

PolicyPennings by Daryll E. Ray & Harwood D. Schaffer

An application of the bottom-up development process in Senegal

When Harwood, Ousmane Pame, and Assane Diop arrived in Moundouwaye, Senegal on Sunday afternoon, June 5, 2016, they were greeted by most of the members of the small rural community on the banks of the Senegal River. Several children wore traditional Haalpulaar clothing and greeted their guests. Among those greeting the three were the village chief and the imam of the community's mosque.

One man played a small drum beating out a dance rhythm and one of the women began dancing and pulled Harwood into the middle of the crowd to join her. It quickly became evident that Harwood had two left feet and was replaced by another woman. The celebration and welcome was joyous and lasted for at least 20 minutes before everyone proceeded into the community to for a meeting.

Last November, they had been invited to Moundouwaye to meet with the members of the community and listen to the dreams and the needs of their community. They had heard about Harwood from Assane Diop and Ali Ly. Assane is leading a permaculture project in the community while Ali Ly, Chief of the Salayaal de Louboudou, Mauritania and a relative of some residents of Moundouwaye. Ousmane, Professor of English at Chiekh Anta Diop University in Dakar, spent time in the community as a youth.

The goal of the visit was to follow up on their November meeting with the community and move to the next step of the bottom-up development process we talked about in last week's column. Harwood listed the issues that he had heard members of the community mention at the previous meeting and asked if he had heard them correctly. The team hoped to work with community members to develop strategies to work on several issues that were of concern to the community. As the sun began to set, the agreement was to meet in the morning under the two mango trees in the women's field.

Monday was market day in the market city of Ndiom, 17 km from Moundouwaye and many community members were there to sell their products, but about a dozen people met with the team in the morning under the mango trees. After talking about several issues, the discussion turned to their interest in the issue of cattle breeding. One of the men indicated that there was an artificial insemination (AI) business in Ndiom.

The question was "what was their goal for breeding? Improved heat tolerance? More meat? More milk?" The mention of milk turned to a discussion of the seasonal variability of milk production. As one of the men said, "During the rainy season they have so much milk that they could take a bath in it and during the dry season they do not get enough milk from their cows.

Harwood asked about making cheese as a way of using the surplus during the rainy season and preserving it for use during the dry season. In addition they could sell any surplus cheese. If they developed a quality cheese they might even be able to sell it as far away as trendy restaurants in Dakar.

The problem was no one in the community knew how to make cheese. It was suggested that the team might try to find some herders among the Haalpulaar who still make cheese and who would be willing to come to Moundouwaye and teach them the art of cheese making. After a short discussion, community members concluded that experts would have to be found elsewhere because cheese making as not a part of the Haalpulaar tradition...but...they would like to do that anyway.

Ousmane suggested that he could use his contacts in the Global Ecovillage Network and elsewhere to see if there was someone versed in traditional cheese making methods who would be interested in coming to Moundouwaye and teach people how to do it. Several men said they would be willing to contact the AI firm to see if they had semen from bulls carrying the genetics for increased milk production.

In the afternoon, a couple dozen people gathered in the shade on a day when the temperature topped 100 F. Many concerns were expressed during this meeting with a diversity of opinion on where to start. In the midst of the diversity of concerns, the discussion kept circling back to the community health center and the need to have an adequate supply of pharmaceuticals available at the health center so people did not have to make the long trip to Ndiom over unpaved roads.

Since the November visit when the health center was a topic of concern, they had raised money locally which was matched by the prefecture to purchase a stock of medicines that they then were able to sell to community members. The problem was multifaceted. The initial stock of medicines was too small to fully meet the needs of the community and while they had sold the medicine at a modest markup, they had loaned some of the money to women who needed to visit the doctor in Ndiom for their first prenatal visit. While the women paid back the money, there was a time gap and thus they did not have enough money at any one time to replace the medicines that had been sold.

Other issues with the health care center included the need for light when a birth takes place at night (Moundouwaye is not on the national electrical grid), the need for additional rooms, and the need for some basic hospital equipment. Community members were convinced that if they could offer quality care, residents of the five smaller communities who sent their

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An application of the bottom-up development

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children to Moundouway for elementary school would use the clinic and probably would support its improvement.

One of the community members told the group that he had purchased a solar panel system that stored the generated electricity in a battery. The battery was hooked up to an inverter that delivered AC current for lighting and the operation of electrical and electronic equipment. But many questions went unanswered because the volunteer midwife was out of the community at the time.

That night the team met with the nurse midwife as well as some of those who expressed the greatest interest in the health center during the afternoon meeting. By the end of the meeting, the group had developed a plan for 1) increasing the supply of pharmaceuticals, 2) electrifying the health center, 3) adding two new rooms, and 4) purchasing the basic medical equipment that was in greatest need.

Costs were developed for each activity and when they were totaled up, it amounted to just under 1.8 million FCFA (the currency shared by eight West African nations) or US\$3,000. The group decided that the pharmaceutical funds would be kept in a separate account to be used only for replacing stocks that had been sold. A group of young men in the community who had developed their own microfinance group for the community would be asked to take responsible for providing loans to women for their prenatal visit.

They would also establish an operating fund for the health center that would cover costs for the nurse midwife, repair and maintenance of the building and equipment, and supplies. In addition, they would establish a capital fund to be set aside for future facility needs including the eventual replacement of the solar electrical system. The capital fund would be funded by a surcharge added to the cost of using the health center. The community will work to identify ways to meet the needs of the poorest members of the community while fully covering the costs of maintaining the health center and providing a basis level of health care services.

Community members agreed to work on raising a couple of hundred thousand FCFA from Moundouway, the surrounding communities, and the prefecture. The development team agreed to work on raising the rest of the needed funds.

Several factors suggest that these projects have a reasonable chance of success. Both the goals and the strategies were identified and adopted by members of the community. The costs of the projects are modest. Community members have committed to taking specific steps to move toward achieving their goals. After research the cheese team will have the information they need to move the project forward or modify it in light of the additional information. The health center project is more fully fleshed out and is can be maintained within the resource base of the community. And members have accepted the responsibility for local fundraising.

As these projects move forward and community members gain experience in strategic community planning, it is foreseeable that others will begin to step forward to work on other community goals. By working with their neighboring communities, Moundouway's neighbors will also begin to experience the fruits of community-led development and strategic planning.

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