the \$50,000 received in 1979. This MOH contribution will help assure that the CRS/Caritas MCH and FFW programs reach their approved level of beneficiaries with the appropriate ration.

The approved levels and value of commodities for the MCH and FFW programs are as follows:

- MCH Program - The FY 1979 program reached 16,600 beneficiaries, instead of the approved level of 30,000 due to lack of administrative funds. Likewise, only 436,399 kg of the 812,000 kg of commodities were actually distributed. Therefore, the actual value of the commodities programmed was \$170,340.

Table 10

CRS, 1979, 1980, 1981

Estimated Dollar Value of Commodities¹

Commodity	1979		1980		1981	
	Kgs ²	Dollars ³	Kgs ⁴	Dollars ⁵	Kgs ⁶	Dollars ⁷
<u>MCH</u>						
CSM	126,376	40,819	162,000	51,840	162,000	45,000
Rolled Oats	79,225	21,786	-0-	-0-	-0-	-0-
Rice	-0-	-0-	326,000	115,078	-0-	-0-
Soy Fortified Rice	-0-	-0-	-0-	-0-	326,000	144,000
NFDM	183,130	64,644	326,000	115,078	326,000	115,000
Vegetable Oil	47,667	43,091	162,000	142,884	162,000	133,000
Sub Total	436,398	170,340	976,000	424,880	976,000	437,000
	Recipients: 16,600		Recipients: 30,000		Recipients: 30,000	
<u>FFW</u>						
CSM	313,664	101,313	546,000	174,720	546,000	151,000
Bulgur	356,913	73,880	-0-	-0-	-0-	-0-
Rice	-0-	-0-	680,000	240,040	-0-	-0-
Soy Fortified Rice	-0-	-0-	-0-	-0-	580,000	256,000
Vegetable Oil	73,845	66,755	96,000	84,672	96,000	79,000
Sub-Total	744,422	241,948	1,322,000	499,432	1,222,000	486,000
	Recipients: 17,000		Recipients: 25,000		Recipients: 25,000	
TOTAL	1,180,817	412,288	2,298,000	924,312	2,198,000	923,000
	Recipients: 33,600		Recipients: 55,000		Recipients: 55,000	

1. Does not include ocean freight

2. Represents the commodities actually distributed by CRS, not the approved levels as found in the AER's

3,5. Based on commodity values supplied by AID/Washington

4. Based on 1980 AER

Based on projections supplied by CRS

In 1980, the increased MOH subsidy will facilitate the program operating at its approved level; the commodity value is projected to be \$424,880 (see Table 10).

- FFW Program - The FY 1979 program provided 774,422 kg of commodities to 17,000 beneficiaries. This compares with the 1,456,000 kg for 25,000 beneficiaries that were approved by AID. These figures indicate that only 68% of the projected beneficiaries were reached and 51% of the food distributed.

Therefore the actual dollar value of the commodities in the FFW program in FY 1979 was \$241,948. In 1980 the value of the approved commodities is \$1,322,000 (see Table 10).

2.3 World Food Programme

2.3.1 Introduction

In 1962, separate resolutions of the U.N. General Assembly and the Food and Agriculture Organization (FAO) established the World Food Programme (WFP). Originally, it was charged with the responsibility for channeling surplus food commodities from donor countries to be used for socioeconomic development in developing countries. The food, donated by more than 100 countries, is designed to be used for specific development projects, rather than as a charitable contribution.³

The 50 members of the Committee on Food Aid Policies and Program (CFA) meet every six months and serve as the WFP governing body. Besides providing general policy, administrative and operational guidance, the Committee reviews and approves all WFP projects. The U.S. is one of the permanent members of the CFA, and thereby exerts its influence over WFP activities. The WFP consults with the various bilateral food programs, such as the USAID Missions during project

3. More than Food, Development & the World Food Programme, published by the World Food Programme.

development, to assure that there is not a "duplication, overlapping, or impinging upon projects being carried out by voluntary agencies or other cooperating sponsors."⁴

2.3.2 Programs in Honduras

2.3.2.1 Introduction

All World Food Programme assistance is provided under Agreement No. 8 between the Government of Honduras and the World Food Programme of the UN/FAO, which was signed on February 3, 1971. Among the numerous issues covered in the agreement is the specification that the GOH will be responsible for the execution of the projects, with WFP providing the commodities and consultation on their utilization.

There are three World Food Programme projects operating in Honduras.

- Honduras 718 Expansion - Rural Development and Rehabilitation through Self-Help, which was initiated in July 1979 for a duration of four years. It is a FFW type of activity which involves the provision of a food ration in return for participation in rural infrastructure development projects and vocational training.
- Honduras 2283 - Production of Basic Grain and Development of Rural Infrastructure, which was initiated in August 1977 for a duration of three years. It is a FFW type of activity, designed to use the food ration as a catalyst to assist a variety of governmental measures designed to promote agrarian reform.
- Honduras 1145 Expansion - Food Assistance for the Nicaraguan Refugee Population, which was initiated in September 1978 for a duration of almost one year. It involves the distribution

4. Handbook 9: Food for Peace, Title II. p. 10-6.

of commodities to needy refugees from Nicaragua who crossed the border and sought asylum in Honduras. Since the termination of this project is currently underway, we will not discuss it in any further detail.

It is also worth noting that in keeping with WFP's philosophy of formulating development projects with limited duration, a number of other WFP projects have previously existed in Honduras since 1966 but have already been terminated. Likewise, there promises to be a series of projects which will be initiated in the near future. Most imminent and interesting of possible future projects is the "Early Diagnosis and Treatment of Malnutrition and the Family." This is being suggested to support the Ministry of Health project designed to increase coverage in the diagnosis and treatment of malnutrition. Questions concerning the capacity of MOH food handling facilities and the potential for duplicating existing CARE activities should be resolved.

A brief description of this proposed project is found on page 145 of this report.

2.3.2.2 Aims and objectives

- Honduras 718 Expansion - The major objectives outlined for this FFW project are:
 1. Mobilizing the unemployed and under-employed through constructing small infrastructure works designed to have social and economic impact via improved utilization of local material and human resources;
 2. Providing appropriate technical assistance, production input, credit and cooperative organization, in order to increase and improve agricultural production among small farmers;
 3. Increasing the role of rural women in development;
 4. Training of local people, with the intention of furthering their contribution to producing goods and fostering improved attitudes toward their socioeconomic development.

In turn, it is envisioned that the nutritional and health status of participants in the program will improve due to the food distribution, food production and nutrition education activities which characterize this project.

- Honduras 2283 - Through implementing this WFP project, the GOH expects to realize the following general objectives:
 1. Increase and improve basic grain, vegetable and fruit production through expanded areas of cultivation and higher yields.
 2. Organize farmers and supply them with technical assistance and credit in order to encourage the use of modern agricultural technology, which will increase the efficiency of agricultural enterprises.
 3. Diversify cropping patterns to guard against agricultural and marketing hazards.
 4. Decrease unemployment and underemployment.
 5. Promote infrastructure development.
 6. Improve the health, nutrition and housing levels of rural families through increased incomes.
 7. Promote coordination among governmental institutions responsible for rural development.

More specifically, it is intended that 30,000 farmers and their families be reached during the three years of the program (5,000 the first year, 9,000 the second and 16,000 the third). The goals are that 75,600 hectares of additional land will go into grain production, and 750 hectares into vegetable gardens or fruit orchards. This will account for 3.6 million man-days of work, which will be compensated by WFP rations.

It is also expected that the infrastructure development projects and training courses will involve 900,000 and 9,000 man-days of work, respectively, which will be covered by WFP food assistance.

The food distributed by WFP is considered an incentive for small farmers to participate in the grain production and infrastructure schemes. The WFP food is designed to allow farmers to concentrate their activities during lean periods and the initial growing season on increasing production and utilizing the other services being supplied to them. These services include technical assistance from the Ministry of Natural Resources (MNR) and credit from the Banco Nacional de Fomento (BNF). In addition, the BNF has established grain support prices and is committed to purchasing the production of the project beneficiaries.

2.3.2.3 Programs by beneficiary type and geographic area

- Honduras 718 Expansion - The project is operational throughout the country, although priority is given to the South-west region. No information was available on the exact location of projects and beneficiaries.
- Honduras 2283 - The project is designed to reach 30,000 farmers and their dependents in the following regions of Honduras:

<u>Regions</u>	<u>Number of Families</u>
North	6,000
South	2,500
West	4,000
Northeast	5,500
North Coast	5,000
Central West	3,600
Central East	<u>3,400</u>
Total	30,000

2.3.2.4 Type and quantity of rations

- Honduras 718 Expansion - Like the CRS FFW activities, each worker receives a daily ration for him or herself, and an additional ration for an average of four dependents. This is compensation for either a day's work in the rural infrastructure projects or participation in the training courses. Table 11 indicates the exact type and quantity of these rations.

Table 11

WFP

Rations for Honduras 718 Expansion

<u>Commodity</u>			
<u>Honduras 718 Expansion</u>	<u>Grams/day</u>	<u>Cal/day</u>	<u>Protein/day</u>
Maize	350	--	--
Pulses	20	--	--
Canned fish/dried fish/canned meat	40	--	--
NFDM	20	--	--
Vegetable Oil	30	--	--
	<hr/>	<hr/>	<hr/>
TOTAL	460	1,700	48
<u>Honduras 2283</u>			
Maize	350	--	--
Beans	40	--	--
Canned fish/meat	30	--	--
NFDM	30	--	--
Vegetable Oil	30	--	--
	<hr/>	<hr/>	<hr/>
TOTAL	480	1,800	56

The frequency or duration of receiving rations is dependent upon the length of attendance and participation in the infrastructure projects and training courses.

- Honduras 2283 - On the average, each farmer will receive a ration for himself and four family members for the 120 days which correspond to the first cycle of basic grain crops. He is also entitled to receive an additional 30 days worth of rations for himself and his family while participating in training activities or infrastructure works. Table 11 indicates the exact type and quantity of these rations.

2.3.2.5 Systems of control, resource delivery, supervision and information

- Honduras 718 Expansion - The implementation of this project is primarily the responsibility of the JNBS. In addition, an Executive Committee with representatives from the Ministries involved in the project (Natural Resources, Education, Public Works and Transport, and Health and Communications), CONSUPLANE and JNBS (which supplies the Secretary of the Committee) is responsible for the inter-agency coordination.

Overall, the JNBS provides logistical support for the WFP food and has the responsibility of accounting for and reporting on its use. However, CONSUPLANE remains the focus for evaluation of the program and communication with WFP on policy matters.

As with the Title II projects, all WFP food commodities arrive at Puerto Cortes. JNBS then offloads the commodities onto their trucks which transport the food to the central warehouse in San Pedro Sula; from there, it is disbursed to regional warehouses. The distribution to the feeding sites is the responsibility of various government entities operating the individual projects or alternatively, of the beneficiaries themselves, who transport the

commodities on mules or horses. The actual distribution to the beneficiaries is on a monthly or bi-monthly basis.

- Honduras 2283 - Following the arrival of WFP commodities at Puerto Cortés, the actual accounting and withdrawal of food is done by the JNBS. They are responsible for offloading the commodities onto their trucks and thereafter, along with MNR, for transporting the commodities to the central warehouse in San Pedro Sula or to the regional warehouses. The commodities are transported to the project sites in vehicles belonging to MNR or JNBS. Thereafter, the food is distributed to the recipients on a monthly or bi-monthly basis in dry, uncooked form.

2.3.2.6 Cost estimates of program value

- Honduras 718 Expansion - The costs for this project are calculated on the scheduled four year duration of the activities. WFP's costs can be figured in terms of the value of the commodities, the external transport and superintendence of the food. During the four years of the project, it is expected that WFP will contribute \$5,561,000 worth of commodities (see Table 12) and \$986,000 for its external transport, for a total value of \$6,547,000.

In addition to the WFP contributions to FFW infrastructure development and training programs, there is a considerable input by the Honduran counterpart agencies, which will total \$6,719,007 over the four years of project operations. This includes money for moving the WFP food, supplies and materials (e.g., for construction, vehicles, utensils), capital investments and personnel services and administration.

Therefore, the total cost of the project, including WFP food, shipping and in-country support provided by Honduras, is \$13,266,007 over four years.

Table 12

WFP

Estimated Dollar Value of Commodities^{1,2}

Commodities <u>Honduras 718 Expansion</u>	1979 1983	
	<u>Kgs</u>	<u>Dollars</u>
Maize	9,493,731	1,357,600
Pulses	542,732	232,800
Canned fish/dried fish canned meat	1,085,465	2,268,500
NFDM	542,732	447,700
Vegetable Oil	814,554	1,254,400
	<hr/>	<hr/>
	12,479,214	5,561,000

<u>Honduras 2283</u>	1976 - 1979	
	<u>Kgs</u>	<u>Dollars</u>
Maize	7,159,090	1,023,800
Beans	818,182	300,000
Canned fish/dried fish	613,636	1,350,000
NFDM	613,636	675,000
Vegetable Oil	613,636	945,000
	<hr/>	<hr/>
	9,818,180	4,353,800

1. Duration of program.

2. Does not include ocean freight, other WFP administrative costs, nor costs incurred by the GOH.

- Honduras 2283 - As above, the costs for this project are calculated on the scheduled three year duration of activities. During this time frame, WFP will contribute \$4,353,800 worth of commodities (see Table 12) and \$1,102,200 for external transport and supervision, for a total value of \$5,456,000.

In addition to WFP's contribution, the Honduran counterpart agencies will contribute \$21,147,214 for non food costs which include administration, personnel and supplies. Therefore, the total program value is \$26,603,214, with WFP contributing about 20.5 percent of the program's total cost.

2.4 La Cooperacion Hondureña Alemana Alimentos por Trabajo (COHAAT)

During our consultancy, the Director, Executive Coordinator and Coordinator were out of Honduras attending a seminar.

Therefore, only limited information on the COHAAT Program was available, (from CONSUPLANE).

2.4.1 Introduction

In 1975, in the wake of Hurricane Fifi, the Federal Republic of Germany (FRG) initiated a food-for-work (FFW) program in Honduras. La Cooperacion Hondureña Alemana Alimentos por Trabajo (COHAAT) represented an opportunity for the German government to show its solidarity with and provide a humanitarian gesture to the people of Honduras. The assistance provided by the FRG takes three forms: (1) food; (2) technical assistance; and (3) tools and instruments (e.g., wheel barrows and shovels). All of the food used in the COHAAT-FFW programs (maize and beans) is produced locally and purchased in Honduras through the capital supplied by the Germans.

Presently, CONSUPLANE is COHAAT's principle counterpart, and is responsible for the coordination of the program and its proper functioning. In addition, the following Honduran counterparts are involved in the execution of FFW projects:

- National Institute of Agriculture - for the agrarian reform projects
- Ministry of Natural Resources - in charge of projects of various independent groups
- The Honduran Forest Development Corporation - for the projects concerned with forest development
- The Ministry of Government and Justice - responsible for the coordination of local development projects
- Others such as the Ministry of Communication, Public Works and Transportation, that will be in charge of some infrastructure and zonal development projects.

2.4.2 Aims and Objectives

COHAAT has stated its objectives in both general and specific terms. The former is to support the realization of the goals of the Honduras National Development Plan, with special attention focused on the improvement of the level and quality of life, assuring employment and access to an adequate diet. The latter is to improve the plight of the marginal groups and to promote self-sufficiency through their participation in the FFW projects.

In addition, the COHAAT FFW activities (1) must support and be integrated with other activities of the counterparts with whom they are working; (2) must be viewed as a temporary source of outside support; (3) must not create dependency; and (4) are not charity programs.

2.4.3 Programs by Beneficiary Type and Geographic Area

COHAAT collaborates with national institutions in the Southern Region of Honduras in the Departments of Choluteca and Valle. In addition, they work in the forest districts of the Eastern Central Region in the Departments of Comayagua, Santa Rosa de Copan and Ocotepeque.

2.4.4 Cost Estimates of Program Value

The only cost figures available from COHAAT were of the total pledges of the COHAAT program in the years 1975-1978. These are summarized below in Table 13. The dollar values shown include the value of the food, packaging, transportation, tools and other operational costs.

Table 13

COHAAT, 1975-1978

<u>Year</u> ¹	<u>Total Program Value (U.S.\$)</u>
1975	1,275,000
1976	1,163,000
1977	1,815,599 ²
1978	1,860,712

2.5 European Economic Community

2.5.1 Introduction

In 1975, the European Economic Community (EEC) initiated food aid to Honduras following the disaster associated with Hurricane Fifi. Originally two commodities, cereal (wheat) and powdered milk were donated. Starting in 1976, however, vegetable oil was also made available to Honduras by the EEC (see Table 14).

Unlike the other programs discussed in this section, the EEC does not have any personnel working in Honduras. In fact, the EEC is not directly involved in operationalizing or overseeing programs. Rather, the Honduran Ambassador in Brussels, Belgium, negotiates with the EEC representatives concerning the type and quantity of

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1. This is the year in which the money was granted, not when it arrived in Honduras.
 2. This figure includes \$282,599 allocated for an emergency program which supplied basic grain to the southern region of Honduras between July and December 1977.

Table 14

COMMODITIES DONATED BY THE EUROPEAN ECONOMIC COMMUNITY

<u>COMMODITY</u>	Amount in Kg				
	1975	1976	1977	1978	1979
CEREALS (wheat except in 1979 when rice was provided)	3,500,000	7,000,000	1,000,000	7,000,000	1,750,000
POWDERED MILK	100,000	1,000,000	1,000,000	3,075,000	3,000,000
VEGETABLE OIL	---	1,000,000	300,000	515,000	515,000

food to be donated to Honduras. Thereafter, a representative from CONSUPLANE serves as the central figure in coordinating the use of food among the various GOH ministries and programs.

Since each commodity is utilized in a different fashion upon arriving in Honduras, we will present the available information about the EEC program in terms of the use of the cereals, milk and oil.

2.5.2 Cereals

All the wheat donated to Honduras has been transformed into flour for commercialization (sale) in the local markets. Banco de Fomento sells the wheat on credit. The proceeds, coupled with other EEC financial aid, are used in the construction of grain silos in Tocoa in the region of Bajo Aguan in northeast Honduras.

It is the intention of the EEC to assist in the agricultural development of this region and in the promotion of agrarian reform through the construction of the silos; these silos are designed to increase the storage capacity for grains while stabilizing prices. The expansion of cooperative farmer organizations is stressed. Yet another objective of the program is to diversify the urban food supply through increased availability of bread. These measures, collectively, are designed to decrease the dependence of Honduras on donated grains-- through stabilized prices and internal production -- and to improve nutritional status in the country.

2.5.3 Powdered Milk

The milk is distributed non-commercially (free of charge) to school children, hospitals and through other dispensaries by the MOE, MOH, JNBS, National Agrarian Institute (INA) and the Centro Integracion Familiar de Aldeas. Much of the milk is used in the schools to complement the WSB supplied by CARE. All the beneficiaries of the EEC milk also receive 10 g of sugar supplied by the GOH.

2.5.4 Vegetable oil

The donation of vegetable oil, which began in the 1976 program with 1000 MT, was used in two ways: (1) 800 MT was allocated to BANASUPRO, a GOH agency that offers to its clients (rural and urban poor) food and other essential goods at reduced prices (the subsidy of these products is paid for by the GOH, and is intended to result in increased purchasing power of the poor, while slowing the rate of inflation); and (2) 200 MT was given away by the JNBS, MOH and INA.

In the 1977 and 1978 program, 300 and 515 MT, respectively, were received from the EEC. Of the 515 MT received in 1978, 350 was destined for BANASUPRO. No further documentation on the programming of the oil, and the use of EEC commodities in general, was available.

3. Collecting And Centralizing Information Within SAPLAN

3.1 Introduction

In the Strategy for the Implementation of the Food and Nutrition Plan of the National Plan for Development 1979-83, it is suggested that SAPLAN help "reorient all the existing food distribution programs so that they truly contribute to improving food consumption levels of the more vulnerable groups." (p. 3 Annex No. 1)

For this intention to be realized, SAPLAN must assume the major coordinating responsibilities and serve as the depository and source of information for the supplementary feeding programs in Honduras. SAPLAN should approve the requests for food from the various agencies involved in supplementary feeding. This contact can help structure the flow of information through SAPLAN.

In order to begin to remedy the void in the information presently available to SAPLAN, the data previously presented (Tables 2-14) were gathered. It is encouraging to note that increasing SAPLAN's involvement in the feeding programs is a high priority of SAPLAN as well as USAID/Honduras.

This convergence is confirmed by AID having included a special section in this consultancy that requests data on supplementary feeding; this is also an expressed need of SAPLAN in their Food and Nutrition Plan. If nothing else, we hope to impress upon SAPLAN and the other agencies involved in feeding, the magnitude of the food resource being transferred to the people of Honduras through existing multilateral and bilateral agreements. There is an obvious need for coordinating and controlling this vast flow of food, which is a logical role for a multisectoral planning agency like SAPLAN.

Adequate and reliable information is a prerequisite to SAPLAN assuming a central role in overseeing feeding programs. The most basic principle, however, is that clear and accessible channels of communication be opened between SAPLAN and the international and national agencies involved with the donation of the food and execution of programs. This consultancy can best be viewed as beginning that process. However, there should be no delusions that the delicate process of changing historical relationships is an easy one, nor that a short term consultancy can do anything but break the ice in the process. In order to help the process of centralizing information in SAPLAN, we offer the following general suggestions.

3.2 General Practices

Good planning and management practices dictate that only the minimal information required for decision making at any given level of program operations should be collected and centralized at that level. This principle suggests that the information supplied and used by SAPLAN should be minimized, reflecting only the essential data needed for program planning, analysis and coordination activities.

There is an unfortunate tendency in most organizations for high level management to demand too much or all program information available, regardless of its utility in their decisions and activities. The result is often catastrophic, as there is an information overload

which obscures the important and essential data required for decision making. Furthermore, those groups or individuals at the operational level charged with supplying this information, may feel encroached upon and encumbered with reporting requirements.

A second concept is that the provision of information from one group or level to another must be viewed as an interactive process. SAPLAN should not only have the privilege to request data from other agencies to carry out their coordination function, but should recognize the obligation to feedback pertinent information. In other words, the goal of SAPLAN's policy formulation and monitoring activities is to improve the effort, appropriateness, effectiveness and efficiency of the supplementary feeding programs. This can best be facilitated with a formative process that is dynamic, rather than a one way flow of data.

A third point in centralizing information on feeding programs is that the process should be incremental in nature. Initially, only a sub-set of the data considered important should be collected. This will allow for the on-going formulation and re-definition of information needs as the information system is developed. That is, making decisions on what data are needed and should be collected will be facilitated with the available data on-hand, rather than the veritable vacuum that now exists. In addition, this incremental approach will not shock the "existing system" as much. Rather, it can serve to foster communication between SAPLAN and the other agencies, thus enhancing the possibility for orderly transmission of information necessary for SAPLAN's multi-sectoral role in policy, planning and coordination.

A fourth general principle is the dichotomous nature of the information which can be collected by SAPLAN on supplementary feeding programs. The two distinct types are (1) the management (and monitoring) of program operations and activities; and (2) the determination of the impact of these operations and activities. Both have application in SAPLAN's role as a multisectoral planning agency, but must not be confused or considered synonymous.

These two functions often receive the labels of process (formative) evaluation and impact (summative) evaluation, respectively. But regardless of the label used, the two functions require different kinds of data, different approaches to sampling and collection, and most importantly, serve different functions. While an effort should be made to coordinate the respective activities of management and determination of program impact, it must be recognized that two distinct efforts are generally required.

The monitoring and management function requires limited amounts of data on most or all the feeding project sites. This information must be collected on a continual basis. Conversely, evaluation of program impact demands data which generally are more difficult and costly to obtain, and may be collected only at a few project sites, for only a short period in the life cycle of the project.

Finally, it is important to remember that SAPLAN currently faces and must deal with a multiplicity of issues and problems in order to assure its survival and viability as an institution. It would be unfortunate to undertake at this time a role in data collection for feeding programs that would overload SAPLAN's capabilities. In other words, data processing should be minimized and should not be confused or considered synonymous with the formulation of policy guidelines, program planning and assessment of on-going activities. Information collection and its use represents one of the tools SAPLAN should rely upon to realize its charter, rather than the converse which sees SAPLAN using its charter for the sake of collecting unessential information.

We stress this issue because imminently SAPLAN will be receiving a sophisticated piece of data processing equipment. Initially it is designed to help SAPLAN and other agencies train people in the programming of supplemental feeding programs and in other functions. The use of a computer might "prove detrimental if it is attempted before the participating agencies have complete understanding and control of

existing manual information needs."³ Fostering communication between the groups involved in feeding programs, learning about each others needs and the respective operational responsibilities, remains the first and most important task.

Given the few principles and cautions outlined above, the challenge is to determine not only the nature and specifics of the information to be centralized within SAPLAN, but also how this can be done while avoiding an administrative breakdown. The following conceptual framework can serve as guidance for standardizing pertinent information within SAPLAN. Some immediate and specific information needs of SAPLAN will be identified. However, the only meaningful and, in the long run, workable approach is for SAPLAN and the donor and executing agencies to jointly determine an appropriate system for the exchange and centralization of information.

3.3 A Conceptual Understanding of Feeding Programs

Before applying the principles outlined above to a discussion of SAPLAN's information needs, it is important to recognize that the ability to intelligently decide what information to collect is a function of posing the appropriate questions about program operations. The quality of the answers and information one receives will reflect the intelligence of questions asked.

The focus of this report is not on how to collect the data, but on the ordering of a reality so that the correct information is quantified. Quantification prior to an adequate conceptualization of program operations is not only pointless, but often detrimental (pointless because the wrong questions are answered, and detrimental because the right questions go unanswered). The context in which the present supplementary feeding programs are operating must be clearly understood in order to formulate intelligent areas of inquiry about program operations. If the nature of the program is unclear, inevitably the questions asked and data collected will serve to obfuscate, rather than elucidate.

Therefore, a conceptual framework to guide program operations and information gathering is a necessary first step. One such framework, the "logical framework," can be viewed with four major stages at which feeding activities and outcomes can be identified and measured.

- The INPUT - Food

The common thread that links all feeding programs in Honduras is the availability of food, to be distributed through noncommercial channels to a specified target group.

The availability of this food often has preceded the development of clearly focused objectives for its use. In other words, the link of projects sponsored by P.L. 480 Title II, World Food Programme and the EEC is that they developed because of the availability of an input, food (surplus commodities), and have been searching for goals and a guiding conceptual framework ever since. This is to be contrasted with appropriate program planning procedures which demand that a problem be diagnosed, followed by the definition of an objective and the identification of the input (resources) needed to initiate the program and thereby realize the objective(s).

- The OUTPUT - Projects

Once the use of the food is decided upon, the expected results of reasonable management of the input (food) are various types of feeding projects, which generally fall into three categories: Maternal and Child Feeding (MCH), School Feeding (SF) and Food-for-Work (FFW).

- The PURPOSES(S) - Nutritional, Health, Educational, Economic and Agricultural

The purposes of a program represent the expected achievement of, or primary reason for, the various types of projects. Depending on the nature of the feeding program, the purpose, or priority of purposes are different. For example, the purpose of an MCH feeding program

might be improved health and nutritional status; of a SF program, more education; and of a FFW program, more employment and infrastructure development.

- The GOAL - Economic Development, Improved Community Welfare

If project purposes are met, there is a higher objective to which the program is designed to contribute, such as "development."

From inputs to outputs, outputs to purposes, and purposes to goals can be viewed as a causal progression of program events that defines a logical framework (logframe) in which to place supplementary feeding programs (see Figure H).

In examining Figure G, it is noted that supplementary feeding programs have similar inputs and goals (except the goal of disaster relief programs) and different outputs and purposes.

In addition it should be recognized that there are a series of hypotheses/assumptions that link inputs to outputs, outputs to purposes, and purposes to goals for different program types. That is, there are a series of conditions or situations which must exist in order to make reasonable the progression of events (inputs to goals) depicted in the disaster relief, MCH, SF and FFW programs in the logframe. The statement and understanding of these conditions is also of importance in the development of a conceptual framework to guide program operations.

3.4 Logframe as a Guideline for Information Collection

The logframe can serve as a tool for standardizing information on supplementary feeding programs within SAPLAN. Therefore, the first step should be for SAPLAN and the appropriate international and governmental agencies to meet in order to make explicit the quantity and quality of the projected input, and to clarify the objectives of these programs at the output, purpose and goal level.

Figure H

LOGFRAME FOR SUPPLEMENTARY FEEDING PROGRAMS

INPUTS	FOOD			
	LINKING HYPOTHESES AND ASSUMPTIONS			
OUTPUTS	Ad Hoc Efforts in Disasters	Maternal & Child Programs	School Feeding Programs	Food for Work Programs
	LINKING HYPOTHESES AND ASSUMPTIONS			
PURPOSES	Hunger Relieved	Improved Nutrition and/or Improved Health	More Education and/or Improved Nutrition	Infrastructure Development and/or Less Unemployment and/or More Agricultural Production and/or Improved Nutrition
	LINKING HYPOTHESES AND ASSUMPTIONS			
GOALS	Relief Humanitarian	Development	Development	Development

Presently different agencies express their aims and objectives at different stages of the logframe. That is, aims and objectives can be expressed in terms of outputs, purposes or goals. The result is that identical types of programs with a similar intended progression of events from inputs to goals, might express their aims and objectives in an inconsistent and therefore confusing manner. The logframe represents a tool for understanding and reconciling differences in the perspectives of various individuals and organizations.

For example, CARE prefers to have their objectives stated solely in terms of achieving the program output -- that is, to have 100% feeding efficiency. WFP's stated objective for their FFW activities is to increase employment, which is measured at the purpose level; CRS's objective -- to improve the quality of life and promote development -- is a measure of attainment at the goal level. For the sake of consistency, a logframe or similar planning device that lucidly expresses the objectives at various stages in the progression of program activities is advisable.

Once a logframe has been formulated for the various supplementary feeding programs, two features concerning information collection warrant discussion:

3.4.1 Inputs and outputs of feeding programs - development of a monitoring system

SAPLAN's information gathering efforts should parallel the progression of program events, beginning with a quantification of inputs into the system. Thereafter, SAPLAN should determine how the inputs (food, money, personnel) are being used and managed to formulate outputs (programs). Data on which communities, municipalities and departments are receiving food; information on what type of program is operational (i.e., MCH, SF, FFW); and quantification of the number of type of beneficiaries and what services other than food that they receive from the program should be collected. This type

of information represents the development of a monitoring system which asks the same basic questions regardless of program characteristics or sponsors.

With this type of information available, SAPLAN can begin to guide the allocation of resources and the planning and coordination of feeding programs between the various agencies. Duplication of effort will be limited and the more efficacious use of the available resources can be the overall result.

However, it is stressed that measuring how the food is being programmed and defining the characteristics of operational projects are monitoring functions that are interactive. Information should flow to SAPLAN, be interpreted and analyzed, and subsequently, directives on programming should be fed-back to the implementing agencies.

3.4.2 Purposes and goals of feeding programs - measuring impact

Measuring achievement of purposes and goals of supplementary feeding programs generally represents a precarious activity which we would caution against. This is especially true of those programs where the purpose is improved nutritional status a realization which will be very difficult to measure, let alone attribute to the existence of a feeding program. However, it is acknowledged that FFW project purposes such as infrastructure development and increased employment might be easier and more reasonable to attempt to measure (although this supports the contention that different instruments are needed for measuring impact of different types of programs).

At a very minimum, however, the existence and functioning of a monitoring system which substantiates the utilization of inputs to achieve desired programs is pre-requisite to measuring purpose or goal achievement. If this is not achieved, any indications that purposes or goals have been met will not be attributable to program activities, because there will be little or no evidence that the

feeding program and the food resource impacted on the lives of the beneficiaries, as was originally intended or planned.

To illustrate, let us examine the case of a MCH supplementary feeding program, the purpose of which is to improve nutritional status of pregnant and lactating women and pre-school age children. In order to discern whether this purpose is achieved, we must first measure the extent to which the food (input) is being used in program activities (outputs). This is accomplished through the type of monitoring system which is a precondition to further evaluation efforts.

Once this monitoring is accomplished, a further consideration is that in order for the MCH program (output) to have an impact on a child's health and nutritional status (purpose), several conditions must be met. Among these are:

- Nutrient intake by the target group, in the absence of the feeding program, is deficient.
- Food reaches and is consumed by the individuals in the target groups in quantities specified (no sharing)
- The food distributed supplies fully the nutrient deficiencies in the target group.
- Substitution for other family food does not occur.
- Nutrient losses due to infection or parasite infestation do not occur.

If these conditions are not met, then nutritional impact of the food will be reduced. For example, if the supplemental food is shared with other family members, the quantity reaching the target individual will be smaller and therefore, of less nutritional benefit. Similarly, if targeting is inadequate and some beneficiaries are not nutritionally deficient, then the food which goes to them is "wasted." The difficulties in attributing changes in nutritional status to program activities are many, especially given the state of the art in assessing nutritional status under field conditions.

For MCH feeding it is assumed that the improved nutritional status (purpose) will result in improving the quality of human resources and further the cause of development (goal). That is, it is believed that in the absence of nutritional supplementation, poor nutrition would result in a population whose mental and physical capacities were diminished and whose productivity would be reduced. This relationship between chronic undernutrition and reduced productivity is itself a hypothesis which has not been fully tested.

In order to demonstrate that outputs resulted in improved nutritional status and, thereafter, in community development, the underlying assumptions mentioned above should also be tested. Although the testing of these assumptions involves considerable effort, if they are not substantiated in some way it indicates that it is not worthwhile to proceed further with the attempt to quantify impact. It is necessary to validate the assumptions that link program outputs to purposes or goals, otherwise changes in measures such as anthropometric parameters, will be unattributable to program output.

Finally, it must be remembered that food represents just one of many factors that impact on the nutritional status of a community or individual. Past attempts to control all the other confounding variables which effect an individual's nutritional status have proven largely unsuccessful. As such, the isolation of the impact of supplementary feeding programs on nutritional status remains a very complex undertaking. We feel that if such an attempt were to be made in Honduras, the difficulties and cost should be carefully considered.

As mentioned previously, the logical design of certain FFW programs might be conducive to measuring achievement of purposes (such as increased employment and infrastructure development), as opposed to those programs with nutritional or agricultural production purposes. In these instances, measurement of program purposes is a reasonable follow-on to the installation of a monitoring system within SAPLAN.

However, a single research instrument cannot be used for evaluating MCH, SF and FFW programs. Furthermore, even within a given project category, there is a tremendous variation in the program structure and function. Within FFW, for example, an irrigation project will be markedly different from a project which trains village women in arts and crafts.

Given this level of variability in programs, the use of a large-scale, random sample survey would obscure precisely those programmatic differences that would allow project managers to decide which activities to emphasize or deemphasize. Furthermore, the large intra-program variability detracts from what can be said meaningfully about the various program forms.

For these reasons, it is advisable to perform a series of in-depth studies of particular program types or groups of programs, which display similar characteristics. This will prove more worthwhile than initiating a large-scale sample survey, which in reality, cannot be suited to variations in the programs examined.

As such, the evaluation of impact of these supplementary feeding programs clearly distinguishes itself from the monitoring functions described earlier, which SAPLAN should initiate immediately. It will be the existence of such a widespread, implementable monitoring system that will be the basis for coordination of and decisions about programming food in Honduras. At some juncture in the future, once it is operational, the analysis and evaluation of impact will deserve further attention.

3.5 A Final Note

The success of SAPLAN in setting up a management and monitoring system and eventually examining program impact rests on the ability to establish institutional linkages with the concerned agencies and organizations. This is the major challenge, rather than the identification of the exact nature of information to collect. Putting the information

in machine readable form for a microprocessor or designing a data collection instrument is a job for technicians. The creative task will be to bring together the various groups and factions involved in these programs, restore their faith in one another's capabilities and good intentions, and reach agreement that SAPLAN is the correct institution for coordination, and that SAPLAN has the capability and interest to do so. It is precisely for these institution-building and linking functions that we have suggested increased technical assistance be supplied to SAPLAN. The determination of which data to collect and in what form is largely established and understood (see National Nutritional Plan). Some refinements are necessary; but more important is the laying of the pipes in which the flow of information can parallel the pipeline that carries the massive food resource to the people of Honduras.

SECTION III:
Health Sector Programs Related To Nutrition

1. Introduction

The primary purpose of this section is to consider the role of the health sector, and more specifically the Ministry of Health, with respect to efforts to reduce malnourishment in Honduras. This is of particular interest with regard to current efforts to define appropriate components for inclusion in the proposed USIAD-Honduras Health Sector Loan.

Until relatively recently, nutrition problems have traditionally been thought to correspond to the health sector. Malnutrition was seen as a health problem and, as such, the responsibility of the health agencies. However, as the health agencies in developing countries attempt to shift their emphasis away from strictly curative medicine toward preventative measures, the nutrition problem takes on new dimensions. Most activities in preventative medicine (vaccination, well baby checkups, environmental sanitation, etc.) are still considered to fall within the health sector. Prevention of malnutrition, on the other hand, of necessity must involve various different sectors including health but also including economics, agriculture, education and so forth. To a large degree this is what has led to the multi-sectoral approach to nutrition planning.

While the above description holds for many developing countries, it is true in particular for Honduras. The whole process (described in more detail in Section I) of the creation and development of SAPLAN is in response to the recognition that dealing with the causes of malnourishment requires consideration of the factors outside of the health sector. After several years of operation under the new structure, it may now be helpful to re-evaluate what is or should be the role of the Ministry of Health with respect to nutrition.

As a first step in understanding this change it is helpful to look at how health and nutrition are presented in the Honduran 1979-1983 National

Development Plan compared to the way these topics were presented in the 1974-78 Plan. For the period 1974-78 there was one volume of the Plan (prepared by the Ministry of Health) which covered health, food and nutrition. Within this volume there was only a fairly short section which was dedicated to food and nutrition, although it is interesting to note that the problem, even then, received a very broad definition. The section discusses the need for a series of multisectoral actions and bases the discussion on a model which separates the problem into food supply (production, marketing, processing, etc.), food demand (income distribution, price control, etc.) and nutrient utilization (food quality control, fortification, environmental sanitation and health).

For the 1979-1983 Plan there were separate volumes for health and nutrition. The nutrition volume, which was developed primarily by SAPLAN, continues with the multisectoral approach and adds much more detail on the coordination and interrelation of relevant programs in the different sectors. The health volume also contains a discussion of the nutrition problem but it only deals with those nutritional components that are specifically related to the health sector.

The attitude of the Ministry of Health has been relatively consistent with respect to nutrition since pre-1974. In summary, the MOH attitude is that nutrition is a very complex problem and only certain components of it can be properly handled within the health sector. This attitude fits well with the new institutional structure of SAPLAN which is responsible for the planning, coordination and evaluation of nutrition related activities. This was demonstrated historically in documents and confirmed in comments made by various persons at the Ministry of Health.

Given this agreement with respect to the institutional structure, this report will attempt to elaborate on two points: (1) which activities or components of a nutrition program correspond to the

health sector, and (2) what is needed to maximize the effectiveness of the relationship between the Ministry of Health and SAPLAN.

2. Ministry of Health Policies

Much of the MOH policy with respect to nutrition is reflected in the attitude that the causes of malnutrition are basically of a social and economic nature. The MOH sees its role primarily as one of detecting and treating the more severe cases. Those activities that they associate with nutrition include weighing preschoolers, identifying "at risk" families, and providing food supplements and nutrition education.

The MOH policy does not appear to give much explicit recognition of the effect of health on nutrition. While the malnutrition problem may have its roots in socio-economic conditions, it is well known that improvements in health status will have a beneficial impact on nutritional status. As such all of the MOH activities aimed at preventing or curing disease represent important factors in the causal model of malnutrition. While there is little doubt that this synergistic relationship is well understood within the MOH, if it were stated more explicitly as part of the Ministry's nutrition policy it would help to clarify their role.

There are other aspects of MOH policy which have implicit but important relevance for their actual and potential contributions to solutions for malnourishment in Honduras. The basic policy which guides the Ministry's activities is summed up in the opening statement on page 1 of the Plan Nacional de Salud, 1979-1983:

"Since 1972 the Ministry of Public Health and Social Assistance has formed its work around one Health Policy: The Extension of Coverage of Health Services to the entire population of the country."

This policy of extending health services to the more remote populations will mean, in most cases, that communities with higher incidence

of malnutrition are being reached. An infrastructure which covers most of the country's population is an important prerequisite for programs to control malnutrition.

Another Ministry policy which is related to the extension of coverage and also has important implications in nutrition is one that calls for community participation in the problem solving process. On page 2 of the 1979-1983 Plan Nacional de Salud the Ministry states:

"The community should have an adequate understanding of its health situation, should be able to identify its fundamental problems, and should participate in the search for appropriate solutions as an active element in their planning and execution in order to guarantee the health of the individuals and the community."

This is an excellent statement of the need for involving the community. To the extent that it can actually be realized it would represent an important aspect of any nutrition program. The complexity of the nutrition problem and the lack of specific universal solutions increase the importance of having communities participate in defining and implementing the solutions. Unfortunately, meaningful community participation tends to be very elusive and extremely difficult to achieve. This important topic will be discussed later.

3. Ministry of Health Activities

The structure of activities within the MOH is similar to other countries where there is a heavy emphasis on extension of health service coverage. The principal characteristics are a hierarchy of different operational levels combined with significant delegation of tasks and a system of referrals. The structure in Honduras consists of six levels. The primary level is the community itself which is served by volunteers including a health guardian, an empirical midwife and a health representative. The second level is made up of CESARs which are rural health centers that are attended by auxiliary nurses. The third level consists of CESAMOs -- health centers attended by physicians. The fourth level is made up of CHEs which are area or

emergency hospitals. The fifth level consists of Regional Hospitals where access to different specialties are found. Finally, level six is the National Hospital which has the full range of specialties and also functions as the teaching hospital.

In addition to the above health services delivery structure, the MOH has other relevant programs such as the ones for vector control and for food inspection. Also of importance is PROSABA (Proyecto de Saneamiento Basico) within the MOH Division of Environmental Sanitation which is installing small water systems, wells and latrines in dispersed areas and communities up to 500 persons.

It is helpful to put the contribution of these levels in perspective by considering the number of outpatients attended at each level together with the cost associated with their treatment. This information for 1977 is reproduced in Table 15 from the Plan Nacional de Salud, 1979-1983; projections for 1983 are also included in Table 15.

The purpose of the above description of health sector activities is to help orient the discussion which follows. However, it is not within the scope of this consultancy to consider the nutritional implications for the whole health sector; rather, this report will concentrate primarily on the first two levels of the MOH structure (Community and CESAR) and will consider the interface between the two levels. Much of what is said about the CESARs will also apply to the CESAMOs since they function in a similar manner except for the activities related to the presence of the doctor.

The principal figure in the CESAR/community health delivery system is the "auxiliarde enfermeria" or auxiliary nurse. An auxiliary nurse is assigned to each CESAR who is responsible not only for the operation of the health center but also has major promotional and training responsibilities in the communities which pertain to that center. To better understand the magnitude of what is expected from the auxiliary nurse,

Table 15

Coverage and Cost of Outpatient Care by Level of Health System

1977

Level of Attention	Establishment/Personnel Type	Number	No. Outpatient Attentions	Cost of Outpatient Attention (Thousands of Lempiras)	Cost per Attention (Lempiras)
VI	National Hospital	5	312,537	4,504.1	14.41
V	Regional Hospital	6	280,902	2,269.3	8.07
IV	Area Hospital	7	117,593	975.2	8.29
III	CESAMO	72	1,101,591	5,143.1	4.66
II	CESAR	284	753,833	1,535.0	2.03
I	Health Guardian	907	544,200	70.8	0.13
I	Empirical Midwife	1650	99,960	35.9	0.36

1983 Projected

VI	National Hospital	3	580,332	6,466,000	10.95
V	Regional Hospital	6	1,773,207	15,537,700	8.76
IV	Area Hospital	21	1,137,688	7,476,700	6.57
III	CESAMO	92	2,073,792	9,085,800	4.38
II	CESAR	284	3,334,716	7,305,100	2.19
I	Health Guardian	3600	2,160,000	901,700	0.42
I	Empirical Midwife	6000	360,000	135,000	0.38

Source: Plan Nacional de Salud, 1979-1983. Pages 76 and 83.

it is helpful to consider a description of those activities which appear to be directly related to nutrition.

The following is a list of selected nutrition related activities taken from the MOH document, "Normas Generales Para La Atencion de Comunidades Rurales," representing only a small fraction of the total activities called for in that document.

- 1.2.3.3 - The auxiliary nurse will participate with the health promotor, in the coordination of actions with other development agencies on food production projects, placing priority on helping families with malnourished children.
 - The auxiliary nurse will give orientation to the community on the consumption and conservation of local foods.
- 1.3.1.2 - The auxiliary nurse will organize education sessions with mothers groups to improve the feeding habits of the family.
- 1.3.1.3 - The auxiliary nurse will give orientation to the trained midwives and mothers about the importance of breast-feeding for normal child growth and for prevention of diarrheas as well as the importance of food for the mother and child, and environmental hygiene.
- 1.3.1.4 - The auxiliary nurse together with volunteers in education sessions will demonstrate the preparation of food to promote better utilization and consumption.
- 1.3.2.2 - The auxiliary nurse will orient the community and promote:
 - immunization
 - prevention of diarrhea
 - prevention of malnutrition
- 1.3.3.1 - The auxiliary nurse will participate in the promotion of school gardens. The auxiliary nurse will promote in the teachers the importance of teaching nutrition and the use of the book "Nutrition in the School."
- 2.1.3 - A fee need not be paid by patients for:
 - prenatal control
 - attention to preschoolers for control of growth and development
 - tuberculosis control
 - immunizations
 - plus patients in extreme poverty

- 3.1.1.5 - The auxiliary nurse will observe the nutritional status of pregnant women based on weight gain and diet
 - Pregnant women will be considered at high nutrition risk when they have a history of miscarriages and premature births, lose weight gain and insufficient diet.
 - All pregnant women under control will receive iron supplement as described in the manual of simplified medicine.
 - All pregnant women who are malnourished will be enrolled in the supplemental feeding program.
- 3.1.3.4 - The auxiliary nurse will motivate and supervise the trained empirical midwife in the home-weighing of all new born babies within the first 48 hours.
 - All new born babies with a birth weight less than 2.5 kg will be considered at risk and will be placed under control as described in the manual of simplified medicine.
- 3.1.2 - The auxiliary nurse will examine, at the CESAR, babies under one year of age on the first, third, sixth and ninth month of age.
 - Children between 1 and 5 years old will be examined every 6 months beginning in the second year.
- 3.2.1.1 - The auxiliary nurse will promote organized groups in the community for the detection of all children under five and their incorporation in the program of control.
- 3.2.1.2 - Control will consist of surveillance of growth and development, and nutritional status as well as control of vaccination.
 - The auxiliary nurse will keep individual cards for each child registered at the CESAR in order to control growth and development.
 - The auxiliary nurse will organize and orient community groups to carry out home control of weight for children less than one year old for those months that the child is not under control of the CESAR.
 - Children whose weight curves fall into the malnourished range will be examined monthly in the CESAR and if the condition persists they will be referred to the doctor.
- 3.2.1.4 - The auxiliary nurse will select malnourished children without complications giving priority to those under 3 years old and refer them to supplemental feeding according to the manual of simplified medicine.

3.2.1.5 - The auxiliary nurse will refer to the hospital those severely malnourished children which present signs or symptoms of complications (diarrhea, anemia or any kind of infection).

Outside of the MOH, there are various other agencies which are responsible for planning and implementing activities in the health sector. The Servicio Autonomo Nacional de Acueductos y Alcantarrillados (SANAA) is an autonomous agency responsible for installing water and sewer systems in communities of 200 or more persons. The Instituto Hondureño de Seguros Sociales (IHSS) is the social security institute and provides a small but significant portion of the population with health services (particularly hospitalization). PANI is an autonomous agency which is funded through the national lottery to develop and implement various programs directed at improving the health of mothers and infants. The Junta Nacional de Bienestar Social (JNBS) is the agency responsible for general community development and social welfare, and is involved in programs such as child care centers, feeding programs and SERNs (nutrition recuperation centers).

The activities of the voluntary health workers (empirical midwife, health guardian, etc.) are almost insignificant when compared to those of the auxiliary nurse. They receive a very small amount of training and, since they are volunteers, they are not expected to spend a great deal of time on these activities. The midwife, of course, has specific duties, but primarily the voluntary health workers are community contact persons for the institutional part of the health system. Much of what they are expected to do is to provide support functions for the auxiliary nurse and the CESAR.

4. Issues: Analysis and Conclusions

What follows now is a series of issues, which were identified during the consultancy and were singled out as being particularly relevant or instructive for this Section, which attempt to analyze the interface between the nutrition problem and the activities in the health sector. The scope of this consultancy does not permit coverage of all issues

relevant to that interface, nor does it allow for a very detailed analysis of any one particular issue. It is hoped that what follows will serve as a beginning for more complete and detailed analysis.

4.1 Issue I - The Auxiliary Nurse's Activities: Theory Versus Reality

One of the most important aspects in determining the impact of the health delivery system is the determination of the gap between the theoretical activities of the auxiliary nurse and the activities which are actually carried out. That this gap exists is evident from the extensiveness of the list of activities in the "Normas Generales Para La Atencion de Comunidades Rurales" document. Basically it is a compendium of all things which could be done at the community level to affect improvements in health and nutrition. If all of these activities were actually realized it would undoubtedly result in a very effective health delivery system. However, it is unrealistic to expect more than a fraction of what is called for because the list is so extensive.

Essentially there are three components: (1) what is called for in the "Normas Generales" document; (2) what is realistically feasible to expect from the auxiliary nurse; and (3) what activities the auxiliary nurses are actually carrying out. There do not appear to be many activities in the "Normas Generales" which an auxiliary level person would not be capable of performing. What is unrealistic is that a single person would be able to effectively accomplish all of them. If, for some reason, it is undesirable to eliminate any of the activities, then the minimum that is needed is an explicit prioritization of the tasks.

A good starting point for establishing priorities would be a careful analysis of the activities which the auxiliary nurses are actually carrying out. These are the persons who are in the field and actually have to deal with the immediate health needs of the community. As a result, their activities probably reflect a certain baseline of which services appear to be most critical from the point of view of

the community. Likewise, a study of actual activities would probably reveal that a large part of the auxiliary nurses' time goes toward treating specific health problems and, as such, there may be important preventative measures which are not realized for lack of time and explicit demand.

Another effect of the auxiliary nurse having more tasks than can be realistically undertaken is that there will likely be a strong tendency to concentrate on those tasks which are clearly defined and easily understood. This is of particular importance with respect to nutrition since a large part of the nutrition related activities do not have specific procedures. Activities such as recording the weights of infants and distributing food supplements do not present a problem. However, activities involving promotion, coordination, education and diagnosis of causal factors often do not have preset, well defined methods for carrying them out. These are the kinds of activities which are important in preventing malnutrition whereas the treatment of malnutrition involves more straightforward procedures.

Another area of activity which likely receives reduced attention is the various support functions which the auxiliary nurse is to provide to the voluntary health personnel. During a field visit to two CESARs in the Choluteca region, it was noted that (1) practically all of the auxiliary nurses' activities took place in the health center, and (2) health guardians and empirical midwives would meet at the health center once a month. Given the minimum amount of training which these voluntary health workers receive, they are certain to need more backup support than monthly meetings. Ideally the auxiliary nurse would spend a significant portion of time with the voluntary workers in their communities, but this is not realistic due to the more pressing needs in the health centers.

It is clear that since the beginning of the extension of coverage program, many more Hondurans have been receiving more complete health service. Nevertheless, the program is reaching a point where

it is becoming more important to consider how to bridge the gap between what the auxiliary nurse theoretically does and what realistically can be expected to occur. As was mentioned above, a first step is to make explicit which activities should be given priority. This, however, will not solve the basic problem that there are more tasks than a single auxiliary nurse can perform effectively. One solution to this dilemma would be to staff each CESAR with two auxiliary nurses so that, by rotating, one would always be staffing the health center while the other would be providing support to the voluntary health workers and promoting activities in the communities. This may involve resources that the Ministry is not able to expend particularly since there still exists a significant part of the population which is not covered by the services of even one auxiliary nurse. Nevertheless, this may be a good model to work toward.

Another possible solution would be to upgrade the position of the health guardian. The health guardians who were interviewed on the field trip to Choluteca were intelligent and appeared to be respected members of their communities; clearly what they lack is sufficient training and motivation. There is no reason why these community health workers could not be trained to perform many of the tasks which are presently assigned to the auxiliary nurse.

A large part of what is discussed in this issue of realistic programming of activities in rural health service delivery is very closely related to the next two issues of training (learning) and community participation.

4.2 Issue II - Training of Community Level Health Personnel

In the development of an extensive health coverage system, the training of personnel is probably the single most important factor. Training is discussed here in its broadest context such that it includes all kinds of learning - both formal and non-formal.

A field visit was made to the Ministry's Regional Human Resource Training Center (CERAR-SUR) in Choluteca where the auxiliary

nurses are trained for working in the rural areas (CESARs). Interviews with the director of the Center, Vibiana de Gallendo, and a review of the current course description and curriculum gives the definite impression that the training is quite complete and well organized.

The CESAR-SUR center trains approximately 100 auxiliary nurses at a time; the course lasts one year. The course consists of 1,313 teaching hours of which 40% is theoretical and 60% is practical. The practical work takes place in the rural communities, the CESARs and in the various sections of the Regional Hospital in Choluteca. There are six regular instructors plus additional assistance from instructors of various related agencies or specialties within the MOH. The course and curriculum were formulated by personnel at the Center with technical assistance from the MOH Division of Human Resource Development as well as from the zone nurse of the Panamerican Health Organization. There exists a very competent MOH group in Tegucigalpa that provides audio-visual teaching aids to the center as well as assistance in how to develop simple teaching aids in the field.

In addition, the Center receives financial aid and technical assistance from USAID. In the past, the Center received the assistance of a nutritionist from the MOH Division of Maternal Child Health on matters concerning nutrition, but that nutritionist is no longer available. The Center apparently does not receive any other explicit assistance on curriculum related to nutrition.

The course classwork is divided into 103 units covering 642 hours; of this, only five units, covering thirty-three hours, are directly related to nutrition. These deal primarily with diets and recipes (including discussion of the basic food groups), and with growth and development aspects including weighing and measuring techniques for classification of nutritional status. A major component of the course deals with the community including a 40 hour unit on carrying out a study of a community in order to make a health diagnosis. While this

type of community diagnosis can be very important in relation to nutrition, it is unclear to what extent, if at all, the nutrition problem is included as part of the study.

From the interviews with the auxiliary nurses in two CESARs it appears that the course is quite complete and that they were at least exposed to concepts that cover the wide range of activities which are expected of them. However, it was also noted that some of these concepts had become removed from their regular train of thought. That is, when they were queried on a particular matter they usually made an appropriate response, but at times it was clear that what they said did not relate to what they actually do.

While the training course for the auxiliary nurses is quite complete and well organized there exists the potential for much of the information being lost for lack of use. To make the training more effective and longlasting it should be approached as a dynamic learning process which would help the auxiliary nurses to integrate what they learn once they begin to practice in a health center. An explicit, ongoing effort at this kind of training will also help to boost moral and remove the sense of isolation which is common with health workers in rural areas.

The training of the voluntary community health workers is extremely brief consisting of one week of instruction by persons at the auxiliary nurse level. Theoretically, this initial training is continually supplemented by the close collaboration and contact which is called for between the auxiliary nurse and the community level workers. If there actually was close collaboration with, and supervision by, the auxiliary nurse this would produce a fairly effective system of continuing training. However, it appears that the auxiliary nurses find these community related activities most difficult and, as was already pointed out, the demands of activities in the health center preclude sufficient attention to community related tasks.

In summary, the whole training system would benefit from more emphasis on a continuous, dynamic learning process in which there exists a high degree of communication and interaction from the community level up through the higher levels of the health delivery system. The process should emphasize learning about the etiology and treatment of health problems rather than transferring specific knowledge of health solutions. This is particularly important in nutrition where the problem is complex and may vary depending on conditions in different communities. Recognition must be given to the fact that nutrition is related to the health sector beyond detection, supplemental feeding, and teaching the basic food groups.

4.3 Issue III - Community Participation

Community participation in the health system is closely related to the previous two issues. It is clear from the policy statement in the 1979-83 National Health Plan and in the activities which are planned for the auxiliary nurse, that the Ministry of Health does actually place an emphasis on the community involvement in the planning and execution of primary health care programs. From the previous discussion, however, it is unclear how effective this policy has been. A study was carried out jointly by USAID and the MOH which confirmed that the auxiliary nurses feel less competent to perform tasks related to community participation.

It is not uncommon to encounter interest in involving community members in the implementation of community development activities including primary health care. What is unusual is the recognition of the need to involve the community in the planning process. To the extent that the MOH seeks this more comprehensive involvement, they must be commended and encouraged.

What is often underestimated is the difficulty involved in achieving a significant degree of participation in rural communities. This is not because these rural populations are incapable of analyzing and

responding to their situation. There is strong evidence that, given their conditions and limited resources, they have very effective decision-making capabilities. The primary difficulty is one of communication between the rural population and the agents who would try to promote and respond to community participation in the planning process.

Two reasons are important in understanding and overcoming this difficulty in communication. The first has to do with the fact that most of the families which comprise these poor rural communities live and react in what can be described as a "survival mode." What this means is that most peasants are living very close to the edge of survival, indicated by the fact that too often one or more of their children do not survive. The effect on decision making in the survival mode is a very complex subject which is beyond the scope of this report. It should be mentioned, however, that a common result is that a decision or action, that is really quite rational for someone in the survival mode, appears to be irrational to someone outside the survival mode.

The second important component to this communication barrier is related to the self-image of the rural peasant. He has been brought up in an environment and social structure which consistently instills and reinforces the notion that he is incapable of innovative thinking. From very early he is taught that knowledge and decisions come from higher authorities. The result is that the peasant is usually quite passive and uncommunicative when he is confronted by someone from outside of the community. It is difficult for him to believe that a person in a "higher" position is sincerely seeking his opinion about what his needs are.

In light of these communication barriers, it is not surprising that the auxiliary nurses find the community participation component of their task the most difficult. Unfortunately, there are no courses which will significantly improve their abilities in this area. It

is doubtful whether simply adding a sociologist would be sufficient to increase their competence in this area.

The two principal factors needed to achieve community participation in the planning process are commitment and time. The best way to train persons to be able to promote community participation is to give them tasks which involve community response, and then provide them with opportunities to discuss their experiences and learn from the experiences of their peers. Essentially, it requires "action learning," where the training and the doing become one.

4.4 Issue IV - Detection and Treatment of Malnutrition

The policy of the MOH with respect to nutrition is in the area of detection and treatment of severe cases of malnourishment. As such, it is helpful to comment in more detail on these activities.

The detection of malnourishment (particularly its early detection in children between zero and six years of age) is one of the most important functions in any campaign to combat malnutrition. This is important from the standpoint of identifying malnourished individuals, and is also important in terms of establishing which communities or areas have the highest rates of malnutrition. This second aspect is particularly relevant in light of SAPLAN's strategy of concentration on integrated activities in areas which have a high prevalence of malnutrition (see Section I).

It is useful at this point to make a distinction between the detection of malnourishment as carried out in the health centers and the surveillance project* which is being carried out by SAPLAN on a pilot basis in the Danli area. One of the goals of the SVAN project is to identify communities with a high prevalence of "at risk" persons. However, the process of interpreting indirect indicators of malnourishment is complex, and direct indicators (i.e., anthropometric

*Sistema de Vigilancia Alimentaria-Nutricional (SVAN)

classifications) should be used whenever possible. In summary, the SVAN surveillance system is not primarily designed as a mechanism for monitoring malnutrition nor for identifying priority problems in specific communities or regions. The SVAN contains a diagnostic logic which calls for the monitoring of causal indicators in addition to the MOH anthropometric data.

The most direct and practical method for monitoring the nutritional status of the country and identifying areas of high prevalence is to take advantage of the MOH well-baby checkups which call for the periodic weighing of all children under six years of age. However, there are several things that must be done in order to make this information more useful. First, data is needed concerning the coverage and the accuracy of the weighings (which are currently being made by the auxiliary nurses). This can be done by randomly studying a number of CESARs. A survey of the area which corresponds to each CESAR would be undertaken to determine what portion of the children are actually being weighed and have up-to-date records in the health center. Any difference (bias) in nutritional status between the children who are regularly weighed and those who are not, would be determined. Checks would also be needed to determine if the weighings are performed and recorded correctly to determine how much error exists in the data which is presently available. Finally the current reporting system would need to be reviewed and possibly revised to insure that accurate information is available at the regional or central level.

In addition to the detection of malnourishment, the MOH also takes responsibility for treatment. In the very severe cases treatment may include medical attention or hospitalization if it is available. However, the principal form of treatment of malnutrition is food supplementation. The Ministry distributes some food directly through the health centers, but most of it is done by referring the malnourished cases to feeding programs run by the social welfare agency (JNBS). The more severe cases may be referred to a recuperation center (SERN)

where the mother receives nutrition education and the malnourished receive the full diet needed for recuperation. The impact of the SERNs is fairly limited because it requires daily attendance at the center, and hence is limited to those families who live in larger towns where the SERNs are located. It is not felt that recuperation centers can provide a very significant response to the Honduran nutrition problem because it is not feasible to extend the availability of the service to a significant portion of the dispersed population.

Up until now the MOH activities in malnutrition detection and treatment have not been very systematic. There is, however, a proposed project to be funded by the World Food Program which is being developed between the Ministry of Health (as the executing agency) and SAPLAN (as the coordinating agency). This project should help to organize and make more explicit the role of the Ministry. Specifically, it calls for a more direct connection between the detection of malnourished children and the distribution of food supplements - both functions to be carried out through the CESAMOs and CESARs as part of the extension of coverage campaign. If the pilot project goes well it may become a model for distributing most supplemental foods in the future, since it makes sense to have a much closer relationship between the detection of malnutrition and the distribution of food supplements.

This proposed project has some additional interesting and worthwhile aspects. For one, it recognizes the need to treat the family rather than merely the malnourished child. That is, the rations are based on a four member family portion rather than just a portion for the child. This approach is much more realistic since the nutrition problem usually impacts the whole family and is just more visible or measurable in young children. The project is also interesting in that it calls for the use of foods which make up the traditional diet and are produced within the country. This will avoid any problems of acceptability and will also help reinforce Honduras' agricultural

sector. Since the foods to be used (corn, beans, powdered milk and vegetable oil) are generally available locally it may be worthwhile to consider doing the project by distributing food stamps in order to avoid having to set up a separate food distribution system where the market system is already in place.

4.5 Issue V- Activities Under the Current USAID Nutrition Grant/Loan

The current USAID Nutrition Grant/Loan contains several components in which the Ministry of Health is directly involved. These fall under the categories of Nutrition Education, and Water Supply and Environmental Sanitation.

In general the Nutrition Education activities under the Grant/Loan have consisted of isolated field training and attendance at a few national or international seminars and short courses. SAPLAN has now submitted the design for, and is carrying out the second course of promoters in nutrition. This course is designed for training intermediate level personnel from the health sector (MOH, PANI, JNBS, etc.) as well as other agencies associated with SAPLAN. The course is carried out by a coordinator and various persons acting as "catalysts." Each "catalyst" is responsible for presenting the material for one or more units.

The design for the course appears to be quite good in that it is based on a very broad definition of the nutrition problem. In addition to the standard nutrition themes, the course covers such areas as statistics and a relatively complete treatment of socioeconomic factors related to nutrition. There is also a unit on nutrition planning in general, and another one on the specifics of nutrition planning in Honduras. These two units account for one quarter of the course work and should help incorporate intermediate level field personnel from the different sectors into Honduran attempts at integrated nutrition planning.

Throughout this report the concept of ongoing "action learning" has been emphasized. The absence of this process appears to be the principal draw-back to the activities being developed under the Nutrition Education component of the Grant/Loan. As discreet activities they appear to be well designed. What seems to be missing is something that pulls it all together into a unified strategy for a continuous program to improve the human resource capacity in the field of nutrition. Once again, training which takes place outside of the problem environment over a relatively short period of time, will not be nearly as effective as it would if it is part of a continuous program which provides learning support for the persons while they are carrying out their tasks.

The Water Supply and Environmental Sanitation component of the Grant/Loan calls for the following: (i) construction of 8,250 low-cost water wells or gravity feed systems (MOH responsible); (ii) construction of 21,000 latrines (MOH responsible); (iii) nutrition education for the families who are beneficiaries of the above facilities (MOH responsible); (IV) an evaluation of the impact of these facilities upon the nutritional status of the families benefited (SAPLAN responsible). It is further specified that both the sanitation projects and the nutrition education are to be located in areas where there are CESARs. In addition, the pilot community food production activities (JNBS responsible) should be undertaken in the same areas and priority should be given to the most nutritionally deficient families within these communities.

While this appears to be a well planned, integrated activity, very little has resulted the way it was originally conceived. By the end of 1978, only 759 wells and 8,320 latrines had been constructed. This delay has been primarily due to procurements running about a year behind, but this problem is being worked out and it appears that at least 50% of the wells and latrines will be constructed. There exists, however, some question as to the usefulness of some of the latrines since they were constructed without walls under the assumption that

the beneficiaries would construct them out of local materials. This complementary activity has frequently not happened, which is in part a result of the lack of the education component. The nutrition education component of this project (with perhaps a few exceptions) has not been realized. The impact evaluation study has not been undertaken nor has it even been discussed. In a few regions there has been an attempt to coordinate the environmental sanitation projects with the activities of the CESARs but this is not the case in general. Nor has there been any significant coordination of the community food production projects with the activities of the CESARs.

The reason that these projects have not been implemented as planned is because the institutional infrastructure did not exist when the Nutrition Loan was initiated. If institutional linkages and training had been developed first under a grant, followed by the larger project funding loan a couple of years later, then these projects would have had a much higher likelihood of being carried out as planned.

Environmental sanitation projects are likely to have a favorable impact on nutritional status regardless of how they are executed. However, in order to maximize their nutritional impact it is necessary to view them in a broader context. Rural sanitation projects should be coordinated with other nutrition activities and targeted toward the more malnourished population. This requires considerable attention to planning and the existence of an institutional structure capable of insuring that nutrition criteria are being considered.

4.6 Issue VI - MOH-SAPLAN Interface/AID Health Loan

This final section contains a few summary thoughts on the MOH-SAPLAN interface and on the projected AID Health Loan. The most important point to be emphasized here is that AID should continue to promote and support the Honduran efforts at multisectoral nutrition planning and not revert back to thinking in terms of the nutrition component of a health program.

This does not mean that there are not activities that can be financed under a health loan that will also have an impact on improving nutritional status. Most support which goes toward the extension of health services will indirectly affect nutrition, in that improvements in health in peasant populations should produce improvements in nutritional status. Furthermore, an effective structure of health coverage will provide agents to participate in community level integrated nutrition programs along with extension agents from other ministries. In particular, we urge that AID support MOH activities in the area of community participation in diagnostic and planning activities as well as implementation. Another MOH function which merits support and is important for multisectoral nutrition projects is collection and handling of height-weight-age data for the detection and monitoring of malnourishment at the family, community, regional and national levels.

What should be avoided in a future health loan are things which would tend to tie multisectoral functions too closely to the Ministry of Health. SAPLAN must be supported independently from MOH funding but at the same time mechanisms should be sought which reinforce the interface between the MOH and SAPLAN. In discussions both at the Ministry and at SAPLAN, there did not appear any significant conflict over activities or responsibilities. When persons at the Ministry were queried about their view of SAPLAN's role, the four principal functions mentioned were diagnosis, planning, coordination and evaluation. There seems to exist a positive attitude with respect to the need for a SAPLAN-like agency to perform these functions. In general it is felt that as SAPLAN builds up its capabilities, its role should be complimentary to the activities of the Ministry of Health.