Spontaneous Adoption

In Burkina Faso, desire to participate in HKI’s Enhanced Homestead Food Production Project was so strong, over a thousand ‘non-participants’ ended up taking part.

‘Organic fertilizer is very important! My soil is weak, and the crops don’t do well without it,’ reported Sana Zahara, satisfied after a day learning how to make compost in Abaza village, Burkina Faso. Having spent several hours practicing techniques for making compost and learning about the proper way to use it to enrich her soil, with the help of trainers from Helen Keller International (HKI) and a local NGO, APRG, she was eager to apply the technique in her own garden. Hundreds of women participating in HKI’s program will soon be doing the same thing on their own plots, dotting the Sahelian region with patches of nutritious green. But Sana Zahara isn’t a beneficiary of the project—Or is she?

HKI has over 25 years of experience supporting farmers in Asia to diversify their diets, improve their incomes, and combat micronutrient deficiencies through homestead gardens and livestock rearing supported by its Enhanced Homestead Food Production (EHFP) approach. Projects in Bangladesh, Cambodia, the Philippines, and Nepal have brought improved nutrition to over 5 million people. With support from the USAID Office of Foreign Disaster Assistance, HKI implemented its first African EHFP project in the eastern region of Burkina Faso in 2009-2012. One of the advantages of the EHFP model, which encourages farmers to train other farmers, is that it can spread far beyond the original participants. After only three years, this ‘horizontal diffusion’ was evident in Burkina, blurring the lines between project ‘beneficiaries’ and ‘non-beneficiaries’ and between project villages and neighboring villages.
In water-scarce eastern Burkina Faso, which sits in the semi-arid Sahel, fresh vegetables are available only a few months of the year; most farm families depend almost entirely on staple grains, like millet and maize. As a result, most people's diets are poor in essential nutrients, such as Vitamin A, iron and zinc. This is particularly problematic for young children, who are in a key time for growth: indeed, childhood malnutrition is widespread in this region: the DHS (2010) estimated the regional prevalence of stunting and anemia at 42% and 91% of young children, respectively. This can lead to poor growth, high mortality, lower educational performance, and poor future economic outcomes, constraining development for generations to come. To help break this cycle, improving nutrition with a child’s first 1000 days (from conception to age 2) is a critical window for making a lifelong impact. As such, HKI’s EHFP project targeted pregnant women and those with children under 12 months of age in 30 villages.

Provided with seeds, tools, training, and education, over 800 of these women began growing vegetables at their homes, feeding their children more diverse, nutritious diets and using improved breastfeeding and nutritional practices. These changes caught the eyes of their neighbors, who were not targeted by the project because they did not have young children. Eager to make such a change in their own homes, they began establishing plots on their own and demanding training to help them do so properly. Seeing such enthusiasm, HKI mobilized resources to train an additional 1200 women farmers. This included farmers like Sana Zahara, the enthusiastic composter, who has 8 children.

In Kalwatinga village, for example, nine women, inspired by what they had learned on the village’s teaching farm, resolved to set up their own common farm in their neighborhood. With their husbands’ help, they enclosed a large plot and began applying the techniques taught by HKI. They invited another 15 non-beneficiary women to join them, sharing the techniques. Soon the land was green with sprouting carrots, beans, okra, and local leafy greens. As shown in the table, such efforts within the project have yielded impressive results for both beneficiaries and non-beneficiaries.
In the dry season [when few vegetables are available], I would prepare for [my friend] a dish with fresh vegetables from my garden. Impressed, she would taste it and ask, ‘How can you have all these vegetables in the dry season?!’ This would convince her to visit my garden and learn to do the same.

- Salmata Zedwemba, Kalwatinga village

Though the initial seed was provided by HKI, the women plan to become self-sufficient in the future: ‘After the project ends,’ declared Salmata Zedwemba, a local farmer, ‘I will buy the seed myself. I have seen the benefits; I know it is worth it for my family!’

Their nightly dinners have become more nutritious and interesting with the addition of vegetables, and selling vegetables had allowed her to buy notebooks and other school supplies for her children. Her husband nodded proudly from the side, noting that he would help keep the fence maintained: ‘We have an obligation to help our wives in their work.’

Saouadago Adjirata is a ‘non-beneficiary’ farmer who shares this plot with Salmata, and she is eagerly growing okra and leafy greens, planning to add these ingredients to her dishes so that, with a more diverse diet, her seven children will be ill less often. This sort of autonomous adoption through diffusion of information about gardening between friends and relatives within a village helps improve sustainability of an intervention and enable its growth, even after the official project has finished. Given limited resources, sustainable, agriculture-based approaches to fighting micronutrient deficiencies can go a long way to ending this ‘hidden hunger’.

Under the 2013-2016 CHANGE project funded by Global Affairs Canada, HKI was able to extend the EHFP project to cover 30 additional villages. In one of these villages, Moodré, a group of farmers had already heard about the project and were so eager to participate that they went to a nearby participating village, learned techniques from friends and relatives there, and set up gardens on their own. Though their techniques may have been imperfect, their enthusiasm marks fertile soils for continued efforts to establish green islands of nutrition and wellbeing in the Sahel. With HKI’s training, over 2,400 more women learned how to do just that through CHANGE. And undoubtedly, thousands of their peers will join in as those ‘beneficiaries’ share their new knowledge and skills throughout their village and beyond.
The EHFP and CHANGE Projects are supported by:

• Women are encouraged to establish their own gardens and apply improved infant and young child feeding and hygiene practices.
• Women's empowerment activities support more equitable intra-household decision-making and workload and resource sharing.
• With more varied agricultural products, potentially greater earnings from selling surplus production, and new knowledge, participants are better able to feed their children and families diverse diets rich in micronutrients, combatting malnutrition and improving child health and growth.

What is Enhanced Homestead Food Production?

• A communal garden or ‘village model farm’ is established in each village, including infrastructure such as a well.
• On this garden, women learn improved gardening and animal husbandry practices.
• Interactive nutrition education improves their understanding of the causes of malnutrition, including low dietary diversity and poor sanitation, and potential solutions.

FIGHTING MALNUTRITION AT ITS ROOTS.