



Enhancing community health

Monquecagua Area Development Program in Honduras



A World Vision Australia Case Study



Primary school students, Monquecagua ADP

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What is an Area Development Program?

In the early 1990s, World Vision began utilising Area Development Programs (ADPs) as the preferred approach to poverty reduction – as vehicles for child-focused, community based development.

While it is difficult to define an ADP, they all have certain common characteristics.

They operate in contiguous geographical areas, large enough to have some micro-regional impact, yet small enough to make a major impact on selected communities. Initially implemented in rural areas, ADPs have been adapted to urban settings. Typically, an ADP may encompass a rural municipality or an urban suburb with a population of between 20,000 and 40,000.

ADP activities vary according to the context and the expressed needs of the community. They may focus on clean water, education, agriculture, preparing for natural disasters, health or leadership skills. Activities that enhance the community's ability to advocate for policy change are also often included.

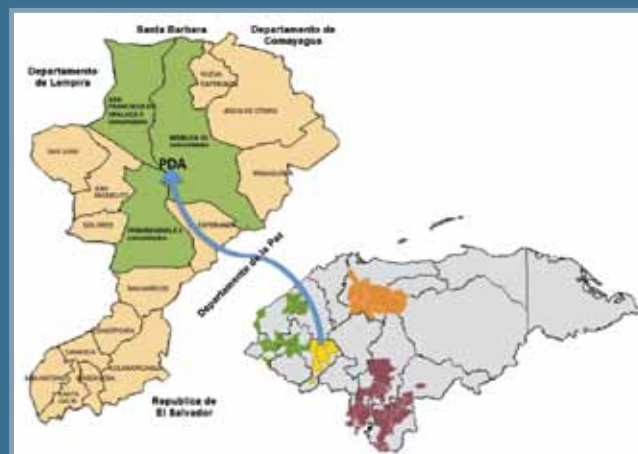
A strength of ADPs is their longevity. Unlike many development programs, ADPs typically run for 10 to 15 years. Before starting an ADP, World Vision staff will spend some two years working with the community to identify their current capacity and their needs, and then together they will plan the most appropriate intervention. Progress towards meeting the ADP's goals is evaluated every five years, and its design and future is then reassessed.

ADPs are specifically designed to be sustainable. Community organisations, families and individuals share in project leadership and activities from the start.

If the program is managed well, communities are equipped and motivated to continue in these roles when World Vision leaves.

Employing diverse funding sources for different ADP activities extends World Vision's ability to fund these longer-term programs. Child sponsorship is the principle funding source. The community selects some 2,000 to 4,000 children to be sponsored, usually from the poorest families. Contributions from the sponsors of these children are pooled to fund activities that are designed to benefit all children in the community, not only those who are sponsored, as well as their families and the entire community.

This publication documents the experience in one such ADP to demonstrate World Vision's approach to addressing poverty and its causes.



Message from the National Director, World Vision Honduras

To address the causes of poverty, World Vision Honduras started to implement the Area Development Program (ADP) strategy in 1990, choosing to work with communities in the poorest areas of the country.

The Monquecagua ADP started in 1997 in one such area. It is inhabited by the indigenous population known as Lencas, marginalised from health services, education and employment opportunities by every government in power.

Despite poor living conditions, Monquecagua is a suitable area for sustainable development. Its access to natural resources facilitates diversified agricultural production for consumption and sale in local, regional and national markets. However, the greatest asset of this area is its people – men, women and children with dreams and hopes, committed to developing their potential and determined to break the cycle of poverty.

In Monquecagua, World Vision recognises that the community is the legitimate owner of its development process. We have invested in strengthening community capacities in leadership, organisation and management. The communities have enhanced their abilities and obtained a more integrated development vision, as well as a leading role in managing and sustaining their development process. The majority of the communities participate in program assessment, monitoring and evaluation.

Children and adolescents have learned to participate, lead, empower themselves and serve the community. They support each other to obtain better results in school subjects such as mathematics and Spanish. Moreover, they are participating in the development of their communities.

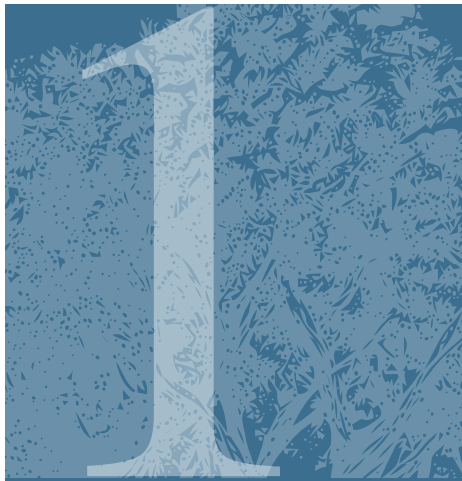
Many have achieved their great aspiration of completing secondary education and have developed entrepreneurial abilities, to set up and manage businesses. This has motivated others in the communities to progress with hope of a better life.

A significant contribution of Monquecagua ADP is the promotion of equality. Today, girls have the same educational opportunities as boys; there are female community leaders, and women own businesses. Their self-esteem has increased and their ability to generate income has improved, allowing them to invest sustainably in health and education for their children.

Community leaders have stated that they are ready to continue their development when World Vision's support concludes. They have developed strategic alliances with partners such as local government, other development agencies and government organisations. In some cases, community plans have been included in municipal development plans, allowing the community to secure financial support for their projects. Most importantly, they now have the capacity to lead and sustain their own development processes.

We would like to recognise the work done by the ADP manager and his team. They have succeeded in developing a respectful and mutually collaborative relationship with the communities. They have offered opportunities to community leaders to develop their full potential, and have provided sustainability for the development processes initiated and consolidated within the ADP.

**Milagro de Castro, National Director,
World Vision Honduras**



Monquecagua, — a fertile land

In many places, particularly at higher altitudes, the topsoil is thick and richer in organic matter, and in many other parts the subsoil is reddish brown clay.

Monquecagua is a community located in western Honduras, within the municipality of Intibucá. It is bordered largely by other municipalities of Honduras, and in the south by the Republic of El Salvador.

The Monquecagua Area Development Program (ADP) reaches into the surrounding Yamaranguila and San Francisco de Opalaca municipalities. In practice, this means that it affects 18 communities with a total population of 69,000 inhabitants; all of whom are of the Lenca ethnic group. Of these local people, 99% of the community consider themselves Catholic, whilst the remaining 1% are evangelical Christians.

The municipality of Intibucá is located at an average height of 1,480 metres above sea level, which according to the National Weather Service creates a dry winter climate. It is characterised by a dry season from December to March and a rainy season from May to November, with an average minimum temperature of 12 degrees Celsius and a maximum of 22 degrees Celsius.

Families living in the ADP are from the Lenca ethnic group.



The area of Intibucá is mostly composed of Milele soils. These are deep, well-drained soils formed on volcanic ash. They are set on a relief of strongly undulating or even more rugged hills, with slopes that, for the most part, have a gradient of less than 30%. Communities are often located in vast mountainous chasms that reach up to 2,400 metres in height. In many places, particularly at higher altitudes, the topsoil is thick and rich in organic matter, and in many other parts the subsoil is reddish brown clay. This mixture has meant that some of the area is blessed with excellent soils suitable for the production of potatoes, vegetables and fruits, however traditionally much has been used for the production of corn and beans.

In October 1998, Honduras was devastated by Hurricane Mitch – the second deadliest Atlantic hurricane in history. Mitch caused historic amounts of rain to fall in Honduras which resulted in such massive and widespread damage that then Honduran President Carlos Roberto Flores claimed that Hurricane Mitch had “destroyed 50

years of progress in the country”. With the assistance of the international community, a massive rebuilding process was begun and continues today. The challenges for Honduras continued in 2009, with a president being exiled.

The people of Honduras have a long and proud history. The Honduran lifestyle is based on extended family ties. You can commonly find parents, grandparents, children, aunts, uncles and cousins occupying the same household.

Homes are usually a small two-room adobe dwelling with dirt floors, and are made of brick with atriums or inner patios. Beans, corn tortillas and rice are the staple foods. Special dishes include tapado (a stew of beef, vegetables and coconut milk), mondongo (tripe and beef knuckles), nacatamales (pork tamales) and torreas (similar to French toast and served at Christmas). Topogios or charramuscas (frozen fruit juice in a plastic bag) are frequently drunk during the summer months, and coffee is usually served with the main meal of the day.

Fútbol, or football, is the national sport. The game is particularly popular with young boys, and there are professional competitions also. Throughout the country, socialising with family or friends is one of the main ways people spend their leisure time. National Independence Day is 15 September and school children practise for months in preparation for Independence Day parades and events. At Christmas, it is traditional to construct Nativity scenes from natural materials and clay figures. Girls have their formal initiation into social life, called La Fiesta Rosa, at the age of 15, when elaborate parties are held to recognise their coming of age.



Football is a popular pastime in the community, especially for boys.

Health and life in Monquecagua

Illnesses, such as acute respiratory infections and diarrhoea, which are easily preventable and treatable in other parts of the world, commonly affect children and can result in death.

Honduras had a national under-five mortality rate of 31 per 1,000 births in 2008¹ – five times more than the rate in Australia for that year². Gross National Income (GNI) was US\$1,800 per capita in 2008, compared with GNI in 2008 of US\$3,480 per capita in neighbouring El Salvador³ and US\$40,350⁴ per capita GNI in Australia, for the same year.

Similarly, life and health are difficult in the region of Monquecagua. Many homes and families do not have adequate, basic infrastructure such as toilets and fresh water supplies. Buildings are often made of locally sourced materials such as mud and sticks, with dirt floors and rudimentary fireplaces, all of which make living conditions difficult and unhealthy. Houses often consist of just one or two rooms, where seven or eight persons live with their tools, belongings and often animals, further reducing their living space while increasing the transmission of disease.

Illnesses, such as acute respiratory infections and diarrhoea, which are easily preventable and treatable in other parts of the world, commonly affect children and can result in death. As a further consequence of repeated infections and food shortages, children often suffer malnutrition resulting in reduction in growth. Malnutrition, due to consuming either not enough food or the wrong balance of foods, is widespread. There are high rates of poverty, which mean that the cycles of malnutrition, illiteracy, crowding and disease remain very high.

World Vision in the region

World Vision is a child-focused organisation, and it uses child sponsorship to benefit both sponsored and unsponsored children and their families in the community. Children are seen as agents of change within their own communities, worthy of both protection and empowerment. This ethos is incorporated into every project. In all such projects, child abuse and child labour are tackled and the rights of children upheld, including the rights of children with disabilities.

Part of World Vision's role in Monquecagua is to bridge gaps that may exist and to partner with other organisations that are already positioned in the area. For example, partnering with the local district school services – which provide the school buildings, teachers and resources for education – in an effort to work with the community and increase children's attendance at school. In the case of health services, which are provided by the government, World Vision's impact includes educating parents on the role of health services and encouraging their use, and educating families on healthy behaviours such as eating nutritious foods, correct elimination of rubbish and waste and timely treatment of illnesses.

World Vision began working with communities in Honduras in 1995 and evolved this initial project into four ADPs including Monquecagua in 1997. The Monquecagua ADP consists of several key projects, some of the successes and challenges of which are described in this booklet.

Local farmers have learnt more productive and sustainable agricultural practices.





Development from the bottom up - the master key

Building local capacity has been a key priority since the ADP began to work with the people of Monquecagua.

"Go to the people. Live with them. Learn from them. Love them. Start with what they know. Build with what they have. But with the best leaders, when the work is done, the task accomplished, the people will say 'we have done this ourselves.'"

- Lao Tzu

In working with the people of Monquecagua, World Vision recognises that the community is the owner of its own development. The local people must be the centre of all efforts within the community, in order to be able to effectively address the underlying causes of poverty and sickness. For this reason World Vision does not simply engage in giving away food or building schools, as it is not just about unlocking a few doors to health and prosperity. Rather, long-term

sustainable development requires giving the community the ability to open every door – the master key.

Since the inception of the ADP, the focus has been on teaching and empowering the community to understand the issues they are facing, and how to tackle them. This approach is aimed at strengthening the participation and empowerment of the community, to develop their own vision, implementation and evaluations. Through capacity building, community leadership and networking, the community develops fundamental skills that can be applied to any issues it may face once World Vision has left. In this way, development is a living process with each generation passing it on to the next.

In the words of local community members: *"Previously the people were afraid of community organisations, which might impose their own version of development. When the ADP began we were not too sure, but some people started to help and guide others in developing themselves. There used to be political clashes and people would even kill each other; before there was no liberty and now this has changed."* - Men's group, Rio Grande

Building capacity

Building local capacity has been a key priority since the ADP began to work with the people of Monquecagua. Staff meet extensively with members of the community in order to determine where there are gaps in training, resources and information on issues such as business, health and education.

Microenterprise is supported with access to micro credits that enable families to buy livestock or necessary technology, assets without which the families of Monquecagua would not be able to improve their standard of living. The community has created many small businesses including bread production, textiles and clothing, building, agriculture and livestock. To support the growing number of businesses, community groups made up of entrepreneurs were established, enabling the locals to share information and collectively approach funding bodies or the government.

For example, in Azacualpa, 22 young people were trained on packing techniques, food safety standards and post harvest management of vegetables – practices that had not been used in

the region before. The farmers were given access to micro credit to purchase small food transport containers. As a result, farmers were able to sell their food in smaller portions directly in the markets of San Pedro Sula and the capital, Tegucigalpa. This practice alone increased the sale value by 25%, compared to the prices they had been receiving for selling it in bulk to suppliers. As the farmers organised themselves into one larger community business group, they were able to register their business and so comply with State of Honduras legislation that allowed them to sell in national markets. The new business practices mean that the farmers now employ young locals in their emerging businesses.



Amparo, a local farmer, with his daughter.



Teaching and empowering farmers like Amparo to improve their family's standard of living has been a priority.



Community leadership & participation – children as the future

“The purpose of these organisations is to change and better the community, improve our way of living, help our community to progress.”

World Vision embraces the empowerment of children as central to community leadership. This enables children to participate in decisions that shape their world, learning skills they will then in turn pass on to their peers and eventually their own children. This is likewise the focus for women, persons with a disability, single mothers and others who are so often overlooked by many societies. Through World Vision’s process of community participation they are now given a voice in their community, and with that the ability to change their world.

One key goal is the development of local groups and boards that allow extensive community participation and raise the collective power of the communities. Over the life of the ADP, World Vision has facilitated local people to organise water boards, Community-Based Organisations (CBOs) including parents’ groups, women’s groups and children’s groups, and business groups such as an agricultural productivity group. Many of these committees or CBOs are well on their way to being sustainable and no longer requiring the support of World Vision to operate.



Children have a voice in community decision making.

“Each community group brings us benefits, the sponsorship group cares for the community, makes requests on our behalf. The Parents’ Organisation looks after morning tea in the schools.”
- Girl in Dulce Nombre

“The purpose of these organisations is to change and better the community, improve our way of living, help our community to progress. The most important is the sponsorship, the board of water, the community council. They participate in the meetings and make requests to help the community, managing and obtaining help for us in the community.” - Women’s group, El Tabor

Many children’s organisations have been established that encourage peer-to-peer learning, with leadership positions given to a child of each gender. Several children’s committees, including children’s basic hygiene, school governance and child tutors, now exist in each community.

A wonderful example of a child CBO is at a school in Dulce Nombre community. In response to unsatisfactory results amongst some of the children, the ADP initiated the ‘tutors of boys and girls’ group, which utilises child-to-child supportive learning. These tutors help children who need extra assistance in subjects such as mathematics and Spanish. Hector, a tutor child, says of the program: *“It is a privilege to support my classmates who need it, now I have more friends and also I’m learning more.”*



Children’s groups foster leadership and peer-to-peer learning.

Creating opportunities for women

“There was a time when the man made all of the decisions, but from year 2000 onwards a lot more opportunity has been given to women to make decisions as well.”

Historically, communities in Monquecagua are male-dominated, with men making all the decisions. As women did not speak out in public, many had low self-esteem, such that any attempts by World Vision staff to include them in leadership were met with hesitation or refusal.

To facilitate changes in attitudes towards women in Monquecagua, ADP staff began giving training on gender and management. This helped to both empower and coach women in management, whilst helping change community perceptions on the role of women. With the development of each CBO, women were encouraged to take up leadership positions, voice their ideas and concerns and engage in business. From small beginnings, every CBO can now boast that it has women in positions of leadership.

The men's group in El Tabor summed the situation up, saying: *“There was a time when the man made all of the decisions, but from year 2000 onwards a lot more opportunity has been given to women to make decisions as well.”*

With the changing attitudes of the community has come greater self-esteem for the women in Monquecagua, and the opportunity to better their families' living standards. There is still some way to go toward changing long-held cultural practice, but the community members recognise the need to address this and are working carefully towards achieving gender equity.

Members of this women's agricultural cooperative have grown in self esteem and become leaders in their families and the community.





Developing partnerships

Local boards, parents' associations, village councils, government bodies, community banks and microenterprises are all partners in the program.

Fundamental to community participation is the need to build partnerships between project staff, community groups and other key stakeholders in the area. Importantly, links with other organisations are forged to enable the CBOs to obtain support and resources. World Vision appreciates that successful development programs cannot be achieved by one organisation or group alone – strategic partnerships are essential. In the words of a World Vision staff member:

“The linking with organisations is a key factor for guaranteeing the support of the communities, a good relationship between them and the community, guaranteeing the attraction of resources and supports, whether it be physical works or the creation of capacity, the importance of pursuing these organisations.”



Selvin, a World Vision development facilitator, assesses crop growth with a local farmer.

Local boards, parents' associations, village councils, government bodies, community banks and microenterprises are all partners in the program. An exciting example of this is a partnership with CENET, or the National Centre of Education for Work, which is a government institution providing adult training and accreditation. The project has established agreements with CENET to train and up-skill community leaders. This will provide the ongoing education and support in marketing, entrepreneurship and business that the community leaders need to fulfil their goals.

In a wonderful example of partnership at the community level, World Vision and the community have joined together to tackle a tropical disease called Chagas that is endemic in Honduras.



Partnership with community groups has been essential.

Chagas disease

This parasite is transmitted to animals and humans via insects that are only found in the Americas.



Chagas disease (pronounced sha-gas) is a tropical disease caused by the parasite *T. Cruzi*. This parasite is transmitted to animals and humans via insects that are only found in the Americas, particularly rural areas in Latin America where poverty is widespread. The insect that carries the Chagas parasite breeds freely in houses where the floors are dirt and walls are made of untreated materials such as mud, adobe and straw. Chagas also spreads more readily where hygiene practices are poor and not well understood. Contrary to widespread belief, it is not transmitted by casual person-to-person contact. Chagas is endemic in the Monquecagua districts and is of great concern, because if left untreated it can become life-threatening.

At night, when the occupants are sleeping, the bugs emerge and bite the faces of those sleeping, sucking blood and then defecating on their faces.

On the other hand, timely treatment is usually 100% effective.

The blood sucking bug that transmits Chagas to humans hides in crevices in the walls and roofs of vulnerable houses during the day. At night, when the occupants are sleeping, the bugs emerge and bite the faces of those sleeping, sucking blood and then defecating on their faces. Infection with Chagas results from the infected faeces of the bug entering the body through mucous membranes or broken skin. Other ways of contracting the infection include mother-to-child transmission and by eating food that has become contaminated with the bugs' faeces and then not properly cooked.



Here and above left, child-to-child teaching was an important component of efforts to reduce the incidence of Chagas disease.

Chagas disease

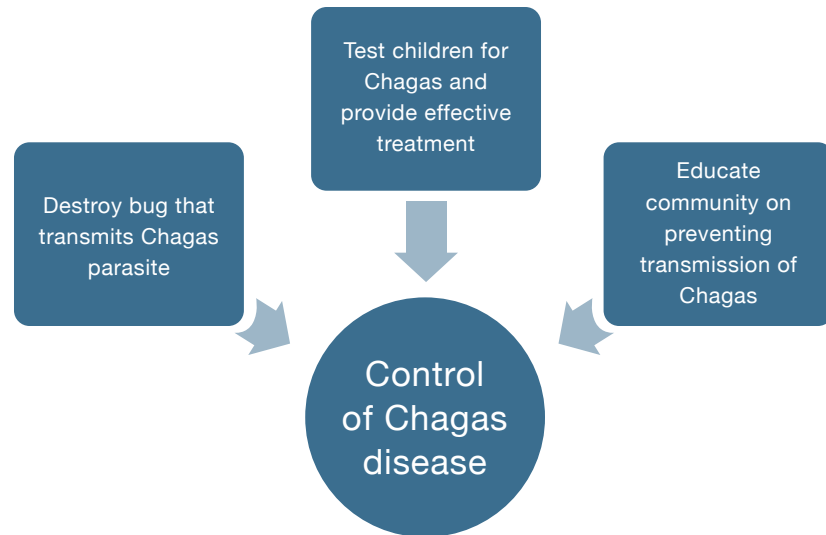
Since 2002, this exciting project has contributed to reducing the vulnerability of community members to Chagas disease through a multi-pronged approach.

After the first infection there are often no symptoms; yet in up to 5% of cases infected children will die from severe infection of the heart muscle (myocarditis) or brain (meningoencephalitis). For those children who survive, the infection persists unless it is treated. It can remain contained for decades, although up to 30% of infected persons will develop heart or intestinal complications that can result in death⁵.

The people of Monquecagua ADP have highlighted the issue of Chagas in Honduras, as it is a problem that could easily go unobserved. World Vision's goal is to "contribute to the prevention and the control of Chagas disease under the framework of the Chagas National

Plan, with a program that addresses all of the factors in transmission". Treatment is most effective if the infection is diagnosed early, and consists of using anti-parasitic drugs. In another example of partnership, the local people and World Vision staff work in collaboration with the Ministry of Health to provide the necessary health tests and treatments.

Since 2002, this exciting project has contributed to reducing the vulnerability of community members to Chagas disease through a multi-pronged approach. The interventions are represented in the following chart:



The goal of World Vision is to "contribute to the prevention and the control of Chagas disease under the framework of the Chagas National Plan, with a program that addresses all of the factors in transmission".

Destroying the Chagas bug involves two main interventions in all households:

- improving the structure of high risk houses (the expertise and resources needed for this are beyond the reach of the poorest people in Monquecagua)
- spraying the walls of all houses with insecticide

Community members are educated in stopping the transmission of Chagas and trained in basic sanitation, which will also reduce the transmission of other common and potentially deadly diseases such as diarrhoea and acute respiratory infections. Importantly, knowledge about Chagas enables the community to take control of the issues for themselves.

Looking to a future without Chagas

As part of the Chagas project, 63 heads of families were trained in masonry, in order to enable community members to improve their own houses. Of course, this has had the effect of increasing the capacity of the trained family members to generate incomes in the longer term. Women, including some single mothers, were included in this project. This enabled 18 women to increase their incomes as well as their standing and respect in the community. One of these women, trained in bricklaying, said of the program:

"I got pregnant with my first child, I returned to my community to my parents' house and started to work in agricultural activities, then I had two more children. Life hasn't been easy for me. I asked the ADP Monquecagua Chagas project to support



Community members were trained how to improve the structure of their houses to help control the spread of the Chagas bug.

Chagas disease

Furthermore, all houses in the community were sprayed with insecticide to destroy the bugs that transmit Chagas as per World Health Organization standards.

me with the construction of a new house... I was waiting for them to come and build my house, but I never expected that the project started to organise us in support work groups, training us and giving us practical teachings in construction techniques. It was in this way that I started to work and started to learn how to be a bricklayer."

For this mother, each day is now an opportunity to succeed. The monthly income she generates enables her to care for her children and give them an education, and in that way continue to improve their future prospects.

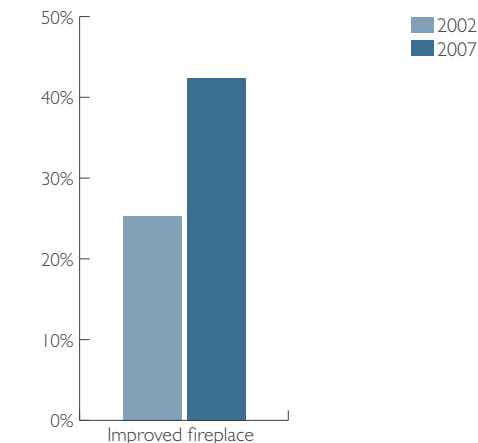
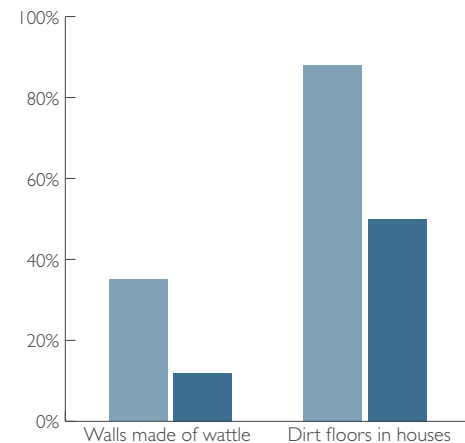
In total, all of the 77 houses identified as high risk were improved or rebuilt, through the creation of supportive work groups. The benefits to the community included a significant reduction in the number of houses with walls made of wattle, as well as a significant reduction in the number of houses with dirt floors.

Furthermore, all houses in the community were sprayed with insecticide to destroy

the bugs that transmit Chagas, as per World Health Organization (WHO) standards.

While making these improvements, home fireplaces that produced excessive smoke were replaced with improved fireplaces. Dense smoke inside dwellings is a known contributor to acute respiratory infections in young children and women⁶ and these types of infections are among the most common causes of illness and death in children in Monquecagua.

Training of families also included education on basic sanitation, extended to 74 community leaders and 68 members of basic sanitation committees. Education was also provided to children in the seven local schools using an audio-visual program entitled "Boys and Girls without Chagas". This program employs child-to-child teaching methods and describes Chagas disease, prevention and treatment to those in the community most vulnerable to it.



To prevent Chagas disease, 77 at-risk houses were improved or rebuilt and all houses were sprayed with insecticide.





Protecting the vulnerable – the health of children

The health of children is multi-faceted. In order to address the needs of children already infected with Chagas, almost 2,000 children aged under 15 were screened using blood serology.

"We are guilty of many errors and many faults, but our worst crime is abandoning the children, neglecting the foundation of life. Many of the things we need can wait. The child cannot. Right now is the time his bones are being formed, his blood is being made and his senses are being developed. To him we cannot answer 'Tomorrow'. His name is 'Today'". – Gabriela Mistral, 1948

The health of children is multi-faceted. In order to address the needs of children already infected with Chagas, almost 2,000 children aged under 15 were screened using blood serology. Nine children were found to be positive for the silent killer. These children were given appropriate treatment in partnership with the National Health Secretariat, in each case with full recovery⁷. Future work will be ongoing in these and other specialised areas of children's health.

However, malnutrition is not to be under-estimated, as it is believed to be an underlying cause of 50% of all childhood deaths worldwide⁸. Malnutrition essentially means "bad nourishment". It can refer to having not enough as well as too much food, the wrong types of food, and the body's response to a wide range of infections that result in the inability to use nutrients properly to maintain health. Malnutrition is characterised by inadequate or excess intake of protein, energy and micronutrients such as vitamins, and the frequent infections and disorders that result. Children in the Monquecagua region commonly suffer preventable diarrhoeal diseases and acute respiratory infections. Their inadequate nutrition makes them more susceptible to these and at greater risk of death.

In the Monquecagua region, the diet of most people is very limited, with corn being the most common type of

food grown. While some of it is sold for income, most farmers operate at subsistence levels, meaning that they do not often produce enough food for even their own nutritional needs. As a result of the lack of diversity of food grown, many families have diets that are insufficiently varied to provide all the basic nutrients needed, as well as not having enough food to last throughout the whole year.

The issues around the diet and health of the people of Monquecagua are many and varied. There exist deeply-rooted cultural practices, as corn has for centuries been a traditional food for Honduran people. Hence, despite the richness of the local soil that can support other fruit and vegetables, there is a lack of knowledge on the importance and use of other foods. As a whole there are low levels of food harvest and diversity, largely due to the poor organisation of production among many growers in the community. Most families do not have the basic agriculture infrastructure needs, including a water supply, for year round production. It is difficult to obtain small business loans, and few people have the entrepreneurial skills to be able to change their situation.

This in turn affects their income, as for part of the year they do not have enough produce to sell to enable them to buy many of the basics of life. As a result, most rely on inconsistent casual day work to survive, as there are few sources of employment in the area.

The extreme poverty means that access to basic health services is difficult, with health facilities sometimes located days' travel away. Some of the children become parents in their teenage years, and so the cycle of poor health and poverty continues.



The region's traditional, corn-based diet lacks the nutrients children need for healthy growth and development.



Agricultural Diversity project

Training is pivotal to building the capacity of the local people to improve their agricultural practices.



There are two World Vision projects that work together to address these interlinking issues, namely the Agricultural Diversity project and the Health and Welfare project. The Agricultural Diversity project aims to train farmers in sustainable agricultural practices that will provide them with reliable, varied food sources for health and nutrition. Training on the marketing and sale of extra food produced contributes to longer term economic security. The health project aims to tackle food insecurity while addressing transmission routes of disease (called vector control). These projects are inextricably linked and together attempt to address major health issues, some of which are described here.

Monquecagua has much potential for agricultural development. Most families have at least two blocks of land and all communities have a system of potable water, although due to population growth these are no longer sufficient for the communities' needs. The climate

and soil are suitable for the production of a variety of vegetables and fruits.

There are many individual examples of successful agricultural production achieved by members of the community. In 2007, staff and children at two schools began growing peaches in the lots surrounding the school. Soon they were joined by ADP staff, who helped teach agricultural skills to the 140 children that attended the school. The peaches grown were used to provide daily morning tea for the children.

Training is pivotal to building the capacity of the local people to improve their agricultural practices. Several education sessions were held in communities throughout Monquecagua covering topics such as "basic diagnosis and treatment of plant diseases," in conjunction with USAID. These were attended by community leaders, production groups and community banks. With a strong focus on minimising harm to the environment, technical support

was provided, including education on selecting the most appropriate crops for the soil, sowing, correcting soil pH, and harvesting techniques for potatoes. This training was attended by 54 farmers from eight communities. A group of farmers began growing rarely seen strawberry crops, which were monitored by the community, and several demonstration plots were set up for the local farmers to come and learn the processes required to successfully cultivate strawberries, as well as potatoes, carrots, lettuce, cabbage and broccoli. The ADP has helped to foster basic skills required to diversify their crops from just the small number of crops that were traditionally being cultivated.

As community members identified gaps in infrastructure and technology, changes were made. For example, in one community, two greenhouses were purchased to facilitate year-round production. Almost 300 plastic canisters were purchased for reducing damage during transportation of produce to the market. Many micro irrigation systems were installed in a joint effort between community members and ADP staff. In the 06/07 financial year alone, 442 micro credits were facilitated through community banks, of which half the recipients were women and half men.

Complementing the increase in diversity of food sources, ADP staff held training sessions on how to properly prepare meals for best nutrition. Families were excited to cook with little-known fruits and vegetables, and the increase in livestock meant that meat became more readily available.

The local climate and soil are suitable for the production of a variety of fruits and vegetables.





Health and Welfare project

Children are weighed and measured in order to identify any health issues early - when interventions are most likely to be effective.

The Health and Welfare project has evolved over the life of the ADP. In the early stages, in response to the immediate need, its approach consisted of the provision of medicines, construction of housing infrastructure, and financial support for treating medical emergencies and special health cases. This has gradually led to implementing the Healthy Home and School strategy, which addresses the underlying determinants of a healthy environment.

Children are weighed and measured in order to identify any health issues early – when interventions are most likely to be effective. Up-to-date immunisation of all children is supported, and vitamin supplementation given to hundreds of at-risk children. Linking in

with the agricultural project, farmers and other families are educated in what good nutrition involves. Training in the understanding and preparation of a nutritionally balanced diet is given in accordance with the National Dietary Guidelines for Honduras.

World Vision has forged many links with local hospitals, health staff and volunteers in the process of improving the nutrition of children in the Monquecagua region. Education of children and parents is carried out in schools and communities. In a partnership with the local health volunteers' network, nutritional assessments of children were made with the involvement of the parents. Utilising the community-based Integrated Child

Care model, regular monitoring of children is carried out and those with severe malnutrition are identified and treated.

Recognising the role of the mother as the gatekeeper to her children's health, mothers are involved in every part of any health intervention. Mothers are often supported to start home gardens and poultry farming for their family's needs, and educated on the importance of feeding their children and themselves a balanced diet. After providing demonstrations on how to cook new, nutritionally varied meals, mothers are urged to incorporate at least three of the new recipes into their family's diet.

"Before, it used to be that when someone became ill they had to get to the clinic on

foot and walk for a whole day, now we have a health centre nearby."

– Men's focus group participant

The timely assessment and treatment of illness is vital, but training mothers in understanding this is not enough when health services are a day's walk away. For this reason, World Vision has engaged in negotiations with key partners in health, particularly the Peace Corps health volunteers and regional services, who now conduct regular health checks and monitor at-risk children. In addition to this, new health centres have been opened in areas of population growth and the ADP has helped facilitate the improvement of roads and public transport for when hospital treatment is required.

Perhaps more importantly, local people now understand that many determinants of health are within their power to influence. In the words of a women's group in Dulce Nombre, many healthy habits are simple and effective:

"Now there is more hygiene in our homes, when preparing meals, we no longer drink unsafe water but only boiled and treated."

Members of the community report that their self-esteem has improved along with their new lives. They now have a positive attitude towards their future, and actively participate in the different community processes, having seen firsthand how effective these can be.



Mothers have learned how to cook nutritious meals for their children and encouraged to incorporate these recipes into their family diet.

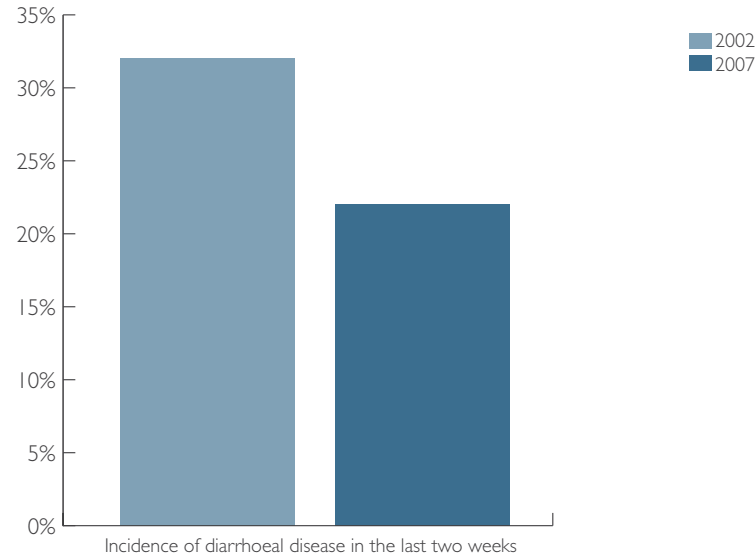


Close links between the health and agricultural diversity projects have helped to ensure that all family members learn what good nutrition involves.

Health and Welfare project

The timely assessment and treatment of illness is vital, but training mothers in understanding this is not enough when health services are a day's walk away.

The combined results of both projects in tandem have been very promising. Diarrhoeal disease – a common cause of illness, inadequate weight and even death – in children aged under five dropped from 32% in 2002 to 22% in 2008⁹.



The symptoms of acute malnutrition among children have been reduced.



Significant improvements in health indicators amongst local children have been recorded since the implementation of health and agriculture project activities.

Year	Percentage (%)
2002	32%
2007	3.2%

Year	Percentage (%)
2002	59%
2007	41.5%

Wasting, a measure of acute malnutrition due to recent food shortage and/or illness that measures low weight for height, dropped from 32% in 2002 to 3.2% in 2007¹⁰.

The number of children who are underweight, another measure of growth utilised by the WHO that measures longer term malnutrition, dropped from 59% in 2002 to 41.5% in 2007¹¹.

Although these results are very encouraging, the percentages are still above the national average for Honduras of 22.6% (underweight). This indicates that whilst great progress has been made by the community in addressing local determinants of health and wellbeing, challenges still remain.

The ADP has made many gains and is taking on further challenges with the goal of greater dignity, justice and hope for its community. In the words of staff members:

"This is not easy to achieve, we know very well; but, because we cannot do it all, does not mean that we cannot give our best effort to do what we can do."

Staff and members of the ADP derive their motivation to face these challenges from various sources – their

own faith, ideals, hopes, desperation or sheer courage.

The Monquecagua ADP is an encouraging example not only of World Vision's work in some of the poorest communities of the world, nor of what can happen when concerned Australians walk along the road towards development and justice. It is foremost an example of what communities can do for themselves if we can just give them the tools.

The future in Monquecagua

Staff and members of the ADP derive their motivation to face these challenges from various sources – their own faith, ideals, hopes, desperation or sheer courage.



The children of Monquecagua face a brighter future.



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