

periodic review of developments in international nutrition

Nutrition in the Context of Conflict and Crisis



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United Nations System

STANDING COMMITTEE ON NUTRITION

In 1977, following the World Food Conference (with particular reference to Resolution V on food and nutrition) the Administrative Committee on Coordination (ACC), comprised of the heads of the UN Agencies, recommended the establishment of the Sub-Committee on Nutrition. This was approved by the Economic and Social Council of the UN (ECOSOC). Following the reform of the ACC in 2001, the ACC/SCN was renamed the United Nations System Standing Committee on Nutrition or simply the SCN. The SCN reports to the Chief Executives Board of the UN, the successor of the ACC. The UN members of the SCN are ECA, FAO, IAEA, IFAD, ILO, UN, UNAIDS, UNDP, UNEP, UNESCO, UNFPA, UNHCHR, UNHCR, UNICEF, UNRISD, UNU, WFP, WHO and the World Bank. IFPRI and the ADB are also members. From the outset, representatives of bilateral donor agencies have participated actively in SCN activities as do non-governmental organizations. The SCN Secretariat is hosted by WHO in Geneva.

The *mandate of the SCN* is to serve as the UN focal point for promoting harmonized nutrition policies and strategies throughout the UN system, and to strengthen collaboration with other partners for accelerated and more effective action against malnutrition. The *aim of the SCN* is to raise awareness of and concern for nutrition problems at global, regional and national levels; to refine the direction, increase the scale and strengthen the coherence and impact of actions against malnutrition worldwide; and to promote cooperation among UN agencies and partner organizations. The SCN's annual meetings have representation from UN Agencies, donor agencies and NGOs; these meetings begin with symposia on subjects of current importance for policy. The SCN brings such matters to the attention of the UN Secretary General and convenes working groups on specialized areas of nutrition. Initiatives are taken to promote coordinated activities—interagency programmes, meetings, publications—aimed at reducing malnutrition, reflecting the shared views of the agencies concerned. Regular reports on the world nutrition situation are issued. *Nutrition Policy Papers* are produced to summarize current knowledge on selected topics. *SCN News* is published twice a year, and the *RNIS* is published quarterly. As decided by the Standing Committee, initiatives are taken to promote coordinated activities—inter-agency programmes, meetings, publications aimed at reducing malnutrition, primarily in developing countries.

This issue of SCN NEWS was edited by Andrea D Moreira, MPS ID Sonya Rabeneck, PhD is Editor-in-Chief Cover Illustration by Stefan Boness

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Abraham Besrat 1938-2002

Abraham Besrat died on April 4 at his home in Addis Ababa after a brief illness. Africa and the entire nutrition community has lost one of its most effective advocates. Abraham was wise and honest; he was a gentle person and a fine professional.

Abraham obtained his first degree in agriculture at the Imperial Ethiopian Agricultural and Mechanical Arts College in Addis. He did his MSc at Oklahoma State University; his thesis was on the biological value of Ethiopia's main crop *tef.* After completing a PhD at the University of Minnesota he returned to Ethiopia in 1961, where for 15 years he taught biochemistry at Addis Ababa University. He rose through the academic ranks to become Dean of Agriculture, Associate Dean of Research and then founding Dean of the School of Graduate Studies. Abraham's first contact with the SCN was in 1981 when he presented a paper at a workshop on nutrition and agriculture at Castelgandolfo, Italy. He was a true friend and supporter of the aims of the SCN, and the work programme of the Secretariat, over many years.

From 1982-1983 Abraham was a UNU Senior Fellow at the International Food and Nutrition Program at the Massachusetts Institute of Technology. Because the political situation in Ethiopia had changed, it became difficult for Abraham to return to his country, so he took a position at FAO in Rome. He was highly regarded in the corridors of FAO, and much admired for in-depth knowledge of the linkages between nutrition and agriculture as well as his patience and good humour. Abraham then moved to a UNU position in Tokyo. This provided the opportunity for the family to be together, after many year of separation due to the political situation in Ethiopia. The Besrat family prospered in Tokyo and learned fluent Japanese, "except for me" Abraham would say with a smile, "after twelve years, I can manage a courageous few words."

When Abraham retired from the UNU he continued to represent the UNU Rector, while reestablishing his home in Addis. Abraham played an important role in both the Nairobi and Berlin annual sessions. It was indeed a great pleasure and privilege to welcome him back to the SCN forum. In Berlin in March, Abraham spoke enthusiastically about his plans to move to a new office in Addis, expand his crop breeding work and move the capacity building agenda steadfastly forward in Africa. The news of his death just a few weeks later was so unexpected. The SCN Secretariat extends sincerest sympathy to his wife, Tsehai, and their two children.



CHAIRMAN'S ROUND-UP

For this issue of SCN News, which is dedicated to Dr. Abraham Besrat, the Secretariat team presents the full set of papers delivered at the 29th session in Berlin in March of this year on the theme nutrition in conflict and crisis. The symposium touched upon the politics of humanitarian aid delivery, livelihood security, and the right to food and nutrition during emergencies. In keeping with the tradition of SCN symposia, the day provided an opportunity for UN agencies, NGOs/civil society and bilateral development partners to interact, share experiences and debate the difficult issues their agencies face in their daily work. The recommendations for SCN action will be taken up by the SCN Working Group on Nutrition in Emergencies, now chaired by Dr. Marjatta Tolvanen.

The symposium day also provided an opportunity for a public announcement of the appointment of the 8th SCN chair, Ms. Catherine Bertini, who will begin her two-year term on August 1, 2002. Ms. Bertini stepped down as Executive Director of the World Food Programme in April of this year. From WFP's headquarters in Rome, Ms. Bertini carried out the agency's dual mandate: to avert starvation in humanitarian crises through emergency operations and to promote long-term development projects aimed at breaking the deeply rooted hunger-poverty cycle. Under Ms. Bertini's leadership, the WFP underscored the seminal role of women in food aid and pioneered the use of food aid to empower women. Ms. Bertini previously worked in the US government where, from 1989 to 1992, she was the Assistant Secretary for Food and Consumer Services in the Department of Agriculture. Having known and worked with Ms. Bertini for many years, I am fully confidence that she will provide very dynamic leadership for the SCN's important work as well as lead the SCN in new and exciting directions.

Indeed, the SCN is still "the SCN". Since the last issue of this journal a decision was taken on the new name. After extended discussion on the many possibilities during the 29th session and afterwards, the overwhelming majority of SCN participants favoured retaining the acronym "SCN" simply because it is so well known. In fact, the acronym dates back to 1976. Thus, the SCN is now the Standing Committee on Nutrition of the United Nations System, and reports to the Chief Executives Board, chaired by the Secretary General. Information about the Chief Executives Board (in a way the SCN's new parent body) is available on the CEB website: ceb.unsystem.org One role of the CEB is to ensure that effective arrangements are in place for inter-agency coordination in areas of UN system-wide concern, like nutrition, which are crucial for development and for which several agencies share responsibility.

The SCN Secretariat welcomes Dr. Claudine Prudhon as RNIS Coordinator, beginning 17 July 2002. Previously Claudine worked with Action Contre la Faim, France. She has extensive experience, both field and headquarters, with emergency nutrition issues. Claudine takes over this demanding position from Brian Jones who has compiled and written RNIS quarterly bulletins since December 2000. I extend sincere appreciation to Brian for the professionalism he brought to the RNIS work over the last year and a half as well as his unfailing good humour and enthusiasm for long hours of work and wish him well in his new position with Oxfam, UK. In addition, Mr. Tonny Bogere recently joined the Secretariat as a summer intern. Tonny is working on a web-based information sharing system dealing with nutrition and HIV/AIDS. Tonny is from Uganda where he worked for several years caring and supporting people with HIV/AIDS.

This past several months have again seen several important appointments in the nutrition field. Dr. Eileen Kennedy has been named the new Global Executive Director for the International Life Sciences Institute. Dr. Kennedy, former Acting Undersecretary of Research, Education and Economics at the US Department of Agriculture assumed her position in mid March. Dr. Kennedy served on the SCN's Advisory Group for Nutrition in past years, and has been involved extensively in the nutrition work of many UN agencies. Most recently, she chaired the FAO consultation on human energy requirements. Dr. Rolf Carrier has been appointed as Executive Director of the Global Alliance for Improved Nutrition. The progress of the GAIN initiative has been reported in the pages of SCN News over the past year. Dr. Carrier is widely known in the nutrition field; he has served in a number of senior field posts for UNICEF in India, Bangladesh and Indonesia where he has been a highly effective voice for nutrition.

Finally, as chair of the SCN for these past two years, I wish to express my sincere appreciation to those UN agencies, bilaterals and NGOs who have assisted me to raise the visibility of nutrition as a development issue through the SCN network.



ADVOCACY IN PRACTICE

Towards Malnutrition—Free Tamil Nadu

ndia has a federal constitution and Tamil Nadu is one of the States in South India, with a rich linguistic and cultural heritage of its own. One of the world's earliest irrigation systems was developed in Tamil Nadu two thousand years ago. The State is also dotted with numerous Hindu temples, mosques and churches. Religious harmony has been a way of life in the State for centuries

In the past, lunches were served in Hindu temples for all those who needed such social support. The State Government has revived this age-old tradition recently, as a component of an integrated safety net against poverty-induced hunger. Food availability and absorption are fairly satisfactory in the State, thanks to a hard working farming population and a reasonably satisfactory position in primary health care, sanitation and drinking water supply.

Economic access to food arising from inadequate opportunities for sustainable livelihoods is the major food security challenge in the State. Nearly 50% of the rural population do not own assets like land or livestock. The only assets they have are their time and labour. Hence in the biovillage programme of the M S Swaminathan Research Foundation at Chennai (formerly known as Madras), the emphasis is on adding economic value to the time and labour of the assetless, through technological and skill empowerment. The transition for unskilled to skilled work is the pathway adopted to enhance income and reduce workload, particularly for women who suffer from multiple burdens in their daily life.

The Government of Tamil Nadu has chosen "nutrition security" among the 15 thrust areas to be rigorously pursued in order to provide every child, woman and man an opportunity for a productive and healthy life. The strategy has two major components. First, enhance the productivity, profitability and sustainability of the major farming systems of the State, since agricultural progress represents the best safety net against hunger, poverty and deprivation. This is because of the dependence of over 70% of the State's population of 60m on crop and animal husbandry, inland and marine fisheries, forestry and agro-processing, for their livelihoods.

The second component of the strategy is introducing a whole life cycle approach to nutrition by providing catalytic horizontal linkages among numerous vertically structured programmes. The following programmes will thus be implemented in an integrated manner at the level of each individual:

- pregnant mothers—avoid low birthweight
- □ breastfeeding mothers—achieve WHO goals
- ☐ infants (0 to 2 years)—reach through mothers
- □ pre-school children (2 to 6 years)—integrated child development service
- □ youth (6 to 21 years)—school noon meal pro-4ramme
- □ adults (21 to 60 years)—food for work
- old and infirm (over 60 years)—food for nutrition.

It should be mentioned that Tamil Nadu was the first state in the country to introduce a universal noon meal programme for school going children in the age group 3-14 years.

The next SCN annual session will be held in Chennai from 3-7 March 2003. On that occasion, the SCN's 5th Report on the World Nutrition Situation focusing on Engaging Development: New Opportunities for improving Nutrition Outcome will be released. In addition, there will be a workshop on Malnutrition Free Tamil Nadu, accompanied by a field visit to see the implementation aspects of the programme. An effective delivery system of entitlements, designed to reach the unreached and including the excluded, is what will help to achieve the desired nutritional goals. Also, the programmes should be designed on the pattern of partnership with the people and not of patronage. Ownership of the programmes by local communities and their total involvement are absolutely vital for launching a sustainable nutrition security movement. This is the goal of the Tamil Nadu Nutrition security compact, which aims to achieve the goal of hunger free India set by Mahatma Gandhi just before India became Independent on August 15, 1947, by August 15, 2007 which represents the 60th anniversary of India's independence.

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NUTRITION IN THE CONTEXT OF CONFLICT AND CRISIS

The 29th Session of the SCN was held in Berlin (Köpenick), Germany at the Dorint Hotel on 11-15 March 2002. The Session was hosted by the Federal Ministry for Economic Cooperation and Development (BMZ), the Government of Germany, in collaboration with the German Foundation for International Development (DSE) and Deutsche Gesellschaft für Technische Zusammenarbeit (GTZ)

his year's Symposium on Nutrition in the Context of Conflict and Crisis took place on 12-13 March. The Symposium's goal was to raise awareness and mobilize commitment amongst policy-makers of the critical importance of nutrition before, during and after crises and conflicts. It set out to do this through four specific objectives:

- to promote cooperation amongst UN agencies, NGOs and bilaterals
- to promote greater understanding and linkages in food and nutrition policies used in development and humanitarian situations
- to provide a forum for discussion on achievements and new challenges needed to improve nutrition situations, and
- to highlight basic human rights and humanitarian principles as the basis for nutrition programming.

The Symposium focused primarily on those emergencies where there is a total breakdown in authority resulting from internal or external conflict, known also as complex emergencies. Complex emergencies pose a particular challenge for humanitarian agencies because response may be compromised by the interaction of violent conflict, internal and external political objectives and insecurity.

A statement (see back cover of this issue) was prepared for endorsement by the UN Secretary General. This statement urges better coordinated action between UN agencies, bilaterals and NGOs in emergency situations. Most importantly, it reflects the Symposium's recurring themes found below and lists recommended actions for the SCN.

The 6th Dr. Horwitz Lecture, given by Soha Moussa, provides a personal and technical account on the importance of keeping schools open during crisis and conflict. This lecture serves to remind all those involved in emergency work of the emotional and psychological effects that violence, insecurity and uncertainty can have on a child.

To summarize, the following themes emerged during the Symposium:

- There has been significant progress in a number of technical areas in emergency nutrition.
 However, these advances are poorly implemented
- Nutritional needs can and should be addressed through a range of interventions, including broad-based livelihood approaches, selective feeding programs, and health programs
- The humanitarian imperative is a central tenant of emergency relief interventions, but it is undermined by the politicization of aid, especially food aid. The humanitarian imperative needs to be divorced from political and foreign policy objectives
- The human rights approach promotes equitable distribution and emphasizes human dignity.
 This approach is a shift away from the notion that emergency relief is a charitable gift, which denies dignity
- There is a moral dilemma and an inherent tension between access to affected populations and cooperation with corrupt regimes. In situations of insecurity, while negotiating access, there is a risk of legitimizing governments or quasi-governments
- The professionalization of NGOs means they are increasingly taking on the mandate of ca-

- pacity building as part of their emergency response. Yet, the appropriateness of capacity building is context specific and, as a minimum, agencies should respect the International Red Cross and Red Crescent Movement and NGO Code of Conduct and attempt to build disaster response on existing local capacity
- Refugee populations are often better off than local populations. During emergencies, the host governments are not well equipped to handle displaced populations. Solutions are still needed to reconcile the standard of living of the emergency-affected, refugee, or displaced populations, and the needs of the host government population
- Agencies risk disrupting social structures by inappropriate targeting and blanket protocols, calling for knowledge and in-depth context analysis.
 Blanket protocols risk being culturally insensitive and more evidence is needed to support the effec-

- tiveness in targeting certain groups. Vulnerability assessments must consider the multiple risks facing people in conflict without singling out individual criteria for targeting
- Agency specialization can lead to gaps in mandates. The conceptual framework currently in use promotes multisectoral interventions to address nutritional needs. Eventually, certain agencies find it very difficult to cover all the sectors, leading to specialization and gaps in mandate. Therefore, coordination of actions between agencies is needed to ensure that none of the emergency needs of an affected population are missed
- The term 'do no harm' is inappropriate. There are positive and negative effects of action, therefore, the goal should be to minimize the bad and maximize the good aspects of aid and emergency relief.

The SCN Secretariat is most grateful to Ellen Messer, Marc Cohen and Anthony Zwi for reviewing the papers in this collection.

Deutsche Stiftung für internationale Entwicklung



The German Foundation for International Development (DSE) is an institution for international dialogue and training following the policy guidelines of the Federal Government of Germany. DSE's development efforts focus on an

exchange of political experience through workshops and conferences and on further professional training for specialists and executives from developing and transitional countries. The activities of the Foundation are mainly commissioned by the Federal Ministry for Economic Co-operation and Development (BMZ). The scope of its mandate, however, also allows DSE to act on behalf of other organisations. The DSE Centre for Food, Rural Development and the Environment (ZEL) contributes to rural development, food and nutrition security, management of natural resources and of development projects in partner countries.



Deutsche Gesellschaft für Technische Zusammenarbeit (GTZ) GmbH The Deutsche Gesellschaft für Technische Zusammenarbeit (GTZ) GmbH is a government-owned corporation for international cooperation with worldwide operations. GTZ's aim is to positively shape the political, economic, ecological and social development in our partner countries, thereby

improving people's living conditions. Through the services it provides, GTZ supports complex development and reform processes and contributes to global sustainable development. The GTZ was founded in 1975 as a corporation under private law. The German Federal Ministry for Economic Cooperation and Development (BMZ) is its main financing organisation. GTZ also undertakes commissions for other government departments, for governments of other countries, for international clients such as the European Commission, the United Nations or the World Bank, as well as for private-sector corporations. The GTZ operates on a public-benefit basis.



SYMPOSIUM OVERVIEW: BREAKING THE LINKS BETWEEN CONFLICT AND FOOD INSECURITY IN COMPLEX EMERGENCIES

Ellen Messer and Marc Cohen

The papers and perspectives from the Symposium on Nutrition in the Context of Crisis and Conflict reflect what is old and new in humanitarian thinking and action, both in the principles that guide and regulate the rhetoric and behaviors of donor and implementing-agency bureaucracies, and in what concepts motivate the technical interventions on the ground. In aggregate they expertly address all three dimensions of nutrition—food, health, and care—and all three aspects of food security-availability, access, and utilization.

The contributors, all policy makers and practitioners, recognize and seek new ways to overcome the

sometimes fragmented rather than holistic responses to food crises, while at the same time they emphasize the need to identify more diverse and creative ways for the affected communities to mobilize resources to protect food security and prevent destitution. As illustrated by Young et al.'s community-based approaches,

there are multiple and complementary avenues to reach and assist the food insecure, in particular women, for example, through preferential targeting to improve technology in what is traditionally women's work, and by increasing women's access to elevated levels of resources as their portion within traditional economies visibly dominated by men.

Similarly, Jonsson et al. demonstrate that decisions to provision vulnerable populations in the context of illegal actions by states or non-state actors can and do involve tradeoffs, but life-saving projects based on human rights principles can try to meet individual demands and needs for essential food, water, and medicine without giving full and extra support to unlawful authorities. Unfortunately, we have few examples of such actions and evaluations of their political implications, or successes and failures. In many militarized contexts, codes of conduct notwithstanding, humanitarians still find it impossible to avoid hiring armed guards and providing food, incomes, and vehicles to combatants, who fuel further conflict.

Although the more polemical papers on principles argue against a politicization of aid (which appears to be almost inevitable because both violations and defense of human rights tend to take place in the political arena), the more practical reports on livelihood-security and human-rights strategies suggest ways humanitarians can work around rights-abusive govern-

ments and offer new ways to reach and engage networks of females and males struggling to gain livelihood and maintain stable lives with dignity in unsettled times.

Moussa's thoughtful contribution on the use of food for education argues creatively from hard experience that schools and school feeding, especially in contexts of political instability, are multi-functional. Such programs, by their very regularity and existence, always bring to the table extra-nutritional meanings and values, as they contribute to social and psychological welfare and a sense of connectedness that goes well be-

yond the immediate access to food. Education of girls has also been shown to deliver intergenerational nutritional benefits.

Happily, these discussions demonstrate that linkages between conflict/conflict-prevention and food insecurity/ food security in the post-Cold War era are beginning to be addressed by peace and food-

security advocates both inside and outside of government and relevant international agencies, which increasingly recognize and accept the critical inputs of NGOs. The explicit commitment of the German government through its Ministry for Economic Cooperation and Development, to policies ensuring sustainable food security and prevention of conflict, along with USAID's reorganization, and renewed attention to 'interactive pillars' that include agriculture and trade in interaction with conflict prevention, humanitarian assistance, and democratization, suggest that governments are widening their scope of action to address complex food-security and conflict issues together, and also to increase integration of NGO and private actors and actions.

In addition, actions by UN agencies following up the activities of the World Food Summit, suggest that nations and the UN system as a whole at last are taking human rights seriously in implementation of humanitarian assistance.

These efforts may be slowly bridging the gap between those diplomatic agents and agencies that engage in conflict prevention and peace making, and those who seek to protect food and livelihood assistance. But the structural causes of crises and conflicts, including the politics of food, still do not enter seriously into most diplomatic discussions, which are handled by separate departments. Equally, the conflict-

potentiating effects of aid, including who will control scarce resources such as irrigation water, improved seeds, or other technologies-in addition to land-require careful analysis in each situation, and are always political. While the principle that humanitarian agencies and aid should eschew politics is right in spirit, crisis situations, such as the demand for refugee feeding, are inherently political, and the politics of food, which cannot be wished away, must always enter into combined food-security/conflict-prevention strategies in order to prevent future crisis.

For the most part, these presentations were not addressing conceptual questions of whether conflicts are caused by food insecurity, or the more theoretical questions of whether people engage in violence and warfare primarily because of ethnic animosities or perceived resources deprivation. Nor were they addressing how UN agencies, governments, or NGOs might intervene in situations of impending crisis to avoid conflict. But the case studies on livestock protection do illustrate what appear to be successful strategies for preventing or mitigating the impacts of conflict, and assuring the benefits of those resource savings are widely shared across households and communities. Both relief and development policies stand to benefit from such gendered approaches, which seek to protect food security and livelihoods as a deterrent to conflict, whatever its causes.

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NUTRITION IN THE CONTEXT OF CRISIS AND CONFLICT

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It does not take much to appreciate the relevance of a Symposium on *Nutrition in the Context of Crisis and Conflict*. We all recall the pictures of hungry children in Afghanistan and their empty and fearful eyes as they look at the cameras and into an uncertain future. We also vividly recall the stream of hungry, fearful refugees being rejected at the borders. At the same time we see pictures of areas covered with small food parcels and lorries full of foodstuffs that cannot get to affected regions because of conflict. After reading in *Süddeutsche Zeitung* on 12 February 2002 that Afghan mothers are happy if their children get a place in an orphanage because they are simply unable to feed them, I know that the theme of this symposium is a right and important one.

The Trouble Spots Worldwide

Since the end of the Cold War, 103 armed conflicts have taken place, of which 88 are and were conflicts within states¹. Old conflicts have broken out afresh, often intensified by ethnic and religious tension. At the end of 2000, some 24m people were dependent upon international humanitarian aid for their survival as a result of armed conflicts in developing and newly industrialized countries. Aid organizations often report rising acute malnutrition of refugees and internally displaced persons (IDP)². The UN estimates the number of refugees and IDP to be around 35m, of which, 80% are women and children³.

Africa is where most of the conflicts rage and, at the same time, the continent where the share of hungry people is the largest. In East Africa, political conflicts and wars have exacerbated hunger in Rwanda, Burundi, Eritrea, Ethiopia, Somalia, Sudan and Kenya. In Central Africa, the people in the Democratic Republic Congo are suffering from the expansion and intensification of the civil war. The fertile regions in the east that used to produce in abundance, can no longer feed their own population. In West Africa, Liberia and Sierra Leone remain the biggest hunger crisis spots. Sierra Leone is attempting to recover from eight years of brutal civil war and has started reconstruction, but even the UN peace-keeping forces have not yet been able to re-establish peace throughout the country⁴.

Although in other regions of the world the connection between conflict and hunger is not as equally pronounced and widespread, conflicts contribute to exacerbating the food situation in Palestine, Indonesia, East Timor, Colombia, and some south-east European countries.

The Vicious Circle Between Crises And Hunger

Most of these armed conflicts take place in regions heavily dependent upon agriculture. As a consequence of civil war and displacement, fields can no longer be cultivated and whole regions lie fallow. Conflicts cause hunger, but at the same time, hunger can also cause conflicts.

Armed conflicts destroy crops, cattle herds and land; they ruin a country's infrastructure and markets. Further, they destroy the ecological and social resources needed for food production. A study by the International Food Policy Research Institute found that in 14 Sub-Saharan African countries food production in years of war fell distinctly short of that during peace years⁵. Thus in Angola, production was reduced by almost 50%, with an average reduction in all conflict-affected countries of 12.3%. The FAO used a similar method to estimate the conflict-induced losses



of agricultural yields. During 1970 to 1997 losses amounted to US\$121b6. This accounts for more than 75% of the total support given by the international donor community to Sub-Saharan countries afflicted by conflicts. Figures like these reaffirm that it would be much more appropriate, and preserving of human dignity, to prevent conflicts rather than to provide emergency aid.

Agricultural losses do not stop with conflict. Landmines are one of the cruellest tragedies hampering the path towards peace in a country. The Red Cross estimates that 24,000 civilians are either killed or brutally maimed each year by land mines⁷. In some countries the bulk of the arable and grazing land is mined, making food production impossible. Thus, it would be

possible to expand usable farmland in Cambodia by 135% if the country were fully demined. As long as there is no drastic change in this situation, poverty and hunger will continue to be a permanent threat.

Development policy is peace policy

Challenges, Possible Solutions And Fields Of Action Nutrition in the context of crises and conflicts must encompass three aspects:

political power or even recognition.

riorating. People feel that there is nothing more to

lose, therefore, they are willing to fight for resources,

- managing acute emergency situations and formulating assistance in such a way that it does not intensify impact
- preventing crises and preserving human dignity;
- combating hunger as a cause of conflict and/or consequence of conflict.

Management of acute emergency situations

A rapid, coordinated response on the basis of a division of labour by the players—states, various UN organizations (WFP, UNHCR, and others), NGOs, and bilateral do-

nors—is a fundamental precondition for success. The WFP has been, and continues to be, a crucial player during this phase and an important partner of the German government.

Designing emergency assistance in an appropriate manner poses a substantial challenge. Mary Anderson, in her 1999 study 'Do No Harm', has given examples of how aid itself can exacerbate conflicts¹⁰. Donors must take measures to prevent this misuse of food aid from the onset of their planning and implementation. This requires an in-depth understanding of the origins of the conflict and a precise analysis of the participating conflict parties and their willingness to resolve the conflict. Aid should not be given without accountability. Furthermore, planning must take into account the risk of well-intentioned food aid prolonging conflicts.

It is well known that food aid can have a counterproductive effect on market and nutrition practices. Local markets can be destroyed, making livelihoods almost impossible for small farmers, and increasing dependency. Over the past 20 years, donors have contributed massive food aid supplies to the Ethiopian government, neglecting the necessary reforms in the agricultural sector and proliferating dependency amongst farmers. Food aid must be demand-driven. It is not right to take advantage of people's misery through marketing surplus production and using attractive incentives. Food aid should be procured in regional or local markets. The German government has shifted toward this direction: approximately 95% of German food aid is procured in developing countries. Furthermore, German food aid is untied, meaning countries can freely decide what type of procurement is best suited for themselves. In the meantime, this approach is being copied in almost all EU countries and we appeal to other donors to follow suit.

Apart from mines, food is also used as a weapon. In the wake of food sieges, food reserves and production capacities are destroyed and hunger prevails. In southern Sudan, where both government and rebel troops apply these tactics, some 2.5m people were dependent upon emergency food aid in July 1999. Hutu guerrillas from Rwanda have abused their control over the distribution of food aid in refugee camps to expand their own political power8.

FAO provides evidence for these practices in its description of the world food situation. Most of the ten countries showing the poorest food situation (Somalia, Afghanistan, Burundi, Eritrea, Haiti, DR Congo, Mozambique, PR Korea and Niger) were or still are affected by war-like conflicts and/or are faced with natural disasters6. Sufficient food for the population will remain intangible as long as wars are waging and conflicts prevail.

Crises, Conflicts And Wars As A Result Of Injustice, Poverty

Quite often warlords or the ruling political class capitalize and abuse ethnic differences, using them deliberately to escalate violence. This mixing of different interests is described as politicized ethnicity9. By contrast, civil wars in Central America have been the outcome of protracted food crises and human rights violations. Access to land, and thus access to food, has often been the key demand of rebels. Even today, numerous landless farmers in Central and South America are fighting against an unjust distribution of land, which excludes them from securing their own food. Lack of agro-reforms, or misconceived or one-sided reforms, encompass a tremendous potential for conflict. Generally speaking, tension explodes quickly into violent conflicts where economic conditions are dete-

Preventing conflicts from becoming violent

Preventing crises from turning into violent conflicts is something that concerns us all. On 11 September 2001 we were given a terrifying example of what it means to live in one world. No part of the world is safe, no part can cut itself off and protect itself from what is happening elsewhere. The G-8 states account for more than 70% of the world-wide gross national product, but for only about 10% of the world population. While Western menus offers specialities from every corner of the world, 24,000 human beings die from hunger and malnutrition every day11. Southern countries must be enabled to share in world-wide developments. They must be able to live their life in freedom and with human dignity. Peace cannot prevail as long as social marginalization and injustice continues. Development is the most important weapon in the fight against terror, crises and conflicts worldwide.

The German government has declared the prevention and overcoming of violent conflicts to be one of the core objectives of its international policy, and it has been given broad support by society. The basis of the German government's concept of crisis prevention and conflict settlement is an extended security concept comprising of political, economic, ecological and social stability. In this concept, development policy plays the important role of contributing to a reduction of the structural causes of conflict, as well as, to the promotion of mechanisms for a non-violent settlement of conflicts in crisis-prone partner countries through improving the economic, social, political and ecological situation. Development policy is peace policy.

What Can We Do?

Poverty reduction is needed to reduce the structural causes of conflict. Worldwide, more than 1.5b people must live on less than US\$1 per day¹2. Their poverty is a hotbed for instability and conflict. At the UN Millennium Summit in September 2000 the heads of states and governments agreed to reduce by half the share of extremely poor people in the world population by the year 2015. The German government fully endorses this goal and has developed a Programme of Action 2015 to outline the steps Germany is undertaking to contribute towards realizing this goal.

Good governance (i.e. sound, development-oriented government action) has been an elementary principle of our co-operation. We intend to continue focusing on this in our future work. For example, we will increasingly support those countries that promote a peaceful co-existence of different ethnic groups and religions within their societies, thus establishing mechanisms of non-violent conflict resolution. Likewise, we support the strengthening of rule of law institutions. The German government has strengthened this approach as part of the struggle against international terror and has made available special funds for this purpose.

Examples:

- establishing the Civil Peace Service as a new development cooperation instrument. Trained experts act as mediators to prevent violent conflicts or, once these have ended, to build lasting peace
- supporting co-operation in the areas where potential conflicts could occur over scarce resources, for example, in the field of fresh-water resource management, and
- supporting reconciliation and communication measures, for example, a project in Chad helps settle conflicts between cattle-holders and farmers by means of a committee of understanding.

What Does The German Government Do To Combat Hunger? At the global level the German ministry advocates, within the framework of the WTO negotiations, dismantling of agricultural subsidies and especially export subsidies to avoid an adverse impact on food security (e.g. as a result of the destruction of local markets or subsidized exports). It is important to improve developing countries' access to markets to bolster foreign exchange earnings. Hence, the EU has granted the least developed countries duty-free market access for almost all goods, except arms. The German government is examining further possibilities of improving market access, and we invite other donors to join the EU's initiative 'Everything but Arms'.

Key instruments at the local level are projects enabling people to improve their own food situation on a sustainable basis. These include projects promoting rural development, additional income and the informal sector. BMZ prioritizes the development of rural areas, which is more than just agricultural promotion. Rural areas offer space for up to 80% of the people in developing countries and for some 75% of people living in absolute poverty.

Prospects: Future challenges

Development policy as peace policy must be expanded further. Only by strengthening crisis- and conflict-preventing elements in development cooperation can we put into place long-term structures that ensure the peaceful coexistence of people on a sustained basis. Germany will continue to take an active part in the reconstruction of countries affected by the aftermath of crises and conflicts.

Fighting hunger belongs at the top of the political agenda. This is not only a moral duty, but a necessity if we all wish to live in peace and security. Hence, the German Parliament has asked the German government to play a pioneering role in the combat against hunger. Germany shall:

- maintain our priority to food security and agriculture/fishery
- endorse efforts for an international embodiment of the right to food
- continue our endeavours for a continuous improvement and adjustment of the food aid instru-



- ment, and
- endorse the orientation of relevant WTO agreements towards the needs of sustainable food security in the developing countries.

Poverty reduction is also key and must be considered a priority. Germany shall:

- consistently implement our Programme of Action 2015 to reduce poverty
- increase our attention to Africa
- continue and further develop the debt remission initiative, and
- give active support to improving development financing.

Food security for all will remain a dream so long as conflicts exist. Food security can dissolve tension and clearly contribute to safeguarding peace. Crisis prevention and the combat against hunger are future tasks meriting our full participation. They contribute to world-wide security and are in the interest of all of us.

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WHAT ARE THE CHALLENGES TO IMPROVED 'HUMANITARIAN' ACTION IN FOOD CRISES?

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Food is a daily need. In crisis situations where markets, economies and lives are totally disrupted, finding enough food to eat is a central struggle. The physical need to eat is obvious, but the humiliation and pain of hunger and being unable to feed one's family is often poorly appreciated. Food and nutrition intervention has become the central element of humanitarian crisis response. As the role of crisis intervention has expanded in terms of publicity and political relevance, nutrition in crisis situations has become an important issue for public solidarity and for aid policy. Therefore, it is an important theme for this year's SCN Symposium.

Over 10 years ago in the Martin Forman Lecture, Alan Berg called for more nutrition engineers¹. Mr. Berg argued that while there is always room for more rigorous scientific knowledge, the main failure was not in terms of the coherence of our scientific knowledge, but in the application of this knowledge. The most recent edition of *New and Noteworthy in Nutrition* reveals that many of the same problems exist today².

Food crisis and the ineffectiveness of the humanitarian 'system' Food crisis is a major threat in crisis situations. Food

crisis is a major cause of instability, ill-health and increased mortality. It contributes to the collapse of economies, livelihoods and increases inequities in already inequitable situations. It is also well appreciated that intervention in crisis situations is dominated by the use of food aid as the major intervention strategy, both in monetary value and volume. Food aid is the organizational logic driving emergency intervention thinking and capacity. Yet, it is well recognized that food aid is probably the most corruptible form of emergency intervention and in terms of providing nutritional well-being—it is a blunt tool.

The dangers are well known to people's immediate and long-term well-being when forced to migrate out of distress and collapse of entitlement. Relief camps may be organizationally reassuring, but they are not healthy or secure places to live. Today, much is known about crisis situations, which is meant to improve relief response. Such advances in knowledge include:

 a need for broad based food, nutrition, health and water interventions, preferably to support livelihoods, but sometimes specifically to reduce morbidity and mortality

- information now available on complex food economies and survival strategies of individuals, households and economic groups
- need to expand food quantities in food baskets and food diversity and quality, and
- quality of interventions may be compromised when coverage is extended.

In addition, it seems there has never been more money given to crisis interventions and never so much public support for humanitarian action than today. At no other time have governments supported humanitarian action in crises and wars, both financially and politically, in such a comprehensive fashion³. Humanitarianism has become mainstreamed.

Correspondingly, there has been a growth of specialist humanitarian funding channels and the development of technical implementation capacity. The much-vaunted humanitarian 'system' that has emerged has developed enormously in its capacity to talk and to meet and to have papers written on important subjects such as protection. Yet, there is still terrible hunger,

chronic pipeline problems and major shortages in food basket quantities and qualities. There are still major inequities in the distribution of foodstuffs and services, with resources concentrated in certain politically sensitive areas, while other populations are aban-

doned. There is still inarticulate migration, shelter, livelihood, nutrition, food and health interventions. In short, the humanitarian 'system' does not seem to be able to significantly reformulate itself to be able to implement lessons learned. It does not seem to have advanced in protecting people and meeting their critical needs while preserving their dignity.

One should be careful with suggesting that the mere existence of hungry people is the failure of the humanitarian system alone—hunger is primarily a political issue and humanitarian actors have limited political power. But humanitarian actors have set themselves the task of accessing the hungry and abused and meeting their needs and demanding their protection. So why is the humanitarian 'system' so ineffective?

There is one paradigm that says the 'system' is poorly funded, poorly managed and poorly coordinated. What we need would seem to be greater coherence and leadership of the 'system', through streamlined donor funding, effective coordinating mechanisms, improved information sharing and a common set of technical standards. All the different agencies can be cogs in a single well-oiled machine if someone would only put it together and oil it. This is the prevalent analysis among donors, NGOs and the UN agencies today and for the past ten years. The fact of continued and progressive failure of the 'system' does not

seem to provoke a collective challenge to this paradigm. Why have the tremendous advancements in the quantity and quality of resources allotted to humanitarian action not made appreciable differences in our ability to access and protect people in crisis? More resources can always be obtained, better management decisions made, but more of the same would be produced. There needs to be a completely different frame of analysis for the problem and possible actions.

The meaning of Humanitarian Action

There is a danger in assuming all intervention in emergency or crisis situations is automatically humanitarian. Fifteen years ago, the word 'humanitarian' was hardly used. Most agencies defined their actions in emergency situations as relief operations. But, relief operations were the poor cousin of proper development work. They were the necessary evil before getting back to the serious business of development. In other words, relief was the band aid.

UN agencies were largely absent from the heart of crisis situations. The UN was far more bound by re-

spect for sovereignty and did not have the analytic frame, logistic and security apparatus, or staffing to stay in crisis situations. Donors had a difficult time applying their disaster funding mechanisms to the challenges of manmade disaster response. Following increases in

available funds and media exposure in the early 90s, different institutions have developed a humanitarian infrastructure and a humanitarian identify. Almost all agencies that seek to do good things today define themselves as 'humanitarian'. As a word it has lost currency, moral intent and political meaning.

Yet, humanitarian ideas and conceptual frames are important for working in man-made crises. They have been developed precisely to do this, so understanding humanitarianism is important in understanding the nature of emergency interventions. The task is to develop better access to ordinary people caught up in the middle of acute crises, in order to assist and protect them, and to help expand their horizon of choice so that they may start to re-establish control and agency over their own lives.

Armed conflict is recognized as an affair of society—a political system trying to win power and influence over another political system. Armed conflict is intolerable as an experience and so the balance between the freedoms of the individual and the requirements placed on the individual by his or her membership in society become strained. Hence, there has been an explicit recognition of the place and rights of 'Man' in society and the need to protect and assist men and women in the midst of war.



States recognize that there may be contradictions by allowing the recognition of 'Man' in war. However, they also recognize it is sufficiently important to sustain an appreciation for human life and human dignity and allow such compromise if they are reasonable. Therefore, they have created the laws of war. If 'Man's' political history is characterized by the use of violence, one of the reasons society has been successful is that men and women have usually been able to generate an ethic of restraint in the use of violence⁴.

If humanitarian action is genuinely aimed at impartially serving those in greatest need (impartiality), if it is humane in its impulse (humanity), if it is provided with independence from any other agenda, be it political or religious (independence), and if it is non-partisan in the social struggle in which it is operational (neutral), then it has the greatest chance of being allowed⁵. It is difficult to negotiate the terms and conditions of access on a case by case basis. Therefore, each case of denial effects the chances of humanitarian action in other contexts.

Humanitarianism is a moral philosophy not a political ideology; personal political preferences do not have any impact on a commitment to humanitarian action. On the other hand, developmentalism is caught up in the right-left debate on the validity of the concept of social justice and the means to societal development. Humanitarian action should be politically irrelevant and unquestionable in motive (historically) to have maximum opportunity for access and assistance.

Peace and development on the other hand are intensely political issues. For peace to be desirable it must be just and must reasonably allow for the balance between the needs of the men and women in society. This delicate understanding of working in conflict is crucial. Current policies linking aid to development, peace and respect for human rights are overlysimplistic and disrespectful of the complexity of affairs in other people's societies. Would the international community dare to impose a rather mediocre package of social services on the people of Ireland or Israel today and call it conflict resolution and peace-building? Despite the very good will of aid officials and their genuine ambitions, the articulation of current aid and political strategies in Africa and Afghanistan today shows a deep lack of respect for the very real and pressing political and social realities of their conflicts and wars.

What this argument proposes is that humanitarian action is grounded in a set of principles designed to promote maximum access to people in crisis and the prioritization of a particular set of objectives relating to alleviation of acute human need and the preservation of dignity. If this argument is accepted, then it is logical that humanitarian action becomes a small and lim-

ited ideology grounded in an ethic of self-restraint and not the normal utopian and progressive ideologies found today.

Humanitarian action does not aim to provoke social change; it aims to assist and protect victims and inspire discipline and restraint in the use of force for social change (this does not mean it is unimportant or unpowerful). Humanitarian action is practical and politically realistic. It must be action oriented, it must be non-coercive, it must be provided solely for the benefit of those we seek to assist. Humanitarian action is targeted to humans and not society and, therefore, humanitarian actors must take responsibility for the delivery of their assistance all the way to the beneficiary level. The basic conditions that humanitarian actors require are to have the freedom to assess needs, the freedom to deliver assistance and the freedom to monitor the outcome. If these conditions are denied, humanitarian action is likely to be compromised and sow the seeds for its own destruction.

Challenges to the 'System'

As mentioned earlier, many aid workers and policy officials refer to the international community and the humanitarian system. With the 'system' perspective in mind, systemic type reforms have been suggested, but a system is a group of related units forming a network with a common goal or a single purpose. Do all the humanitarian actors seek this purpose (to assist and protect victims)? When stated that there needs to be greater integration of

humanitarian action into political affairs and construction of conditions for peace, such as in Afghanistan today, it is clear that the humanitarian system is not a system. Or if it is, it is not humanitarian. Why was access denied into Kosovo when the Serbs were in control? Why is access denied in Chechnya? Why is there limited access into North Korea? Why is it impossible to reach a major and severely effected proportion of the population in Angola today? Why does nobody even talk of the victims of the conflict in Tripura or Assam? Is it because political leaders or politically inspired individuals see themselves in opposition to the Western political system and see humanitarian action as part of this?

The politicization of humanitarian assistance has been well described and documented^{6,7,8}. In the 90s, humanitarian action evolved from the poor cousin of development aid to become an organizing principle for much more than humanitarian/emergency assistance providers. While humanitarian agencies demonstrated on television that aid was being delivered, the West was paradoxically reducing aid and diplomatic resource flows to the least developed nations. Humanitarianism also justified an increased legitimacy of interventionism over sovereignty arguments, in order to protect the rights/needs of 'Man' in unjust societies. This contra-

dictory force, on the one hand, used aid to demonstrate engagement where there was none and, on the other, concentrated aid flows to politically sensitive areas where aid was co-opted into the political address of the situation. These contradictory trends created an increasingly political logic to the direction of aid funds (geographically and in terms of activities). In the first situation, humanitarian aid became totally subordinated to higher political/societal objectives and aid became perceived as part of the political interference. In the latter, humanitarian agencies were left witnessing terrible crimes again humanity with no capacity to address the causes of the crisis.

Six aspects of current humanitarian action can be identified which hamper how the 'system' works today.

Political Conditionalities

Humanitarian action is delivered to the victims of crisis. Paradoxically, the authorities who wage war are also those who have to agree to allow humanitarian access. They are held to respect humanity in war and exercise restraint in the use of violence. But in many conflicts today, those who wage war have low-levels of accountability to their citizens and tend to demonstrate limited respect for humanity or restraint in the use of violence against their own people. Civil war is often more violent and less restrained. The objective of war becomes the obliteration of the opposing society and not capture. In many modern crisis situations there is little support from authorities to allow humanitarian action. For humanitarian action to be meaningful it should have a high impact on the life of those it seeks to help and a low impact on a specific party's ability to pursue their political project. They should not allow humanitarian action because there is something in it for them, but because they respect the need for restraint in the use of force and the defence of humanity.

Therefore, imposing conditionalities on humanitarian aid logically should have little leverage over the political party (it is purposefully irrelevant to them) and enormous impact on ordinary victims. The clearest demonstration of the fallacies of such a policy have been shown through the embargoes imposed on rogue regimes, including humanitarian assistance. In 1993, the UN and ECOMOG tried to put an embargo on Taylor-held Northern Liberia. The actions led to countless deaths of starving people and no substantial reduction in Taylor's grip on power. Embargoes from Iraq to Northern Sudan privilege the ruling elite and punish the poor. If there is even less food available due to embargoes and one person has a gun and the other does not—who will eat?

Yet, even unquestionably good conditionalities have been shown to penalise the weak and vulnerable. When NGOs and the UN tried to form a collective front and hold their aid for Afghanistan conditional on the respect for human rights of women, the result was a massive reduction in aid flows, punishing the starving and the sick who were disproportionately women¹⁰.

Humanitarian assistance is a very poor lever on power. If the powerful suspect humanitarian aid is being used to gain leverage over them, they will act to deny the possibility of aid. There is no influence and the possibility of humanitarian action is lost, further contributing to the loss of restraint and lowering the value of what it means to be human at all.

Concentration

Recently there has been a trend towards even more concentration of aid in the most politically sensitive areas to whitewash military interventions and hide the absence of genuine efforts toward nation building. Humanitarian action in such situations is truly a subsidiary to political intervention and a political excuse for avoiding full responsibility in such contexts.

The majority of resources are invested in crises with intense political interest³. This has various effects. Specifically, it diverts interest and resources to a few crisis situations. The numbers of NGOs and expatriate staff committed to Kosovo, E Timor or now Afghanistan, are disproportionate to the commitment to other areas. In addition, in these highly politicized environments the political machine co-opts humanitarian assistance for political ends. The food bombing of Afghanistan by the US on the same night as they began bombing (while hunger and famine were known to be at catastrophic levels for over one year) was clearly not delivered for humanitarian purposes, otherwise food bombing would have occurred earlier.

North Korea has been the recipient of one of the largest food aid programmes of modern times. The US and the EU have funded massive food and medical programmes to counter a reportedly devastating famine under a policy of 'constructive engagement'. However, the famine is heard but not seen and it is increasingly evident that the food crisis is structural and a result of the state structure. UN agencies and NGOs are not allowed to have significant numbers of expatriate staff in N Korea. Most agencies have almost no freedom to assess the needs independently, they are denied the opportunity to directly deliver assistance and they are unable to monitor the impact of assistance^{11,12}.

Kim Jong-il, the leader of N Korea, has publicly proclaimed that only 30% of N Koreans have to survive for N Korea to reconstruct a victorious society. The state is militarily in control and seems unperturbed by the total collapse of the economy¹³. It is clear what his balance point is between the success of society and the freedoms and well-being of 'Man'. Many of the independent NGOs working in N Korea pulled out because they became aware of the game played to pretend the programme was an effective redress to people's acute needs. It is clear there is a massive structural food problem in N Korea and this probably requires massive and sustained food assistance to reduce mortality and stabilize society. There is significant evidence to suggest that all aid is channelled to members of society favoured by the regime through state man-



aged distribution systems and the military¹².

The aid programme no doubt supports some livelihoods, but fails to help those the regime does not value and only serves to stabilize a very dangerous regime. This may be a legitimate political action, in an attempt to reduce chances of a regional nuclear war, but this is the same regime responsible for the famine and complete denial of responsibility to look after its own citizens. Is this a humanitarian programme? What damage does this programme do to the possibility of humanitarian action? How accountable to voting publics is a programme of sustaining a dictator by food, hidden under the guise of a humanitarian mantle? How responsible is the political engagement by international states that seem unable to confront the problem? With this (non)humanitarian programme and lack of democratic accountability in our address of the N Korean problem, is the world hiding behind food as an alibi, avoiding the reality that it has no policy to deal with the horrors of N Korea¹⁴?

Research has shown a progressive increase in the earmarking of donor funds to particular crises. As the majority of humanitarian actors are driven by the availability of government donor money, humanitarian assistance is becoming increasingly selective in quantity and quality³.

Impartiality

If aid is provided according to a political logic, as argued above (non-neutral), it is also difficult to demonstrate that aid is provided on the basis of need alone and the most needy receive the most aid (impartiality). There are substantial differences in the quantities and standards of humanitarian action around the world. It is very moving to see the quality of hard dried grains given out in a typical food ration in Africa (usually too little, too infrequent and without sufficient complimentary quality foods). At first sight, it is hard to believe this is food for humans, however nutritious it might be. In the camps for Kosovars in Macedonia, on the other hand, large numbers of people were queued in a respectful way and rapidly given cloth bags filled with fresh baked bread, peppers, cucumbers, melons and tomatoes. This demonstrates that it is possible to feed large numbers of people in a respectful way and with a humane diet. Some refugee populations, especially in Africa, get a poor deal in comparison to others caught in 'preferred crises.' How do the people in these crises look at humanitarian actors when they arrive? As friends trying to help or as part of a system of discrimination and injustice in which they are caught in?

Coercion

After the end of the cold war, refugees were no longer politically desirable reminders of the failure of the communist world to care for its citizens. Refugee camps became perceived as dangerous breeding grounds for criminals, lawlessness and radical militant action. Refugee programmes developed a life of their own, drawing in endless quantities of assistance. Policy concerns re-oriented to the containment of crisis and the rapid management down of relief flows. As the political control of humanitarian assistance increased, aid was co-opted to push people back into home situations or to move them to other areas.

Sierra Leone has been racked by a terrible war for nearly ten years. During this time, tens of thousands of people fled to Guinea to try and find some semblance of peace and security. Many of the refugees were treated as second class citizens and used for cheap labour, but they were safe. In 2001, preparations were made by rebel groups to destabilise N Liberia. Retaliatory rebel attacks were launched across borders into Guinea and focused on refugee camps in an attempt to catalyse mass movement and chaos. Humanitarian and human rights groups called for the refugees to be moved out of border areas to safety. International powers and the Guinean military had no interest in seeing potential enemies spreading out across Guinea, and tried to contain the crisis. Military, police and civilian militias began victimizing refugees on the basis of ethnic identity, with no proof of their involvement in rebel activities. Men were stopped at check points and stripped for evidence of tribal scarring marks. Many were brutalised, arrested and executed.

Eventually when the situation had calmed down, it became politically expedient to move the refugees. Refugees were told to relocate deep into the forest where there were no alternative sources of income or livelihood, except total reliance on international assistance and leaving them much more vulnerable to manipulation. While this programme offered real safety to thousands of refugees and was eagerly accepted, there was a large number of refugees who did not want to move away from the border. These refugees were told that their camps would be flattened and they would no longer receive assistance if they remained in the border regions. The only way to receive foreign aid is to move to the new camps.

It might be true that insecurity would limit the possibility of provision of regular humanitarian assistance, but to declare no more would be provided was an abandonment. The refugees' only choice was to relocate to new camps and live under uncertain conditions for an unspecified length of time, entirely at the mercy of the aid givers. Is this expanding the choices of refugees and assisting them in managing their own lives and possibilities in terrible times? Given the very erratic and low quality aid programme over the past ten years refugees are reluctant to put the lives of their families in the hands of the international community.

These patterns of coercive manipulation of vulnerable populations dependent on food aid and other assistance have been repeatedly seen over the past couple of years in Iran, Pakistan, or Zambia to name but a few. WFP's own figures show a trend in decline of food support to protracted refugee operations and a major increase in food diverted to protracted displaced

persons operations¹⁵. Food is used more within countries to support containment of crisis situations and refugee outflows.

Bureaucratic Imperative

All systems of order and organization develop interests and organizational imperatives, no matter what their objectives. Most professionals in this field have a general desire to have a real impact in assisting people's lives and relieving the misery and humiliation of hunger. However, organizations have their own norms and interests and workers who exercise their own personal interests through these organizational processes. An agency can only be convincingly humanitarian (single minded in its desire to help people today), if it is driven by a humanitarian impulse, or, if it is strictly mandated, monitored and held accountable to that mandate.

In order to have the possibility to enter dangerous areas and deliver resources and stand by people in times of need, the international aid community needs to organize. There has to be a balance between the motivation of the people trying to make a difference and the necessity of the organization to give those in-

dividuals power to act. The organizational interests are only acceptable as long as they do not eclipse the humanitarian impulse.

There is an increasingly bureaucratic imperative driving the humanitarian sector today. This is true of

donors, UN agencies, international and local NGOs. In the past, UN agencies were largely state funded and relied little on media coverage. Today, the UN agencies are paralysed by intra-agency and inter-agency turf battles, which has become progressively worse in the last decade as they are squeezed for funds. The UN increasingly needs to advertise rather than depend on reliable state support. States support different agencies in different ways over different times. themes and agencies become 'flavour of the month'. Different governments are seen to support one agency and to 'own' it, which deters other states from funding that agency. UN agencies act to define their own interests and imperatives, expanding or contracting to fill certain spaces and modes of action or mandate, without a comprehensive analysis of all the spaces that need to be filled.

With changes in the refugee regime and declining political support for sustaining large refugee populations outside of conflict and crisis areas, UNHCR tried to become involved in moving people back. As a result UNHCR displaced UNICEF as the UNs largest non-food humanitarian agency. But as funds and support declined even further UNHCR has now retracted its mandate, responsibilities and ambitions. Who will

(re)fill the gap?

The bureaucratic imperative is enhanced by the funding patterns and competition between UN agencies and NGOs fighting for media space and funds. The bureaucratically interested agency is peculiarly vulnerable to political manipulation, because it steers towards opportunities for agency advancement, which are easily offered by political (funding) sources. Donor governments have a responsibility to support impartial humanitarian action and should not use funds to create turf battles and competition. This bureaucratic imperative is cutting at the heart of the truth of humanitarian action and placing peoples' needs after bureaucratic/agency interests. This is a major reason why the UN system does not function as a system and why the UN agencies fight desperate turf battles over coordination and areas of responsibilities. This happens particularly in the high profile political emergencies where resources, prestige and career opportunities will be abundant. In the moments of great crisis, the operational logic behind the humanitarian sector is partially driven by institutional interests. The turf battles undermine the ability of agencies to work together and act to create ownership of sectors. It leads to an increasing

compartmentalisation of responsibilities and technical capacities. The verticalization of agency capacities means it is far more difficult to generate and implement complex multisectoral strategies

There is an increasingly bureaucratic imperative driving the humanitarian sector...different governments are seen to support one agency and to 'own' it, which deters other states from funding that agency...cutting at the heart of...humanitarian action and placing peoples' needs after bureaucratic/agency interests

which we know are critical for supporting livelihoods in crisis situations and reducing distress and mortality.

However good, impassioned and driven to improve the lives of hungry and insulted people professionals may be, if they are working in an agency that has lost the balance between an organizational imperative and the moral imperative of its workers, then that agency is no longer humanitarian in drive. One's work will be swamped and frustrated by a bureaucratic logic that may be hidden behind nice words, but is inherently inhumane, ineffective and amoral.

Technicalization and Cost-Effectiveness

Humanitarian assistance is still about delivering services. Therefore, the majority of professional development, planning and monitoring resources are expended on estimating if the agency is doing its job, delivering materials and providing services. Humanitarian action is a management challenge, which denies the political reality of the lives people are living. It is critical to have close contact with people in crisis situations to understand what they are facing and what are the major limitations in their daily struggle to stay alive. The underlying assumption that governs humanitarian action today is that what matters is delivery of services



coupled with a desire to improve cost-effectiveness. This has allowed a focus on notions of quality that only reflect needs as determined by absence of material. These notions of quality do not ask why there are no services and such needs. There are fewer and fewer international aid staff on the ground and insufficient resources to commit numbers of experienced experts in the design, implementation and monitoring of humanitarian programmes. The needs of the vulnerable cannot be respected, protected or reacted to without that proximity.

Who is it that sets the indicators by which agency actions are monitored? If there is no monitoring of the frequency and equity of distribution mechanisms, aid agencies will not place the same emphasis on these quality dimensions of the aid interaction. Working in crisis situations means working in highly corrupt, inequitable and perverse anti-social environments. Many of the institutions of society will be co-opted and predatory in nature, manipulating scarce resources and people's lives to enhance power and wealth. If aid is

poured into these social systems without adequate attention to quality aspects, and the quality of the aid relationship and service to the beneficiary, these resources will feed into systems of repression.

A decade ago people would criticize WFP for being a logistics machine, and it remains so today. Without new incentives for enhanced quality of their actions, will they be different tomorrow? In order to further reduce costs of food distribution and avoid the critical nature of some partner NGOs, there is increased use

of local and non-transparent organizations. The increased focus on the costs of food distributions has had a major impact in reducing the concept and efficacy of humanitarian intervention, and particularly in understanding the challenges to protection of victims in crisis³.

In Goma, MSF withdrew from the Rwandan refugee camps after demanding increased accountability of food aid and seeing no change. The amount of food was far in excess of the numbers of people in the camps, but people remained malnourished. MSF were prevented from doing a proper registration or from distributing directly to the beneficiary. The organisers of the genocide controlled the food supplies and used the food as a resource to re-build their military capacity. Even though this is well known, these same challenges continue today. In Mazlak camp in Western Afghanistan, WFP provided food for 300,000 people while NGOs estimated the population to be half that. Yet, nutrition monitoring in the camps showed that there was growing malnutrition and the camp residents were progressively more malnourished than new arrivals. Vast amounts of food were delivered to community leaders who had hundreds of ration cards. The leaders then sold these bulk quantities. The food was shipped in and then out of the camps. MSF and ACF have pushed for a proper registration, which was recently accomplished by IOM and the UN to reveal a population of only 110,000 people. The next step must be to move towards individually provided rations and not via corrupted and discriminatory community delivery systems. Community based delivery maybe cheaper, but it is not always the solution to ensure egalitarian distribution of food in emergency situations.

These factors undermine the perception and experience of humanitarian assistance by political actors and beneficiaries. Humanitarian assistance then loses its respect and is either blocked (as in Chechnya today) or is cynically manipulated by local warlords. Furthermore, the aid recipients do not work with aid agencies to achieve maximum benefit from the assistance, but rather work against aid agencies to extract maximum personal benefit. There needs to be an explicit responsibility for the provision of services all the way to the

beneficiary: to feed, secure, protect. Can humanitarian action under the current 'system' be humanised, making it truly responsive to differing needs of people caught up in crisis? Can this be done without major changes in structure and putting more people next to the victims?

What To Do

This macro-level critique tries to recognize some of the challenges that effective sector wide humanitarian action. Of course imple-

menting apolitical humanitarian action in the real political world will always present major problems. This critique is not meant to imply that everything is hopeless and nothing can be achieved.

There has been enormous attention and public resources given to humanitarian action. The general public has vigorously understood and supported the humanitarian imperative. The UN and NGOs are significantly involved in the humanitarian debate and committed to action. Access to people in crisis is won and sustained and military and political leaders around the world are aware of humanitarian obligations and allow some form of action. There has been real commitment to improved quality of intervention and many people have given time and energy to push forward knowledge and thinking in how best to intervene in crisis situations.

It is partly because there are so many experienced and committed people in the field of humanitarian action that it is expected and desired rapid improvement in overall capacity to access, assist and protect. It would be naïve to simply ask for greater political investment in addressing the causes of crisis at a moment when investment in the military has expanded rapidly, at the same time as investment in diplomatic representation, civic interaction and overseas aid has collapsed¹⁶. The West has moved towards a militarization of international relations with declined capacity for diplomacy. We should recognize this and reassess the possibilities for good aid in the changing context.

The predominant rhetoric and actions for those who genuinely want to see reform and improvements in our ability to feed people with dignity and restore their own capacity to take control of their lives and reinstate their agency and choice is driven along a notion of technical 'systems' improvement. So there is an agenda: better donor policies, better donor coordination on objectives, better UN management, better UN agency cooperation, better coordination of NGOs, and finally, better integration of humanitarian action within a political framework for the creation of peace and progressive development and participative politics. But the current humanitarian aid environment means that the proposed agenda above will have to work along side such impeding factors such as:

- a decline of political investment in crises in areas of limited political interest
- donor manipulation of humanitarian action (to favour friends or hide disengagement)
- donor funds tied to political conditionalities
- UN agencies funded in a way as to increase internal competition
- no state responsibility for the fulfilment of the mandate of the UN
- no UN capacity to respond to the state agenda;
- a massive diversity in philosophies of action by different actors and host societies
- increased military intervention in some crisis zones;
- betrayal of universal impartiality—and the clear prioritizing of certain victims over others
- the institutionalisation of the humanitarian impulse;
- increasing public questioning of the humanitarian sector, and
- a vast array of organizations with different ideas, motivations, legitimacies and objectives all called NGOs.

So it is little wonder that the 'system' does not function systematically in the pursuit of humanitarian objectives. Actions that assume a systems orientation and serve to force development of the overall coordination and technical capacity of the system are doomed to fail in promoting substantial improvement in the ability to address hunger, misery and dehumanisation. Worse, they may lead to increasing political instrumentalization.

What actions might such a critique suggest? Here are some suggestions, which are by no means exhaustive:

Food is life and food is dignity. In a survey on mental trauma in Sierra Leone in 2000, MSF found that the majority of people assessed were suffering some form of acute mental stress¹⁷. The causes of stress were multiple and bound up with the collapse of society, fear and experiences of violence. By far the highest proportion of people attributed some of their mental trauma to the debilitating and humiliating effects of hunger. In a country so beset by violent chaos, this illustrates the importance of food as a means to basic dignity of life. The international aid community has a tremendous responsibility and should be motivated to pursue that responsibility

- The current system is not a system, or at least not one driven by humanitarian concerns. It is important to have a greater sense of realism about what the major momentum in humanitarian and political intervention entails, so as to recognize opportunities and threats for the development and promotion of effective humanitarian action. Following a systems-based agenda serves to reinforce a depoliticized and technocratic agenda without much power for change
- The current organization of relief activities is limited by a range of factors including incoherent objectives and perverse funding incentives, as well as political conditionalities tied to assistance. Further work is needed to define how to react to acute nutritional crisis situations in open situations and across different cultures. The challenges of the HIV/TB pandemic must be dealt with and the livelihood and nutritional challenges it creates addressed. Investments can be made into simple means to assess and respond to adolescent and adult acute malnutrition and mortality. Well grounded aid strategies, sound needs assessments and clear and unequivocal action plans, aimed primarily at responding to real needs of people, are compelling arguments for improved practice
- States will try to manipulate humanitarian assistance for their own ends. States have signed the Geneva conventions and have a basic responsibility to appreciate and support vital independent and impartial humanitarian action. The funding patterns of donor governments should reflect on their humaniresponsibilities. Humanitarian funding should be given to mandated bodies in a manner to promote effective impartial action in support of humanity. Funds should not be provided to mandated agencies (such as ICRC and the UNHCR) on a project basis, as this promotes concentration of funds in certain crisis situations and undermines the impartiality of the specialist agencies. This does not mean that these bodies should not be held accountable, on the contrary, they should be held more accountable to justify their successes and failures on a global scale
- It is unacceptable that the policies of states and UN agencies are so dependent on the personal political ideologies and experiences of senior technocrats. States and UN agencies have formal responsibilities, which should not be open to interpretation. States should enact laws to define and control the use of humanitarian budgets, to enforce separation



- between the use of humanitarian funds and the pursuit of political interests and to define their humanitarian responsibilities
- Clear categories of intervention in crises should be developed, with concordant principles and clarity of objectives to guide intervention. Not all assistance provided in emergency situations needs necessarily to be humanitarian, but the objectives and mode of operation needs to be clearly stated in order that decisions to act are held democratically accountable. Interventions aim to achieve their true objectives, correct institutional capacities are developed to maximize intended goals and humanitarian action is not degraded by incoherence and degradation of its principles through association
- There needs to be much better reporting on aid flows, achievements and quality indicators. Information must be able to be aggregated so there is increased transparency about what is being done, for what reason and what are the trends. Today, academic observers claim it is impossible to aggregate data on funds and material flows. It is also impossible to review what happens to materials once they have entered a country. Accountability systems need to avoid overlap and focus on real funds and material flows (not pledges), all the way to the beneficiaries
- UN agencies must be given a mandate and then funded in such a way as to enhance cooperation and fulfilment of the mandate. If they fail they should be held technically accountable, whilst states should be held politically accountable. There should be an independent review capacity, to map out the UN mandate, to what degree the UN agencies fill their mandates, and if the sum of UN agency actions fulfills the total mandate. The review capacity should be ongoing and should not just determine gaps and failures, but isolate and identify causes of failure (technical or political), so as to point to the responsible actors and promote reform rather than avoidance
- Humanitarian workers/activists must always be aware of the critical balance between an agency's real drive to meet the needs of people and the bureaucratic interests of the organization. The value of the work of aid agencies must be insisted on and the bureaucratic imperative must be countered
- Food and nutrition crisis is central to understanding the political economy of most crisis and conflict situations today. The dynamics in a crisis situation are deployed to destroy economies, deprive people of opportunities and target the basic productive means in society. Therefore, food and nutrition perspectives are uniquely placed to describe the cross-cutting impacts of crisis and to advocate for broad based and comprehensive response. The SCN must reconstruct an agenda for multi-sectoral and multi-agency action, resurrecting real positive dynamic interaction between the various food and nutrition agencies, with distinct roles and inter-

- active programming possibilities. If there is limited competition and distinct roles, there should be the possibility for enhanced action and inter-action
- There must be more funding for quality interventions. The meaning of quality must be defined in terms of the degree to which victims are saved and can exercise choice in their own lives. Humanitarian actors should recognize that there is a responsibility to deliver assistance to the individual beneficiary. In having such a field presence, there is a requirement to interact with the beneficiary to understand the diversity of challenges they face. Only an interactive relationship can inspire the crafting of solutions that do not impose assumed good things, but rather help expand the victim's horizons of choice. This will mean increases in programme costs. The argument to increase programming cost must be well constructed and championed and must resolutely serve the vulnerable and not institutional interests
- There must also be greater investment in rapid establishment of epidemiological surveillance in crisis situations, to be able to follow real problems and genuinely monitor progress. Political proclamations by agencies that there is a famine and later that they have averted famine, without demonstration of the facts that they have done so, does not promote learning or better practice. This is agency focused and not people focused, obscuring accountability to improve our actions
- There must be more funding for applied research and the development of appropriate intervention strategies, following good epidemiological surveillance and appreciation of people's needs
- There needs to be sustained peer review and critique of developed knowledge. Too often, we are driven by very circumstantial evidence and personal ideology. Scientific methods and the academic tradition needs to be more widely applied to humanitarian action.

Conclusion

The basic perspectives on food security analysis, famine theory, nutritional assessment and food and nutrition intervention have been established for some time. There is also general consensus that effective reaction to nutrition challenges depends on a multidisciplinary approach strategically and practically coordinating avoidance of migration, health and epidemic control, food security and livelihood support and sustenance of care environments. Humanitarian action is grounded in a set of principles designed to promote maximum access to people in crisis and the prioritization of a particular set of objectives relating to alleviation of acute human need and the preservation of dignity. There are no major gaps in our conceptual knowledge that should inhibit our actions.

There have been some considerable advances in the technical and logistic capacity of the various aid agencies to deliver timely and effective responses to nutritional crises around the globe. However, despite major technical advances there has been little substantive progress in our shared capacity to effectively assist, protect, support and care for the needs of the majority of people in most desperate need. Why is this? The 'community' of donors, UN agencies, NGOs often try to find solutions based on an assumption we are all part of a 'humanitarian system'. But different political and bureaucratic interests, different ideological perspectives, the technical compartmentalisation of aid delivery; and a focus on service delivery and costeffectiveness ignore important ethical and political considerations. Without a commitment to humanitarian principles the immediate needs of people, using aid to promote agency and not coerce populations, and alignment of the objectives of the humanitarian aid community—the 'systems' perspectives will not serve to enhance our capacity.

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A world fit for children

Outcome document for UNGASS

Editor's Note: These excerpts are taken from the outcome document of the United Nations Special Session on Children, held in New York in April.

The outcome document was written and negotiated over a period of about two years, with UNICEF serving as the Secretariat for this lengthy process. The document reflects world leaders' renewed commitment to children.

Declaration

14. Care for every child. Children must get the best possible start in life. Their survival, protection, growth and development in good health and with proper nutrition is the essential foundation of human development. We will make concerted efforts to fight infectious diseases, tackle major causes of malnutrition, and nurture children in a safe environment that enables them to be physically healthy, mentally alert, emotionally secure, socially competent and able to learn.

Plan of action

Goals, strategies and actions

- 36. We are determined to break the intergenerational cycle of malnutrition and poor health by providing a safe and healthy start in life for all children; providing access to effective, equitable, sustained and sustainable primary health care systems in all communities, ensuring access to information and referral services; providing adequate water and sanitation services; and promoting a healthy lifestyle among children and adolescents....
- c) reduction of child malnutrition among children under five years of age by at least one third, with special attention to children under two years of age, and reduction in the rate of low birthweight by at least one third of the current rate.
- 37.5 Protect, promote and support exclusive breastfeeding of infants for six months and continued breastfeeding with safe, appropriate and adequate complementary feeding up to two years of age or beyond. Provide infant-feeding counseling for mothers living with HIV/AIDS so that they can make free and informed choices.
- 37.22 Achieve sustainable elimination of iodine deficiency disorders by 2005 and vitamin A deficiency by 2010; reduce by one third the prevalence of anaemia, including iron deficiency, by 2010; and accelerate progress towards reduction of other micronutrient deficiencies, through dietary diversification, food fortification and supplementation.



A REVIEW OF THE ADVANCES AND CHALLENGES IN NUTRITION IN CONFLICTS AND CRISES OVER THE LAST 20 YEARS

Frances Mason, Action Against Hunger/Action Contre la Faim and Anna Taylor, Save the Children UK

The international community is being faced with new injustices and new challenges to ensure the human right for adequate food and nutrition. This paper is intended to remind us of where we have come from in emergency nutrition and to highlight how far we have to go before the rights of disaster-affected communities are respected and upheld.

The main purpose of this paper is to assess the principle advances made over the past years in nutri-

tion in conflicts and crises and to propose direction for further advances in the field. The term 'advances' refers to developments in technical knowledge and nutrition policy and practice. The project cycle management is used as a framework for presenting these advances and the challenges that remain. Specifically, the paper:

- considers the objectives of the advances and describes how well they have been achieved
- determines the challenges and issues that still exist in relation to the advances, and
- provides recommendations on how these challenges might be overcome and issues resolved.

Advances made over the last 20 years are considered with historical reference. This paper is not intended to be an exhaustive listing of all achievements and challenges, but builds on the advances documented in the SCN 4th Report on the World Nutrition Situation¹. Recommendations are intended to contribute to the development of a plan of action for the international community that will accelerate the pace of advances in the field of emergency nutrition and lead to significant improvements in relieving the suffering, death and degradation of disaster-affected communities. The first step in this process would be a collaborative effort by bilateral agencies, UN agencies, and NGOs through the SCN.

Background

This paper is not able to provide significant detail on how highlighted advances took place, but it is essential to emphasise the important role that interagency collaboration has played in furthering the sharing of technical knowledge and improving the policies and practice of nutrition in conflicts and crises.

Interagency meetings held since 1988 initiated many of the interagency collaboration and policy developments described below. These meetings provided a forum for improved coordination, mutual understanding and enhanced analysis of the constraints

within the humanitarian system. A central focus of the interagency work was the move towards Public Nutrition^a, which is a shift from the individual to the population level and from a narrow set of technical interventions to a wide range of strategies, policies and programmes to combat malnutrition². These interagency meetings have also provided a catalyst for a number of initiatives that have enhanced policy formulation and practice guidelines.

The Interagency Group was instrumental in recommending the establishment of the Refugee Nutrition Information System (RNIS), to be managed by the SCN Secretariat, in 1993. The RNIS project was the first to systematically collect, compile and report on interagency nutrition and mortality data in response to the lack of information on the observed high rates of acute malnutrition and crude mortality in emergency affected refugee and displaced populations. The

reports present recommendations and priorities for action, including key constraints to operational response and act as an advocacy tool in raising awareness of the seriousness of particular contexts and often focus on emergency situations that are not covered by the media or have been 'forgotten'.

The Emergency Nutrition Network (ENN), which also originated from an interagency meeting, has become the key forum for information sharing amongst nutritionists working in emergencies. Its primary focus has been to ensure that experiences and lessons learnt are documented so that institutional learning can take place in the short to medium term. The ENN is now funded by approximately 20 agencies (UN, bilaterals and NGOs).

An unprecedented example of interagency collaboration was evident in the preparation of the nutrition chapter for The Sphere Project Humanitarian Charter and Minimum Standards in Disaster Response^b. This

^a Public Nutrition is a broad-based problem-solving approach to addressing nutritional problems of populations or communities in which the broader factors of health, water and sanitation and social care play significant factors in the causes of malnutrition, alongside food insecurity. This approach requires a contextual analysis from the macro to the micro levels.

^b The Minimum Standards specify the minimum acceptable levels to be attained in sectors of humanitarian response. Each standard has a set of key indicators which signal whether the standard has been attained. They provide a way of measuring and communicating both the impact, of the programmes as well as the process methods used.

project aims to improve the effectiveness of humanitarian action and to make humanitarian actors more accountable. The Sphere initiative has stimulated much debate, ranging from enthusiastic support to concern over the limitations it might place on humanitarian action. Beyond the limited number of official Sphere translations that exist, the Sphere project has been translated into 19 languages.

These interagency initiatives are becoming increasingly inclusive, aiming to consider operational as well as technical and academic agencies and endeavouring to ensure the participation of southern NGOs and agencies. However, interagency collaboration is one small part of the process of facilitating real advances. The development of technical guidelines is another and there has been much investment in these. Capacity building, not discussed in detail here, is the growing area for consideration and investment. For real progress to be achievable and sustainable, global, national and local capacity for sound nutritional analysis and response remains perhaps the biggest challenge for the coming years. This fact becomes apparent throughout the subsequent sections of this paper as the limitations of the advances achieved are described.

Analysis and Assessments

As the paradigm of public nutrition began to be established in the early 90s, UNICEF developed a conceptual framework for understanding the causes of malnutrition. This was incorporated into their policy, as part of their Triple A approach. This framework was largely based on the Tanzania (Iringa) Nutrition Programme³. The framework was later adopted by a wider group at the International Conference on Nutrition in 1992⁴. This framework has been instrumental in ensuring an understanding of malnutrition that goes beyond inadequate intake to include the range of food security, care and health factors that contribute to malnutrition. Analysing these processes in specific contexts has created opportunity for intelligent nutrition programmes that address real rather than assumed causes.

Assessment of malnutrition and mortality, which is located at the apex of the conceptual framework, has become increasingly widespread in emergency-affected communities, so much so that the prevalence of acute malnutrition (wasting and oedema) of children 6-59 months is now a widely used currency for understanding the extent of the impact of a crisis on populations. This demonstrates the usefulness of anthropometry in providing objective data in situations where information may be limited and also indicates the importance given to levels of malnutrition for understanding the likely impacts on mortality⁵. Standard survey methods are now largely agreed upon in key emergency nutrition guidelines^c and combined with freely available

^c Examples include The Management of Nutrition in Major Emergencies World Health Organisation: Geneva; WFP (2000) Food and Nutrition Handbook. World Food Programme, Rome; MSF (1995) Nutrition Guidelines Médecins Sans Frontièrs; Prudhon C. (2001) La Malnutrition en situation de crise, Action Contre la Faim.

software for statistical analysis, such as Epi-Info, have facilitated comparison of affected populations both spatially and temporarily.

While the usefulness of anthropometry is not in dispute, knowing a level of malnutrition alone does not allow a humanitarian agency or government to respond appropriately unless there is information on the causes. Causal analyses (using the conceptual framework) are frequently conducted alongside anthropometric assessments⁶ and bring together quantitative and qualitative approaches. These are important developments which must be invested in further to establish best practice approaches.

There is also increased understanding of the importance of the analysis of epidemiological data alongside that of anthropometric data. Measles coverage data has become a fundamental component of regular data collection within anthropometric surveys and the importance of assessing mortality indicators in conjunction with malnutrition has become more widely recognised. In Burundi in 2001, standardized reporting of the numbers of malnutrition cases in centres and the number of malaria cases, combined with analysis of the worsening food security situation proved to make a strong case for assistance⁷.

Although the assessment of malnutrition in children under five years and the estimation of prevalence has become routine work for many emergency nutritionists, there remain substantial gaps in understanding how to measure acute malnutrition in other age groups, namely infants (<6 months), adolescents, adults and the elderly. This is due to the inadequacies of reference population data and inter-ethnic variation. In the last few years the limits of our understanding of how to measure these groups have become more widely discussed and the research agenda has become clearer.

Progress in assessment of malnutrition has been paralleled by the more widespread establishment of early warning systems in emergency prone countries. Some of these are based on analysis of food supply (e.g. famine early warning systems and more recently FIVIMS) while others use an understanding of access to food. The Vulnerability Assessment Mapping, which is one of the most important emergency management tools used by WFP, is used to improve understanding of food security issues and to identify the most appropriate strategy for addressing food insecurity.

Progress made in the assessment of household food and livelihood security has been extensive both in terms of the development of sound methodologies and in their widespread use across large parts of emergency-affected countries. These methods have moved beyond analysing food balance sheets, mapping environmental conditions and monitoring agricultural production and vegetation to understanding households' access to food. The development of the household economy approach (HEA) for assessing food aid



needs by Save the Children UK was a significant part of this process. This approach uses entitlement theory to determine the effect of a shock on different socioeconomic groups in different communities. HEA was followed by the development of other approaches to assessing livelihoods which all hinge on understanding access to, rather than simply availability of, resources with a concern for longer term support of livelihoods and self sufficiency as well as immediate needs. This has allowed for a greater understanding of how individuals and communities cope with food insecurity, particularly through determining the role of community structures and the use of available traditional resources.

Despite consensus on appropriate anthropometric survey methodologies, there remain frequent examples of poorly conducted surveys or assessments that serve to misinform rather than inform decision making¹⁰. Common mistakes include fundamental errors on sample selection, unclear and untransparent presentation of data and failure to include assessment of oedema. These errors reflect poor human resource capacity and the failure of those agencies responsible to take technical expertise in nutrition seriously.

The importance of clear case definitions for micronutrient deficiencies, adequate sample size and, where possible, biochemical confirmation during micronutrient deficiency assessments has been widely recognized. However, challenges exist in their implementation and the lack of validated field-friendly sample collection and analysis technology.

There remain substantial shortfalls in the way information generated by early warning systems is used, making them not as effective in preventing emergencies as had been expected. While the increased use of anthropometric figures in planning emergency response can be regarded as progress, levels of malnutrition are usually impacted late in a crisis and therefore ideally should not be used to trigger response. The reliance on anthropometry for response undermines the value of comprehensive food information systems that monitor early indicators of a food crisis in generating timely humanitarian responses.

Interventions

FOOD AID RESOURCING Since 1989, the proportion of global food aid allocated to emergencies^d has increased from one eighth to one third in 1999 when it equalled 4.7m MT¹¹. The remaining two thirds are allocated to project^e and programme food aid^f. In 2000, 86% of WFP food aid went to emergency activities, the highest

proportion for 23 years. The increasing proportion of food aid allocated for emergencies should be seen in the context of greatly fluctuating total food aid allocations over the 90s. While the proportion of food aid allocated to emergencies has increased, the overall quantity has varied substantially through the decade, peaking in 1992, declining substantially in the mid 90s to 2.8m MT in 1996 and increasing again in 1998¹¹. The latter increase is unlikely to be sustained and is attributable, as are previous food aid trends, to the appearance of global surpluses and the subsequent increase in programme food aid for Russia¹¹. These recent surpluses (primarily from the US) have also provided impetus for initiatives like WFP's global school feeding programme launched in 1998.

There have been notable advances at donor level (bilateral and multi-lateral) with regard to the provision of food aid and other resources for food and nutritional emergencies. Many of these advances have been in response to the political, institutional and bureaucratic constraints that affect donors in very specific For example, in 1996 the EC implemented Regulation 296 which, among other initiatives, established a cash facility for supporting food security measures. This allowed for a significant move away from providing food aid. In 1996, the US Congress replaced the wheat reserve by a Food Security Commodity Reserve of wheat, corn, sorghum and rice to be used to meet unanticipated emergency needs in developing countries. In addition, WFP has worked to improve the efficiency of its food aid resourcing and program-

The implications of the potential negative effects of food aid have also begun to permeate donor thinking in recent years. WFP recently held a workshop on food aid in conflict¹² that concluded that there was a need to identify and elaborate the principles that guide WFP operations in conflict settings. Further, ECHO recently commissioned a study in southern Sudan, which in part examined the role of food aid in fuelling conflict. DfID also has emerging policies on the potential of food aid to damage local economies¹³. In 2000, the ODI Humanitarian Policy Group and Nutrition-Works¹⁴ reviewed the principles and practice for food distribution in conflict and made the following key recommendations:

- programme situation analyses should include risks to lives and livelihoods, war strategies and war economy and political contracts to determine the risk of diversion of food aid
- agreement with authorities and coordination between agencies should be based on an analysis of accountability of local authorities
- appropriate distribution methods should be identified considering whether beneficiary representatives or local institutions can be relied on to distribute to the most vulnerable and if not whether registration is possible for direct distribution, and
- risks of abuse at each stage of the distribution proc-

^d Emergency or relief food aid is targeted and freely distributed to natural and man-made disasters.

^e Project food aid is provided on a grant basis to targeted groups to support specific developmental activities.

^f Programme food aid is provided bilaterally for sale in developing countries, the funds being used either as general budgetary support or to finance specific development projects.

ess should be identified and strategies developed to minimize them.

Despite these notable achievements, the politicization of food aid in emergencies is at times scandalous. The mismatches in food aid allocation between emergency affected populations is a profound embarrassment to those working in the humanitarian aid sector. The geo-political factors underpinning these imbalances are plain to see. This problem extends beyond food aid. For some countries, the international response has met less than 10% of estimated needs. For example, Eritrea in 1998 received less than US\$2 for every person affected by the emergency while the former Yugoslavia received US\$166 per person¹¹.

Bureaucratic impediments to efficient release of funds for the purchase of food aid or other resources to support food security are also at times scandalous. The difficulties currently being experienced within the EU under the new regulation 296 is particularly noteworthy in this regard.

A series of external and internal reviews have identified numerous constraints that WFP face in implementing effective emergency food aid programmes¹⁵. These include:

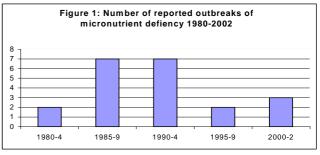
- lack of resources for the immediate response account (IRA) and international emergency food reserve (IEF)g
- the fiscal cycle of some donors and the length of time it takes to approve appeals for emergency assistance does not coincide with those of WFP, affecting the timing of pledges and whether funds can be made available in advance or not
- increasingly rigorous and complex administrative and accounting procedures substantially increase the lead-time of emergency food assistance delivery, and
- difficulties in obtaining accurate estimates of population numbers in need. Inaccurate population estimates can easily lead to donor under-provisioning.

RATION QUANTITY During the refugee crises of the late 70s, (most notably those in South East Asia), there was little understanding on the part of the health-oriented aid workers, of the importance of the nutritional content of the food rations given. The focus of nutrition was very much on nutrition surveys, supplementary feeding, and various manuals were devoted specifically to the management of nutrition programs

g The IRA is completely untied cash. The IEFR is a commodity-based facility with an annual replenishment target of 500,000 tonnes. There is an increasing tendency on the part of donors to insist on advance information on where resources given to the IEFR are to be used. Combined with under-pledging of the IRA this means that the WFP has to go back to governments if it needs to reschedule a commodity. At the very least, this increases storage costs, and at the worst can considerably delay emergency assistance.

in refugee camps. However, it was only in the late 80s that there was an agreement among the major humanitarian organisations to increase the daily ration for refugees from 1500 to 1900 kcals per person per day¹⁶. In 1997, the UN technical agencies agreed that this should be increased to 2100 kcals as a planning figure and provided information to allow context specific requirements of populations to be calculated.

RATION QUALITY During the famines of the early to mid 80s, refugee populations experienced several outbreaks of scurvy. This lead to the first realisation that the nutritional components of the diets of refugees needed to be considered in the same light as those of 'resident' populations¹⁶. Two meetings in 1991^{h,17,18} noted that despite international nutrition guidelines, relief programmes often fail to provide the minimum recommended daily allowances (RDA) of micronutrients such as vitamin A, thiamine, niacin, vitamin C, iron, and folic acid¹⁷. After the early 90s the number of reported outbreaks of micronutrient deficiency (scurvy, pellagra, beri-beri, xerophthalmia and iron deficiency) declined after this period (Figure 1).



Source: ENN Field Exchange (Toole 1992)

It is important to note that most data come from refugee and displaced populations and it is likely that outbreaks in resident populations have remained unchanged over this period. Difficulties in addressing micronutrient needs through provision of fortified foods in emergency situations include pipeline constraints in the early stage of an emergency, reduced shelf life of fortified commodities and the cost of fortified blended food in comparison to unfortified staple grains¹⁹. Recommendations made in early 199117 to strengthen surveillance of micronutrient deficiency diseases and develop standard clinical case definitions were still being repeated in 199820 and 200021. Questions remain concerning fortification, such as where fortification should take place and which foods should be chosen (i.e. within or near to the affected country or in the donor country). Data on the effectiveness of other types of interventions to address micronutrient malnutrition, such as local food production and increasing market access, remain sketchy²².

h In November 1991, the Centre for Disease Control (CDC) in Atlanta, Georgia, USA hosted a one-day technical review of micronutrient deficiency diseases in refugee populations. In March 1991, an international symposium was held on 'Responding to the Nutritional Crises Among Refugees: The Need for New Approaches.



TARGETING OF FOOD AID Despite evidence of the difficulties of targeting in the late 80s23, the 90s saw a renewed emphasis on targeting because of increasing application of the relief-to-development continuum model, and a decline in resources with the increasing duration of conflict-related emergencies²⁴. Although there have been well documented examples of appropriate targeting, in most emergency contexts, experience shows that targeting is rarely successful²⁵. The necessary criteria for success include stable, nonconflict situations, and relatively large wealth differentials within communities, where a large proportion of households are targeted and the ability to identify community representatives that can be relied on to target the most vulnerable. There is growing consensus that the greatest gains in targeting efficiency can be made by improving information systems which inform decisions about geographic targeting rather than by refining intra-community targeting systems²⁶.

LIVELIHOOD SUPPORT Over recent years there have been notable attempts to further the experience and understanding of humanitarian agencies in the effectiveness and appropriateness of interventions aimed at supporting livelihoods without the use of food aid. A paper by the British Red Cross²⁷ looks at the potential of cash transfers as an alternative form of relief and concludes that these findings give cause for cautious optimism and point to circumstances in which cash relief can work to best effect. It is beyond the scope of this paper to describe the technical debates surrounding this approach.

Despite the significant lack of official policies or guidelines, donors have begun to explore different modes of food security support in emergencies. Yet, guidelines on the funding of different stages of an emergency are still needed. A negative aspect for NGOs is that as funding opportunities and mechanisms change and diversify, bureaucratic difficulties can multiply making it harder for NGOs to access resources quickly and efficiently. At the same time, unless donor policies and funding strategies for these interventions are clearly formulated and coherent, agencies applying for funds may be unclear about rationales to apply to project proposals and confused by donor responses that as often as not may be based on individual views of decision-makers rather than firm and coherent institutional policies¹³.

SELECTIVE FEEDING PROGRAMMES There has been considerable advance and consolidation of existing knowledge in relation to the treatment of severely malnourished children. Despite improved understanding of the pathophysiology and treatment of the severely malnourished child, the median case fatality rate of children in hospitals in non-emergency settings has remained unchanged over the last 50 years and is on average 20-30%, with the highest levels of 50-60%²⁸. However, analysis of children in a number of therapeutic feeding centres in Africa, during emergencies, shows a case fatality rate of 9.6%²⁹.

Efforts are now underway to address the sustainability of the treatment of severe malnutrition in emergency-affected countries. A study comparing four centres treating cases of severe malnutrition (two therapeutic feeding centres (TFCs), one specialised nutrition unit (SNU) and one day care center) in Liberia, showed that the chief factor that appeared to cause the higher rates of mortality in the SNU, in comparison to the other three centres, was the adequacy of the management and training skills of the senior staff. This example demonstrates the importance of longer-term efforts to build capacity at the national level in countries that are frequently affected by disasters.

In addition to the technical advances, progress has been made in giving recognition to the importance of care and stimulation for children during rehabilitation from severe malnutrition, to promote recovery. In emergencies these components of programmes are often overlooked but their importance is becoming more widely recognized.

Much consideration is being given to the role of 'athome' treatment of severe malnutrition. TFCs for treatment of inpatients with severe malnutrition in emergencies have played a major part in saving children's lives in the past 20 years. Nevertheless, TFCs, especially in open situations (i.e. resident populations or internally displaced persons not in refugee camps), may have harmful effects on the food economy of patients' families, encourage increased population concentrations around them and create dependence from international agencies³⁰. Furthermore, programme coverage as a measure of the impact or quality of therapeutic feeding programmes is less consistently used.

The challenge is still how to ensure that mortality rates for all children remain low while designing home-based treatment programmes that are appropriate to the operational, environmental and socio-economic context. Studies show that detailed analysis of data collected prospectively in real-life service settings can lead to major improvements in the management of severe malnutrition. Although the Prudhon Index can be used to assess expected mortality, attention should now be focused on ways to reduce mortality.

In addition to the work on home-based care, there are several key technical challenges to existing treatment protocols for malnutrition. Firstly, the misdiagnosis of dehydration and the inappropriate administration of saline solutions to severely malnourished children, as well as early overfeeding, seem to be responsible for many avoidable deaths. This aspect of treatment is not emphasised in any current guideline, training manual or textbook²⁹. Secondly, the nutritional care and support of AIDS patients adds a new dimension to the work of treatment facility staff. Understanding how AIDS patients can be cared for in feeding programmes and within the community in emergency contexts is limited. Finally, despite the comprehensive best practices guides³¹, there is very limited understanding of the efficiency and efficacy of supplementary feeding programmes.

Monitoring and Evaluation

A publication by the Policy Department of Oxfam in the early 80s³² noted a growing resistance to the use of food aid. This influential study demonstrated the importance of understanding the context for interventions and monitoring the immediate and wider impact of programmes. This was followed in the early 90s by the UNICEF 'Triple A' Cycle (assessment, analysis, action). Like the conceptual framework, this cycle has been influential in the emergency sector as well. Alongside these developments, the use of the logical frameworks, where monitoring indicators and sources of verification must be specified, has gradually been accepted by donors and in turn agencies, to the point where the presentation of logical frameworks is now mandatory for the majority of funding applications.

These initiatives reflect the growing importance that agencies are placing on monitoring and evaluation. Donors are now increasing the availability of resources for these activities. This goes hand in hand with the increased need for accountability in humanitarian contexts. The Sphere project has also created a valuable impetus to monitor the context in which interventions are made, conduct evaluations and institutionalise learning. There have been several reviews of the application of Sphere standards in different humanitarian contexts. There remains, however, a significant dearth of thematic evaluations. For example, there has been no comprehensive 'overview' impact evaluation of emergency supplementary feeding programmes since Beaton and Ghassemi's seminal article in 1982.

Impact indicators (usually primarily quantitative) are prioritised in monitoring and evaluations, often to the expense of process indicators ¹⁶. Too great an emphasis is placed on anthropometric and mortality indicators as a means of monitoring and evaluation. There is little agreement on appropriate indicators for early warning, recognising that deterioration in nutritional status is usually a late indicator of a crisis.

In many contexts where agencies have previously worked for many years under relatively stable conditions, on arrival of an emergency, there is frequently a substantial lack of base-line data available. The gathering of baseline information in emergency prone communities is an essential component of emergency preparedness.

One of the regular findings of independent evaluations (e.g. CDC, bilateral government evaluations, and material submitted to Field Exchange) is that there are still enormous difficulties with up take/implementation of best practice by implementing agencies. There may be many reasons for this, such as absence of guidelines at project level, poor training of field staff and lack of technical support by headquarters staff. There may be a number of factors that in

turn underlie these constraints, including development agencies 'turning their hand' to emergency work but lacking the institutional expertise and support capacity; agencies trying to maintain capacity in all sectors of emergency food and nutrition (e.g. from therapeutic feeding to livestock interventions), but lacking the capacity to maintain expertise in the diverse array of activities involved.

Conclusions and Recommendations

This paper has illustrates some of the complementary roles that UN agencies, bilateral donors and NGOs can play in preventing and treating malnutrition in conflict and crises. All three groups of agencies have worked together to achieve significant information sharing and collaboration through interagency meetings, the initiation of the Emergency Nutrition Network and the unprecedented collaboration in the writing of the Sphere project nutrition chapter. In all areas of the project cycle, emphasis must now be placed on building capacity.

In assessments, the major advances in methodologies have sharpened analyses and improved programme design. However, information has proven insufficient to always initiate response and the effective translation of assessment recommendations into appropriate action remains constrained.

The proportion of food aid allocated to emergencies has increased over the last 20 years, though it remains low and the availability of this aid still fluctuates according to global food surpluses. WFP and donors have made substantial efforts in improving systems for the provision of food aid. In recent years guidelines have been developed to ensure these advances permeate to the field level. However, the politicization and dysfunctional structures remains a major frustration to humanitarian efforts.

In contrast to food aid programming, therapeutic feeding can be effective in reducing in-patient mortality due to rapid scientific advances and the development of nutritional products. There is increasing scope for innovative programming beyond general rations and feeding programmes in post conflict settings. This allows nutritional programmes to realize their broader cross-sectoral goals.

Prioritising of accountability in programming has greater investment in monitoring and evaluation methods strengthened and lesson learning initiated.

The recommendations generated by this paper could contribute to the development of a plan of action for NGOs, donors, and the UN agencies through the SCN. Some recommendations are made:

- an NGO-sponsored website should be established to enhance accurate media reporting on food and nutrition in humanitarian situations
- extension of the international cooperation and collaboration between international agencies to more regionalised initiatives involving local institutions and local nutritionists should be prioritised. This

¹ The publication was mostly concerned with project and programme food aid, not emergency food aid.



- could be addressed through the existing SCN working groups
- the links between the donor and the practitioner need to be strengthened. Past experiences of failures and successes need to be shared. This requires the development of much stronger relationships between public nutritionists, donors and key decision-makers
- policies need to be translated into practice: All agencies need to ensure a routine incorporation of training modules into their human resource development systems and also to set up effective monitoring and evaluation
- readjustment of policies on the part of all major food aid players and institutions, in order to ensure that humanitarian needs are met adequately. This includes WFP, bilateral agencies—particularly the two largest bilateral food aid donors, the US and the EU—as well as international NGOs who deliver food aid. These agencies should engage in a paradigm shift from food response to nutritional response allowing for the reform of food aid to be consistent with a nutritional imperative
- food aid resources should be part of a more flexible system of response. In such a system emergency food aid would be procured and supplied from the most efficient and timely source for purposes of meeting the assessed quantitative and qualitative nutritional need. Similarly, resources for food should be more readily transformable into non-food inputs for health, livelihood or other inputs required to protect, maintain and recover people from nutritional assaults, and
- monitoring and evaluation needs to consider issues of accountability and a willingness to document mistakes. The Sphere project should be seen as a vehicle to achieve this. Agencies should work together to produce and reach consensus on interim indicators to monitor before anthropometric indicators are likely to deteriorate. This should be underscored by both the ENN and RNIS. Monitoring and evaluation systems must be expanded beyond inputs and outputs—e.g. must include usual threats to livelihoods, an understanding of the changes in the external environment, social, cultural, environmental and fiscal impact of programmes.

This paper is a shortened version of the complete paper presented at the SCN Symposium Nutrition in the Context of Conflict and Crisis March 2002. For a copy of the complete paper, please contact Fiona O'Reilly, The Emergency Nutrition Network fiona@ennonline.net / www.ennonline.net.

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NUTRITION AND LIVELIHOODS IN SITUATIONS OF CONFLICT AND OTHER CRISES

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The work of humanitarian organizations over the past two decades has highlighted the continuing importance of nutrition in traditional forms of humanitarian response¹. Nutrition is also an essential part of the evolving analytical toolbox that helps in understanding the impact of emergencies on livelihoods and the effectiveness of livelihood approaches in emergency response. This paper explores a 'livelihoods approach' for protecting the lives and dignity of people in emergencies, as related to concerns in nutrition and household food security.

The first part of the paper explores the linkages between livelihoods and nutrition in populations affected by conflict, by reviewing the definitions of livelihoods, vulnerability and resilience in the context of humanitarian response. The second part focuses on three case studies of livelihoods approaches in different pastoralist systems in East Africa, which illustrates the critical linkages with concerns in nutrition. The paper concludes with a discussion of the essential principals of a livelihoods approach, followed by an agenda for learning and further research.

Humanitarianism—the old and the new

The imperative for humanitarian action is to protect the lives and dignity of people in conflict and crises, which is based on the 'right to life with dignity' and the over-arching humanitarian principles of impartiality and humanity.

In protecting lives and human dignity, humanitarian agencies seek to address not only the immediate life-threatening nature of complex emergencies, but also attempt to protect and support people's livelihoods. This is because livelihoods are central to the integrity, identity and autonomy of people. Or in other words, livelihoods are fundamental to human dignity.

In the context of protracted crises and conflict, disaster relief has become the predominant mode of international assistance in these areas. This has changed expectations of relief, which now include a broader range of goals for example, laying foundations of future development interventions, promoting conflict resolution and containing refugee flows. Strategies to promote or protect food security are one example of

the broader range of interventions. These developments have been termed by some as the 'new humanitarianism'.

A problem of definition—livelihoods, vulnerability and resilience in emergencies

Given the wide array of disciplinary backgrounds and sectors engaged in responding to emergencies, it is not surprising that many concepts lack common definitions and carry different meanings according to the background and objectives of the user.

Natural disasters and vulnerability

In relation to natural disasters the concept of vulnerability is central to the debate about their causes and solutions. It takes more than extreme physical events (hazards) to produce disasters. Vulnerability analysis focuses on the factors that make a community unsafe—a lack of resources, services and security. People most lacking these elements are very often constrained to live in areas least likely to be receiving the benefits of development, and most likely to face a range of hazards². This does not imply that all poor people are vulnerable, nor that all vulnerable people are poor. The element of risk (what someone is vulnerable to) has to be defined, as does the potential for that person to deal (cope) with that risk³.

Natural disasters may appear to affect the poor disproportionately, but in fact this is not always the case. Earthquakes hitting cities or major floods may affect 'rich and poor' alike—however, it is the greater capacity of the rich to overcome such a shock that matters. Wealthier individuals and societies protect their assets and income streams (their livelihoods) through income diversification, the accumulation of disposable assets, and by means of formal and informal insurance. It is the fact that poorest households are constrained in their ability to pursue such avenues that makes them more vulnerable to the (perhaps otherwise equal) impact of an exogenous shock.

The nutritionally vulnerable

From a nutritional perspective, 'vulnerable groups' have a different yet distinct meaning. The nutritionally vulnerable are generally considered to be those facing



particular nutritional risk, either as a result of their stage in the life-cycle (infants and young children, pregnant and lactating women, the elderly) or those who have relatively greater nutritional requirements as compared with their ability to meet those needs (women, the sick, the disabled). Estimates of the prevalence of acute malnutrition (wasting) among infants and young children are important 'proxies' for the nutritional (physiological) vulnerability of a population, but give no indication of how precisely a given shock has affected a community.

Because of the limited dimensions of physiological vulnerability, it does not necessarily identify the most vulnerable in all contexts, as it fails to take into account the multiple risks people face as a result of a failure in any of the three groups of underlying causes of malnutrition, related to food, health and care. In other words, while physiological risk is itself constant, the actual degree of risk associated with 'physiological risk' will be affected by context. For example, the elderly may have increased physiological risk, (decreased mobility, poor dentition etc), however, if family and community caring and support practices continue to exist to care for the elderly, they are not necessarily at increased risk. Furthermore, while the under-five year olds are physiologically at risk, it is not necessarily this group who are most vulnerable in all contexts (for example, in the Kosovo crises, and more recently in Afghanistan). Therefore, while the definition of physiological risk is extremely important, it does need to be viewed in the context of other underlying and influencing factors, including livelihoods.

Livelihoods and vulnerability

Livelihoods are a means of supporting human life⁴ or a means of living⁵. They represent more than just the necessities of life, since they are shaped by the goals, preferences and constraints of individuals, households, communities and societies. As Scoones puts it,

A livelihood comprises the capabilities, assets (including both material and social resources) and activities required for a means of living.

The 'goals' of a community are likely to be multifaceted and context-specific. Studies of behavioural responses (coping and adaptive strategies) to food insecurity and famine have shown that these goals shape peoples responses according to perceived benefits, costs and trade-offs.

In many crises individuals are typically obliged to reduce the number of meals consumed, and the quantity of food consumed, and/or switch to cheaper but less preferred foods^{7,8,9}. Indeed constraints to food consumption remain central to most people's experience of any crisis. For example, people forcibly displaced from their homes in central Burundi would return to try to retrieve root crops from their homesteads, which meant travelling to insecure areas and risking attack. Similarly, refugee women would travel from refugee camps in northern Uganda to insecure

areas where they had plots of land cultivating crops, or were collecting wild foods¹⁰. The 'choice' to consume less food for a period of time does not imply a preference for less food, rather an imposed prioritization among alternative routes to survival. In this sense, people cut back on food to protect key resources upon which their livelihood depends.

These resources typically include:

- economic resources (access to employment, use of land and natural resources, markets and trading opportunities, small enterprise)
- technologies (agricultural- and production-related)
- financial resources (access to money or other liquid resources; assets, cash/savings and credit, remittances, debt)
- human capital (education, skills, ability to work (health and strength)
- social capital (networks, community relationships, claims and obligations, community security)

Empirical evidence from many countries demonstrates that 'less vulnerable' households in crisis situations tend to have more diversified income streams, and those initially more diversified (in terms of asset base and income sources) make faster and greater gains in both income growth and energy intake in a post-crisis environment¹¹. However, in many complex emergencies even the previously wealthy may not be able to protect their advantage. A key characteristic of conflict-related emergencies is that the basis of livelihood sustainability comes directly under attack. The extent to which livelihoods (versus people) are 'vulnerable' to attack or loss is therefore a question central to any assessment of 'need' in a complex emergency setting.

Conflict and risk

In complex emergencies, a whole new dimension of risk related to conflict is introduced, because complex emergencies are characterized, in part,

by the deliberate exploitation of civilians. Undermining self-sufficiency and productivity are not merely by-products of conflict, but also are the intended consequences of functional violence and war¹².

'Functional violence' meaning violence with a strategic purpose beyond wilful harm, such as the destruction of the resource base of the opposition.

It has long been recognized that armed conflict is one of the major causes of famine in Africa, since it results in more rapid disintegration in the functioning of both the market and the state, and restricts the mobility necessary for livelihoods. The reverse is also true, in that famine and direct attacks on food systems have been used as an instrument of war¹³. The nature of risk introduced by conflict and violence varies according to the dynamics of each particular conflict. Various classifications have been proposed. Macrae and Zwi review attacks on food systems as a common

instrument of war, and propose three categories of activity; failure of governments to take appropriate emergency measures; direct attacks on the means of producing and procuring food; and the selective provision of assistance to certain groups¹⁴.

Low levels of conflict, but nevertheless incorporating violence and insecurity, occur outside of the context of intra and inter-state war, and can in themselves have devastating impacts on livelihoods. In the Horn of Africa, there are several national border areas characterized by conflict and insecurity. Among the Tur-

kana of north east Kenya, for example, the traditional livelihood-enhancing functions of l i v e s t o c k 'raiding' (through redistribution of pastoral resources), have to some extent been replaced by more predatory forms,

which undermine livelihoods by restricting mobility which is the death knell for pastoralism¹⁵.

Nutrition is not necessarily the most important input

or the most important goal, but a livelihoods analysis

cannot afford to ignore nutrition

Violence is frequently characterized by the forced migration of communities away from the region of conflict to safe areas. Crossing borders usually grants the forced migrants the status of prima facie refugees, while the internally displaced have no such international recognition. Displacement of people automatically separates them from their means of livelihood. Without the resources upon which their livelihoods are based it is unlikely they will be able to secure an adequate living. Of more pressing importance however, is likely to be the health crises and greatly elevated risk of dying, that is common in the acute phase of an emergency, where there is limited shelter, overcrowding, lack of sanitation and clean water and lack of food.

For our purposes of considering livelihoods in the context of crises and conflict, we would therefore emphasise the element of risk introduced as a result of conflict. We are concerned with 'vulnerability' as the risk of harm to people's resources as a result of the inability to counter external threat arising from conflict, or as a result of inherited or ascribed traits such as gender, class, race/ethnicity and age made salient by the nature of the conflict. Thus in a complex emergency the multiple risks facing people, include the risks engendered by conflict itself.

A definition of livelihoods in communities facing conflict might be as follows,

Livelihoods comprise the ways in which people access and mobilize resources that enable them to pursue goals necessary for their survival and longer-term well-being, and thereby reduce the vulnerability created and exacerbated by conflict.

This definition can be used as the basis for a preliminary framework for analysing livelihoods in conflict situations.

Nutrition and livelihoods; overlapping analytical frameworks

Livelihoods determine, and in themselves are determined by, the nutritional status of individuals. The interactions operate through a range of pathways, including both direct and indirect.

Within the livelihoods concept, nutrition is one of several fundamental components; nutrition is potentially either a type of resource, a recognized goal or measurable outcome. Nutrition is not necessarily the most important input or the most important goal, but a livelihoods analysis cannot afford to ignore nutrition.

A considerable strength of the livelihoods approach is that the importance of nutrition is likely to vary according to the perceptions and priorities of people themselves and the nature of their vulnerability. Thus a livelihoods analysis attrib-

utes to 'nutritional well-being' the importance with which communities themselves ascribe to it—an uncommon departure from a disciplinary point-of-view. This has important implications for the success of nutrition interventions. For example, food aid may be the only form of liquid assets available, in which case consumption of the ration will be determined in part by households' need for currency.

While one must be wary of assuming perfect knowledge or indeed the ability of malnourished individuals to 'express' a preference for better nutrition, this viewpoint overcomes one of the drawbacks of the current conceptual frameworks for nutrition¹⁶, which is their failure to include local cultural perspectives of malnutrition. Key questions outsiders frequently fail to ask relate to the role nutrition has played in shaping livelihoods; what is the cultural significance of malnutrition and how has that shaped societies and households subsequent behaviour? Patterns of resource utilization, such as household decisions about the use of food produced, do not necessarily maximize the potential for good nutrition, as explained in the earlier sections (coping strategies may involve reducing food consumption or sacrificing nutritional quality). underlying rationale for these decision-making processes may be easily missed where a purely nutritional perspective is taken.

The conceptual framework of causes of malnutrition describes three clusters of underlying causes, related to food, health and care. Household food security is principally concerned with the livelihood activities or strategies that generate access to food and income. The importance of livelihoods as a determinant of household food security and even access to health services is fairly obvious, but less immediate is the importance of livelihoods in relation to the 'care' cluster of underlying causes of malnutrition. Livelihoods are clearly essential for maintaining functioning social net-



works, based on mutually beneficial exchange in terms of labour, assets and food. These are the foundations of the direct care-giving behaviours, which if disrupted may lead to malnutrition.

The social and economic inter-dependence that creates social networks may be severely disrupted even replaced by more predatory systems in times of conflict. In Turkana district for example, the increase in extremely violent forms of raiding that incorporated a criminal element was felt to lead to a collapse in the moral economy¹⁷. Wider social changes have a profound effect not only on food security, but also on the social networks and care-giving behaviours that are necessary to ensure adequate nutrition. Issues such as social cohesion or the divisions caused by narrowly targeting interventions are central to understanding nutritional impact.

The household livelihood security framework developed by CARE incorporates food security as an aspect of nutritional security. This in turn is a central component of household livelihood security defined as sustainable, adequate access to resources to meet basic needs¹⁸. These authors consider it misleading to treat food security or nutrition independent of livelihoods, in other words there is a need to recognize multiple constraints, as well as opportunities facing households, which influence household decisions. A further di-

mension that a livelihoods analysis needs to consider is the recognized seasonal determinants of malnutrition¹⁹. Seasonal variations in anthropometric status are frequently associated with the 'hunger gap' and subsequent post-harvest period.

Based on the definition of livelihoods proearlier,

'livelihoods analysis' in communities facing conflict might consider the following,

- 1. access to livelihood resources (their extent and mix)
- 2. the strategies used to access and mobilize these re-
- 3. peoples' own livelihood goals
- 4. livelihood outcomes (and pathways to these out-
- 5. vulnerability (risk and resilience). In particular how the above are disturbed by conflict e.g. restricted mobility or restrictions on ability to pursue coping strategies.

Nutrition is a component part of each of these perspectives on livelihoods. The conceptual framework of underlying causes of malnutrition complements the livelihood analysis by elucidating the effect of risks to livelihoods on malnutrition, and also the mitigating effects of livelihoods interventions on malnutrition, through either indirect or direct pathways.

Case-studies of livelihoods, livestock and nutrition; reducing vulnerability and risk

Three case studies of interventions to support livelihoods based on pastoralism in recent emergency contexts in the Greater Horn of Africa are presented.

Kenya 1999-2000: De-Stocking

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The 1999-2000 drought in Kenya was more severe and more widespread than either the 1992-93 or the 1996-97 droughts and had a massive impact on the livelihoods of both pastoralists and agro-pastoralists. It is estimated that more than 2.3m sheep and goats, over 900,000 cattle and 14,000 camels valued at approximately 5.8b KSh were lost. As a result many pastoralists dropped out of the production system altogether to settle in peri-urban areas, in close proximity to food relief distribution centres.

Previous responses to drought among Kenyan pastoralists were mainly based on the distribution of relief food, particularly cereals^{20,21}. In some areas the distribution of free relief food has been extended well beyond a temporary short-term measure, and regions, such as Turkana district, have been receiving relief food on and off for at least the past 10 years. During the drought of 1999/2000 the distribution of food relief was more extensive than ever before due to the

widespread nature of the drought. Food relief started in February 2000, and the number of beneficiaries creased steadily throughout the year from 1.7m in February to 3.3m in December

The livestock intervention program in pastoral areas that took place in 2000/1 is

thought to be the largest of its kind in East Africa, possibly in the world. A total of 21 projects in 10 districts involving 13 agencies were implemented. Donors gave close to US\$4m for the drought-related livestock intervention program between June 2000 and January 2001²². These included: de-stocking interventions; animal health activities (veterinary projects); livestock transport subsidies; livestock feed; re-stocking; and cross-border harmonisation and peace initiatives²³. Many of these interventions are not new as such, but the scale and level of coordination of the emergency livestock initiative in 1999-2000 was unprecedented.

The total value of livestock saved and salvaged through the various interventions is estimated to be more than US\$2m²⁴.

De-stocking—an overview During periods of drought, animals are generally in poorer condition due to a decline in vegetation, and mortality is increased. Oversupply in the livestock markets can lead to a collapse in livestock prices and an increase in the price of animal fodder (because demand is high). De-stocking interventions^a provides pastoralists with the typical market price for their livestock (generally small stock), and they are free to use this income as they see fit. There is a strong multiplier effect of the generated income; income from the sale of animals was used in Kenya for buying water for livestock, veterinary drugs, payment of school fees, purchases of essential household necessities including food, and for setting up small businesses, like tea-shops. While at the same time this economic activity would draw food and other basic necessities into local markets thus generating local business. The off-take of animals reduces pressure on grazing, making more available for surviving livestock.

The purchased animals are slaughtered, the hides and skins may be sold, and the meat is distributed, either as fresh meat or it may processed by air-drying to give it a longer storage life. The processing of animal carcasses has formed the basis of cash-for-work and food-for-work programmes.

In the Kenya programmes, local community groups or relief committees organized the distribution of meat and the selection of beneficiaries. In Worgedud, Mandera, for example, beneficiaries were selected mainly on the basis of those who could not pay for borehole water fees for their animals. While in Takaba, Mandera, selection was made on the basis of those with the most pressing cash problems—such as having sick family members in need of medication, or families whose children were threatened with expulsion from school for non payment of fees, or families unable to buy the most basic food stuffs.

In Wajir, fresh meat was distributed on regular basis to beneficiaries at the following rates:

- two shoats per eight families per week for the duration of the operation
- two bulls or camels per week per school for three and later four high schools
- six goats per week to a hospital
- three goats per week to a tuberculosis centre, and
- three goats and one bull per week each for six orphanages.

Nutritional benefits Both fresh and dried meat obviously have a high nutritional value and in emergency contexts complement well the free distribution of grain-based rations. In addition animal fat is made available, which is energy dense and improves palatability of the diet.

The de-stocking interventions in Kenya indicated that the distribution of fresh meat was generally preferred to the processing and distribution of dry meat. Fresh meat was cheaper and simpler to produce, faster to distribute and entailed minimum wastage. For beneficiaries it was felt to be more satiating and above all was preferred by pastoralists.

The distribution of fresh meat with proper planning raises the possibility of replacing the vegetable protein (pulses) in the relief food ration with animal protein at a much reduced cost and enhanced nutritional value. Critical reviews of de-stocking programmes have argued they should be run in conjunction with other forms of humanitarian assistance²⁵.

The success of de-stocking as an emergency intervention is contingent on the timeliness of its implementation in relation to cycles of drought, local knowledge on the part of the implementing agency, and the legitimacy or representativeness of the local relief committees or community groups that are involved.

The timing of this type of intervention is critical, before too many livestock deaths have occurred and to prevent pastoralist households from dropping out of pastoralism systems of production and joining the destitute in search of relief in peri-urban areas. Also the prompt sale of stock ensures more and better quality meat.

SOUTHERN SUDAN 1990s: PROVISION OF LIVESTOCK HEALTH SERVICES

Civil war and conflict has plagued Sudan for decades. In 1989 the first UN managed humanitarian programme known as Operation Lifeline Sudan (OLS) was established in response to the widespread humanitarian suffering in southern Sudan. This programme continues to provide international assistance to the people of southern Sudan to this day.

The majority of southern Sudan's 6m people are subsistence farmers, most of whom rely on transhumant pastoralism. In southern Sudan the Nilotic Dinka and Nuer own about 85% of the cattle²⁶. Cattle raiding and extremely violent armed attacks on pastoralists have characterised the conflict in southern Sudan since 1983, and contributed to the worst famine the region has witnessed in 1988. Even before the raiding in 1988, the transfer of livestock resources from the south to the north was very great. Since 1994 the Dinka in Bahr el Ghazel were further subjected to raiding and destruction by Kerubino's forces (allied to the Government of Sudan). Extreme famine was experienced once again in Bahr el Ghazel in 1998, as a result of conflict and the resulting displacement combined with drought and poor harvests in 1997.

Veterinary projects—an overview Just as excess human mortality during famine is driven by a combination of starvation and disease brought about by localised health crises, livestock losses during drought and complex emergencies are similarly associated with increased disease transmission and a deteriorating condi-

^a De-stocking in the traditional sense is done to reduce the livestock population from ranches etc., for marketing purposes to balance stocks with carrying capacity of the land. It is a management technique to sell finished animals, in contrast to 'culling' unwanted animals (old or sick animals).



tion of livestock. An increase in disease transmission rates occur as a result of concentrations of livestock numbers around remaining water holes and exposure through duress migration, or increased susceptibility to disease because of stress. Veterinary care of livestock can reduce livestock losses during drought periods by treating or preventing diseases in addition to the buffering capacity provided by preventative animal health care with regard to the physiological stress of migration or other conflict induced actions (similar to the saving both lives and livelihoods for humans). thermore, healthier animals make more efficient use of remaining grazing resources. Therefore, timely veterinary interventions can be very effective at preventing livestock losses and are highly cost-effective. implemented community based animal health programmes have short and long-term benefits at both the individual and community level.

The Operation Lifeline Sudan Veterinary Health Care Services Prior to the late 80s, the southern parts of Sudan were very poorly served by government veterinary services; only very limited livestock services were operative in the major southern towns of Juba, Wau, Malakal, and other GOS controlled towns. This lack of services in part contributed to the endemicity of Rinderpest, a cat-

tle disease that is widely recognized and prioritised by pastoralists in the south. Prior to the 90s pastoralists in southern Sudan were also marginalized by the conven-

tional livestock vaccination activities operated by the Pan African Rinderpest Campaign (PARC), because of the insecurity and logistical difficulties that limited use of cold chains and conventional, government recruited vaccinators.

The OLS veterinary programme aimed to improve household food security through two pathways: the Rinderpest vaccination programmes, which were initially to control and more recently, to eradicate Rinderpest, and the establishment of community based animal health programmes in southern Sudan on a cost-recovery basis.

In the early 90s the development of a thermostable Rinderpest vaccine meant that the area of service delivery was no longer constrained to where a cold chain could be maintained. In 1993 participatory approaches developed by NGO animal health projects in Afghanistan and the Greater Horn of Africa were introduced to operations in southern Sudan as a means to deliver this vaccine to remote pastoral areas. Community based animal health workers (CAHW) were trained and equipped to vaccinate cattle against Rinderpest with the active participation of livestock-rearing communities, and also to deal with problems such as internal and external parasites, wounds and miscellaneous bacterial diseases.

Output—efficiency of service delivery Southern Sudan covers approximately 800,000 km and the estimated cattle population is 5.8m in addition to 1-2m in government controlled areas²⁷. Between 1989 and 1992, the UNICEF livestock programme used conventional cold chains and vaccinated an average of 285,000 cattle against rinderpest annually. In 1992 the programme came to a virtual standstill as insecurity disrupted cold chains and vaccination teams. In this year, only 140,000 cattle were vaccinated.

During 1993-95 CAHWs in southern Sudan vaccinated 1.1 to 1.7m cattle against Rinderpest respectively. There have been no confirmed outbreaks of rinderpest in southern Sudan since 1998. By 1996, a network of 563 CAHW's had been established. These CAHW's treated 1.3m cattle, about 156,000 ruminants and 100,000 domestic fowl during 1996. No records were available to compare these treatment figures to the period before the onset of the CAHW system. Further, only parts of Equatoria were accessible by road; the rest of the rebel-held areas had to be accessed by air, and the number of places accessed was limited.

Nutritional Impact Evaluation of the OLS veterinary programmes has traditionally focused on process indi-

cators of service delivery as well as qualitative evaluations of program impact. A study in 2001 identified five broad categories of indicators to monitor impact. These included:

Nutrition is not necessarily the most important input or the most important goal, but a livelihoods analysis cannot afford to ignore nutrition

- impact on animal health and herd size
- impact on availability, access and utilization of livestock holdings
- impact on availability, access and utilization of livestock products in the home
- contribution to long-term viability of household coping mechanisms by strengthening kinship ties, and
- impact on health status of beneficiaries (nutrition, morbidity and mortality)²⁸.

The programme's impact on nutrition is either a result of direct consumption of livestock products, or alternatively through a wide range of indirect pathways, that either influence consumption patterns or exposure to disease within the household²⁹. Improved cattle health was also thought to contribute to improved human health and HFS by decreasing exposure to zoonotic diseases, and the loss of income this would represent³⁰.

In times of stress, like drought or the annual hunger gap, cows may be auctioned or exchanged for grain, or slaughtered for meat. It therefore appears that cattle resources are perhaps more important to daily food intake only in times of duress³¹.

Impact during times of crises A study three years earlier at the end of the dry season (hunger gap) in the same area coincided with severe drought and conflict in other parts of southern Sudan, which produced widespread hunger, and acute food shortages³². The study found that in each of the villages included, the amount of meat in the diet increased dramatically; some families reporting their diet solely consisted of meat and vegetables. In a society where excessive (daily) meat consumption is considered harmful to physical health and social well-being, this was a clear indication of a survival strategy. The local slaughterhouse also reported a 66% increase in the number of cattle slaughtered for consumption between the months of May and July 1998³³. One of the reasons for the steep increase in meat consumption was the lack of grain and declining terms of trade between livestock and cereals, which reveals an ideal opportunity for a combined intervention addressing both the need for grain and protection of livestock. Successful veterinary care programmes must be responsive to periods of stress, whatever the cause, by supporting their community based animal health workers and providing a wider range of livestock interventions to protect livestock and livelihoods³⁴.

EASTERN ETHIOPIA 1998: RE-STOCKING

The Ogaden rangelands in southeastern Ethiopia are home to ethnic Somali pastoralists and agropastoralists. The environment is harsh and the region suffers as a result of its isolation, lack of infrastructure and years of political marginalization by the Ethiopian government. The Somali-Ethiopia border cuts through traditional clan territories and has little significance for either pastoralists or traders, but has played a major role in terms of regional conflict which has generated one of the worlds most intractable and severe refugee crises, with semi-permanent refugee camps close to the border since 1988.

Escalation of the civil war in Northwest Somalia/ Somaliland in the summer of 1988 drove tens of thousands of refugees across the border into Ethiopia. The victory of the Somali National Movement in early 1991 did not bring immediate peace and stability to northwest Somalia. Drought in 1989-91 also drove local pastoralists and agropastoralists to the camps. A further influx of 90,000 refugees into existing camps occurred following conflict in Somaliland in November 1994. The vast majority of Ethiopian returnees were reabsorbed immediately by the local population, but a minority registered for assistance in the camps and received a resettlement package, but awaited further assistance in the camps.

Since 1993 agencies have been trying to take a longer-term view of assistance, and have developed rehabilitation programmes comprising interlinked agriculture, livestock human health, education and water projects. A main aim of this work was the reintegra-

tion of Somali returnees from Djibouti and Somalia into the Somali Regional National State. By 1994 the total returnee population was estimated to represent 20-30% of the rural population.

The boundary between Ethiopia and Somalia is long and unguarded, and Ethiopia did not restrict incomers. People living along the border cross the border at will, so that the residents of the camps have continued to move freely between the camps and North West Somalia. Markets in the refugee areas have a wide range of goods on sale, many coming from abroad into Berbera and Somaliland. The area is a significant transnational trade route, with Hartisheikh (the site of refugee camps) being a major marketing center. The refugees, returnee's and local inhabitants of this region share the same Somali ethnicity and cultural traditions.

Re-stocking—an overview Re-stocking is usually a postemergency/rehabilitation intervention focusing on pastoral households with substantial livestock losses, whereby an external agency buys livestock and distributes them to households identified by community based groups or relief committees according to established criteria.

Typically re-stocking aims to provide a sufficient number of animals to destitute pastoral households to ensure a return to pastoralism. This requires a definition of 'minimum herd size' for subsistence and the herd composition for a particular pastoral system. Restocking projects vary widely and include provision of virtually any livestock type, either as a donation or using numerous forms of credit. Recipients of livestock are likely to need additional assistance, for example, basic household items that they have been forced to sell during the emergency.

Re-stocking works best when traditional restocking practices are understood and form the basis for project design. Given the requirement for local purchase, such projects can be easily corrupted by local traders increasing the price of stock in the market, or the unfair selection of beneficiaries and inappropriate choice of livestock. To overcome these potential difficulties requires a long process of community dialogue, which is most effective if the implementing agency has a long history of involvement in the area and good community relations.

Provision of sheep and goats to Somali returnees in Ethiopia³⁵ In 1995 Returnee Ethiopian Somalis arriving home in Somali National Regional State were welcomed by their communities and according to Somali tradition, received support such as basic agricultural inputs, allocation of land and livestock. Livestock were essential for those families who wished to resume herding activities and rebuild assets. Despite the assistance which returnees received from relatives, it was evident many returnee families were still struggling to meet basic household food and income requirements. The longevity and scale of the refugee/returnee problem had



undermined traditional restocking mechanisms. In response to this problem in 1995 Save the Children Fund investigated traditional methods of re-stocking used by Somalis. This revealed that goats and sheep were preferred for re-stocking to other livestock for a number of reasons, including:

- their high fecundity and potential for rapid herd expansion
- young adult male animals, particularly sheep, could be sold or exchanged for rice and sold in order to buy other livestock such as cattle or camels. The rearing and sale of male sheep was a particularly important method of income generation
- goats produced more milk than sheep and so goat milk was consumed by the family especially children
- the skins and dung of sheep could also be utilised
- in terms of networks of reciprocity, sheep and goats were more likely to be provided in the form of a gift, while oxen for draught power or donkey for transport were commonly lent.

Traditional re-stocking practices also targeted particular beneficiaries, including female headed households, aged households and poor households who had lost livestock.

Based on this information, SCF designed and implemented a small-scale re-stocking project with 22 Somali agropastoral communities who had received returnees. The project provided six adult female sheep and/or goats to beneficiaries, who were selected during traditional community meetings. A system for redistributing offspring from the first beneficiaries to other needy families was designed; and assumed 50% of the offspring would go to 'second level' beneficiaries during the first year of the project. Veterinary care of livestock was arranged in partnership with the local Ministry of Agriculture veterinary staff and by training community based animal health workers. All stages of the restocking project were closely linked to traditional systems.

Impact of re-stocking on the nutrition of children Baseline information was collected which included beneficiaries expectations of the project. By far the most common expectation was increased availability of milk to give to As a result assessments of the quantities of goat milk fed to children of different ages in relation to other foods, were incorporated into subsequent monitoring activities. A mid-term review of the project attempted to assess goat milk off-take and compare this with the nutritional requirements of children. These estimates were not based on consumption studies, but instead from qualitative interviews with project beneficiaries. In the dry season milk off-take per goat was reported to be approximately 300ml per milking per day, whereas wet season milk off-take was reported to be 600ml per day. In the preparation of a typical milk-maize porridge 300ml was used to prepare one

porridge meal, and 3 to 4 porridge meals would be fed per day. These calculations represent rough estimates, as cows milk was also used in some meals and children of different ages tended to eat communally from a single bowl. The review calculated that on a single day in the wet season, goat milk could provide the child with approximately:

- 658 kcal (more than 50% of the RDA for two year olds)
- 30.6 g protein (127% of RDA)
- 371μg vitamin A (148% of RDA)
- 1205 mg calcium (267% of RDA)

Catley notes that this type of assessment and calculation could be a first step towards making detailed links between the provision of goats to returnee households and benefits to the children in those households³⁶. It is noted however that the measurement of variables such as milk off-take and human milk consumption is technically difficult, and not necessarily appropriate for routine monitoring.

Essential principles of a livelihoods approach in complex emergencies

In reviewing these case-studies several principles in the application of a livelihoods approach in the context of conflict and crises emerge.

Assessment and analyses

Analysis of livelihoods and nutritional risk are relevant to understanding both the immediate life-threatening risks to people, and threats to their future survival. Life-threatening nutritional risks include; a failure to meet immediate food needs; increased exposure to disease as a result of contaminated water (or food), lack of sanitation, inadequate shelter; and the increased susceptibility to disease associated with severe malnutrition or other debilitating diseases. These are the critical components of an emergency needs assessment and upheld by minimum standards of humanitarian response³⁷.

In order to assess the food security of households, several agencies have developed assessment methodologies^{38,39}. Although the precise objectives vary for different agencies, they do have several elements in common. For example, they generally incorporate an analysis of the different sources of food and income (access); a review of coping strategies; and the stages or timing of applying different coping strategies⁴⁰. It is not universal however, to consider food security in relation to the wider concept of livelihoods, nor to explicitly consider the socio-political dimensions of risk and vulnerability introduced as a direct result of conflict. A few agencies, including ICRC, CARE and Oxfam GB incorporate a form of livelihoods analysis into their emergency and development work^{41,42,43}.

A preliminary framework for analysing livelihoods in conflict situations has been suggested in the earlier section on nutrition and livelihoods, which is based on the definition of livelihoods. More work is needed in developing and applying this framework, especially in relation to developing practical tools for evaluating livelihood interventions.

It is essential to explicitly incorporate analysis of the political economy of conflict, and its impact on livelihoods and the underlying causes of malnutrition. Tools for analysing the complexities of conflict and their implications for field based organizations implementing both relief and development have been developed and widely applied⁴⁴. But these have not been

generally incorporated within a livelihoods analysis, and there remains a need to develop analytical tools that could help us understand the ways in which people respond, adapt and even subvert the effects of violence on their lives, in

relation to their livelihoods and the costs they incur by following particular survival strategies.

Local priorities and expectations will shape the success

of any external intervention

Local priorities and expectations will shape the success of any external intervention. As shown in the Eastern Ethiopia case-example, the expectations of more milk for children from the de-stocking project formed a central part of subsequent monitoring activities, as from the communities perspective the success of the project would in part be judged by increased availability of milk. In Southern Sudan, Holland showed the importance of monitoring not only output indicators but also patterns of utilization of livelihood resources, in order to evaluate how they translate into improved household food security and nutrition. For example, an intervention strategy that supports animal health through vaccination and treatment may indeed increase herd health and herd size, but unless the resources are tracked, their impact on nutritional outcomes will remain unclear.

Monitoring can also reveal the potential negative side effects or risks associated with a given livelihood intervention, for example, the potential negative impact on nutrition of monopolising water sources for livelihood interventions, making less water available for washing, bathing, cooking and drinking.

An understanding of local perceptions and priorities must be balanced with the knowledge of specific known health or nutrition risks. For example, measles immunization and distribution of vitamin A supplements are absolute priorities in terms of saving lives in times of nutritional crisis, yet may not be recognized as such by local communities. Humanitarian agencies and professionals clearly have a responsibility to ensure these priorities are adhered to as part of a broader response strategy.

Prioritising response strategies

As a matter of principle, external intervention in a nutritional crisis should include a range of combined

strategies to promote access to food and provide access to health care, while at the same time supporting and protecting livelihoods. In all three case-examples, the livestock interventions complemented a broader range of interventions, including the distribution of free food assistance, which was a critical aspect of food security.

More work on analytical frameworks is essential if needs are to be prioritized according to their lifethreatening risk, or their affect on livelihoods, or, as is becoming increasingly popular, in accordance with hu-

man rights. These frameworks need to be especially conscious of the financial, staff, and security constraints agencies face during conflict situations in both implementing an assessment and subsequent interventions. Allocating priorities is of

course much easier said than done in a context where agencies must work in accordance with their mandates and demonstrated institutional competencies. Nevertheless the need for a range of combined strategies to address risk is widely recognized by humanitarian agencies, and generally promoted within agency guidelines and the minimum standards of humanitarian response. Given the context of an increasing proliferation of agencies working in protracted crises situations, prioritizing and combining relief strategies is in large part reliant on effective coordination mechanisms. Although the Kenya case-example is restricted to emergency livestock interventions, the degree and level of coordination of multiple agencies and a wide array of interventions was unprecedented.

Partnership and advocacy; combining appropriate technical and local knowledge

None of the interventions in the case-studies would have been possible without specific technical input from specialists not just in veterinarian science or agricultural economics, but also in participatory ways of working and community based interventions. A wide range of technical and social skills are essential to livelihood programming success and this includes the particular knowledge and skills represented by public nutrition. Both public nutrition and livelihoods approaches challenge the barriers of sectoral viewpoints imposed by individual disciplinary training and focus, termed 'academic tribalism'⁴⁵.

Within food security interventions generally, and the three case-examples, it has been a long held assumption that successful interventions will produce tangible benefits for human health and nutrition. Despite this underlying premise, monitoring and evaluation of such programmes rarely extend beyond an assessment of efficiency (numbers of cattle vaccinated etc). In all three of the case-examples, human nutrition benefits were acknowledged as general project ob-



jectives, but were not linked explicitly on an operational or evaluative level.

As a starting point, we suggest that an understanding of the types and degree of malnutrition in the project area, together with an analysis of the underlying causes is essential for judging the potential impact of a project on nutrition. Furthermore, this knowledge is essential in recognizing those factors that will restrict or limit programme impact on nutrition. This type of knowledge and understanding does not require more nutritionists, but it does necessitate a public nutrition

approach, whereby nutrition is every body's business, and that all concerned have a basic understanding of the core nutrition principles^b. The reverse is also true, a public approach nutrition quires nutritionists to consult and work collabora-

tively with a wide range of stakeholders and technical experts. Creating a wider awareness of the role and importance of nutrition requires job related training on a vast scale, and advocacy among donors and other supporters of livelihood interventions. Basing training activities within regional institutions will help create greater regional ownership and responsibility for livelihood approaches in emergencies.

The success of all of the livelihood case-examples described earlier was in part dependent on a detailed local ethnographic knowledge and understanding. In Ethiopia this was generated by a specific study of traditional re-stocking mechanisms, in southern Sudan by a long history of working in the area and knowledge of pastoral systems; and in Kenya by working with local organizations, especially where the external agency lacked experience of working in an area.

Learning as a way forward: a research agenda for the international humanitarian community

Improved tools and frameworks are needed for monitoring and evaluation of nutritional impact of programmes that combine both qualitative and quantitative approaches. This requires a substantive shift from the current focus of analytical tools on emergency needs assessment, to analytical tools and learning in relation to monitoring the nutritional impact of livelihood interventions. Although the basic indicators for monitoring and impact assessment of nutrition related factors are well known, typically operational constraints and donor reporting requirements limit agencies interest or capacity (at least in the case of livestock agencies in these case-studies) to look more deeply at nutritional impact. The challenge, therefore, is to develop usable methods for these particularly difficult contexts.

There is a plethora of studies needed to explore the linkages between nutrition and livelihoods with a view to maximising the nutritional benefits of livelihood initiatives on nutrition. These include for example:

- how different livelihood strategies affect nutrition during periods of crisis relative to periods of greater stability, and how livelihood interventions impact

...external intervention...should include a range of

combined strategies to promote access to food and

provide access to health care, while at the same time

supporting and protecting livelihoods

the effects of different livelihood initiatives on quality of the diet, including micronutrients (particularly, vitamin A, vitamin C and iron) and macronutrients (fat and protein) in relation to expected dietary deficiencies

how best to enhance

the complementarities of food distribution programmes and other livelihood initiatives. The distribution of free food

assistance is usually intended to meet immediate requirements for food, but nevertheless studies have shown it contributes significantly to the resource base of the household, as a portion is either traded or exchanged to obtain other essentials46, or alternatively to fulfil social obligations. In Turkana, beneficiaries of free food expressed a preference for combined intervention strategies, that included both food and livelihood support⁴⁷, and

the affects of food aid on local food production, market supply and prices of foodstuffs.

Finally, the potential difficulties that arise from attempts to combine both humanitarian and more developmentalist principles within one programme should be acknowledged. For example, how far can we take community based approaches within a humanitarian principles framework that emphasizes neutrality and values speed of operations? Striking a balance here will promote more effective programmes, but also will begin to break down the 'Berlin Wall' between relief and development practitioners.

Conclusions

Nutrition in emergencies has developed and consolidated as a professional sector, but there is a need now for a broadening of the sector to extend the public nutrition approach into other programmes which impact on malnutrition. Conceptually nutrition is already incorporated within the livelihoods analytical framework (as a resource, a goal and measurable outcome). A livelihoods analysis, that incorporates an assessment of vulnerability related to the conflict, can contribute much to our understanding of the causes of malnutrition and barriers to its improvement.

The case-studies illustrate that we have moved well beyond analytical frameworks to the practical implementation of livelihood initiatives that impact on nutri-An essential step needed to further the under-

^b Tufts University in conjunction with the World Food Programme has designed Food and Nutrition training modules that are targeted at non-technical national and international staff members.

standing of how livelihoods improve and protect nutrition is partnership with an increasing range of stakeholders, which requires the nutrition sector to continue to boldly reach out to other sectors to show how these nutritional benefits may be analysed and improved upon.

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THE RIGHT TO NUTRITION IN CONFLICT SITUATIONS

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In July 1999, Namanga Ngongi, then Deputy Executive Director of WFP asked:

What are the right criteria to help guide humanitarian agencies in deciding when to get involved, when to stay involved and when to withdraw in the emergency context (especially when governments deny access to civilians)? Do we stay knowing that our food aid relieves the government of some of its obligations? Or do we take a high moral stand and withdraw, knowing that this, at least in the short term, will mean that those living in poverty will continue to suffer!

Ngongi has posed a question based on various ethnical dilemmas that most agencies face when running programmes to support the right to adequate nutrition of civilians affected by conflict.

This paper looks at case studies drawn from UNI-CEF's experience in Sudan and Burundi that highlight the types of ethical dilemmas referred to by Ngongi and why operational agencies are facing these dilem-

mas more often. It concludes that a number of interrelated factors are creating more ethical dilemmas. These, include the changing nature of warfare and conflict throughout the twentieth century: the increasing

focus on human rights violations as a cause and a consequence of contemporary conflict, and the increasing application of human rights principles to guide programming by operational agencies.

In 1998 agencies working to realize the rights of civilians in the Bahr El Ghazal (BEG) Region of Sudan faced a number of ethical dilemmas. In particular agencies were faced with the dilemma of what, if any, actions they should take when faced with large-scale diversions and theft of food and other humanitarian supplies. The scale of the diversions raised serious questions as to the neutrality and impartiality of the operation; however suspension of deliveries or other sanctions would have threatened the on-going efforts to meet the humanitarian needs.

In 1998 the government of Burundi adopted a policy of forced relocation or regroupment of civilians to restricted camps. The government claimed that it was entitled to take this action for the security of the civilians and that it was legal under the Geneva Conventions. However, most observers and legal experts were of the opinion that the action was illegal under International Humanitarian Law (IHL) and was a violation

of a number of human rights. Despite international protests the government proceeded with its policy and called on the UN and NGOs to provide food, health-care and other humanitarian services to the regroupment camps. The agencies were faced with the dilemma of on the one hand fulfilling their commitment to the humanitarian imperative and meeting the humanitarian needs of the civilians in the camps, but on the other hand, assisting and legitimizing the government in an illegal action that violated the rights of many of its citizens.

Nutrition and Nutrition as a Human Right

The adequate nutritional status of an individual requires simultaneously household food security, adequate care and protection, and adequate access to basic health services. During 1990-1996 the SCN debated intensively how to conceptualize the causes of malnutrition. This paper uses the conceptual framework proposed and used by UNICEF².

Except for the Convention on the Rights of the Child (CRC), nutrition is not explicitly recognized as a human right in most conventions and declarations. This is mainly because a 'foodbiased' approach domi-

nated the concept of nutrition; nutrition was more or less equated with lack of food. As addressed in a large number of UN Conventions and Declarations, 'freedom from hunger', and the 'right to food', therefore, often meant, implicitly at least, a right to nutrition.

Nutrition as a Human Right During Conflict

NON-DEROGABLE HUMAN RIGHTS Critics of international human rights law and its use to support programming by development and humanitarian agencies (through what has become known as the human rights approach to programming (HRAP)) are always quick to highlight its lack of enforceability and difficulty of application, particularly in emergency and conflict situations. Much of this criticism stems from a commonly held misunderstanding that most human rights law does not apply during conflict situations because it may be derogated.

Derogation is a procedure through which a state may temporarily suspend certain of its obligations under international human right law and it is the general concept of derogation that has lead to the confusion or misunderstanding that human rights law has little or no application in conflict. However, on close examination it is clear that a state's scope for derogation from its legal obligations in emergency or conflict is very limited, and in many instances, non-existent.

The derogation clause most commonly referred to by those who argue that there is little scope for application of human rights law in conflict is Article 4 of the International Covenant on Civil and Political Rights (ICCPR) which states that 'in times of public emergency which threatens the life of the nation States Parties may take measures derogating from their obligations under the present Covenant with their other obligations under international law and do not involve discrimination solely on the ground of race, color, sex, language, religion or social origin.'

Paragraph 2 of Article 4 goes on to stipulate that there can be no derogation from: Article 6, the inherent right to life of every human being; Article 7 the

prohibition against torture and cruel, inhuman or degrading treatment or punishment; Article 8(1) and (2), prohibition against slavery and servitude; Article 11, prohibition against imprisonment for failing to fulfil a contractual obligation; Article 15, the pro-

hibition against retrospective criminal prosecution; Article 16, the right of recognition before the law; and Article 18, the right to freedom of thought, conscience and religion.

So, quite clearly, the so called 'derogation clause' in the ICCPR does not in any way permit States to suspend or reduce their legal obligations to ensure the adequate nutritional status of their citizens during times of emergency conflict. Finally, it is also important to note that many international treaties simply do not have derogation clauses, and therefore cannot be derogated from at all. Critically, the International Covenant on Social, Economic and Cultural Rights (ICSECR) and the CRC cannot be derogated and therefore apply equally during times of conflict as during times of peace.

As well as having a continuing legal obligation to maintain the nutritional status of its own citizens during times of conflict, a state also has certain legal obligations towards foreign nationals seeking refuge in their territory including facilitating access to adequate food, health services and protection necessary for the maintenance of an adequate nutritional status. In addition, states also have an obligation to cooperate with UN High Commissioner for Refugees in order to provide adequate care, assistance and protection for refugees (see Convention Relating to the Status of Refugees, 1951).

THE RIGHT TO NUTRITION UNDER INTERNATIONAL HUMANITARIAN LAW (IHL) International Humanitarian Law (IHL), or the 'Law of war' as it is sometimes referred to, is a branch of public international law which is applicable during international and non-international armed conflict. It is meant to restrict or limit the right of the parties to a conflict to use the method or means of warfare of their choice and to protect persons and property affected or liable to be affected by the conflict.

There are a plethora of international humanitarian law instruments and customary IHL jurisprudence. This paper will focus on the Geneva Conventions of 1949 (primarily Common Article 3, and the 4th Geneva Convention on the Protection of Civilians) and the two Additional Protocols of 1977.

INTERNATIONAL ARMED CONFLICT In the case of international armed conflict, the Fourth Geneva Convention provides certain legal safeguards and provi-

Article 54 specifically prohibits starvation

of civilians as a method of warfare

sions for the civilian population of opposing states, which if adhered to would ensure their adequate nutritional status.

When one state occupies the territory of another, the civilian popu-

lation of the occupied state becomes protected persons under Article 4 of the Fourth Geneva Convention. Section III provides specific provisions, which if fully applied and respected should ensure the nutritional status of the civilian population. In particular, Article 55 provides for the provision of adequate food and Article 56 provides for adequate health care.

If an occupying power is unable to adequately address the food and health requirements of the civilian population, it is required by Article 59 to 'agree to relief schemes on behalf of the said population, and shall facilitate them by all the means at its disposal'.

In addition to the protection provided by the Fourth Geneva Convention, additional protection for the civilian population affected by international armed conflict by Additional Protocol I of 1977. Article 54 specifically prohibits starvation of civilians as a method of warfare and population, such as foodstuffs, agricultural areas for the production of food, crops, livestock and irrigation and water supply facilities. Article 69 supplements the Fourth Geneva Conventions and provides that the occupying power shall, to the fullest extent of the means available to it and without any adverse distinction, also ensure the provision of clothing, bedding, means of shelter, other supplies essential to the survival of the civilian population of the occupied territory and objects necessary for religious workshop.

Finally, in addition to refugees, one state to a conflict may have nationals of the opposing state(s) on its territory at the outbreak of hostilities. Foreign nation-



als in this situation are defined as 'protected persons' under Article 4 of The Fourth Geneva Convention and are entitled to specific protection, which if applied fully, should include such provisions to ensure their adequate nutritional status.

NON-INTERNATIONAL ARMED CONFLICT Various forms of protection are also available to civilian populations in civil, or non-international armed conflict. Article 3, common to each of the Four Geneva Conventions (usually referred to as 'Common Article 3') provides for the protection of civilians in non-international conflict against violence to life and person (in particular murder of all kinds, mutilation, cruel treatment and torture) against them being taken as hostages and against outrages upon personal dignity, in particular humiliating and degrading treatment.

Additional protection for civilians and their rights is provided by the Second Additional Protocol of 1977, which develops and supplements Common Article 3.

Article 14 of the Additional Protocol II provides, in addition to the various protection of life in Common Article 3, that starvation of civilians as a method of combat is prohibited. It is therefore prohibited to attack, destroy, remove or render

useless, for that purpose, objects indispensable to the survival of the civilian population, such as foodstuffs, agricultural areas for the production of foodstuffs, crops, livestock, drinking water installations and supplies and irrigation works.

Finally, it is important to note that there are strong arguments that the Additional Protocols apply even to States that have not signed them because they have become part of the body of customary international humanitarian law. This also means that in case of non-international conflict, the Additional Protocol II also applies to non-state warring parties such as liberation movements and rebel groups.

The Changing Context

THE CHANGING NATURE OF CONFLICTS Though there is obviously great variation amongst contemporary conflicts, there are also many similar features that have important implications for humanitarian work and those who seek to realize the right to adequate nutrition.

Most contemporary conflicts are internal, often ethnically based. They usually pit government forces and associated militias and paramilitaries against insurgents of various kinds. These insurgents may be motivated by ideology, ethnic identity and grievances or a pursuit of economic gain. There may be several different groups operating at any one time. Contemporary conflicts are particularly lethal for children because they make little distinction between combatants and

civilians. In recent decades, the proportion of war victims who are civilians has leaped dramatically, from 5% to over 90 %.

Most of today's humanitarian crises have grown out of human rights crises. Indeed, as Mary Robinson, UN High Commissioner for Human Rights has often pointed out, many of today's conflicts grow out of human rights abuses. The targeting of civilians is often a deliberate tactic of war entailing horrific levels of violence and brutality, employing any and all means-from systematic rape, to the destruction of crops and the poisoning of wells, to ethnic cleansing and outright genocide. Too often, combatants have abandoned all human standards—traditional values as well as standards defined by international human rights and humanitarian law. Children themselves can be drawn in as fighters, not just the targets of warfare but even the perpetrators of atrocities.

During the 90s, more than 2m children died as a

result of armed conflicts, and more than three times as many have been permanently disabled or seriously injured. Currently, approximately 20m children have been uprooted from their homes, either as refugees or internally displaced.

At any given time, more than 300,000 children under the age of 18 are being used in hostilities as soldiers.

many of today's conflicts grow out of

human rights abuses

The manipulation of aid for their own purposes by warring parties is increasingly common. This has become particularly the case as, for many western governments, humanitarian assistance has become their principal tool of foreign policy amongst countries of peripheral economic and political interest. Though international humanitarian law calls on warring parties to provide safe and unhindered access to populations in need, especially women and children, such access is often denied. Aid agencies are often accused of prolonging conflicts. In addition, humanitarian actors are often criticised for prolonging conflict and sustaining violent status quos by seeking to feed all sides and failing to prevent the diversion, taxation or extortion of humanitarian supplies.

Traditionally, wars were played out on the battle-field between young men in uniform fighting for their countries. Most contemporary conflicts are internal and are, in so many ways, much more complex. The fighters may be government soldiers, insurgent groups, paramilitaries of government supported militia, war-lords, criminal gangs, traditional tribal forces or security forces belonging to economic actors. In some conflicts, men act as soldiers by day and rebels by night. Young children are abducted and—most brutally in Sierra Leone and Northern Uganda—turned from victims to perpetrators overnight. All of these features serve to blur the once clear distinctions between civil-

ians and combatants. Given that humanitarian law and principles are predicated upon the ability to distinguish between military and civilians, many serious dilemmas result.

The vast inconsistency in mobilising resources for war-affected children is one of the most brutal inequalities in the world today. Sierra Leone received less than US\$20 per child in 1999 compared to US\$216 per child in Kosovo. Donors' response is frequently inconsistent, short term linked to strategic interests rather than impartial definitions of need and media driven. Humanitarian agencies are left to respond inconsistently to malnutrition and humanitarian crises.

Humanitarian crises are generated and sustained by a plethora of different actors—many of whom cannot be held accountable for their actions. Government forces and militias, insurgent groups, UN agencies, international and national NGOs, economic actors including transnational companies, neighbouring govern-

ments, intergovernmental organisations all influence the political and economic environment that affects access to food, health care and protection. Though most conflicts today are internal, almost all have a regional context, with flows of small arms, min-

eral resources, refugees and mercenaries across borders. The conflict in the DRC—especially since the resurgence of fighting in late 1998—is perhaps the best example

HUMANITARIAN CRISES AND THE PEACE AND SECURITY AGENDA With the end of the Cold War, the rise in failed states and internal conflicts and the growth of the so-called complex emergencies, the UN and the Security Council increasingly found itself addressing threats to peace and security that were also humanitarian crises. Through the 90s, the 'human security agenda', led by Canada and countries such as Norway gained influence at the global level. As outlined in the Lysøen Declaration signed by Norway and Canada in May 1998, the human security agenda addresses landmines, the International Criminal Court, human rights, international humanitarian law, women and children in armed conflict, small arms proliferation, child soldiers and child labour.

The human security agenda saw some major successes through the 90s. The Mine Ban treaty, the ICC statute, the Optional Protocol to the Convention on the Rights of the Child on participation in conflict marked significant progress in the creation of new legal standards. In addition, the Security Council made major steps forward in acknowledging the human dimensions of its mandate in passing resolutions on the protection of civilians in conflict (Resolutions 1265 and 1296); children and armed conflict (1261, 1314, 1379), women, peace and security (1325) and HIV/AIDS and

peacekeeping (1308).

The right to nutrition in conflict situations is violated

in many countries and in many ways

The Council has been much slower than it ought to in ensuring the integration of the principles and commitments made in these resolutions into its work on specific country situations. Humanitarian agencies need to recognise the opportunities raised by these developments to sharpen their political advocacy and ensure that the humanitarian dimensions—or the human security agenda—of situations on the SC agenda—are more consistently developed.

DEVELOPMENTS IN INTERNATIONAL HUMAN RIGHTS LAW AND MECHANISMS International human rights law applies to States and their obligations to their citizens. Human rights mechanisms and NGO watchdogs such as Amnesty International traditionally eschewed addressing the activities of rebel groups or economic actors even where their actions had a major impact on civilians. In addition, throughout the Cold War, the emphasis on respect for state sovereignty as defined in

the UN Charter, meant that the UN system was reluctant to take any action that might be perceived as interfering in the domestic affairs of the nation state.

Human rights standards remained of little

relevance or comfort to victims of internal conflicts for many years. Even international humanitarian law provided little protection for victims of internal as opposed to international conflicts. Though the Rwandan genocide of 1994 and subsequently events in Kosovo, East Timor, Afghanistan, Bosnia and other civil wars and humanitarian crises have sensitised human rights activists and human rights mechanisms to the links between state sovereignty, human rights and humanitarian action.

In recent years, the Office of the High Commissioner for Human Rights has become much more operational and now has a presence—independent or as part of a broader UN presence—in many of today's conflicts: Sierra Leone, Colombia, DRC, Burundi, Afghanistan to name but a few.

Challenges for Humanitarian Agencies

CHALLENGES The right to nutrition in conflict situations is violated in many countries and in many ways. According to the 2002 UN Consolidated Appeals, there are millions of people who suffer from both acute and chronic malnutrition as a result of conflicts and the ways in which they are being waged.

Many of the reasons for the continued widespread prevalence of malnutrition in conflicts are programmatic and operational. These include inadequate or inconsistent funding, denial of access of diversion by warring parties, forced displacement, and insecurity for humanitarian staff. Lack of professionalism may be a cause in some cases. This section seeks to address



some of the changes in the way in which humanitarian action is carried out and will seek to identify some of the ethical dilemmas resulting.

HUMANITARIAN DILEMMAS Changing patterns of conflict, as described above, have created some serious challenges and opportunities, for humanitarian agencies. Some of these have already been implied or referred to but it is important to spell them out in some detail.

Given that most humanitarian crises today are also crises of human rights, the obligations of humanitarian agencies to address protection, as a fundamental and integral aspect of humanitarian action, has to be more systematically addressed. This is perhaps the most important challenge to be addressed. Humanitarian workers are often the first to witness or know of human rights violations. However, understanding of and commitment to the human rights dimensions of humanitarian work remains inconsistent and weak. There are

also valid concerns that to advocate for protection issues may reduce access to populations in need and endanger the wellbeing of staff and programmes.

Further, those who control access to civilians may well be war criminals. Humanitarian agencies thus have to risk legitimizing these military leaders because of their need to engage with them. Yet, how should humanitarian agencies engage with non-state actors devoid of any political structure or ideology (non-state actors cannot sign and ratify international treaties), and if so under what conditions?

How to hold non-state entities accountable when their command and control structures are often weak? In the case of UN agencies, how to reach those in need in areas outside of Government controls without contravening sovereignty? Humanitarian actors are accused of prolonging conflict in different ways: through uncontrolled diversion of humanitarian supplies, through taxation and extortion, and through fundability of resources.

Except in extreme cases (e.g. Goma camps in 1994), few would argue that aid should be withdrawn from those in lifesaving need but how can humanitarian agencies ensure that they do not become part of the problem as many have so often alleged^{3,4,5}.

International humanitarian law and humanitarian principles are predicated upon a clear distinction between civilians and the military. How does one keep food from an irregular militia member where wife, mother, sister, daughter is a beneficiary of food aid? How does one ensure that 'selected civilian beneficiaries' are just that?

CHANGING PARADIGMS OF HUMANITARIAN ACTION The most basic obligations of humanitarian actors in working with those affected by humanitarian crises is to save lives and to alleviate suffering, while preserving the dignity of all those affected. Humanitarian action therefore has to be concerned with protecting people from violence and abuse, and protecting or restoring livelihoods that have been threatened or destroyed by disaster or conflict. Humanitarian action is born out of and guided by human rights, humanitarian law and humanitarian principles including a sense of compassion and solidarity with those affected by disaster.

Humanitarian action traditionally focused on service delivery: health, water, nutrition, food aid and shelter. Humanitarians eschewed any mention of human rights though their beneficiaries were some of the most vulnerable populations imaginable. Reasons for this included a belief that human rights were somehow 'political' and controversial—while humanitarianism was safe; a concern that advocacy on human rights issues would compromise access to populations in need

Humanitarian action is born out of and

guided by human rights

and a belief that attention to human rights would somehow compromise

neutrality. As Slim argues, 'Throughout the second part of the 20th Century, the greater part of humanitarian activity and ideology has remained firmly in a philanthropic mould'6.

In recent years, in response to the changing nature and increased complexity of humanitarian crises, humanitarian action has expanded its scope and the range of its actions. This includes the development of programmes such as family reunification, psychosocial care of children and education—all critical elements of humanitarian work. But, more importantly, humanitarian action has slowly begun to engage with the need to protect as well as assist victims of conflict.

The move towards a rights-based approach to humanitarian action has been a slow and painful one for most humanitarian agencies. Few really understand the meaning of protection in a humanitarian setting and even the most basic definition of protection competencies is not yet achieved. Training on human rights, humanitarian law and associated standards such as the Guiding Principles on Internal Displacement is inconsistent. Experience from a diverse range of humanitarian crises suggests that few humanitarian agencies engage on what they still perceive to be controversial or sensitive issues.

In addition to the slow progress made in addressing human rights in the context of humanitarian action, humanitarian workers have also recognized the need to root their work within an ethical framework. Such a framework is made up of what are known as humanitarian principles. Though there is no one definitive list of humanitarian principles, they are widely seen to include: the humanitarian imperative, neutrality, impartiality, independence, transparency, accountability, do no harm, protect from future vulnerabilities, and respect local custom

Various attempts have been made to codify and enforce these principles. These include the IFRC/ NGO Code of Conduct for NGOs working in disaster relief that has been endorsed by most of the major NGOs to initiatives at country level to create a consensus amongst humanitarian actors themselves such as occurred in Sierra Leone and Liberia. Other initiatives have also sought to establish agreements with warring parties. The Operation Lifeline Sudan Ground Rules, for example, adopted a joint commitment between the rebel groups and the humanitarian actors towards the Convention on the Rights of the Child and the Geneva Conventions as well as a declaration of humanitarian principles. The Ground Rules sought to define not only the legal and moral standards pertaining to both parties but clear accountabilities—do's and don'ts of all sides so that all concerned knew what they could and could not do. Though only partially successful, the Ground Rules did represent an early attempt to deal with the concept of claim holders and duty bearers in such situations.

Human Rights Actors in Conflict Situations

CLAIM HOLDERS AND DUTY BEARERS Human rights represent relationships between a subject with valid claims (claim-holder) and objects with correlative duties and obligations (duty-bearer). International human rights law only recognises the obligations of the state. The CRC is an exception, because parents or child caretaker are also recognized as duty-bearers. There is a need to extend the claim-duty relationship to increase additional subjects and objects at sub-national and community levels. In armed conflict this would include all key non-state actors. As a matter of fact, many of the 'principles of humanitarian actions' reflect exactly such relationships.

It is interesting to note that both the ICESCR and the ICCDR state in their preamble:

Realizing that the individual, having duties to other individuals and to the community to which he belongs, is under a responsibility to strive for the promotion and observance of the rights recognized in the present covenant

This statement can be understood as recognition of other duty-bearers than the state.

In a Human Rights Approach to Programming (HRAP), such an approach requires the identification of all key duty bearers in relation to each specific human right, including the right to nutrition. Such an analysis is called role or pattern analysis.

In such an analysis, it is important to recognize that very often the individuals may be a claim holder and a duty bearer at the same time, but in relation to different rights. For example, parents are the prime duty-bearers in realizing the rights to nutrition for their children. However, this right might be violated because some of the crucial rights of the parents are violated.

The parents may have a right to emergency food and the area commander has the correlative duty to ensure this, but violates this right. There is a web or a pattern of human rights relationships. An example of these relationships from the famine in Southern Sudan in 1998 is summarised in Table 1.

DEFINITIONS OF ACCOUNTABILITIES As mentioned above human rights express relationships between a subject with a valid claim and objects with correlative duties and obligations. These duties or obligations specify what the objects are supposed to do; in other words for which the objects are to be held accountable. Human rights are, therefore, closely related to accountability. In order to hold someone accountable three conditions must be met. First, the person must accept that she/he has a responsibility, i.e that she/he should act. This includes awareness and motivation. Second, the person must have the authority to act, i.e. she/he may act. It must be legitimate for she/he to act. Third, the person must control resources, i.e. that she/he can act.

Responsibility, authority and resources are necessary components of capacity. Very often lack of action where an objects duties are not met or carried out, is due to a lack of capacity, rather than because of negligence or ill-will. In a HRAP it is therefore important to identify the specific gaps in the capacity of all duty bearers. Programmes can then be designed to close the specific gaps between the duty and capacity of specific duty bearers.

Where a duty bearer is intentionally violating rights, different types of programme interventions are required as lack of capacity is not the problem.

Case Studies

CASE STUDY 1. THE 1998 FAMINE IN SUDAN

As is well known, famines are rarely, if ever, freak and unpredictable events. They are almost universally manufactured, either intentionally or out of negligence, because governments and other governing authorities want them to happen or do not care if they happen because they have other political, economic or military priorities. The famine in Sudan in 1998 was no exception.

As the famine was developing in the Bahr El Ghazal (BEG) region at the beginning of the year the government of Sudan placed a complete, and then maintained a partial, flight ban over the worst affected areas for six weeks. This effectively denied aid agencies access to populations in need at one of the most critical points, and right at the moment when assistance was required to prevent the full scale catastrophe that was to develop shortly after. The flight ban was lifted in mid-March and agencies were able to deliver large amounts of food and health services to the worst affected areas. After some logistical constraints, the operation was at full scale by June, delivering enough food and health services to meet assessed needs. However, despite the amount of food and health ser-



Table 1 Claim-Duty Relationships during the Bahr El Ghazal Operation (1988)

	Claim Holder							
Duty Bearer	Vulnerable People	GOL Leaders	Local Chiefs	SPLA	SPLM SRRA	Relief Worker	Sudan Government	
Vulnerable People		Distribution of assistance						
GOL Leaders	Distribution of assistance among the household		Inform about distribution					
Local Chiefs				Collect food to the army (tax)				
SPLA	No recruit- ment of child soldiers		Ensure access and prevent theft			Provide security		
SPLM/SRRA	Provide food to the IDPs							
Relief Worker	Support ac- cording to needs			Neutrality and impartial- ity			Neutrality and impartiality	
Sudan Government	Ensure basic services					Ensure access by air		

In this table vulnerable people are shown to have a right against SPLA not to recruit children for the army. SPLA is the duty-bearer. On the other hand SPLA has a right against Relief Workers that they perform their work in a neutral and impartial manner. The Relief Workers are the duty-bearers. The table is far from complete and only shows some examples.

vices that were being provided malnutrition rates were not declining.

There was much debate as to why malnutrition rates were not declining, or declining fast enough, and it was agreed to conduct a joint assessment by UNICEF and WFP, NGOs and the non-state entity that controlled the BEG region, the Sudan Peoples Liberation Movement/Army (SPLM/A) and its relief organization, the Sudan Relief and Rehabilitation Association (SRRA), an NGO registered in Kenya. This strategy was controversial because the SPLA was taking the food for its soldiers and that therefore there was no way that the SPLM/A and SRRA could objectively assess the situation. It was decided to conduct the assessment jointly because even if it were determined that the SPLA was the cause of the problem, the SPLM/A and SRRA were the only groups that could solve it.

The main findings of the joint assessment were:

- the SPLA was taking relief food and other supplies, but this was not the major contributing factor to the problem
- there may have been some under assessment of overall needs and total population, but his was not the major contributing factor to the problem, and

following distribution to targeted recipients (assessed beneficiaries) there was a re-collection of food by local political leaders (chiefs, traders, military commanders, SPLM and SRRA officials all exercising personal not organizational political authority) and redistribution based on the local social socio-political hierarchy, rather than on the basis of assessed needs, and this was major cause of the problem.

The SPLM/A and SRRA resolved to take immediate and urgent measures to rectify the problem and correct the distribution of food and other relief supplies. By the last quarter of the year, although malnutrition and mortality rates were substantially declining, it was clear that there was still a major problem and that the SPLM/A and SRRA were either unwilling or unable to address the problem. The relief operation was seeking to meet the first humanitarian principle of the humanitarian imperative. However, with the well-documented continued diversion of food and other relief supplies, it was very difficult for OLS to maintain that its operations in BEG were neutral, impartial or transparent and it was very difficult to be accountable to anyone—beneficiaries or donors—for the humani-

tarian assistance. Neutrality, impartiality, transparency and accountability are all vital humanitarian principles. UNICEF, as the lead agency in OLS but in close consultation with sister agency in OLS but in close consultation with sister agency WFP, considered two options for resolving the problem, both of which created ethical dilemmas. The first was to suspend the delivery of food to BEG, and the second was to suspend non-life saving capacity building support to the SRRA.

Ethical Dilemmas: Both of the above solutions created or risked the creation of serious ethical dilemmas. With the first, suspending operations to restore neutrality and accountability would have meant violating the humanitarian imperative. With the second, there was the risk that the SPLM/SRRA may have retaliated by expelling OLS from its areas, denying access and preventing OLS from seeking to meet the humanitarian imperative.

Resolution: The ethical dilemmas were never fully resolved. The OLS management team rejected the first option on the basis that seeking to meet the humanitarian imperative was the primary reason for OLS' existence and that it was preferable to accept some partial subjugation of the other humanitarian principles in order to maintain the supremacy of the humanitarian imperative. However, in certain circumstances deliveries of food to some locations were cancelled on the basis that the level of diversion was so high that there was no food at all reaching targeted beneficiaries and therefore continued supply was doing nothing to meet the humanitarian imperative in any event.

The second option was put by the OLS management team to the OSL consortium of NGOs at a meeting in mid-November and a vote was taken. Of the approximately 30 NGOs at the meeting, only one voted in favour of suspending building support and risking loosing access. So again, seeking to meet the humanitarian imperative was considered to be of overriding importance.

CASE STUDY 2: REGROUPMENT CAMPS

Some humanitarian crises create situations where civilians are forced-against their will and against international law-into situations where they should not be but where they will suffer and possibly die. A dilemma exists in fulfilling the right to nutrition but, by doing so, legitimizing the forced displacement. This is happening in Angola currently since late 2001, the Government Armed Forces (FAA) have been carrying out major counter insurgency operations in Eastern/ Central Angola. The displacement is often 'forced displacement. The objective of the strategy is to cut off logistical support to UNITA as well as further weaken the movement by limiting their contact with local populations. OCHA estimates that over 50% of displacement currently is caused by the Government. The impact on civilian population has been devastating with an estimated 30,000 people being displaced in

December and early January alone. Government services have not been established at any location to adequately cope with the consequences of the counter insurgency. In such situations, humanitarian agencies are faced with a need to feed those displaced without endorsing or condoning the actions of the government.

In 1998 the government of Burundi adopted a policy of forced relocation or regroupment of civilians to restricted camps. The Government claimed that it was entitled to take this action for the security of the civilians and that it was legal under the Geneva Conventions. However, most observers and legal experts were of the opinion that the action was illegal under International Humanitarian Law (IHL) and was a violation of a number of human rights. Despite international protests the Government proceeded with its policy and called on the UN and NGOs to provide food, healthcare and other humanitarian services to the regroupment camps.

Ethical Dilemmas: The agencies were faced with the dilemma of, on the one hand, fulfilling their commitment to the humanitarian imperative and meeting the humanitarian needs of the civilians in the camps, but on the other hand, assisting and legitimizing the Government in an illegal action that violated the rights of many of its citizens.

Resolution: The UN system, and most NGOs that were facing the same dilemma, resolved it by applying maximum pressure to the Government of Burundi through diplomatic means to change its policies while at the same time providing a minimum amount of humanitarian assistance to maintain an adequate nutritional status of the populations in the regroupment camps. All agencies involved agreed not to provide any form of assistance that could help sustain the camps on a long-term basis. This sometimes meant that the assistance that was provided became considerably more expensive (for example water was trucked in rather than provided by digging bore holes which would have been cheaper but permanent), but, this was considered an acceptable cost to pay in order to find a balance between meting the humanitarian imperative and not supporting the illegal actin of regroupment.

Conclusions and Recommendations

Recognition of the right to nutrition in situations of conflict has increased at global and field level in recent years. The ongoing UN reform, launched by the Secretary General, has helped to advance the thinking amongst UN agencies to develop and use a human rights approach to programming. Humanitarian assistance and protection of human rights are more closely integrated than before, although inconsistently and frequently with little real impact.

The Humanitarian Charter of the Sphere Project states:



we reaffirm our believe in the humanitarian imperative and its primary. By this we mean the belief that all possible steps should be taken to prevent or alleviate human suffering arising out of conflict or calamity, and that civilians so affected have a right to protection and assistance. It is on the basis of this belief, reflected in international humanitarian law and based on the principle of humanity, that we offer our services as humanitarian agencies.

The conclusion from this paper can be summarized as follows:

- The changing nature of armed conflicts has limited the applicability of International Humanitarian Law (IHL). The difference between combatants and civilians is frequently no longer clear
- This, however, does not mean that IHL no longer is useful in armed conflicts. The principles and standards enshrined in the IHL remain vital to the protection of civilians and require intensified promotion and dissemination
- Human Rights Law (HRL) is not so often derogable in conflicts as many assume. The ICESCR and CRC, for example, are not derogable at all
- There is a need and a possibility to extend HRL to define duty bearers other than the states parties.

- The Preamble of the UDHR and the two Covenants recognize this possibility. This would mean that duty-bearers should be identified at all levels of society with specific accountabilities
- In summary, International Humanitarian Law and an extended Human Rights Law should be used in conflict situations.

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Doing the Right Thing: Addressing Humanitarian Dilemmas

Panel Discussion

Chair: Professor MS Swaminathan, SCN's Distinguished Nutrition Advocate

Principles of humanitarian action were first developed by the ICRC to guide humanitarian action in conflict situations. Since the early 90s, there have been an increasing number of agencies working in on-going conflicts, which has led to a renewed emphasis on humanitarian principles. In particular, this includes the adoption of the "Code of Conduct for the International Red Cross and Red Crescent Movement and NGOs in Disaster Relief" (see box, p 48).

Minimum standards for disaster response were first developed in 1998. These are aimed at improving the quality and accountability of humanitarian response. Accountability, in terms of compliance with agreed minimum standards, is a means of achieving impartiality. Minimum standards are given in the Sphere Project Handbook, which also incorporates the Humanitarian Charter. The Humanitarian Charter re-inforces the core principles of humanity and impartiality, as



well as others set out in the Code of Conduct. It also contains aspects of humanitarian, human rights and refugee law.

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On the ground, the principles of humanitarian action (and aspects of Humanitarian Law) have been incorporated into agreements between agencies and warring parties. These agreements have taken the form of local codes of conduct or ground rules. They usually outline the respective responsibilities of different actors in achieving a

principled, humanitarian response, including for example, ensuring the security of aid workers and obtaining access to populations in need.

International aid agencies and workers are faced with the challenge of applying principled approaches during emergencies, but what is the appropriate response when principles and standards cannot be met? How do you "do the right thing"?

The Principles of Conduct for the International Red Cross and Red Crescent Movement and NGOs in Disaster Response Programmes

In order to maintain high standards of independence, effectiveness and impact in disaster response, eight* of the world's largest disaster-response agencies came together in 1994, to agree on the following:

- The humanitarian imperative comes first.
- Aid is given regardless of the race, creed or nationality of the recipients and without adverse distinction of any kind. Aid priorities
 are calculated on the basis of need alone.
- Aid will not be used to further a particular political or religious standpoint.
- We shall endeavour not to act as instruments of government foreign policy.
- We shall respect culture and custom.
- We shall attempt to build disaster response on local capacities.
- Ways shall be found to involve programme beneficiaries in the management of relief aid.
- Relief aid must strive to reduce future vulnerabilities to disaster as well as meeting basic needs.
- We hold ourselves accountable to both those we seek to assist and those from whom we accept resources.
- In our information, publicity and advertising activities, we shall recognize disaster victims as dignified human beings, not objects of pity.

*Caritas Internationalis, Catholic Relief Services, the International Federation of Red Cross and Red Crescent Societies, International Save the Children Alliance, Lutheran World Federation, Oxfam, and the World Council of Churches

The full text of the Code of Conduct can be viewed on the IFRC website http://www.ifrc.org/publicat/conduct/index.asp

Why are we not meeting standards?

Manuel da Silva, WFP

In my experience at WFP, there are four reasons why the international community is not meeting standards. First, denial of access to vulnerable or affected populations is becoming more frequent. In the past when there were fewer emergencies, it was easier to separate the political linkages from the emergency. Today, the political linkages are very much embedded within the emergency, increasing the need for negotiated access to affected populations. For example, in Angola in 1996, the UN faced a dilemma: agree to have 50% of emergency aid distributed in UNITA areas, where needs were assessed to be low, or not have access to government areas. If the UN refused to cooperate with UNITA, 25,000 people would starve, of which 15,000 were women and children. In cases when life is threatened, agencies need to adjust to the context. However, flexibility in fulfilling standards, or in general principles, should only be considered in clear life threatening situations. In these situations, the medium term consequences need to be balance against the short term benefits.

Second, there is a lack of agency presence on the ground. Standards, knowledge and research for emergencies exist. What is lacking is implementation. In the earlier stages of the Ethiopian crisis in 2000, with the exception of MSF and ICRC, there were no agencies on the ground. This stems mostly from attention being diverted from implementation to advocacy, so much so, that we are not doing as much as we should do.

Third, issues of security are hampering aid workers' ability to meet minimum standards during emergencies. WFP has a higher relative percentage of staff killed than Americans killed in Viet Nam. It is rare to

come across someone at WFP who has not lost a friend or colleague at some point in his or her career. Security conditions reduce the presence of humanitarian agencies on the ground more than in the past.

Finally, resources are insufficient to respond to emergencies today. Although, there has been an increase in resources, we need to compare that increase to the number of emergencies over the last five years. WFP had many more resources in Sudan in 1999 than available today. In West Africa, specifically in Guinea, Liberia and Sierra Leone, only 17% of required resources have been raised for this year. This means that by June there will be no food in any of the refugee camps in this region.

Building local capacity: does it comprise the humanitarian principles of neutrality, impartiality and independence?

Susanne Jaspars, NutritionWorks

Principles are particularly relevant in relation to food distribution in conflict, because food distribution has been shown to be the intervention that is most subject to abuse. Further, abuse of food distribution may result in the exclusion of the most vulnerable groups. War strategies are often designed to deny access to food to people perceived to support the opposition, and they may be excluded from food distribution through denial of access, attack, manipulation of assessments, under-registration etc. Food may also be diverted, taxed, or stolen to benefit the army or militia, local authorities or powerful groups or individuals. At the same time, in financial terms, food assistance



forms the largest component of humanitarian assistance.

In the Code of Conduct for the International Red Cross and Red Crescent Movement and NGOs in Disaster Relief, it is stated that:

- agencies will attempt to build disaster response on local capacities, and
- ways shall be found to involve programme beneficiaries in the management of relief aid.

In practice, capacity building can mean a variety of things, ranging from education and training, to supporting local coping strategies. In food distribution, agencies sometimes try to build on local capacity by distributing food through local authorities or traditional elders, local NGOs or community based relief committees.

Working with local institutions, however, poses serious risk of compromising the core principles of neutrality and impartiality for several reasons. Each institution will have its own particular agenda, ethnicity and political affiliation which position civilians as well as the military, local institutions may be under pressure to favour the more powerful, and local institutions may have different perceptions of vulnerability and entitlements.

In a workshop in Nairobi in December 2001, agencies agreed that in situations of acute crisis, capacity building was usually the first principle to be abandoned in the interest of the humanity and impartiality.

To achieve an impartial response, it is necessary to take active measure to reach the most vulnerable. This includes:

- objectively assessing the severity of crisis and, therefore, the need to intervene
- analysing the risk of abuse
- identify distribution methods that effectively reach those most in need
- work with accountable local institutions or distribute directly to beneficiaries
- independent monitoring, and
- minimize taxation and diversion through specific strategies.

Distribution methods include, for example, distribution to elders, to local authorities or NGOs, to relief committees, or directly to households or to individuals. There are a number of agency practices to ensure a neutral and impartial response. For example, with increasing severity of exploitation and abuse, the following may be used:

- agreements with local institutions to adhere to principles
- registration, ration cards, and monitoring
- distribution to small units, direct to malnourished
- less desirable foods, frequent distributions in small quantities, and
- soup kitchens.

The key points to remember when designing a principled food distribution, or any humanitarian intervention, are that the humanitarian imperative, and the victims' interests, should always come first. Some approaches, or principles, may compromise the application of others, and in acute crises, capacity building as part of food distribution may have to be abandoned in the interests of humanity and impartiality. Finally, principles can promote consistency and predictability in humanitarian action. If we, as the humanitarian community, can agree on an overall ethical framework to guide our actions, we may have more power to bring about an adequate and effective response to humanitarian crises.

Can Aid 'Do No Harm'? Lessons learned from experience

Wolfgang Heinrich, Church Development Services (Germany)

In 1994, a group of international agencies were commissioned to conduct the Local Capacities for Peace Project (LCPP). Different types of aid agencies and relief and development projects were reviewed in conflict settings ranging from outright organized warfare to situations of sporadic inter-communal violence. The goal was to discover and define certain commonalties and dilemmas in delivering humanitarian assistance and use this information to develop a tool that assists in future planning. There were six main lessons learned from this process that demonstrate clear challenges to many principles and standards agreed upon today.

Lesson #1

When international assistance is given in the context of a violent conflict, it becomes part of the conflict. Although assistance agencies intend to be impartial in relation to who wins and loses in a conflict, the actual impact of their activities is never neutral regarding whether conflict worsens or abates. In conflict settings, relief or development projects can (and often do) reinforce, exacerbate and prolong conflict. However, they can also help to reduce inter-group divisions and support people's capacities to find peaceful options for solving problems.

Lesson #2

Situations of violent conflict are characterized by two types of factors. First, conflicts are always characterized by inter-group divisions and tensions. These factors are commonly termed "dividers" or "sources of tensions". On the other hand, the context of violent conflict is also characterized by a number of factors that link and connect people even though they are at war. These are called "connectors" and "local capacities for peace" (LCP).

Lesson #3

When relief or development assistance is brought into the context of violent conflict, it inevitably affects those factors that exist in that context that divide people as well as those that connect them. Assistance both feeds into and worsens intergroup tensions and divisions, or it reduces them. The way in which assistance is provided, it either ignores or bypasses existing connectors and peace capacities and, thus, weakens and undermines them or it supports, and thus reinforces, them.

Lesson #4

The relief and development workers involved in the LCP found that the resources transferred by assistance projects into areas of violent conflict affect the context in five predictable ways:

- resources are often stolen by warriors and used for their purposes to support armies to buy weapons
- resources have market effects through their impacts on wages, prices and profits; through these, assistance either reinforces incentives for continued violence or incentives for peace
- assistance projects have distributional impacts in that it targets some groups and not others; when a project is directed toward one of the subgroups in conflict, it can exacerbate inter-group jealousies and tensions
- resources brought in through assistance projects can substitute for local resources that, without the assistance project, would have been required to support civilian life; this, in turn, can free up local resources for the pursuit of conflict, and
- assistance projects can legitimize some people and some activities and delegitimizes other people and other activities; insofar as their effects legitimize warriors and their actions, it can reinforce violent conflict.

Lesson #5

LCPP also found that how assistance is provided carries "messages". How aid is given, how staff interacts with local people, how protection is arranged, and the like, all convey messages that either reinforce the modes of violence, or reduce them. Seven patterns of "implicit ethical messages" were identified, including: hiring armed guards to protect goods or staff, international agencies' refusal to cooperate with each other sends the implicit message that others do not need to cooperate with them, those who control resources may use them without accountability to others who might need them more, evacuation of expatriate staff and high value technical equipment over local staff sends the implicit ethical message that different lives have different value, and use of gruesome pictures for fundraising demonises one side of the war and makes innocent the other.

Lesson #6

The details of an assistance programme are what deter-

mine its impacts on the context. Details that can feed into divisions and tensions or support connectors and LCPs include: the timing of an assistance intervention (when and for how long), the location; the staffing (both expatriate and local), the selection of partners and of "target groups", and the decisions about what and how many external resources to supply. Finally, and most important of all, is in the how of programmes (what kind of distribution system is chosen, how the terms of access to goods are defined and enforced, etc.) that most direct impacts of assistance projects are felt.

Are humanitarian funds only for life-saving initiatives?

Alain Mourey, ICRC

Can humanitarian funds be transferable from lifesaving initiatives to programmes that support livelihoods? The dilemma can be looked at from various angles and raises many questions, including what are the reasons for the dilemma and what is the real dilemma?

First, all donors are not alike in their allocation of funds. Any generalization is dangerous in this respect. The attribution of funds to live-saving activities rather than the support of livelihoods may be related to quite different issues, such as:

- the specialization of funding towards specific types of projects
- the fragmentation and specialization of the nutrition intervention, meaning that funds are requested accordingly, further influencing the specialization of funding
- the prioritization of live-saving activities over the support of livelihoods
- a preference for activities that make fund raising easy, i.e. those that capture the media's attention. Unfortunately, those activities are mostly oriented to direct live-saving activities (this preference stands true for both donors and humanitarian agencies)
- a preference for activities that can be easily justified, and
- the priority given to a political agenda rather than to humanitarian imperatives.

Such reasons are probably more contextual than conceptual and, as such, do not represent a real difficulty since there is room to maneuver. What is more worrying, though, is that the question of transferability. This implies that funds that can be qualified as humanitarian are only those supporting live-saving activities, whilst those supporting livelihoods are not considered as humanitarian. This represents either a conceptual problem over the meaning of what is humanitarian and/or a manipulation of this meaning. There, perhaps, lies the actual problem.



It is a fact that humanitarian interventions aim to both prevent and alleviate the suffering of victims. As for nutrition, preventive activities are those that support and protect livelihoods, meaning victims are allowed to have access to their own food. Along this line, it is also quite recognized that humanitarian interventions should aim to get the victims off of assistance through supporting, restoring and protecting livelihoods. Further, when humanitarian live-saving activities are necessary, they testify to a failure to avert crisis, which represents a failure to respect Human Rights and International Humanitarian Law.

Under the threat of famine, what people fear first is destitution related to the loss of livelihoods, long before fearing starvation. Hence, if humanitarian activities are restricted to what is live-saving only, this would kill a true, comprehensive and coherent approach to prevent, mitigate and solve nutrition crises. The challenge remains to promote a coherent approach in donor and humanitarian agencies.

However, up to which point is there an actual dilemma between life-saving activities and supporting livelihoods? Further, at what point is supporting livelihoods considered less humanitarian than live-saving initiatives? Experience has shown that there are indeed many donors requesting and funding programmes that support livelihoods, besides just livesaving activities. Donors believe that this is the only way for humanitarian intervention to make sense. The funds may come with different titles and from different budgets, but money is available for both types of programmes; hence, transferability is not an issue.

If it is still felt that the intervention to properly tackle nutrition crises is confronted with an actual or intended dilemma because of the restriction on humanitarian funds to only live-saving activities, it is then urgent:

- to demonstrate through hard data that there is an actual problem
- to work with the main donors to discuss the issue and find solutions, and
- to stop giving wrong messages about nutrition interventions by bringing some coherence to activities so that it does not only focus on the measurement of nutritional status and on supplementary and therapeutic feeding. But encompasses as well, through any appropriate measure, the protection, rehabilitation and development of livelihoods. This depends on the access to food, as well as, the capacity to meet most of the other basic needs allowing living in dignity.

Discussion

Tom Marchione (USAID): USAID is among the largest donors of assistance in cash and in kind to complex emergencies largely through its Office of Foreign Disaster Assistance and Office of Food for Peace. Last

year alone USAID provided food assistance to nearly 30m people, mostly women and children. The greatest proportion of those assisted was currently or recently suffering from complex emergencies. Our official humanitarian assistance goal, toward which we track our performance, includes saving lives and reducing suffering, while protecting children and other vulnerable groups. We are also increasingly mindful of the value of livelihood support. These goals are taken seriously and we track our performance against them using mortality rates and young child malnutrition (wasting), among other indicators. Our approach towards achieving these goals requires us to respond quickly and to work in cooperation with UN specialized agencies, NGOs and other donors in mitigating the impact of conflicts and restoring development conditions as fast as possible. Wherever we can, we seek to promote peace and good governance in the process of providing our humanitarian assistance in efforts to prevent future conflicts.

USAID adheres to principles of neutrality in assisting all affected civilians. USAID has a policy that actually says 'a hungry child knows no politics'. There is also a policy of doing no harm in our provision of food and other assistance and of keeping humanitarian workers out of harms way. As has been pointed out by the panel, it is easy to state these principles, but in reality it is very difficult to apply them.

On the question of neutrality or impartiality, to the US this refers to beneficiaries or affected civilian populations based on the assessment of need. We do not discriminate against one group of needy people in favour of another group in our provision of assistance. This does not mean in any sense that the US will not pursue its foreign policy goals with regards to parties in a conflict, such as the RUF in Sierra Leone or the Taliban. We continue to provide food and other assistance to meet needs in places like Liberia and N Korea. Nevertheless, we have no illusions about the nature of these governments and are in no way neutral toward them

With regard to the question of 'doing no harm', especially the issue of prolonging conflicts, we have no good evidence that food aid does actually prolong conflicts. We doubt that withholding food from hungry and innocent civilians will induce warlords to make peace and allow free flow of humanitarian assistance. We oppose diversions to combatants and do everything we can to prevent it from happening.

On the question of risks to NGOs, we are attempting to get NGOs access to populations in need of nutrition programs, but the US does not consciously put NGOs in places that would be too risky. In fact, we pay to train NGOs in matters of personal security. Still NGO and WFP personnel make heroic efforts to gain access to protect the nutrition of affected groups in conflict areas, putting themselves at risk.

Urban Jonsson (UNICEF): We seem to easily treat different aspects of law, rights and morality without being clear about what is allowed and what is permissible within each of these entities. For example, we talk about human rights and sometimes equate that with human rights law, which is not the same. Although they are related, we talk about international humanitarian law, the law of war, which is rather specific to the Geneva Conventions, and then we have this enormous grey zone of principles for humanitarian action, which in my view, has been created because of the limitations in international humanitarian law.

Given the complexities of conflicts today, sometimes we come up with ethical dilemmas that are more part of philosophy and we begin to have rules for doing no harm. I do not agree with that. Ethical dilemmas almost always mean that at least two types of impacts occur, one good one and one bad. That is the dilemma. So I will have to accept to do some harm if I think the lesser of the evils is preferred.

For example, in Burundi UNICEF had to decide what type of water program it would pay for, but such that President Buyoya's government would not be legitimized by our actions. So we established some very temporary bore holes that could not be used for the long term. Of course it was immediately used by Boyoya. However, to put in bore holes was the lesser of the evil. Although, we did some harm we also did some good.

So my point is when we talk about ethics and morality there are certain rules. When we talk about human rights law and international humanitarian law there are other rules. They are related, but not the same

Susanne Japsars: Concerning the increasing proliferation of principles, I completely agree with Urban Jonsson. We are adding on more and more principles and moving further away from the original principles that were developed by ICRC. Some principles given in the Code of Conduct may be contradictory to the core principles of humanity, impartiality and neutrality and cannot always be applied at the same time. Therefore, it is a matter of defining what the various principles mean and how to manage them. The principles of humanity and impartiality are generally acknowledged to be the overriding principles.

There are problems with some aspects of the do no harm approach, where the focus is very much on how aid can fuel conflict. It is possible to prevent harm completely, but we can try to minimize it through various strategies. Instead, let us shift the focus on doing good, rather than doing no harm.

Wolfgang Heinrich: The title, 'do no harm' was taken from the Hippocratic Oath. The title was suggested to the LCPP's working team by an aid practitioner working in Goma in 1995-96. The argument was that in the medical profession the Hippocratic Oath of doing no harm is the vision. Every surgeon knows that he has

to inflict harm and sometimes has to inflict substantial harm in order to do good. But in spite of that, the medical profession has continuously struggled to minimize harm and continuously struggled to improve the quality of their work.

The argument of the aid worker was that the "do no harm" project addresses the fact that many of the aid practitioners working in situations of violent conflict are continuously haunted by the experience that the projects they are in charge of have inadvertent negative side effects. They are being criticized for this, but are hardly ever given substantial support in how to deal with these situations.

We are trying to keep the vision, knowing that we must continuously face dilemmas and deal with situations where there are no magic bullets, no blueprints, nor easy fixes.

Question from the audience: Wouldn't it be better to use our understanding of livelihoods to make decisions on the type of emergency response we implement, knowing that while they may not be absolutely ideal in terms of their composition, they will perhaps in the long run enable those communities to be a bit more secure?

Manuel da Silva: In the case of WFP, there is a difference between what we do today and what we did ten years ago. Ten years ago, WFP was mainly receiving food in kind. This has changed and today about 50% of our resources are still in kind. Actually, WFP is purchasing food in Africa. More than \$45m of food last year was purchased locally in Africa. But this does not mean we can always use the right food at the right time. There are issues of priorities and timing.

Abraham Besrat (UNU): Susanne Jaspars mentioned that capacity building approaches compromise principles of impartiality and neutrality, and says that in acute crisis capacity building should be abandoned completely. I think this begs clarification.

There was also mention of principles of impartiality and non-discrimination and that food should not be diverted to political or military purposes, but that primary responsibility rests with national authorities. Isn't there some conflict here? If it is up to the national authorities, how would it be possible for this to be non-discriminatory and then to be used for military purposes?

Susanne Jaspars: In terms of capacity building being abandoned during situations of acute crisis, the kinds of capacity building that people often associate with free distribution it could be argued that is not building capacity at all. Rather it is co-opting local NGOs or local people distribute the food for you. It is sometimes even a way of doing it cheaply.

Alain Mourey: Regarding equal distribution of food aid by national authorities in conflict, we know this is a very big problem because national authorities are part of the conflict and cannot be impartial. Obviously, it is



a problem to deliver aid into the hands of authorities where there is conflict, and where it will probably fall to corruption, distortion, and diversion.

Serge Male (UNHCR): One way to empower people in refugee camps is to inform them of their rights. If you share with refugees what they are entitled to receive (which amount of which type of food per week), they begin to feel empowered.

Manuel da Silva: We need to inform people of their rights when we are in situations where we cannot fulfil those rights. During food distributions, the people in the camps should be informed about what are the quantities that are being provided. They should not be told that every month they are entitled to receive a certain amount because if resources run out, this may cause security problems.

Question from the audience: Agencies have said that they will not treat the refugees with a higher standard than the local population because the local population will migrate into the refugee areas. The dilemma is that this inevitably leads to deliberate underfeeding of the refugees so that they are kept at the standard of the host population. This is clearly an unacceptable situation and a dilemma of resources. Do you feed the whole population or do you deliberately starve or underfeed the refugees so they are not better off than the host population? How do we solve this dilemma?

Alain Mourey: This is a consensus amongst agencies that when we can and if required, we should feed equally those who are displaced, refugees and the local population. It is probably the best way to create links between the local population and displaced persons.

Anna Taylor (Save the Children, UK): The media's role in reinforcing the channelling of resources to big emergencies has come up a number of times during discussion. How can we, the emergency nutrition community, better engage with the media to try to ensure greater equity in the provision of humanitarian assistance?

Manuel da Silva: I think we can do a much better job in raising the public's awareness of the difficulties in mobilizing resources and I think this depends very much on having a more active nutrition community involved with mass media.

Alain Mourey: As long as we have CNN style media I do not think we cannot make much progress. There is no analysis of background factors or causes. If I put a stone in a person's shoe and oblige him or her to walk with it nobody will remark that he or she has a stone in their shoe. They will see that this person is not walking very well; perhaps he or she is disabled. It is the same for the media and emergencies. As long as reporting continues this way, we are not going to make much progress.

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UNHCR Refugee Women: A Pictorial Gallery

http://www.unhcr.ch/cgi-bin/texis/vtx/womengallery

Women and girls make up about 50% of the world's refugee population, and they are clearly the most vulnerable. At the same time, it is the women who carry out the crucial tasks in refugee camps—caring for their children, participating in self-development projects and keeping their uprooted families together. To honour them, and to draw attention to their plight, the High Commissioner for Refugees dedicated this year's World Refugee Day (June 20) to women refugees.

This photographic gallery shows some of the may roles uprooted women play around the world—bringing to life the tremendous human dignity and courage of women refugees even in the most difficult circumstances.

Keeping Schools Open: School Feeding in Conflict and Crisis Dr. Abraham Horwitz Memorial Lecture

Soha Moussa Graduate Student in International Nutrition, Tufts University

"Human history becomes more and more a race between education and catastrophe."

H.G. Wells (1920)

It is an honour to deliver the 6th Dr. Abraham Horwitz Lecture. I am also privileged to speak on the subject of nutrition in the context of crisis and conflict, coming as I do from Lebanon, which has had more than its share of both.

Much of this lecture has been influenced by my own experience growing up amidst conflict and internal displacement. However, these remarks also stem from a unique opportunity in the summer of 2001 as a World Food Programme (WFP) School Feeding Associate. I was among twenty-eight students selected to travel to fifty-four countries, many of which were experiencing emergencies (e.g. Sierra Leone, East Timor, Colombia) to assess school feeding programmes in place. The stories and perspectives of all the associates considerably broadened my experience. The consensus at the end of the summer was that schools have the potential to address nutritional issues, as well as, provide a safe haven and a source of stability for children and their families both in areas experiencing emergencies, and where relocation as a result of such emergencies has occurred. School feeding programmes can play an instrumental role in keeping schools open in crisis and conflict.

Introduction

The early school feeding activities a century ago, e.g. following the Boer War in 1908, were concerned with "the poor health of army recruits". Offering food in schools was perceived as a good way to ensure that children were healthy and well nourished, which would eventually make them strong soldiers. Today, the objectives of school feeding, we hope, are different.

Although there is no formal definition of school feeding in the literature, school feeding here refers to the use of the school institution as an instrument for delivery of food to children. Using the school structure ensures fast distribution of food when the facility is already in place, regular distribution when the structure is relatively stable, and optimal reach when the target group consists of those covered under the school activities. Typically, school feeding consist of food delivery in the form of wet meals, dry snacks, and/or takehome rations. While school meals are supplied on a daily basis as breakfast, mid-morning snack or lunch, take-home rations are distributed less frequently.

Defining the Objectives

In stable situations, school feeding programmes are often designed to enhance academic performance and cognitive development. Improved nutritional status of school-age children leads to better attention and cognition, and thus, better educational outcomes^{2,3}. The objectives of school feeding have also been expanded to include food security^a, providing an income transfer to caregivers and reducing the opportunity cost for parents of sending children to school⁴.

Improved nutrition and school attendance, however, present particular challenges in the context of crisis and conflict. School feeding can improve attentiveness in class by reducing short-term hunger-many children come to school on an empty stomach—yet they remain surrounded by the distracting and disturbing facets of the crisis. Although school feeding can provide an incentive for increased school attendance, such crises also tend to pull children into the workforce either as formal labour or as child soldiers. In the case of formal labour, successful school feeding programmes in emergency situations should constitute an income transfer sufficiently large enough to outweigh an alternative income that children might earn elsewhere. For child soldiers who often support their families financially, the transfer must outweigh the benefits, especially access to food, provided by armed groups⁵. Hence the need to clearly define what the realistic and feasible objectives of school feeding in conflict and crisis are, especially during the acute stages of emergencies.

Refining the Objectives

Keeping schools open in times of crisis provides children with a sense of normality, an unbroken routine and a friendly and structured environment⁶. This is why, where at all possible, children should continue to go to school. School feeding may itself provide an incentive for keeping schools open. However, in times of crisis, school feeding is more than just an incentive, otherwise programmes that are less costly could be an alternative. Being tied to education, school feeding has the potential to preserve a generation of human capital, an advantage measurably more important in com-

^a Food security is defined by the World Bank (1986) as 'access by all people at all times to enough food for an active, healthy life'.



plex emergencies than in normal situations. In situations when other social support structures may be broken down, school feeding could also enhance the role of schools as social support structures for children. It may then be possible for educational, nutritional and psychological gains to emerge from this existing school infrastructure with benefits accruing synergistically.

The Wider Benefits of Emergency School Feeding

War is an adult problem, however, war's effects extend to all age categories. Children are emotionally and physically vulnerable, and often suffer profoundly because the conflict not only disrupts their normal routines and perceptions of security, but also predisposes them to psychological risks^{7,8}.

The familiar is reassuring, and going about the school routine helps children adapt better to the new situation. Children derive from the school system and their peers at school the ability to cope more effectively with intense emotions, stress and anxiety. The school, therefore, becomes more than an educational institution, it becomes a stable support structure.

When I was a child, we continued to go to school

despite the bombshells. At school it was possible to block out the images of war, even though teachers were constantly adjusting school routines because of special circumstances. Most im-

portantly, we were not allowed to "play war" during recess. Peers and teachers were an invaluable source of support for me and for my generation of children of war.

Cooperation and Complementarity

Keeping schools open in such circumstances is difficult but not impossible through coordination of various groups. Ideally, the local communities would mobilize to restore schooling for their children. UNICEF would make educational inputs available plus access to water, sanitation and health services. WFP can identify the requirements for food aid and the logistics of delivery. Local NGOs can implement school feeding activities as prioritized by the community. Also community members themselves can participate in the reconstruction and food delivery works.

In Sierra Leone, humanitarian aid agencies and workers were able to access the town of Daru in the Kailahun District only after the UN deployed troops in the area, which ensured that Daru remained one of the few safe havens in continuously unstable surroundings⁹. The Norwegian Refugee Council (NRC), with the support of UNICEF and UNHCR, expanded their Rapid Educational Programme (REP) to the region. REP is designed for children aged seven to 12 years (mainly refugees, displaced persons and returnees) who have missed out on years of schooling because of the war. The programme has been successful in promoting

the reintegration of children into the standard school systems and, thus, in furthering their educational growth. WFP, in turn, contributed cereals, pulses and vegetable oil, the main ingredients of the school meals provided by NRC to children attending the REP schools. In the first half of the 2000-2001 school year, the enrollment in the ten existing REPs was around 1,000 children. By February 2001, the number of enrolled children almost tripled and nine new REPs were added, an improvement appreciated both by the Government and external observers. Success in Daru led to the reopening of schools in other Kailahun District chiefdoms, despite the fact that the district itself remained unsafe for resettlement. By September 2001, the Ministry of Education had opened ten additional schools and the total enrollment had risen to over 6,500 children (40% of whom were girls).

WFP's Sierra Leone country office attributes this achievement in school enrollment and retention to community ownership of the programme as well as to the solid cooperation between partners: the NRC, WFP, UNICEF, local NGOs and community groups. All partners coordinated their efforts to collectively

provide school facilities, teaching materials and food. Host communities provided labor for the construction of kitchens and food preparation, as well as cooking utensils and

condiments. Communities rallied to make the emergency school feeding programme a success because having a school facility for their children provided a stable community institution in a volatile area.

In addition to enrollment figures, monitoring indicators such as perceived quality of education, parental satisfaction, and learning performance would be important to show overall effectiveness of the programmes in providing education to increasing numbers of children without decreasing the quality of that education.

Challenges to Emergency School Feeding

The school...becomes more than an educational institution,

It becomes a stable support structure

School feeding initiatives serve the developmental goal of building human capital as an investment in the future. Yet, implementing school feeding operations in an emergency, however, has more than its share of challenges and concerns. The major areas of concern relate to security, the political nature of the crisis and related vulnerability analysis, nutritional issues such as targeting and programme design, availability of teachers and school infrastructure, availability of complementary health activities, as well as gender-related issues.

The first issue of concern is security. Relative security is a prerequisite for all activities in emergencies to ensure access to the targeted areas, mobility of children and teachers to and from school, transport of food

commodities to the target areas and, importantly, delivery of food to its intended beneficiaries.

Complex emergencies are highly political and of long duration¹⁰, in addition, war strategies are often aimed at particular social, ethnic or political groups who are not necessarily the poorest^{11,12}. Therefore, understanding the political interplay that causes vulnerability^b, and incorporating this understanding into assessment and scope of school feeding programmes, is important to ensure that they effectively cater to those most in need13. In the case of children, vulnerability is often physiological and emotional, and possibly social, economic and political. School feeding goals would then be best served if the programmes are part of the wider nutritional strategy for the area experiencing conflict. This strategy might address livelihoods protection, food security and nutrition rehabilitation programmes, based on comprehensive needs assessment and the community priorities specific to the region.

Closely related to vulnerability assessment, is the issue of targeting. Often, malnourished children are delayed in enrolling in schools14 or may have dropped out to assist with household income generation. Moreover, targeting schools in the most food insecure areas, might not yield the desired returns because these are the schools with the least resources. Therefore, building monitoring and surveillance within the project is important to evaluate and understand effectiveness¹⁵. Adequate monitoring requires looking beyond the enrolment figures into the characteristics of those enrolled, and also, those who are not enrolled in schools. Moreover, school feeding programmes usually reach children between five and 15 years of age, a group that is often overlooked by assistance organizations that normally target younger children in supplementary feeding programmes. The objectives of the two, however, are different, and there is need for complementarity when they are implemented simultaneously, so that when malnourished children are identified, they could be rehabilitated before they enroll back in

Supplying culturally acceptable and familiar foods is another frequently noted concern in donor-assisted school feeding operations. Supplied food is usually tied to the surplus available from donor countries. (It goes without saying that any food aid provided should not have the effect of disrupting local markets or providing a disincentive to local agriculture.) The types of food provided become of particular concern when they fail to match the local eating customs of the recipient country. Some agencies have, however, addressed this challenge with creativity. In Bolivia, for example, the local NGO in charge of school feeding printed copies of the 'WFP Food Cook-Book' for school staff in charge of food preparation. The booklet illustrates

recipes using WFP-provided basic ingredients, to familiarize the cooking personnel with the new ingredients. In addition, the food provided for schools tends to be the same throughout the year. In rural Port-Sudan, active parent-teacher associations work to transform basic food ingredients into edible -and even desirable- food by their own contribution of condiments, flavourings and other seasonal crops.

This is the essence of genuine cooperation in food aid, namely, the provision of food aid to communities, who then take responsibility for its ultimate use. More so, when school feeding is built into analysis of existing government policies and commitment to continuing the programme beyond the emergencies, the exit strategy or the transition from emergency to government-assisted school feeding programme, becomes easier.

The need for an adequate number of trained teaching personnel is another important challenge. Because teachers are often among the first people to leave affected areas, a useful response may be the provision of incentives (in the form of food-for-teaching, where food shortage is an issue) to encourage them to remain in town. Related to teacher shortages is the problem of classroom overcrowding. Overcrowding, indeed, is often a by-product of school feeding, which has the effect of drawing more children to school than can be accommodated. Foreseeing the problem and rehabilitating schools in ways which might permit subsequent expansion, or rehabilitating a larger number of schools is an important consideration in view of the set objectives and expected impacts. In any case, school feeding programmes should not undermine the quality of education provided at the school.

It is often noted that school feeding ensures meals only to schools that are accessible. Consequently, schools in less accessible areas where children are most likely to benefit from food assistance, are often excluded. Overcoming this problem is a great challenge under any circumstances, particularly in complex emergencies where the school structure might be destroyed or considerably damaged. For example, in cases where the school structure has been destroyed and/or access to schools made impossible because of population displacement, an alternative school setting has been initiated by UNICEF through 'School-in-a-Box'c. Tents are set up so that children can continue to go to school despite their displacement and the lack of school infrastructure (e.g. Liberia, Democratic Republic of Congo, East Timor)¹⁶. A combination of the School-in-a-Box and a food ration for every child and teacher attending the temporary school could be a useful short-term means of addressing immediate needs for a swift restoration of normality.

^b Vulnerability is 'defenselessness and insecurity in the face of particular risks' (Chambers, 1989).

^c A 'School in a Box' is a portable kit developed by UNICEF and UNESCO. It contains basic school supplies and educational materials for up to 80 children.



It must also be recognized that school feeding is but one element of school nutrition and health. Complementary health activities, including immunization (especially measles in internally displaced camps), deworming, and the availability of safe drinking water and sanitary facilities are yet more important in emergencies than at other times. De-worming activities are carried out in conjunction with Ministries of Health and Ministries of Education's partnership with WFP-assisted school feeding in many countries (e.g. Nepal, the Dominican Republic, Mozambique). These integrated programmes require in-depth understanding of the health priorities in the area, as well as appropriate expertise and capacity to monitor health programmes.

Special attention also needs to be given to gender issues that may well emerge around emergency school feeding operations. It is recognized that girls experience war and displacement differently than boys because of their culturally defined social roles and expectations¹⁷. Girls are often reluctant to attend school

when safety concerns exist and are often the first to drop out when the family resources get scarce¹⁸. Their safety may be at risk while commuting to and from school, but also at school because of the potential for female child abuse and HIV/AIDS transmission (e.g. Ethiopia, Mozambique). Drop-outs also increase when the head of the household is absent because of war, or when both parents are absent, adding income generation and sibling care to the already heavy household responsibilities of girls. Improving girls' well-being by increasing their opportunities is, accordingly, an important goal. School feeding as an incentive for education is an important means of achieving this goal. Genderbased educational incentives have worked particularly well in drought-affected Pakistan where a WFPassisted programme distributes oil rations for girls attending at least 20 days of schooling in a month. Enrollment, as a result, increased in participating schools by 76% and attendance increased from 76% to 93% in one year¹⁹. The oil ration in Pakistan, importantly,

Summary Table: Areas and issues of concern and means of addressing them

Areas	Issues of concern	Potential means of addressing these issues			
Security	safe access to target areas by children, teachers and aid workerssafe transport and delivery of food	- active government involvement			
Political and pro- tracted nature of conflicts	- particular groups targeted by the conflict (e.g. ethnic, social)	 vulnerability analysis to properly identify target groups school feeding as part of the national nutritional strategy addressing priorities (livelihoods, food security, nutritional rehabilitation) 			
Reach	 malnourished children start school late schools in food insecure areas are difficult to reach age group reached by school feeding programs is often not prioritized by assistance organizations 	 vulnerability analysis to properly identify target groups, areas and priorities monitoring systems built into the programs Complementarity between programs (especially school feeding and supplementary feeding) 			
Foods	 supply is tied to surplus from donor countries same foods are provided all year round 	 matching donated food items to local eating habits community involvement and input preparing for transition from donor-assisted to government-assisted programs 			
Teachers	 teachers may be targeted in the conflict classroom overcrowding may result from shortage of teachers and/or as a byproduct of offering food in schools 	 security and vulnerability assessment incentives for teachers monitoring the quality of education teacher training rehabilitating adequate numbers of schools or foreseeing expansion 			
School infrastruc- ture	- school premises may be damaged and/or have limited resources	- flexible alternative school structures (e.g. school-in-a-box)			
School health	 immunization and de-worming complement school feeding safe water and sanitation facilities are available in schools 	 integrated and complementary school health activities assessing health priorities cooperation among agencies monitoring programs 			
Gender considera- tions	 social roles and expectations are culturally defined commuting to and from school and unsafe school environment (child abuse and HIV transmission) income generation and sibling care 	 gender-based educational incentives food benefits outweigh the cost of sending girls to school advocating child rights and gender equality 			

represents fully 10% of a poor family's monthly income and provides a substantial monetary incentive for these families²⁰.

Again, this needs to be done in conjunction with advocacy to address child rights and the underlying gender inequalities within the cultural norms, otherwise, achievements remain a temporary gain that has not addressed the root-causes of the problem.

The new WFP's emergency Food-for-Education operation in Afghanistan which is intended to start in April 2002 as part of their emergency response, addresses some of these issues²¹. It is intended to assist the government (the interim authority at this point) to establish and maintain an educational system that supports quality education for all by combining five components, three of which are food-for-work programmes: food for school construction or rehabilitation, food for teaching, and food for teacher training. The other two components are school feeding programmes: take-home rations for non-formal education, and in-school feeding (and, where necessary, takehome rations) for elementary school children (boys and girls, but especially girls). The challenges WFP is facing in Afghanistan are numerous, mainly availability of implementing partners capable of operating on a large scale quickly and efficiently; security concerns; limited resources of the interim government; safety of girls and women in commuting; and shortages in water supply. However, there is a window of opportunity for getting comprehensive attention to the education and nutrition of school-age children in Afghanistan. This opportunity ought to be addressed in the context of a comprehensive understanding of vulnerability, food security interventions and longer-term school feeding policies for the country.

In Conclusion

The importance of keeping schools open in times of crisis for the comprehensive well-being of children cannot be overstressed. The challenges are great, as they are in any venue in complex emergencies. What is needed is courage, not to be hindered by the complexity of the task or fearful of the limitations, rather be aware of the social role of education and the great potential of schools to serve multiple functions.

Mahatma Gandhi wrote, 'If we wish to create a lasting peace we must begin with the children'. Universal education and good health are basic children's rights, and they converge in one institution, the school. Protecting these rights when children's physical and psychological well-being are at stake, represents a formidable challenge. School feeding could play an instrumental role in meeting this challenge by helping maintain the school structure, and consequently providing education, contributing to good health and reinstituting normality in times of crisis.

In Lebanon, food was not short during the seventeen years of war, hope was. Schools were the most precious source of hope, they maintained our faith in the future.

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The next issue of SCN News #25 (December 2002) will feature

School-Age Children: their health and nutrition

We welcome suggestions from our readers on books, web sites, etc Email us at accscn@who.int



Global Consultation on Child and Adolescent Health

At the 12-13 March 2002 Global Consultation on Child and Adolescent Health, world leaders, WHO Director-General Dr. Gro Harlem Brundtland, UNICEF Executive Director Carol Bellamy, policy-makers, academics and a senior World Bank delegation gathered to discuss the dangers faced by the world's children and young people. An outcome of the Consultation was the Stockholm Commitment by World Leaders, which served as a framework for the UN General Assembly Special Session on Children, held in May.

The Stockholm Commitment, which makes no reference to nutrition, states:

"We envision a world where children and adolescents enjoy the highest possible level of health, a world that meets their needs and enables them to attain their full potential. We gather in Stockholm...to commit ourselves to intensify our efforts to achieve this aim, and to join together in partnership to seek bolder approaches to reach the most vulnerable, the most isolated and the poorest.

The way ahead is a shared vision: to mobilise our resources to improve the health and development of children and adolescents, expand coverage of effective health and development interventions to reach every child and adolescent, and empower families and communities to care for and foster the health and development of their younger members. Through these efforts we address poverty and inequity, conditions which lay the greatest burden of ill health on the poor and weaken our collective efforts to advance humanitarian aims and global peace."

For more information and conference materials visit:

www.who.int/consultation-child-adolescent

Paul Arthur

On 9 March 2002, the world's public health nutrition community was shaken by the unexpected death of Dr. Paul Arthur at the age of 45 years in Ghana.

Paul was born in Kumasi, Ghana on 20 March 1956. He graduated with distinction from Ghana Medical School, Legon in 1981. After his housemanship at Korle Bu Teaching Hospital, he worked as primary health care coordinator for Offinso District and as programme manager (EPI and CDD) on the Ashanti Akim Rural Health Programme before embarking on further studies. He was awarded an MPH from Leeds University in 1988 and an MSc from the London School of Tropical Medicine and Hygiene in 1989. During his MSc he contributed to the proposal development of one of the two Ghana VAST trials in northern Ghana, namely the child health study and subsequently became its field director. This, his first major research involvement firmly established him as a leading contributor in the vitamin A community.

The Ghana VAST trials were the first to demonstrate an impact of vitamin A supplementation on child morbidity and mortality in sub-Saharan Africa. They were also unique in including a detailed assessment of supplementation on morbidity, in the same setting as an assessment of the impact on mortality. They found significant reductions in the occurrence of severe (but not mild) episodes of illness, on clinic attendances, on hospitalisations, as well as a 19% reduction in mortality, suggesting that vitamin A supplementation protects children by reducing the severity of illness, rather than by increasing resistance to infection.

Paul followed this with the establishment in 1994 of the Kintampo Health Research Centre and wide programme of research into strategies to improve the health and nutrition of women and children, including assessing the benefits of linking vitamin A supplementation to early childhood vaccines, exploring dietary approaches to improving vitamin A status, identifying ways to enhance health seeking behaviour, and the evaluation of the safe motherhood programme. Paul's contribution to micronutrient malnutrition did not stop with vitamin A. In recent years, he spearheaded studies in the area of iron and zinc interventions in collaboration with the University of Toronto. These were centered around the innovative approach of "sprinkles," a powdered mixture of essential trace elements (iron and zinc), which represents an approach to targeting additional nutrition to infants in the weaning period by mixing the sprinkles as a condiment to porridge-type complementary foods. Feasibility studies in Ghana showed promise for this strategy in initial trials recently published.

At the time of his death, Paul was heading the field-research effort toward the resolution of the latest of the public health issues of vitamin A nutrition in low-income countries, namely the benefits for pregnancy outcome and maternal mortality reduction of regular weekly low dose vitamin A supplementation to women of childbearing age. This will be his living legacy as the study advances and the results are disseminated and published.

Paul fulfilled many roles at once, working effectively on many different levels. His achievements in setting up and directing Kintampo Health Research Centre speak for themselves. His experience in large scale field research is only equalled by a handful of people in the world. He also worked tirelessly on Ministry of Health commissions within Ghana. He played a leading advocacy role for the articulation of policy and the establishment in 1996 of the Ghana national vitamin A deficiency control programme. He was on their technical advisory group, and made major inputs to the development of protocols for the national vitamin A survey and for the evaluation of the impact of the programme. In addition, he was a senior lecturer at the London School of Hygiene and Tropical Medicine, and made important contributions to both the research and teaching programme. Last but not least, Paul was internationally regarded as a pre-eminent epidemiologist, and made significant contributions to a variety of international advisory committees, for WHO, UNICEF, World Bank, and others. Paul was a member of the steering committee of the International Vitamin A Consultative Group since 1996, and an instrumental charter member of the Child Health and Nutrition Research Initiative within the Global Forum for Health Research. Paul was always in demand, and he always fulfilled expectations.

Paul always worked for the public good, any personal acclaim he received of course gave him pleasure but was always a secondary consideration. He networked quietly and widely forming effective partnerships to achieve wider goals. He inspired trust and confidence within moments of meeting him. Paul was extraordinarily gentle and kind. He was generous with his time and advice to friends, colleagues and students alike.

Paul was dedicated to developing the capacity of public health research both within Ghana and in the wider context. At KHRC he placed staff development high on the agenda, and raised scholarships for several staff to attend post-graduate masters' programmes. He also accepted young scientists from the UK for exposure to epidemiology and field research. Paul was a role model to more people than he ever realized. He was a superlative teacher, an inspiration both to listen to and to watch in action.

Paul was a truly remarkable man who touched the hearts and minds of so many of us. His dedication to public health and in particular to improving the health and well-being of women and children in disadvantaged areas was total. This was grounded in his own family bonds. He combined research of the utmost quality with a commitment to translating research results into programme action and policy. Paul's work has made a difference both in Ghana and more widely. He is truly irreplaceable. His death is a loss that Africa and the wider international public health community could ill afford.

Paul leaves a wife Dinah Newton and three sons.

Betty Kirkwood London School of Hygiene and Tropical Medicine



29 TH SESSION SCN Working Groups

Working Groups (WGs) are the driving force of the SCN. Through WGs, participating agencies take an active role in the work programme of the SCN by sharing information on the latest scientific advances, identifying critical issues for further attention by SCN participating bodies and by providing advice to the Secretariat and the SCN Chair. WG chairs and co-chairs serve for about two years.

Key contacts for Working Groups					
Working Group	Chair/Co-Chairs	EMail contact address			
Breastfeeding and Complementary Feeding	Miriam Labbok, UNICEF Randa Saadeh, WHO Reina Buijs, The Netherlands	mlabbok@unicef.org saadehr@who.int reina.buijs@minbuza.nl			
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Nutrition in Emergencies	Chair: Marjatta Tolvanen, UNICEF Secretariat: Saskia van der Kam, MSF/Holland	mtolvanen@unicef.org saskia.vd.kam@amsterdam.msf. org			
Nutrition, Ethics and Human Rights	Urban Jonsson, UNICEF	ujonsson@unicef.org			
Nutrition and HIV/AIDS	Andrew Tomkins, Institute for Child Health; UK Jos Perriens, WHO	a.tomkins@ich.ucl.ac.uk perriensj@who.int			
Nutrition of School-Age Children	Joy del Rosso, Save the Children Arlene Mitchell, WFP	jdelross@savechildren.org arlene.mitchell@wfp.org			

Four WGs held full four hour meetings during the SCN 29th session in Berlin. Full reports are available from the SCN website (http://acc.unsystem.org/scn/) or from the Secretariat by email (accscn@who.int). Please note: the Breastfeeding and Complementary Feeding WG report will be made available in the upcoming weeks on the SCN website.

CAPACITY DEVELOPMENT FOR FOOD AND NUTRITION Chaired by Cutberto Garza (UNU)

Barbara Underwood (IOM) summarized briefly the implementation of the three African regional action plans presented in Nairobi last year. The West African region has focused on the enhancement of advocacy skills in partnership with the West Africa Health Organization. Workshops are planned for July in Côte d'Ivoire and for October in Ghana. HIV and stunting/underweight are the main foci for capacity development in eastern and southern Africa. A request was made for greater involvement by the UN agencies, bilaterals and NGOs in implementing regionally driven,

coordinated plans for capacity development in Africa. Presentations were given by SCN participants representing IF-PRI, UNU, the World Bank, Brazilian Forum on Food and Nutrition Security, and Norway. A theme in each of these presentations was the importance of linking training, especially specialized degree training, with relevant opportunities for retaining human resources in the regions most in need for enhanced capacity in the area of food and nutrition.

The Working Group recommended that:

- ☐ The Working Group be provided with quarterly updates of efforts to implement the African action plans presented at the 28th session in Nairobi and of new efforts in Asia, Latin America and the Middle East.
- □ Regional databases (accessible through the internet or a listserve) be developed and maintained to cover activities in priority areas identified in the regional action plans that are in the early stages of planning, individual and institutional expertise in action plan priority areas, and material for training in action plan priority areas.

- Other mechanisms be explored for assuring greater collaboration among and between UN agencies, bilaterals and NGOs keeping in mind that these mechanisms should be supportive of regionally-derived and driven plans of action.
- ☐ Greater collaboration be developed among working groups whose focus includes nutrition and HIV/AIDS and nutrition in other emergencies to assure improved capacity in these high priority areas.
- A revolving bank be developed to circulate training materials within and between regions. Efforts should be focused on priority areas identified by each of the regional action plans.
- Action plans developed by each region should include a specific section outlining ten-year human resource development master plans that build incentives for career development and placement. These plans should provide clear mechanisms for continuing education to enable individuals and institutions to respond to changing needs, improve links with sectors, and widen the discourse with the aim of recruiting economic policymakers.
- UN agencies, bilaterals and NGOs also should review what each could do to create local opportunities, thus enhancing retention of capacity in the regions.
- ☐ The establishment of a fund linked to the need to external advisors/consultants on projects supported by UN agencies, NGOs and bilaterals should be explored.
- ☐ A steering committee in Asia should be formed and a work plan developed by it to permit the presentation of a ten-year action plan at the 30th SCN session in Chennai next year. A similar effort should be undertaken in the Middle East.

MICRONUTRIENTS

Chaired by Ian Darnton-Hill (Columbia University)

Recommendations of last year were that this WG would focus on integrated interventions including food-based approaches, rather than interventions involving single micronutrients. To do this, an agenda had been designed that gave an overview of the global situation, reports on multimicronutrient research, food-based approaches and an overview of activities regarding iron, zinc and some of the B vitamins. There was a short presentation from ICCIDD to ensure iodine was addressed. Barbara Underwood presented GAIN (Global Alliance for Improved Nutrition), a new initiative aimed at supporting developing countries in fortification of existing staple foods with micronutrients. John Mason (Tulane University) presented an overview of trends in micronutrient deficiencies and control programmes. The presentation highlighted the three methods for measuring trends: comparing national surveys at different times, fitting regression to diverse national results, and interpolating regional estimates at different times for comparison. The prevalence of clinical vitamin A deficiency is declining relatively rapidly, indicating that the ICN goal will be met. There is much less progress towards the control of iron deficiency and other forms of anaemia. Regarding IDD, where there are effective national salt iodization schemes there is impressive reduction in goiter. Presentations were also made by Professor Andrew Tomkins (Institute of Child Health) on multiple micronutrient supplementation during pregnancy, Heather Goldman (USAID) on USAID's support to vitamin A programmes, Jack Ling (ICCIDD) on IDD elimination, Saskia de Pee (Helen Keller International) on homestead food production, micronutrient deficiencies and their role in poverty reduction, Richard Deckelbaum (Columbia University) on the March of Dimes recently-released report on the lifecycle approach to nutrition which targets preconceptual women (see publications section), Gary Gleason (International Nutrition Foundation) on activities by a wide range of partners on iron, folate and zinc, and Venkatesh Mannar (MI) on the need for a new strategy for iron.

The Working Group recommended that:

- ☐ A programme planning framework be developed that is consistent with the new decade goals to be adopted in May 2002 at the UN Special Session on Children.
- ☐ To enhance effectiveness and reduce non-productive competition, the possibility of setting up a group to promote the integration of different strategies for prevention of micronutrient deficiencies should be examined.
- ☐ Coordinated efforts to develop effective strategies for preventing anaemia in children under two years should be promoted; Iron Deficiency Project Advisory Serviceoffered to initiate a task force of the Working Group for this.
- ☐ Methods need to be developed to identify groups not currently reached and the best approaches to address their needs; a task force involving INACG could take this on.
- ☐ Following the establishment in The Hague of the Global Network for Sustained Elimination of Iodine Deficiency, the sustainability of IDD control programmes should be examined; a task force involving UNICEF, WHO, ICCIDD and others should take this forward.

NUTRITION AND HIV/AIDS Chaired by Badara Samb (WHO)

While the role of nutrition in HIV/AIDS prevention, care and mitigation is now better understood, there remains a large gap between commitment and action. The main objective of this working group meeting was to add impetus to this emerging nutrition agenda and highlight the opportunities for relevant action. Jos Perriens' (WHO) presentation dealt with the minimum care and support package, which includes nutrition care and counselling. For some of these elements there is no guidance available on how to scale up. Strategic partnerships have led to significant decreases in drug prices. The HIV/AIDS department at WHO is not yet discussing the relationship between HIV and nutrition. During the discussion the point was made that drugs alone are not a sufficient response and hunger is a growing concern. Dan Raiten (National Institutes for Health) put forward the role of diet/nutrition in HIV and issues that would require special consideration above and beyond provision of food. He proposed a guiding framework to prioritize critical issues. Andrew Tomkins (Institute for Child Health) discussed nutrition among children and distinguished between those infected with HIV/AIDS and those affected because the mother was HIV+ or because both parents were sick or dead. He showed that nutritional care makes a difference to children with HIV; many children can survive to school age. Community-based initiatives for children whose parents are



both sick or dead are quite broad, and the question is how to scale up while maintaining quality. Maren Lieberum (consultant) presented an overview of the several UN agency initiatives dealing with nutritional care and support for people living with HIV and AIDS. Stuart Gillespie (IFPRI) focused on the livelihoods perspective in the relationship between nutrition security and HIV/AIDS. He recommended that priority attention be given to communication and information sharing, and how to scale up community responses.

The Working Group recommended that:

- ☐ A consultative meeting should be organized to review and compare all initiatives dealing with nutritional care and support. The meeting should include all stakeholders especially community-based organizations.
- ☐ The new chair of the working group should approach Nutritionnet (www.nutritionnet.net) to open up an information sharing forum on nutrition and HIV/AIDS and permit day-to-day dialogue between those active and concerned with these issues.
- ☐ The SCN chair should write to Peter Piot and heads of HIV/AIDS departments in UN agencies of the commitments to nutrition and HIV/AIDS shown last year and summarized in the SCN Statement. These letters should identify several interventions that have proven to work
- ☐ The working group should elaborate a conceptual framework for research priorities; this framework should be used in consultative meetings.
- ☐ The Secretariat should consider bringing together the various presentations made on March 14 in Berlin and publishing these along with short summaries from other presenters, possibly in *SCN News*.
- ☐ The new chair of this working group should discuss with other working group chairs, well in advance of next year's meeting in Chennai, how to incorporate HIV/AIDS into working group agendas with a view to harmonizing coverage.

Four brief reports were received from WG that did not meet in full during the 29th session.

NUTRITION ETHICS AND HUMAN RIGHTS Chaired by Urban Jonsson (UNICEF)

Last year this working group decided to intensify work on benchmarks and indicators for monitoring the realization of the right to food, health and care, to seek active engagement in this work of all SCN member agencies, and to review the status of other human rights-related work relevant to nutrition within the agencies. A draft document on monitoring had been developed by the working group task force and presented to the 28th session. Since then, the document has been discussed internally in UNICEF, and was also presented to the UN Development Group's working group on human rights programming at its January 2002 meeting in New York. It will serve as an input into the development of generic guidelines for human rights based programming, spearheaded by UNHCHR and UNDP, and the working group should seize the opportunity to contribute to this process. A major item on the working group's continuing agenda is the preparation of a manual on the interpretation and use of General Comment no. 12 on the right to adequate food, issued by the UN Committee on Economic, Social and Cultural Rights. As a preparatory step the Group

will have an opportunity to review, next year, the outcome of six national seminars to be held in the course of 2002 with support from Norway. The principal objective of these seminars is to set into motion a national process to operationalize General Comment no. 12. Seminars are planned for South Africa, Brazil, Mali, Uganda, Nepal and Norway. A synthesis report will be compiled; this will provide the basis for which the working group would discuss the procedure for developing guidelines on the implementation of General Comment no. 12. This discussion would also consider how to bring in other relevant General Comments from the Committee on Economic Social and Cultural Rights, notably on the right to health, to education and to housing.

HOUSEHOLD FOOD SECURITY Reported by Brian Thompson (FAO)

This group decided last year that work would consist of sharing operational research on community-level best practices, reaching consensus on community-centered foodbased nutrition improvement programmes, possibly holding a workshop to discuss this, drawing up a plan of action for incorporating community nutrition approaches into country level policies and programmes and exploring the use of food aid for improving household food security. A virtual task force was set up. The task force is in the process of identifying its priorities. These may include work on defining common terminology, concepts and approaches, the compilation and sharing of lessons learned for reaching a consensus on best practices, the identification of indicators related to household food security, advocating for the more prominent position of household food security in development efforts for improving nutrition and "moving from know how to do how". The working group has had a slow year; the task force invites those interested in shaping the agenda to join the email discussion forum.

NUTRITION OF SCHOOL AGE CHILDREN Chaired by Don Bundy (World Bank)

This working group has been helping to support intersectoral partnerships to promote a common vision of school nutrition and health activities, which work synergistically to improve the health, nutrition and education of school-age children especially girl children and the most disadvantaged. Work is underway in three areas: school nutrition and health programmes, HIV/AIDS and school-age children, and knowledge management and information sharing. The FRESH partnership (Focusing Resources on Effective School Health) was launched in April 2000. This is an intersectoral initiative to improve access to health and nutrition services within school health programmes. The core components of the FRESH framework require school-community partnerships. FRESH programmes are now being developed in over 20 countries in Africa. WFP is working with WHO to develop programmes linking school feeding with deworming. Following a successful pilot programme in Nepal, including regular fortified midday meals, regular deworming, health education and improvement of health and hygiene facilities, two workshops were undertaken in Africa in 2001 to help education and health sectors introduce deworming into school feeding programmes.

The working group recognizes that HIV/AIDS poses one of the greatest threats to nutrition, health and education of school-age children. Policies for strategic action have been developed by partnerships of agencies and by individual agencies. The UN Interagency working group on HIV/AIDS, Schools and Education has helped the development of strategic plans that support the UNGASS target of achieving a 25% reduction in infection rates among young people in the most affected countries by 2005 and globally by 2010.

A new document, What's new in the health and nutritional status of school-age children has been prepared by the working group. There are plans to publish this in full in the December issue of SCN News. Other initiatives taken include a SchoolHealth Mail List, to share information on school health and nutrition and to serve as a forum for debate and to act as point of contact. A school health website has been developed and is administered by the Partnership for Child Development. A new FRESH website is being developed; this site will contain sections on each of the core components of FRESH.

NUTRITION IN EMERGENCIES

Presentation by Francis Mason (Action Against Hunger/UK)

Members of this working group were active during the year in supporting the Secretariat in developing the 29th session symposium programme. A task force meeting was held on March 14 in Berlin to follow up on various work activities under way. The task force agreed on the importance of a proposal prepared by Helen Young (Tufts University), the Refugee Nutrition Information System (RNIS) policy paper, to assess the technical basis and empirical origins of current field approaches to nutrition surveys, the purpose of which is to serve as a normative reference for agency policies, guidelines and training initiatives. The working group stressed the importance of raising funds for this initiative.

A new initiative by the US Government to strengthen the capacity for monitoring standard anthropometric and mortality indicators was discussed (see Emergencies Section). A number of concerns were raised by the group with regard to the need for qualitative indicators to be used alongside quantitative indicators. It was also noted that the proposal for the RNIS policy paper would be a useful precursor or parallel analytical activity for a workshop to be convened by the US. Save the Children/UK presented recent experience of measuring mortality in Sudan.

The thematic group on infant feeding in emergencies has worked steadily throughout the year on operational guidance, which will now be translated into four languages. Two training modules will also be developed. It is extremely important that this work is seen through to completion, including pilot testing. This requires both funding and technical input from task force and working group members.

The thematic group on capacity building (focal point: Annalies Borrel, Tufts University) presented their work to date. This includes developing a work plan and preparation of a training inventory that will be put onto NutritionNet for further consultation and review. A new thematic group was initiated for home-based treatment and community therapeutic feeding (focal point: Mija Tesse Ververs, Action Contre la Faim/France). Recent experience and future proposed strategies were presented by Valid International, Save the Children/UK and Action contre la faim. The task force agreed that plans to employ ready-to-use therapeutic foods (known as RUTFs) should be carried out only in the context of very careful analysis. Furthermore, any plan to produce alternative RUTFs should be subject to strict ethical review.

A second new thematic group was initiated, looking at the myths established over food and nutrition programmes. The focal point for this work will be Suzanne Jaspars (NutritionWorks). Working Group members have agreed to provide evidence that supports or negates these myths. The refugee thematic group (focal point: Zahra Mirghani, UNHCR) circulated a paper to initiate discussion of activities. NutritionNet, an interactive platform for nutrition professionals to share detailed knowledge about nutritional research and operations has been initiated by Médecins Sans Frontières/Holland. The task force encourages all those who have not already registered to do so. It is intended that NutritionNet can be used also as a forum for constructive work amongst thematic groups.

The task force agreed that it was time to do an assessment of how the RNIS reports are used. The task force was requested to provide suggestions on how the functioning of the RNIS can be further enhanced.

The SCN 30th Session

including a one-day Symposium on *Mainstreaming Nutrition*

will take place in Chennai, India hosted by Professor M S Swaminathan Monday 3 through Friday 7 March 2003

Registration and programme details will be available on the SCN website http://www.unsystem.org/scn from mid October 2002



PROGRAMME NEWS

INTERAGENCY

GAIN Global Alliance for Improved Nutrition

During the last year, the global micronutrient community has created new mechanisms to strengthen collaboration on two major micronutrient initiatives: food fortification and vitamin A supplementation. Recognition of the need for collaboration among bilateral and multilateral donor agencies has never been higher as the technical and financial resources available through any single agency are, generally, insufficient to mount a successful micronutrient program.

Launched formally at the UN General Assembly Special Session on May 9, the Global Alliance for Improved Nutrition is preparing to solicit applications from interested countries to accelerate efforts to combat micronutrient deficiency through food fortification. Emphasis within GAIN will be on the fortification of staple foods consumed in sufficiently large quantities by a large proportion of the population to have a measurable impact on the micronutrient status of the population. GAIN partners will include bilateral donors, foundations, UN and other multilateral agencies, developing country governments and experts, PVOs/NGOs, industry and industry associations, and scientific institutions. In half a dozen countries, USAID has devoted resources from its micronutrient programs to assist countries considering applying to GAIN to create and/or strengthen the public/ private partnership so critical for a successful fortification effort. Funds available for the first year of GAIN activities will be between US\$20-25m with more than US\$70m committed over five years. Further information is available on the GAIN web site, www.gainhealth.org.

This is a time when there needs to be greater advocacy to periodically deliver high-dose supplements en masse to children. Major donors support vitamin A supplementation as the most rapid and effective way to prevent vitamin A deficiency in pre-school children. Therefore, they have established a mechanism for coordinating and accelerating the effort to encourage national governments to adopt some form of active, periodic distribution of vitamin A for the post-National Immunization Days (NIDs) era. UNICEF has also established a database to assist monitoring events in countries related to vitamin A supplementation and periodic communications among partners is already serving to provide warning of potential problems arising as countries phase out their NIDs activities. The donor alliance, consisting of UNICEF, WHO, USAID, The Micronutrient Initiative, and CIDA, support the integration of a routine, but periodic, vitamin A distribution in order to maintain the high coverage established through NIDS. USAID, working closely with UNICEF, has had success in introducing periodic vitamin A supplementation in Zambia, Ghana and, more recently, Uganda.

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IFPRI International Food Policy Research Institute

RENEWAL: Ensuring food and nutrition security in the time of AIDS

"AIDS is a development problem, not a health issue" has become a mantra in recent times, but what does it mean in practice? Mainstreaming requires an understanding of the interactions of the HIV infection's impacts on different sectoral concerns. More often than not, food is the number one priority for people affected by the pandemic.

IFPRI has collaborated with the International Service for National Agricultural Research (ISNAR) in a regional action research initiative aimed at filling key knowledge gaps regarding HIV/AIDS and food and nutrition security. The Regional Network on AIDS, Rural Livelihoods and Food Security (or RENEWAL for short) lays emphasis on local ownership, capacity development and the creation and strengthening of research-policy networks. It aims in particular to foster proactive linkages between national agricultural and public health organizations – two sectors which normally do not 'talk' to each other - and between academia and policy-makers.

RENEWAL is a process, not a project. Currently underway in Uganda and Malawi it will hopefully expand regionally, with Tanzania and Zambia having already expressed demand for this approach. Essentially the process involves a preparatory phase in which background papers on HIV/AIDS and food and nutrition security are prepared for each country. These papers then feed into a national multisectoral stakeholder workshop that generates priorities for action and research, as well as agreement on forms of governance of the initiative. Action research studies, focused on at least one of the priority areas and involving local partners are selected and funded out of an Action Research Fund (ARF). The findings of these studies along with the results of immediate policy modifications will be discussed in policy workshops to be held in 2003.

As part of RENEWAL, IFPRI is working with local partners in Uganda and Malawi to further understanding of the ways in which key food and nutrition-relevant policies and programs may be modified so as to minimize the spread and depth of the HIV/AIDS epidemics. In doing this, the focus will be on understanding the types of responses that affected households and communities have made to HIV/ AIDS in selected livelihood systems; the way in which existing household and community-level capacities have been mobilized in these responses and where and how capacity gaps constrain alternative strategic responses. Finally, the pathways through which key nutrition-relevant actions may a) reduce the risk of HIV infection, and b) increase household and community resilience to HIV/AIDS impacts will be elucedated. RENEWAL has benefited from generous funding provided by Norway, CIDA, IDRC, USAID and WFP, but more is required as the initiative grows.

Various capacity strengthening training materials on HIV/AIDS, food and nutrition security are now available on the IFPRI website (www.ifpri.org) with a RENEWAL website planned for the near future.

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Efficacy Trials for Multiple Micronutrient Supplementation During Pregnancy

Report of a meeting held on March 4-8, 2002 at the Centre for International Child Health, Institute of Child Health, University College London, London, UK

The main aim of this meeting was to increase the collaboration across research groups developing trials to test the efficacy of a multiple micronutrient supplement for use among pregnant women in developing countries. Whilst WHO recommends universal distribution of iron/folate supplements to all mothers in developing countries, it is recognized that most women suffer from multiple micronutrient deficiencies, not just iron deficiency. The composition of the multiple micronutrient supplement agreed upon for use in trials at a meeting in 1999 organized by UNICEF, WHO and UNU, is now being used by research groups in trials funded by a variety of funding agencies. An interest was expressed to increase collaboration among the ongoing efficacy trials, and to that end a meeting was held at the Centre for International Child Health, Institute of Child Health, London, from March 4-8, 2002, funded by the Micronutrient Initia-

The objectives of the meeting were related to increasing the efficiency of the research effort and speeding the translation of scientific results into policy. The first objective was to explore how to maximize the research outcomes that would be obtained from the various multiple micronutrient supplementation trials. The second objective was to seek ways of ensuring, as far as possible, improved comparability across the various trials, and if appropriate to maximize possibilities of pooling data across sites in the future. The third objective was to discuss mechanisms by which research findings would be fast-tracked to policy-makers and programmes as soon as results became available. The meeting was organized in two parts. The first four days mainly involved the principal investigators of five efficacy trials and the main UN agencies. On the final day, the meeting discussed the results of the consultation with a wider audience of policy and programme oriented participants.

The efficacy trials under consideration included:

- a study in Nepal looking at birthweight conducted by CICH with funds from the Wellcome Trust
- a study in Guinea-Bissau looking at birthweight conducted by the Copenhagen Agricultural University with funds from DANIDA
- a study in Bangladesh looking at birthweight conducted by ICDDR,B with funds from UNICEF
- a study in Pakistan looking at birthweight conducted by the Aga Khan University with funds from UNICEF, and
- a study in Indonesia looking at maternal mortality and birthweight conducted by Helen Keller International with funds from UNICEF and USAID
 - In addition, the group discussed three other protocols:
- a study in Bangladesh looking at vitamin A supplementation during pregnancy and maternal mortality conducted by the Johns Hopkins University group with funds from USAID and The Gates Foundation

- a study in Tanzania looking at a different multiple micronutrient supplement during pregnancy and birthweight in non-HIV infected mothers conducted by the Harvard School of Public Health group with funds from NIH and UNICEF; and
- a completed study from Nepal looking at a different multiple micronutrient supplement during pregnancy and birthweight and early child morality conducted by the Johns Hopkins University group with funds from UNICEF and USAID.

After having jointly reviewed these protocols, the meeting split into two smaller working groups. The investigators discussed further the design and ethical issues of efficacy trials and future collaboration. A non-investigator group considered the programme implications of the ongoing research.

A set of minimum requirements for study design, outcomes to be measured, and confounders or effect-modifiers was agreed. This will enhance the possibility of pooled analysis. It was also agreed that whilst the use of birthweight as an outcome is important, it does not fully capture the potential benefits of improved maternal nutritional status on birth outcomes. All trials should seek to capture information on perinatal mortality. Other maternal mortality trials should also be considered. Collaboration across sites in the sharing of experience in developing standardized tools, such as verbal autopsy (abortion/miscarriage, stillbirth/neonatal death), and night blindness was initiated. The desirability of developing local data safety and monitoring boards to manage the ongoing ethical aspects of such trials was agreed by all. Indonesia is most advanced in this and others would like to learn from this experience. Facilitating the process of policy change and enabling activities that could support the distribution of multiple micronutrient supplements within safer motherhood initiatives were also discussed, including the need for effectiveness trials to be run in parallel with the efficacy trials.

The group felt that the meeting had been very constructive and useful, and that continued efforts were needed to promote further collaboration across trial sites. Increased liaison was desirable for information sharing, keeping everybody updated, and even troubleshooting if necessary. A mailing list was suggested that should be expanded to include all those working on multiple micronutrient supplements, both efficacy and effectiveness studies, especially from developing countries. A further meeting was considered, which could be held in South Asia within a year, involving an expanded set of constituents and bringing extra expertise on board.

These findings and recommendations were presented to an expanded group of participants on the final day, which included representatives of CIDA, The Wellcome Trust Foundation, The World Bank, The Division of Reproductive Health of WHO, USAID, Helen Keller International and the Micronutrient Initiative. After discussion with this expanded group, it was largely agreed that the various organizations present could and should help support and carry forward the recommendations of the meeting.

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World Bank

Collaboration and partnerships have become central to how the World Bank (WB) does business. At country level, commitments to Poverty Reduction Strategy Papers (PRSP) and



Sector Wide Approaches (SWAps) embody the principles of the Comprehensive Development Framework, which aims to put countries in the driving seat, and align international agency support behind country efforts to achieve poverty reduction and human development goals.

Country-level project collaboration

Regional teams are currently finalizing action plans to specify focus countries for WB Health, Nutrition and Population (HNP) activity in the next two-three years. The Africa Region in particular, plans to substantially expand its work on nutrition. These lists will be shared with interested agencies when they become available. Even where specific 'nutrition projects' are not identified, UN agencies and other partners can advocate for, and provide technical input, to ensure nutrition content in poverty reduction strategy credits, sector wide approaches, and health sector development projects.

Nutrition and Gender

A new global partnership on nutrition and gender is taking shape. The aim is to build the evidence base for effective interventions to long-ignored issues of poor nutrition among women and to build research and program implementation capacity for community based action. Final approval for seed funding from the World Bank Development Grant Facility is expected in June 2002. Consultations with UN agencies, bilateral partners and foundations to join the proposed partnership, which will initially be coordinated by the International Centre for Research on Women (ICRW), are ongoing.

PRSP capacity building

Following the successful collaborative effort to include a nutrition module in the regional PRSP training course for country Health and Finance Ministry staff, which involved WB, UNICEF, AED, Commonwealth Regional Health Community Secretariat, and nutrition focal points from Ghana and the Gambia, there is interest in broadening and deepening training and technical support on nutrition and PRSP. Activities would include preparing a good practice guide on nutrition and PRSP based on a review of completed PRSPs; supporting training and orientation of nutrition leaders in selected countries for participation in PRSP preparation processes, and making funding available on a competitive grant basis to support preparatory analytical work for inclusion in country PRSP processes.

Strengthening country capacity to report on Millennium Development Goals (MDG) and PRSP nutrition goals

The WB endorses the use of a nutritional status indicator (weight for age) to monitor achievement of the MDG goal of poverty reduction. The Bank also supports countries that wish to track child malnutrition levels as part of its PRSP monitoring. In addition to the outcome indicators, the use of intermediate indicators, such as vitamin A supplementation coverage and exclusive breastfeeding rates, is also recommended. A rapid review of data available for the 30 International Development Association (IDA) countries for WB support indicates that recent trend data exist for about 50% of these countries. For the intermediate indicators, 50-60% of the IDA countries have recent estimates. The aim is to increase the proportion of IDA countries tracking nutrition indicators from 50% to 80% by 2005. We propose to work closely with partner agencies to prepare and implement an action plan for the rapid expansion of nutrition data collection and utilization. An initial meeting is scheduled for June 18 and 19, 2002.

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ANTENNA-

Spirulina

The nutritional benefits of Spirulina have been known for thousands of years. Grated or crushed, Spirulina can be added to daily meals to increase their nutritional value. In the Sahara region, Spirulina, sold as *dihé* and traded along the caravan routes, is highly sought-after as an indispensable supplement to the local diet. Rich in protein, essential amino-acids and anti-oxidants, Spirulina is an ideal dietary supplement.

This aquatic micro-organism is totally edible and can be grown in warm and even desert regions. Under a microscope, Spirulina looks like spiral filaments. The micronutrients in Spirulina are easily absorbed because there are no cellulose cell walls. It is also rich in beta-carotene, iron, vitamin B12, and gamma-linoleic acid. A few grams of Spirulina taken daily could enhance conventional nutrition programmes.

Antenna Technologie has developed a Spirulina production system based on field trials, consisting of 4m² growing basins. Shallow (20cm) ponds are built using simple materials (plastic sheeting, planks, earth). Antenna Technologie provides beginners with a fast-growing strain of Spirulina. The high alkalinity of the liquid growing-medium prevents the survival of harmful micro-organisms. Toxicity tests conducted on Spirulina show it is safe. A 4m² basin produces around 40 grams of dry Spirulina per day. Producing Spirulina needs 10 times less water than growing soybean.

Once strained, Spirulina is dried and can be added in powder form to traditional foods. Although mass production and sale of Spirulina dates back more than 20 years, Spirulina is not widely available in the developed world.

Spirulina is produced at the Madurai Ecopark, Tamil Nadu, southwest India. The Ecopark is a two-hectare plot where Spirulina, family gardens and medicinal plants are cultivated and where fish are grown in ponds. About 30 people work at the site and several villages also produce Spirulina with the help of Ecopark.

A total 50kg of Spirulina is produced a month in a dozen 20m² ponds. Spirulina has been tested by the Madurai Medical College in clinical trials, and the college's paediatricians are closely involved in the Ecopark site.

For the past two years, Ecopark has been organizing courses in nutrition and health for women. Women are taught how to grow nourishing plants, the importance of a balanced diet and how to add Spirulina to meals or to weaning foods. These courses enable women to share their experiences and to get professional advice on improving the nutritional value of their family's daily ration with the means available.

Antenna Technologie, a non-profit association, was established in 1989 in Geneva, specifically for the development of appropriate technologies. Antenna Technologie is active in the sustainable improvement of the nutritional value of available food supplies by focussing on locally produced dietary supplements.

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FANTA

Food and Nutrition Technical Assistance

Editor's note: Because the theme of this issue of SCN News is nutrition in emergencies, it was felt that the USAID evaluation of Title II food aid (a total resource transfer of US\$950m per year) deserves ample space and consideration. SCN News asks, do the results of this evaluation demonstrate a significant step forward in the use and impact of food aid? Does the evaluation address some of the issues raised at the SCN Symposium in Berlin?

Over 800m people in developing countries do not have, at all times, physical and economic access to sufficient, safe, and nutritious foods to meet their daily dietary needs and food preferences for an active and healthy life. A major response by the US Government to the problem of food insecurity is the nearly one billion dollars spent annually on food aid. The Title II development (non-emergency) food aid programme constitutes the single largest source of USAID funding focused on sustainable food security.

Title II development food aid directly supplements the diet of young children and pregnant and lactating mothers, and mobilizes poor people's labor to feed families and build local commercial and agricultural infrastructure necessary for sustainable rural development. Proceeds from the monetization of Title II development food aid are used to support the provision of basic health services, nutrition education, agricultural extension and training, and local capacity building, which help insure that the programme's longer-term objective of sustainable increases in food security is met. When Title II development food aid is integrated with other USAID resources, it enhances the effectiveness of child survival, agriculture, income generation, basic education and community development activities targeting the rural poor.

In 1995, USAID issued a Food Aid and Food Security Policy Paper (FAFSA) that defined the general purposes and use of food aid resources in developing countries. Over the past year, the Bureau for Democracy, Crisis and Humanitarian Response/Food For Peace (DCHA/FFP) and DCHA/Programme, Policy and Management (PPM), through the Global Health/Health, Infectious Diseases and Nutrition (GH/HIDN) FANTA project, carried out an assessment of the Title II food aid development programmes and their progress in meeting the food security goals laid out in the policy paper.

The assessment found that the DCHA/FFP and its Cooperating Sponsor (CS) and Mission partners have responded to the goals set forth in the policy paper including: greater focus on the most food insecure regions and countries, especially in Sub-Saharan Africa; increased emphasis on improving agricultural productivity and household nutrition, including a dramatic improvement in the design of Title II agricultural and nutrition programmes with the integration of complementary activities such as technical assistance and training, largely funded by monetization; better results and results reporting; and better collaboration among partners. The assessment also highlighted the constant tension arising from the pressure to use commodity resources as food and the need for cash resources for sustainable impacts.

The assessment report contains 21 key recommendations for programme and policy improvements in two priority technical sectors—agriculture and maternal and child health—and for improving the management of food aid resources. The recommendations are as follows:

Implementation of the Policy Paper Programmatic and Management Priorities

- FFP should adopt the following as the primary determinants of whether food aid is used in the form of food, local currency or a combination of both: the nature of the food security problem, the design of the appropriate solution, local market conditions, availability of complementary resources and CSs' management and technical capacity.
- CSs should make greater efforts to find appropriate ways to use food to address food insecurity issues.
- 3. Congress should expand funds available through the current PL 480, Title II, section 202(e) mechanism, create a complementary source of cash funds for Title II programming and/or fund internal transport, shipping and handling costs directly, so that a larger share of the proceeds from monetization would be available for programming. Congress should reevaluate the effectiveness of the value-added mandate.
- 4. FFP should intensify its consultation with its food aid partners in formulating policy, particularly when the policy addresses a controversial issue.
- FFP should put priority on developing a relief-todevelopment strategy for Title II resources that recognizes the oscillatory and coincident nature of most relief and development transitions.
- 6. FFP should prepare guidance on improving food security for HIV/AIDS-affected households and for households in urban and peri-urban environments.
- CSs should intensify efforts to integrate their Title II
 activities with other complementary development efforts or partners. Missions should improve integration
 of the Title II programme with a broader spectrum of
 strategic objectives.
- 8. CSs should focus on institutionalizing their strengthened capacity and improving quality control in the field.
- CSs and FFP should standardize the methodology for results reporting and widen the dissemination and use of best practices across the Title II programme.
- 10. FFP should allow greater flexibility in Development Assistance Programme (DAP) length in conjunction with stricter exit criteria. CSs should assist communities to find alternatives to CS services early in the programme cycle.
- 11. FFP should establish clear, concise DAP guidelines and not rewrite them each year. CSs should be held accountable to the guidance that was in place at the time DAPs were approved.
- 12. FFP should establish a clear line of authority and clarify for its Title II partners the roles of different management units within USAID (FFP, Regional Bureaus and Missions).

Agricultural Productivity Sector

- 13. CSs and FFP should make sure that DAP proposals demonstrate knowledge of local farming systems and market opportunities, emphasize interventions that ad dress the priority concerns and constraints of farm families and describe the information systems to be used to refine interventions during DAP implementation.
- 14. CSs need to make sure that they adequately deal with



three potential problem areas: 1) finding the right bal ance between food and cash crops, 2) dealing with household cash flow and liquidity constraints, and 3) closing the seasonal food gap through an increased fo cus on improved storage, small-scale post-harvest trans formation, crop diversification and market opportunities.

- 15. When a DAP includes a marketing component, it is absolutely necessary that the CS conduct a market study as part of the DAP proposal preparation and that it demonstrate adequate evidence of technical competency of the CS or a close collaborator.
- 16. CSs should build a gender strategy into DAPs and commit to being persistent and creative in finding workable solutions throughout the Life of Activity (LOA).

Household Nutrition: Maternal Child Health and Nutrition Sector

- 17. CSs should put major emphasis on changing critical nutritional and health behaviors.
- 18. CSs should continue to use growth monitoring and promotion as a key strategy to improve the nutritional status of children under three years old and improve referral and follow-up of malnourished children.
- 19. CSs should focus increased attention on strategies to improve women's nutrition.
- CSs should focus efforts with MOHs on the integration of nutrition into essential maternal and child health ser vices.
- CSs should establish country-specific criteria and verification methods to ensure that the neediest communities are selected and food resources are not used ineffectively.

The recommendations are being incorporated by FFP in their strategic planning process, and in efforts to streamline the management of the Title II food aid programme. In the recently approved Farm Bill, the US Congress increased the cash resources available to the Title II programme, one of the most important of the recommendations. CSs intend to use the report to help plan and recognize and then address specific problems they are facing.

Contact: Juliette Jack Banerjee for a hard copy of full report and more information jjbanerj@smtp.aed.org or visit website www.fantaproject.org

FIVIMS

Food Insecurity and Vulnerability Information and Mapping Systems

One of the central driving themes of FIVIMS is collaboration. The proposal for the Inter-Agency Working Group (IAWG) emerged from an expert consultation of 25 or so donors, international technical agencies and NGOs in 1996. The representatives from these institutions shared the commitments undertaken in the Plan of Action of the 1996 World Food Summit by improving inter-agency and national coordination on food security information systems. While the secretariat for FIVIMS is located within FAO, the programmeme's membership continues to increase, already including half a dozen bilateral and technical agencies, over a dozen UN-affiliated agencies, as well as numerous international NGOs and institutes. FIVIMS focal points have been identified within many of these key institutions, creating an expansive network for information exchange and greater

opportunities for collaboration.

FIVIMS collaboration at international level—6th Meeting of the Inter-Agency Working Group on FIVIMS

The IAWG recently held its annual meeting in Nicaragua jointly with the SISVAN network (Sistemas de Vigilancia Alimentaria y Nutricional). The major focuses were priority setting for the FIVIMS secretariat and IAWG members and a proposal for strategic review of FIVIMS. The meeting recommended increased interaction between IAWG partner agencies to share experiences and ideas and contribute to 'lessons learned' documents. In addition, plans are being developed to strengthen collaboration with WHO regarding country studies on household food and nutrition insecurity and training modules. The World Bank has expressed interest in exploring possible ways of integrating FIVIMS and these nutrition modules into their distance learning network.

One new objective that emerged from the meetings in Nicaragua was more closely aligning international or global FIVIMS with the Millennium Development Goals (MDGs) process, in particular the monitoring, analysis and reporting of its food security and poverty indicators. The meeting identified FIVIMS representation and participation in the proposed MDG Hunger Task Force as a top priority FIVIMS MDG activity. Other areas of collaboration could be capitalised on as they develop. Linking FIVIMS with the MDG and Poverty Reduction Strategy Papers (PRSP) processes would be especially effective in improving information dissemination and in raising the profile of food security and FIVIMS within the international community. At the national level, it was re-emphasised that collaboration with local institutions and building national capacity is essential for long-term sustainability. For these to be successful, integrated and effective support from international agencies is necessary to complement national efforts and resources.

Integrating FIVIMS into the UNDAF/CCA Process

Within the context of the UN Development Assistance Framework (UNDAF), the UN Development Group (UNDG) has established a Common Country Assessment (CCA) process to encourage unified monitoring of follow-up to recent Summits and other international conferences, and provide an information base for better targeting of donor and World Bank resources. Although initially the CCA did not cover World Food Summit commitments, the UNDG and the FIVIMS secretariat have recently reached agreement on a set of proposals for using FIVIMS work to strengthen the CCA process through incorporation of a FIVIMS module, and use of FIVIMS-generated data management and data processing tools for the entire CCA. Piloting of this approach is needed in order to develop guidance of widespread applicability.

To develop and test an approach for integrating FIVIMS work into the UNDAF/CCA process at country level and to establish an operational integrated database management and monitoring capability for CCA, including a FIVIMS module, Bangladesh and Kenya have been selected as the two pilot countries.

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FIVIMS collaboration at national level —Comoros example

FIVIMS has been active in the Comoros as part of an EU funded GCP/INT/742/EC project. Priorities have focused on the development of a food security progress report that would discuss the status of food security and vulnerability in the country, presenting a clear picture of how it has changed

since 1996. UNDP expressed interest in the initiative and a commitment to collaborate has emerged whereby this activity will be carried out as a joint effort between FIVIMS, UNDP and the Government of Comoros' Statistics Division. The report will serve as the 2002 Human Development Report for Comoros, focusing on the theme of food security and vulnerability.

The objective of the report will be to discuss progress in reducing food insecurity and vulnerability in the Comoros, drawing comparisons between urban and rural, as well as between the three islands. The report will rely on information and data already available, though individual case studies will be carried out on each of the islands. UNDP and FIVIMS will carry out an analysis of the principal factors causing and affecting food insecurity and vulnerability in the Comoros and what the implications are for food security in the future. The report will be published later this year.

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IAEA

International Atomic Energy Agency

In January 2002, the name of the sub-programme on Nutrition and Health Related Environmental Studies Section at IAEA was changed to *Nutrition and Effects of Contaminants on Human Health*. The overall objective is to strengthen the sub-programme by providing solutions to nutritional problems of high national and international significance, and at the same time to assist member states to improve and expand on their ability to use isotopic techniques. This reflects the important strategic principle of the Agency to enhance the contribution of nuclear technologies towards meeting, in a sustainable manner, the interests and needs of Member States in the areas of human nutrition and environmental health.

The new sub-programme addresses two issues: applied human nutrition assessment and the study of contaminants affecting human health using nuclear and isotopic techniques. Under these projects isotopic techniques will be highlighted as major tools in addressing health issues (preventive and diagnostic) affecting the entire human life cycle. The Co-ordinated Research Projects (CRP) just concluded (reference asian man, biomonitoring, osteoporosis and stunting), presently running (infection, infant growth monitoring, ageing, nutrition-pollution interactions, micronutrient interactions, mercury recycling in the environment, and impact of industries on food contamination) and planned (intrauterine growth retardation, energy metabolism in the elderly, bone health in the elderly, health promotion for adolescent girls, nutrition and HIV-AIDS, and toxic element atmospheric deposition and human diseases) indicate the vision and dynamism of this sub-programme built around the current UN objectives in the area of human health.

Another suite of activities is supported by the IAEA's Technical Co-operation Programme to ensure technology transfer of isotopic techniques to be applied in developing countries where they not only benefit millions through improved nutrition, but serve as specific indicators of broader social and economic advances.

The Reference Asian Man: Report of a CRP

A CRP was conducted recently on the daily dietary intake

and organ contents of selected trace elements (calcium, cesium, iodine, potassium, strontium, thorium and uranium) of importance in radiation protection. This study was combined with another study on the intake of a few nutritionally important trace elements such as iron, zinc, copper, manganese, selenium, and chromium. The study was carried out for the adult population of nine Asian countries: Bangladesh, China, India, Indonesia, Japan, South Korea, Pakistan, Philippines and Vietnam, which represent 85% of the Asian and more than half (51%) of the world's population.

Knowledge of the biokinetic behaviour in relation to humans of the radionuclides cesium, strontium, uranium and thorium is needed for estimating the internal radiation dose to radiation workers during the production of nuclear electric power and to the general public at the time of an accident. Biokinetic behaviour of these radionuclides could be inferred from the behaviour of their stable counterparts. The data on intake and organ content of trace elements can provide information on their biokinetic behaviour.

The intake of most of the radiologically important trace elements was found to be lower in the Asian region in comparison to the International Commission on Radiological Protection Reference Man data, as well as for essential trace elements in comparison to the recommended dietary allowances of US National Academy of Sciences.

The Reference Asian Man study may enable recommendations for the first time of new population specific daily intake values for elements of importance in radiation protection as well as on the intake of some trace elements for the Asian region. The daily dietary intake values may also provide an opportunity to consider the new recommended dietary allowances for essential elements in the Asian region.

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IFAD

International Fund for Agricultural Development

In partnership with the Italian Institute for Food and Nutrition Research (INRAN) and other partners, IFAD recently initiated a series of project-level benchmark assessments of key indicators related to the Millennium Development Goals (MDGs).

Summary Objectives

This initiative addresses immediate and longer-term issues in improving the impact of IFAD projects. Specifically, the activities were designed to:

- Develop a short list of "anchor" indicators which are based on objective, quantifiable and comparable data (such as access to safe drinking water, prevalence of malnutrition and percentage of women who are literate). These are not intended to replace qualitative information, but to provide a base (anchor) around which the qualitative information can complete the explanatory framework
- Carry out the fieldwork necessary to operationalize the indicators for project management and for reporting on progress toward reaching the MDGs
- Produce training materials and guidelines for use in IFAD projects throughout the region, including the assessment methodology and specific assessment skills.

Activities and outputs

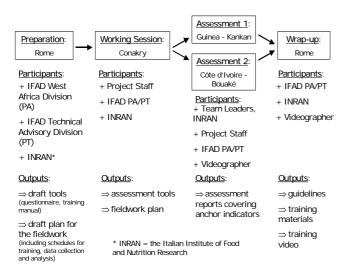
Two projects in two countries were identified:



- Guinea: Programme for Participatory Rural Development in Haute Guinée
- Cote d'Ivoire: Marketing and Local Initiatives Support Project

Essential activities consisted of preparatory work in Rome to define/refine the indicator assessment tools and fieldwork plan, a joint working session bringing together project staff and partners from both countries in Conakry, hands-on assessments in the project areas in Guinea and Côte d'Ivoire, and activity wrap-up and materials production in Rome. This process is illustrated in the figure below.

Activities and Outputs



Results

The first three steps were all successfully completed in May 2002, and materials production is underway. Fieldwork was greatly assisted by UNICEF, the Guinean Ministry of Health, and the Ivoirian National Institute of Public Health in obtaining the necessary equipment for the assessment.

Preliminary analysis of the assessment data indicates that levels of illiteracy, malnutrition and lack of access to safe water/sanitation are significantly higher in the two IFAD project areas than national or regional averages for Guinea and Côte d'Ivoire. The benchmark values for these anchor indicators support the conclusion that the project locations were well selected to reach vulnerable populations in marginal areas, and provide a solid base for assessing changes in areas such as literacy, nutrition and access to water/sanitation in future.

Notable features of this exercise have been the degree of co-operation between the various agencies and project partners, the high level of enthusiasm among project staff to gain practical experience with a straightforward assessment methodology, and the interest of project management in being able to track anchor indicators of impact in the project areas more effectively.

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ILSI

International Life Sciences Institute

The ILSI is a non-profit, worldwide organization dedicated to contributing to improving public health nutrition and food safety globally. The organization includes 15 branches located throughout the world, the Research Foundation including the Human Nutrition Institute and Risk Science Institute, and the ILSI Center for Health Promotion. Dr. Eileen Kennedy, a former member of the SCN Advisory Group on Nutrition, became the ILSI Global Executive Director in March 2002.

Four of ILSI's top global public health priorities include overweight/obesity; biotechnology, food safety/risk assessment and functional foods. On July 17, 2002, ILSI held a round table discussion on the ILSI research framework for contributing to the prevention of overweight and obesity globally. Three principles guide the ILSI activities; first, the ILSI research should complement the activities of the branches. In addition, ILSI intends to emphasize public-private partnerships in addressing the overweight and obesity issues. Finally, a key ILSI strength is experience in bringing together government, industry and academic partners in identifying solutions to global public health issues. This is the paradigm that will be used in the ILSI overweight and obesity research program.

ILSI has a very active International Food Biotechnology Committee. In 2001, this ILSI committee convened a task force to construct a comprehensive, up-to-date, global database on the composition of crops, using data generated by the agricultural biotechnology industry. Composition data for food and feed crops are essential for substantial equivalence evaluations of products derived from agricultural biotechnology. Information obtained from such evaluations allows an assessment of whether there are unexpected effects due to genetic modifications. In addition, composition data for foods and feeds could be used to propose important nutritional and anti-nutritional endpoints relevant to public health. A robust database will further understanding of the phenotype diversity in the composition of conventional crops and their products, provide a context for the evaluation of the composition of biotechnology-derived crops and enhance the scientific basis for and confidence in the concept of substantial equivalence. Once a functional database is established, submission of other publicly available data that meet the acceptability criteria will be encour-

On May 21, 2002, ILSI presented the crop composition database at a meeting attended by representatives from the US, Canadian and European government agencies, academia, and international organizations. Through discussion at this meeting, ILSI obtained feedback that will contribute to the quality of the database and improve its usefulness. It is envisioned that the database will be available for public use via the Internet, and its release is anticipated in the fourth quarter of 2002.

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UNHCR

UN High Commissioner for Refugees

UNHCR/WFP Food and Nutrition Regional Training Workshop UNHCR and WFP organized a training workshop from 8-11 April 2002 in Belgrade. A joint training of this nature was last held in 1995 in Addis Ababa. About 30 participants from WFP, UNHCR, CARE, IFRC and ICRC representing Russia, Azerbaijan, Serbia, Montenegro, Kosovo, Albania and Macedonia attended. The participants were international and national staff coming from a wide range of backgrounds, including programmes, logistics, and technical areas. In addition to enhancing the knowledge of the participants, this workshop provided an excellent opportunity to strengthen partnerships and collaboration among the staff of WFP/UNHCR and their partners.

The objectives of the workshop were to:

- strengthen collaboration and information sharing among UNHCR, WFP and agency staff
- keep staff up-to-date with the latest developments and changes in both organizations (e.g. policy priorities, funding situations, decentralization, restructuring, etc.),
 and
- exchange technical knowledge on nutrition, registration, self-reliance and community participation.

In addition, the workshop included group and simulation exercises and brainstorming sessions on collaboration "success stories", opportunities and roadblocks. The lessons learnt from this workshop will provide a roadmap for future workshops.

The workshop was considered a success and provided an excellent opportunity for open discussion and exchange of views among WFP, UNHCR and partners. A website was created to facilitate communication among the participants: www.30.brinkster.com/trainet/default.htm For other regions, similar workshops will be organized.

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UNU

United Nations University

Food and Nutrition Program—Capacity Development

The focus of last year's SCN Capacity Development Working Group session was on the capacity development plans that were elaborated by ad hoc regional African groups convened by UNU and IUNS as co-chairs of the referenced working group. These were convened as a mechanism:

- for developing long-term capacity development plans that are driven and owned by the regions
- 2. to promote intra- and inter-regional dependence, and
- 3. to explore the viability of a mechanism that goes beyond the predominant "stove pipe" approach to capacity development and leads individual UN agencies, NGOs, and bilaterals to pursue capacity development in important areas, but fails to maximize returns because these usually disparate efforts are not guided by comprehensive, long term plans that are integrated maximally into regional agendas.

The three initial areas selected for capacity development in Africa by the regional working groups were enhancement of advocacy skills in West and Central Africa, the creation of a learning cooperative in Southern Africa focusing on malnutrition and HIV and nutrition, and in East Africa the strengthening of abilities to tackle nutritional problems exacerbated by HIV.

UNU and IUNS are seeking partners to broaden the implementation of other aspects of African regional plans (e.g. developing infrastructures for supporting micronutrient fortification, exploring the appropriate role of biotechnology applied to nutritional problems, enhancing food safety protocols) and to help develop appropriately analogous mechanisms in Asia, Latin America, and the Middle East to facilitate long term plans for capacity development in those regions and to reconvene and expand the groups that were convened in Africa.

Growth References for Children: Moving beyond the 0 to 5 to preadolescents

The increasing prevalence of childhood obesity worldwide underscores the need for appropriate anthropometric references. Current approaches for developing anthropometric references are based on the representative sampling of disease free individuals and the diagnosis of overweight is determined statistically. This leads to the paradoxical situation that children classified as obese by a reference developed 25 years ago may be classified as lean today because the proportion of overweight individuals is increasing worldwide. The UNU seeks partners in accomplishing three important tasks:

- evaluate functional approaches for developing school age, preadolescent anthropometric references capable of identifying growing children in the process of becoming overweight
- assess the feasibility of developing a single international reference based on measurements obtained from participants from the world's major regions
- and, if appropriate, design a protocol for developing a single new international reference based on data that describe how children *should* grow rather than describe *how* they presently grow.

Asian Capacity Development Initiative

After consultation with the UN, bilateral agencies and NGOs, a task force was appointed to develop 10 year plans for capacity development in Asia. The first task force meeting of the Asian Capacity Development Initiative was held in Bangkok, Thailand on April 26 and 27th. The task force is composed of Dr. Abdul R. Kemal, Director, Pakistan Institute of Development Economics (PIDE), Islamabad, Pakistan; Dr. Nguyen Cong Khan, Vice Director, National Institute of Nutrition, Hanoi, Vietnam; Professor Khor Geok Lin, Professor of Community Nutrition, Department of Nutrition and Health Sciences, Faculty of Medicine and Health Sciences, University Putra, Malaysia; Dr. Widjaja Lukito, SEAMEO TROPMED, Gedung SEAMEO, Jakarta, Indonesia; Professor Eiji Marui, Chairman, Japan Research Committee on Nutrition Transition, Department of Public Health, Juntendo University School of Medicine, Tokyo, Japan; Dr. V. Prakash, Director, Central Food Technological Research Institute, Mysore, India; Dr. Emorn Wasantwisut, Deputy Director for Research and Academic Affairs, Institute of Nutrition, Mahidol University, Salaya, Phutthamonthon, Nakhon Pathom Thailand (also serves as the task force's chair); Professor C.R. Yajnik, Director, Diabetes



Unit, KEM Hospital Research Center, Rasta Peth, Pune India; Prof. Dr. Xiaoguang Yang, Director, Institute of Nutrition and Food Hygiene, Chinese Academy of Preventive Medicine, Bejing.

Within the task force, three working groups will examine capacity from three perspectives: capacity clusters, life-cycle approach and ongoing activities in the region.

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WHO

World Health Organization

WHO Study on Nutrition and Non-Communicable Diseases in Countries in Transition

Changes in food systems, patterns of work, travel, and leisure are leading to changes in diets and physical activity in large parts of the world. It is clear that these changes are occurring in less developed countries, especially in big cities, at a speed that greatly exceeds the predictions based on the historical experience in economically developed regions. Of particular concern is that these changes are linked to increasing incidence of non-communicable diseases (NCD) in developing countries. Population based prevention is the most cost-effective public health measure to tackle the epidemic of diet- and physical inactivity-related NCDs.

To meet the urgent need to develop an understanding of the role of changes in the environment at the macro- and community level we propose a 12-country collaborative project in a broad range of environments and ethnic subpopulations. The multi-country study will generate an information base necessary to WHO to formulate its policy, and, at the same time, it will build capacity for strong data use and analysis in the participating countries.

The countries included in this proposed study are Brazil, Chile, Mexico, Egypt, Morocco, Iran, Nigeria, South Africa, China, India, Indonesia, and Thailand. The baseline study will consist of approximately 72,000 individuals sampled in big cities (6,000 per country, 3,000 men and women). The study will assess the prevalence and distribution of common NCDs as well as NCD risk factors, physical activity and diets in detail as well as numerous environmental and community factors. The study will be a five-year project. A prospective design can be built into the study with the possibility of follow-up.

The original idea of the study came out of a one week seminar on nutrition transition, held in Bellagio, Italy, in August 2001. Researchers from different countries expressed their wish manage this study as a WHO study to help in implementation and exploitation of results. The first methodological workshop to plan the protocol was held at the University of North Carolina, Chapel Hill in February 2002 and the first meeting with the country Principal Investigators took place in Sao Paulo from 30 April to 2 May, 2002. Country proposals and an overall proposal will be prepared in June.

In pursuit of the necessary funding preliminary contacts have been made in the NIH (USA), Wellcome Trust (UK), Rockefeller Foundation (USA), and the World Bank. WHO and the University of North Carolina have supported financially the early planning. The study budget will be used for the study implementation in the countries and for the costs of study coordination, analysis and reporting.

The study PIs will be Professor Carlos Monteiro from the University of Sao Paulo (carlosam@usp.br) and Professor Barry Popkin (popkin@unc.edu) from the University of North Carolina, and the two management centres will be located at these two universities. At WHO, the coordinator is Dr Pekka Puska (puskap@who.int), Director, Non-Communicable Diseases and Health Promotion (NMH cluster).

Contact: Dr Pekka Puska and Dr Pirjo Pietinen pietinenp@who.int or visit www.cpc.unc.edu/projects/who



Book Announcement

—Call for Interested Contributors

At the International Congress of Nutrition in Vienna, a symposium was held on National and Regional Household Nutrition and Health Surveys: Use of Information for Program Planning, Implementation and Policy Formation. Surveys from Haiti, Georgia, the Dominican Republic, The Gambia, Guinea, Mozambique, as well as CDC and DHS surveys were presented. Michael Latham delivered the keynote address.

A book on this subject will be published; it will include the symposium presentations and other contributed papers. Papers can deal with a variety of nutrition and health surveys from around the world, including, for example, national, regional or smaller-scale surveys implemented by governments, UN or bilateral agencies, NGOs, refugee agencies, educational institutions, private organizations and others. The contributions should emphasize how collected data have been used. Surveys historically have been criticised for collecting data without adequate plans for follow-up. Manuscripts should be less than 5,000 words. Interested contributors are invited to send a description of up to two pages for consideration to the editors by email, by February 2003.

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INDIGENOUS PEOPLES' CONSULTATION ON THE RIGHT TO FOOD: DECLARATION OF ATITLÁN, GUATEMALA

Reported by: Harriet Kuhnlein, Founding Director, Centre for Indigenous Peoples' Nutrition and Environment (CINE), McGill University, Montreal, QC; Bill Erasmus, National Chief, Dene Nation, Northwest Territories, Canada; and Carol Kalafatic, Program Coordinator, International Indian Treaty Council, New York, NY.

This is a summary of the original Declaration. The Declaration can be seen in full on the website http://www.treatycouncil.org

In preparation for the Permanent Forum on Indigenous Issues, the World Food Summit: 5 Years Later, and the World Summit on Sustainable Development, all to take place during 2002, representatives and traditional authorities of Indigenous Peoples, Nations and organizations from 28 countries, gathered from all regions of the world in a meeting in Panajachel, Sololá, at Lake Atitlán, Guatemala, on April 17-18, 2002. The hosts for the meeting were the Maya Kaqchikel People.

Objectives were to learn of the hardships faced by Indigenous Peoples with respect to food, to define common elements and strengthen ties of cooperation, and to prepare a strategy to overcome hardships related to food security and food sovereignty. It was recognized that Indigenous Peoples, as the poorest of the poor in many countries, face a higher risk of suffering the consequences of food insecurity, and that the situation appears to be worsening in many places.

Elements of the Declaration

The Declaration notes agreement that the right to food by Indigeneous Peoples is a collective right, based on spiritual relationships with Mother Earth, lands and territories, environment and natural resources that provide traditional nutrition. It underscores and emphasizes that the right to food for Indigenous Peoples is a matter not only of physical survival, but also of social organization, language, culture, spirituality, sovereignty and total identity. To deny the right to food is to deny the collective indigenous existence.

It was recognized that food security means "the access to all people to sufficient, safe and nutritious food to meet their dietary needs and food preferences for an active and health life." Food sovereignty is the "right of Peoples to define their own policies and strategies for the sustainable production, distribution, and consumption of food, with respect for their own cultures and their own systems of managing natural resources and rural areas," and is considered to be a precondition for Food Security. The Declaration also considered Article 5 of the Declaration on the Right to Development (1986) which states that "the refusal to recognize the fundamental right of Peoples to selfdetermination" is an injustice against which States should take resolute steps. Further, the International Covenant on Economic, Social, and Cultural Rights recognizes that all peoples may implement their own economic, social, and cultural development, based on their own vision, and that "in no case may a people be deprived of its own means of subsistence." Thus Indigenous Peoples maintain that their rights to land, water and territory, as well as selfdetermination, are essential for food security and food sovereignty.

Obstacles to food security and food sovereignty

The Declaration is explicit in noting many obstacles to food

security and food sovereignty. These include free trade, the imposition of industrialized mono-agriculture causing erosion of genetic diversity and loss of seeds, species and breeds of animals, and the extension of intellectual property rights in favour of multinational corporations. The introduction of genetically altered food is stated to cause loss of traditional foods and health, and loss of the relationship to Mother Earth, including traditional plants and medicines. Pesticides and chemical fertilizers are noted for their poisoning effect on The Earth, and the Indigenous Peoples in communities that work The Earth, affecting food production, nutrition and health, and increasing morbidity and mortality rates, especially for women and children. Obstacles also reported are the imposition of projects by governments and private companies without consultation or prior informed consent, and the policies and demands of international financial institutions and their structural adjustment programs. Militarization and repression in indigenous territories, and national policies which impose inadequate and exclusionary models and practices resulting in loss of lands and territories and collective indigenous identity are also included as generating increased food insecurity.

Resolutions

The Declaration calls for the adoption of the Draft Declaration on the Rights of Indigenous Peoples by the United Nations. It calls on States to ratify the Convention on the Elimination of Persistent Organic Pollutants, the Kyoto Protocol on Climate Change, and the ILO Convention 169 for the rights of Indigenous Peoples. It recommends to the World Food Summit: 5 Years Later, the World Summit on Sustainable Development, and the States participating to prioritize as fundamental the rights for food, health, and education from the perspective and worldviews of Indigenous Peoples, and that international trade and financing entities recognize and respect these rights. It urges FAO to establish an open-ended working group so that Indigenous Peoples may consult in the development and implementation of policies that affect their Food Security and Food Sovereignty. The Declaration also requests the UN Commission on Sustainable Development and the FAO to support campaigns of Indigenous Peoples to inform communities of their rights to food and development, and social, cultural, economic and political rights.

Firm demands are stated to eliminate development policies imposed by States that run counter to philosophies and worldviews of Indigenous Peoples in different parts of the world. Such policies include the privatization of water, usurpation of lands and natural resources and destruction of the environment, appropriation of traditional knowledge and genetic resources. It asks for prohibition of patenting of all forms of life. It demands that governments and multinational corporations inform in a full, truthful and comprehensible manner about the productions, use, transport and



export of pollutants that affect food systems, environment and health of Indigenous Peoples, and that substances considered dangerous to human health, and already banned in other countries, be prohibited entirely.

Commitments

Participants in the consultation committed on a local level to revitalize the world views of Indigenous People, to decolonize communities, and to strengthen indigenous food productions systems. The need to provide families and communities with information regarding benefits of consuming traditional food was affirmed, as was the need for providing information on health risks associated with consuming non-traditional food, including items produced with chemicals and genetically modified products.

At national and regional levels the consultation called for networks of communication and capacity building among Indigenous Peoples for food security and food sovereignty, and the strengthening of cooperation among Indigenous Peoples and Nations. Constructive ties to Civil Society are to be sought, as are policies of self determination which avoid dependency on international financial institutions.

Closure

The document closes with an expression from the Maya language. "Iximulew, job'Imox, Oxi'Kej." Ixim Ulew in Maya Kaqchikel means Solid Earth, granulated Earth, the Earth of the Jungles and of trees that resemble corn. Job' in K'iche language means five; Imox, is a day on the Sacred Mayan calendar. The day the consultation closed, April 19, addresses the qualities of instability, surprise, irrationality, and creation in emotion.

Steven Esrey

Dr Steven Esrey died on 20 December 2001 after a long, valiant struggle against cancer. He had built a highly respected career in nutrition and public health from his doctoral student days at Cornell, as a professor at Johns Hopkins and McGill Universities, and during his last years in the Programme Division at UNICEF New York. His PhD thesis advisor has described him as a world leader in relating nutrition to environmental sanitation and water supply. This area represented for Steven an important entry point for effective interventions to reduce diarrhoea and thus protect nutritional well-being. Those who are familiar with the concept of ecological sanitation recognize Steven's pioneering work in this area and will miss his leadership in developing systems that close the loop in wastewater management and sanitation to best protect both the environment and human health in an ecologically and economically sustainable way.

For his students, he was a professor who set high academic goals. He urged his students to high achievement with the philosophy that a pupil must become better than his teacher. His colleagues at work will remember his strong commitment. Even in the advanced stages of his illness, Steven continued to work and travel to promote a cause that inspired others. His friends will remember a man whose conversation reflected a well-read mind and good sense of humour.

Steven did not ask "why me?" thus he was able to live his days to the fullest. Throughout his illness, Steven was closely accompanied and cared for by two people: Katja, his wife, and Lara, his daughter.

Adelheid W. Onyango Department of Nutrition for Health and Development WHO/HQ



NUTRITION IN EMERGENCIES



Collaborative Effort on Monitoring Relief Assistance

Anne Ralte

Crude death or mortality rates (CDR or CMR)

are the most critical indicators

of a population's improving or deteriorating

health status and the category of data

to which donors and relief agencies

most readily respond

During the last few years, donors have come under pressure to report on results of programmes. USAID and State Department's Bureau of Population, Refugees, and Migration (State/PRM), the two US government agencies responsible for providing relief overseas, discussed for some time the need to coordinate on performance indicators. Implementing partners encouraged this coordination effort and the adoption of commonly shared indicators to facilitate data collection and

reporting to several donors. In consultation with technical agencies, a small set of indicators was selected in 1999 that could be used to measure overall progress in relief situations. The indicators are Crude Mortality Rate (CMR) and nutritional status of children under five.

Crude death or mortality rates (CDR or CMR) are the

most critical indicators of a population's health status and the category of data to which donors and relief agencies most readily respond. A CMR not only indicates the current health state of a population, but also provides a baseline against which the effectiveness of relief programmes can be followed¹. CMR is relevant to USAID and State/PRM in respect to their programmes that address critical, physical needs of populations in crisis.

In addition to CMR, USAID adopted nutritional status of children under five. Acute malnutrition in children under five is closely associated with risk of death. If CMR and nutritional status are improving, probably most of the humanitarian assistance support systems are working. These two indicators help track the cumulative effect of the relief effort on the most vulnerable populations.

Review of Progress

Nutritional status of children under five has been used as a performance indicator by USAID's Office of Food for Peace since 1997 when this was included as one of its Strategic Objective indicators for Title II emergency food aid. The Office of Food for Peace invested considerable time in the consultative process with its implementing partners to select indicators jointly. Other selected indicators reflected values and core principles important to the Private Volunteer Organization (PVO) community, that is, the "do no harm" ap-

proach to implementing emergency food aid programmes.

Since CMR data collection was new to its implementing partners, the Office of Food for Peace supported field-testing of a methodology that combined CMR data collection with existing nutrition survey protocol. The pilot test, undertaken by World Vision/Sudan in 1999, demonstrated that the methodology was feasible and

doable by PVOs. Implementing partners requested technical assistance and training to be able to adopt the methodology. Since then, efforts have been made to coordinate on establishing methodologies and to provide technical support.

> As a joint US government policy advocacy effort, USAID State/PRM consulted donors and international organizations on the adoption of nutritional status and

CMR as commonly shared indicators. The Canadian International Development Agency (CIDA) and other organizations² support this effort. There was broad consensus that an investment is needed to ensure that programmes have the capacity to carry out, analyze, interpret and report on survey findings. This requires training and the provision of technical support to PVOs/ NGOs and other implementing partners. There was also consensus on the need to standardize survey methodologies among organizations conducting nutrition surveys. All organizations expressed interest in participating in a training workshop. Some organizations expressed the view that food security, vulnerability and livelihoods analysis should be integrated as part of nu-

A recent positive development of the several years of advocacy effort is the willingness of implementing organizations, technical agencies and donors to work together to resolve technical problems in collecting reliable data in emergencies, standardize methodologies, and strengthen the technical capacity of all partners.

trition data analysis and interpretation.

Proposed Plans

To standardize methodologies and ensure that reliable survey data is being reported, USAID is organizing a workshop July 23-25, 2002 in Washington DC in collaboration with CIDA and State/PRM. The workshop is coordinated by the Food Aid Management (FAM) and the Food and Nutrition Technical Assistance Project



(FANTA). This initiative is a collaborative effort of many partners including UNICEF, WHO, CDC, PVOs and the SCN's Refugee Nutrition Information System (RNIS). The training workshop is part of a broader technical assistance support system being established for implementing partners that draws on experts from technical agencies and independent experts on emergency nutrition. Ongoing USAID-funded projects, such as CERTI, FANTA, Linkages, are also part of this effort. For example, the CERTI Project (Tulane University) is leading the effort to develop information management tools for field reporting, a web-based forum for posting survey results, and a listserve for field practitioners to have direct, immediate access to the pool of experts.

Standardized survey methodologies will be field tested in about three countries where data will be collected and analyzed as a joint effort, and appropriate interventions will be introduced. Follow-up surveys will be undertaken in each site every six months so trends can be monitored. The pilot test will demonstrate whether these indicators are the most critical ones for measuring overall progress in relief situations. It will also review other indicators that should be included

without a burden to implementing partners, for example, the feasibility of integrating food security and vulnerability analysis. It will also demonstrate the feasibility of a collaborative approach to gathering data in emergencies with representative sites selected by participating organizations. For policy and decision makers, this will provide an improved understanding of humanitarian assistance needs and emergencies that require attention, including those that are less visible, based on real time information that is reliable. This effort will facilitate decision-making and the provision of timely, appropriate assistance to the most vulnerable groups.

Notes:

- 1. Noji E (1998) Monitoring and Evaluation in Complex Humanitarian Emergencies, Emergency and Humanitarian Action. WHO: Geneva.
- 2. Rome: WFP, FAO. Geneva: UNHCR, IFRC, ICRC, WHO, RNIS (SCN), The Sphere Project. Brussels: European Union, Medecins sans Frontiers, Medecins du Monde, Centre for Research on the Epidemiology of Disasters (CRED).

Contact: Anne Ralte aralte@usaid.gov



South Sudan 1998

Brian Jones

Humanitarian Needs of Refugees Versus the Chronic, Although Similar, Needs of Host Population:

The case of Western Tanzania Refugee Camps

Angelina Ballart

Presented to the SCN 29th Session in Berlin 12 March 2002

Refugee Camps of Western Tanzania

Wide spread insecurity resulting from political and military conflicts in the Great Lakes region of Africa continues to cause refugees to flee into Tanzania. Further, the continued and political unrest in Burundi in 1993, and Democratic Republic of Congo (DRC) in 1996, continues to cause a new influx of refugees. Although efforts are being made through the Arusha peace process for Burundi and through Lusaka negotiations for DRC, such initiatives have not yet resulted in sufficient progress to allow refugees to be safely repatriated to their countries of origin.

The refugee operation in Tanzania aims at providing protection, care and maintenance assistance to about 500,000 refugees hosted in 13 camps and at the same time facilitating voluntary repatriation. To achieve this, various humanitarian services have been provided in the refugee camps, these include, shelter, water and sanitation, food, health and nutrition.

Following various interventions in the refugee camps, the health and nutrition situation has been stable. Health and nutrition services provided include:

- maternal and child heath services (growth monitoring, antenatal clinic, family planning, immunization)
- control of malaria
- Parasite control for children and pregnant women
- integrated management of childhood illnesses (IMCI)
- prevention of HIV/AIDS
- prevention of mother to child transmission of HIV
- selective feeding programme (therapeutic feeding and supplementary feeding programmes)
- micronutrient/ multiple micronutrient supplementation
- infant feeding in emergencies
- prevention of low birthweight, and
- support to nutrition surveys.

Refugee affected areas of Western Tanzania

The Government of Tanzania expressed interest in furthering the international efforts to support neighboring countries affected by conflict and civil strife to democratize and respect human rights so as to end the refugee crisis. It has outlined the sacrifice made by local communities to host refugees at the expense of other risks such as insecurity, disease, poor nutritional status, scarce resources, environmental damage and

land degradation that cannot be quantified in monetary terms.

To date, it is estimated that about one million local inhabitants live in the refugee-affected areas. They are comprised of subsistence farmers with very low income and relatively high malnutrition, morbidity and mortality rates. Poor farming practices are a major constraint to food production, coupled with poor road infrastructure, and inadequate marketing systems. The proximity to refugee camps has influenced the prices of the local foodstuff, deteriorating security and destruction of natural environment of the host villages.

Donors continue to provide support for the refugee operation. However, the Government of Tanzania bears the responsibility of hosting 500,000 refugees and the burden of poverty and heavy international debts to be serviced.

Health and nutrition situation

The health and nutrition situation in the refugeeaffected areas, unlike in the refugee camps, is a significant public health problem. Malaria, pneumonia and diarrhea are the major leading causes of mortality and morbidity. Support provided include:

- capacity building of health and nutrition staff
- special feeding programme
- food and medicines and supplies to some of the health facilities and prisons
- water and sanitation projects, and
- technical and financial support to health, nutrition and education.

The table provides a comparative look at the similarities and differences between the refugee and host population.

Dilemmas affecting the host community

A number of constraints and dilemmas affect Tanzania's ability to respond to the refugee situation, including:

- Tanzania is among the least developed countries
- inadequate resources to support asylum seekers
- increased insecurity and tension between the local population and refugees
- acute emergencies becoming long term programmes
- donor support is directed to refugees while development support to refugee affected areas is given lower priority



- cross infections from countries of origin to host population
- abrupt reduction of donor support which interferes with provision of basic services creating insecurity to host population
- increased donor/media attention on refugees while local population deteriorates, and
- inadequate allocation of donor support either caused by media bias, political priorities or geo-economic interests.

Comparative table showing the similarities and differences between the refugee and host population

Situation/Activities/Services	Refugees	Host population
Population	500,000	1,000,000
Under-five mortality/1000/live births	54	137
Infant mortality/1000/live births	32	88
Neonatal mortality/1000/live births	11	32
Maternal mortality/100,000/live births	56	529
Child wasting, % <2SD	3.2	9.2
Special feeding program	available	not available
Micronutrient supplementation	available	available
Infant feeding in emergencies	assessment donecapacity building and community sensitization	not doneboth done
Prevention of LBW program	available	not available
Nutrition survey	conducted yearly	rarely conducted
Control of malaria	Indoor spraying twice a year, community sensitization	Only community sensitization on use of insecticide treated nets
MCH Services	growth monitoringpregnant women receiving supplementary feeding and de-worming	growth monitoringno supplementary feeding, no de-worming
Parasite control for children	program available	no program
Water and sanitation	water treated, safe and cleanprogram for sanitationlatrine coverage >90%	not treated, not safeno programcoverage 30 - 40%
IMCI capacity building	> 80% of target	30 - 40% of target
HIV/AIDS program	included in school health and youths programs	included in youth's program only

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FEWS NET 2.0 http://www.fews.net

The Goal of the Famine Early Warning Systems Network (FEWS NET) is to strengthen the abilities of African countries and regional organizations to manage risk of food insecurity through the provision of timely and analytical early warning and vulnerability information.

FEWS NET 2.0 is a major upgrade of this important information product and features:

- An emphasis on livelihoods and food economy methods
- Emergency, warning and watch alerts (drought, floor, cyclones, ...)
- Current NDVI, RFE, and stream flow remote-sensing imagery
- Drought and flood hazard assessments
- Customizable Email news and updates



Sphere Project: Handbook Revision (2002 - 2003)

The Sphere Project is an initiative managed by four NGO networks: Steering Committee for Humanitarian Response, InterAction, VOICE and ICVA. Since the launching of the first edition of the Sphere handbook in 2000, over 25,000 volumes have been sold and the handbook has been translated into 15 languages (eight spontaneously). This worldwide interest on behalf of national and international NGOs, the Red Cross/Red Crescent movement, governments, academics and UN agencies demands that the Sphere handbook be made as effective as possible. A revised edition of the handbook will be published in late 2003.

The UN Inter-Agency Standing Committee has endorsed the book as an important tool for anyone working with populations affected by disaster and called on all IASC members (UN and NGO) to promote the use of the Humanitarian Charter and Minimum Standards in Disaster Response within their organizations, particularly in their field operations.

Handbook feedback forms, the text of the first edition and additional information can be found at www. sphereproject.org.

In Spring 2003, a draft of the revised text will available on the website.

Sphere Handbook Review Process

The revision's purposes are: to strengthen the link between the Humanitarian Charter and the Minimum Standards; to update the qualitative and quantitative indicators and guidance notes as needed; to address cross-cuttings issues such as children, women, the elderly, disabled, HIV-AIDS, and the environment; to enhance linkages between sectors; to iron out inconsistencies, faults and important omissions from the first edition; and to eliminate repetitive text. In addition, as per an earlier commitment by the Sphere Management Committee, Minimum Standards relating to Food Security will be developed as part of this process.

Six Focal Points and the Sphere project office will undertake this work over one year. Each Focal Point will work in their own particular way based on their sector-specific needs. All Focal Points are committed to a broad-based consultative process with feedback and input from field-based users paramount and with an

emphasis on consultation with the agencies that are regularly using the handbook in disaster response. Comments are encouraged from national and international NGOs, UN agencies, donor governments, governments where disaster response frequently takes place and academic institutions. Individuals from NGO and UN HQs as well as those from academic institutions will participate as reviewers to the revision.

To make sure that agencies' experience, insights and technical expertise inform the Sphere handbook revision, a handbook feedback form is available. It should be submitted to the project office or relevant Focal Point.

Who to Contact

The six Focal Points listed below come from NGO agencies and one academic institution. In addition to their regular work with their respective agencies, these staff are responsible for managing the revision process. Names, contacts, suggestions, recommendations or comments may be sent to the Focal points:

- Water and Sanitation: Andy Bastable, Oxfam GB (abastable@oxfam.uk.org)
- Nutrition: Anna Taylor, Save the Children UK (a. taylor@scfuk.org.uk)
- Food Aid: John Solomon, CARE USA (Jsolomon@care.org)
- Shelter & Site: Graham Saunders, Catholic Relief Services (graham.saunders@crsbh.ba)
- Health Services: Rick Brennan, International Rescue Committee (brennan@theirc.org)
- Food Security: Helen Young, Tufts University (Helen.young@tufts.edu).

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SPEAKERS' CORNER

World Food Summit: five years later (WFS:fyl) A tripartite view -An update on SCN News 23

On 10-13 June 2002 in Rome, FAO hosted the WFS:fyl, a follow-up summit to the 1996 World Food Summit. The Declaration for the WFS:fyl can be viewed in its entirety at http://www.fao.org/DOCREP/MEETING/004/Y6948E. HTM. The features section of *SCN News* 23 focused on the progress made leading up to the WFS:fyl. Here three members of the SCN share some of their perspectives on the outcomes of the summit and the next steps needed.

WFS:fyl—Reflections from a Bilateral Delegate

After a decade of summits we are now in a rush of followup meetings, such as the UN General Assembly Special Session on Children, WFS:fyl, and Rio+10 later this year in Johannesburg. An outcome of another follow-up meeting, the Millennium Summit in 2000, was the Millennium Roadmap. One can say that it was based upon all the summits and big conferences of the past decade - meaning nothing new. The Millennium Roadmap basically reiterates the goals and objectives of these meetings and summits, and in fact has somewhat lower ambitions than several of them. The semantics (and ambitions) have been changed from eradicating extreme poverty and hunger to reducing substantially or reducing by half. Other issues mentioned included poverty, education, hunger, infant and maternal mortality, water, rule of law, human rights and freedoms, democracy and good governance, equality, solidarity, tolerance, HIV/AIDS, peace, security and disarmament.

With so many meetings and summits, politically correct words, goals and objectives that have not been achieved and the painfully slow progress in poor countries, it is easy to become cynical. Concurrently there is growing global wealth and awareness about the problems and solutions needed to help the poor. Words such as 'window dressing', 'lack of political will', 'lies', 'greed', 'dishonesty', 'bluff' and 'political acrobatics' can be heard from disillusioned individuals. It is in the context of these new events and mounting criticism that WFS:fyl was held. The rationale for the WFS:fyl was exactly the slow improvement, and in fact, the worsening situation in Sub-Saharan Africa since 1996. Key issues in various FAO discussions the last years have been fostering political will and generating resources for the poorest.

In the preparatory process for the WFS:fyl (which was short and limited) it was agreed by all countries during the Committee on World Food Security (CFS) 27th session in May 2001 that the Declaration and the Plan of Action of the World Food Summit of 1996 should be reaffirmed, but not opened for new negotiations unless there were new developments. An Open Ended Working Group with the mandate of negotiating a draft Declaration was established. This working group had a draft Declaration ready by June 2001, with WFS:fyl to be held in November of the same year. September 11 changed all that, and the Summit was postponed until June 2002.

In June 2002 in Rome, there were two different but closely related events that influenced the outcomes of the summit. First, the negotiations of the Open Ended Working

Group led to an apparent agreement on many issues formulated in paragraphs without brackets, but left at the same time a number of issues in brackets that were not agreed upon. It was a common understanding that the negotiations should focus on those paragraphs and not bring in new issues. The Norwegian Delegation was therefore quite surprised when suggestions for changes were introduced in the Open Ended Working Group at the 28th session of the CFS. In particular, it was the rich countries that had many additions to almost all of the paragraphs of the Draft Declaration, and suggested additional new paragraphs. The mandate of the delegation I belonged to was to strengthen, or at least safeguard, the issues agreed to in the WFS Declaration and Plan of Action in fighting against poverty and strengthening food security work. Our main concern was to ensure food as a human right and as an important development tool for food security. Preferably this would be done by developing a code of conduct on the right to adequate food.

The negotiations were arduous. Issues that several of the rich countries opposed in the final WFS:fyl Declaration included food as a human right, code of conduct, the High Commissioner for Human Rights, any negative comment to genetically modified organisms (GMO), biological diversity, precautionary principle, multifunctional character of agriculture, and any negative comments about trade. Food as a human right turned out to be the most difficult and was the last issue to be resolved, with negotiations finishing in the early morning hours. Given the fierce opposition from many powerful countries, it is amazing that we were able to get paragraph 10 in the Declaration. The aim of many countries, including the G 77 (a group of developing countries throughout the world), Norway and Switzerland, was to have a similar paragraph mentioning a code of conduct for the right to adequate food. This was not possible and the compromise was to develop guidelines for the right to adequate food. Personally I think that we should be quite satisfied with the result on this particular point given the strong opposition from very influential countries. The process that was initiated by the work of Objective 7.4 of the WFS Plan of Action in 1996 and the fulfilment of this by the development of the General Comment 121 on the Right to Adequate Food as reported by the United Nations High Commissioner for Human Rights, Mary Robinson, in her report to the WFS:fyl, can now be continued.

¹ E/C.12/1999/5, Committee on Economic, Social and Cultural Rights, 20th Session, Geneva, 26 April-14 May 1999.

Apart from this heated issue, there are several other issues that merit mentioning. The first positive surprise was in the content of the information folder given to each participant. The first key fact sheet was "The spectrum of malnutrition" that included a figure on nutrition through the life cycle originally published by the SCN. Director Kraisid Tontisirin and his staff in the Food and Nutrition Division of FAO deserve credit for this. There were nine other fact sheets covering issues related to food security, such as: food safety, urbanization, HIV/AIDS, biotechnology, environment, water, the right to food, social safety nets, and women. Most of the topics have been discussed in the SCN, and others deserve consideration in future SCN work. There were also fact sheets from IFAD, WFP and CGIAR.

Second, the location of the parallel NGO forum was unfortunate. Only one event each day of the NGO forum was located in the FAO building, while for participating in other events one had to move downtown. For a person taking part in an official delegation this was not possible. Several of the other side events gave a more vivid experience than the long and often tedious presentations in the plenary by heads of state or ministers from member countries (it should be mentioned that several of the presentation were both interesting and impressive). Side events worth mentioning include the Multi-Stakeholder Dialogue, the Anti-Hunger Programme, FAO helping the Hungry in Case of Crisis: The Emergency Programme, Rural Women: Crucial Partners in the Fight Against Hunger and Poverty, and the Right to Food. In these parallel events several NGOs par-

ticipated. This was important because NGO presence raised several critical issues, brought real life aspects into discussions, and acknowledgement for well-designed interventions, which is uncommon in diplomatic circles. We need a stronger involvement and presence of NGOs in all UN fora where the direction for the future work to achieve the WFS and Millenium goals is discussed.

In the Millenium Declaration the Government representatives agreed that 'we will spare no effort to free our fellow men, women and children from the abject and dehumanizing condition of extreme poverty', which is seen as both the cause and affect of hunger and malnutrition. Professor Jeffrey Sachs during the Anti-Hunger Programme side-event stated, in his charismatic way, that this time the world has decided not to tolerate this suffering (of extreme poverty and hunger), and he repeated this in his intervention at a World Bank research conference hosted by the Norwegian Government just one week after the WFS:fyl. I hope this reflects a new momentum and drive in the rich as well as the poor countries so that the WFS goals and objective can be achieved. What worries me is that the statements from the Millenium Declaration and Professor Sachs sound like an echo from the World Food Conference in 1974 - a conference which to many represents broken promises. For the moment I choose to remain optimistic.

Arne Oshaug member of the Norwegian Delegation to WFS:fyl: This note is personal and should not be seen as reflecting the opinion of the Norwegian Government. arne.oshaug@basalmed.uio.no

No more of the same remedy—Reflections from an NGO

The Civil Society Global Forum on Food Sovereignty - held in parallel to the WFS:fyl - was very clear in its message. The failure of the WFS Plan of Action to achieve its proposed goals was not due to lack of political will or resources. In reality it was a reflection of the strong political will of governments and international finance and trade institutions in implementing a trade liberalization lead development paradigm. The outcry of civil society was: 'No more of the same remedy'. Civil society dismay was even greater in face of the WFS:fyl Declaration that did not add anything new to the scenario. In fact, it watered down the move towards the elaboration of an International Code of Conduct on the Human Right to Food into a mere set of voluntary guidelines, under pressure of the US and UK governments. It also strengthened inter-governmental commitment towards genetic engineering research, giving more room for increased pressure from the private sector to liberalize the utilization of GMO food.

FAO lost one more opportunity to effectively transform the World Food Security Committee (CFS) into a UN forum to discuss integrated policies towards the food and nutritional security of the peoples of the world. During the preparation for the summit, the CFS and the final Declaration were kept within the narrow borders of agricultural issues, totally avoiding the discussion of nutrition and other themes relevant to the effective implementation of food and nutritional security for all.

On the other hand, the Civil Society Forum on Food Sovereignty produced a Plan of Action including close to 180 proposed initiatives, clustered around four thematic areas: the human right to food, access to productive resources (water, land, genetic resources and credit), sustainable agricultural production and agroecology, and trade and food sovereignty.

Among those, the Forum identified strategic priorities to be promoted by civil society movements and organizations throughout the world: to defend the concept of food sovereignty and the elaboration of an International Convention on it, to withdraw WTO from the negotiation of the International Agricultural Agreement, to defend a full blown moratorium on GMO foods, and to oppose patents on life.

Civil society's positions reflect the total bankruptcy of the World Food Summit, the CFS and FAO as legitimate fora in which to discuss food and nutritional security. The progressive strengthening of International Trade and Finance Organizations, allied with the growth of unilateral political and military actions and the weakening of the UN bodies and instruments, have lead civil society movement to regroup against those main threats to the sustainability of humankind.

The incipient results of Monterrey, of the WFS:fyl, and the lack of transparency and opportunity for effective participation in WTO meetings, are leading to a severe questioning of the legitimacy of international conferences and summits. Civil society sees itself caught in a fit of 'Stockholm Syndrome' in the labyrinth of summit sites.

At the same time, the enormous impact of the international macroeconomic initiatives on national and local capacity to overcome food and nutritional security issues question the value of dedicating energy and time to discuss small scale local initiatives, which are seen as tokenism.



What civil society identifies is the increasing arrogance, unilateralism and lack of commitment of the rich and powerful countries to face the structural roots of hunger and poverty. Only two out of the 29 OECD heads of state were present at the WFS:fyl. The unwillingness to discuss and to strengthen multilateral instruments go hand in hand with the criminalization of the social movements and the option for military answers to those that oppose the growing world social crisis.

We understand the relevance of the demands placed on the WFS:fyl by the Global Forum on Food Sovereignty. However, the process towards the promotion of nutrition and of the Human Right to Food for all will not be guaranteed by Food Sovereignty alone. Effective national integrated strategies are necessary to achieve that, and people are today in need of those if they are to survive and have productive lives. A balance among the two civil society strategies must be reached. Neither local isolated well-conceived nutrition interventions, nor radical macroeconomic paradigm changes, will be capable by themselves of promoting the human right to nutrition for all.

This highlights even more the need for a stronger participation of civil society organizations and social movements working with nutrition related and development issues both in urban and rural areas. Stronger partnership should also be sought with the work of the SCN, and its member agencies and governments. It is fundamental to break the narrow limits of the discussion of food security and food sovereignty as mere productive and economic issues. Trade, agriculture, finance and development must be seen as instruments to promote quality of life for all. For this a much broader coalition will be necessary.

The SCN, with its tripartite composition, and by placing people's nutrition and quality of life at the center of the political agenda, could take on a relevant role in catalyzing this process and in helping to bring governments, civil society and international institutions together to identify strategies to promote people-centred human development.

Flavio Luiz Schieck Valente, MD, MPH, Ação Brasileira pela Nutrição e Direitos Humanos and Focal Point for Latin America and the Caribbean. WANAHR flyalente@tecnolink.com.br

Information Informing Action—a view from the FIVIMS project at FAO

The Food Insecurity and Vulnerability Information Mapping Systems (FIVIMS) initiative received renewed attention at the recent WFS:fyl. It took centre-stage on several occasions when FAO's Director General, Jacques Diouf, referred to the FIVIMS initiative as the means by which FAO monitors progress in reducing the number of food insecure since 1996.

The WFS:fyl focused on food security and vulnerability at all levels and highlighted the gap between the target set at the WFS and reality, while sharing success stories and experiences amongst countries. The approaches and perspectives of the FIVIMS initiative, which reaches across multiple sectors and brings together all information required for an integrated approach to food security and vulnerability issues, are seen as vital contributions to the achievement of the WFS goals.

An entire side-event of the Summit was dedicated to fighting hunger, with 'Ingredients of Success' being presented as a means to promote lessons learnt from the experiences of specific countries which have managed to reduce hunger. Information was a central factor in the success stories presented by the seven ministers participating in the event.

FIVIMS is responsible for facilitating the exchange and promotion of information that reflects successful initiatives and encourages effective decision-making. The FIVIMS initiative has the potential to combine relevant information at local, national and international levels in an accessible format and in a timely fashion. The two way communication flow between information provider and user fostered by FIVIMS also supports sharing of experiences both horizontally and vertically, across countries and agencies for the benefit of all.

FAO is charged with monitoring the performance of countries in their efforts to meet the target of halving the number of people suffering from food insecurity. Since 1999 FAO has issued an annual report on food insecurity and related topics as part of its contributions to the FIVIMS

initiative. In 2001, as in other years, this report, The State of Food Insecurity in the World (SOFI), illustrated the comparative performance of countries towards the WFS goal. It is apparent that with the current rate at which numbers are declining, only about 50% of the target set for 2015 would be met. This reveals how particularly necessary it was that the WFS:fyl call for a renewal in commitments to address global hunger.

What was made evident in Rome in June, both through Mr Diouf's comments and in discussions throughout the Summit, is that FIVIMS has the potential to play a vital and central role in global food security monitoring. The contributions of FIVIMS figure prominently in the effort to combat hunger. A driving notion for the programme is that effective collection and dissemination of information can have a valuable impact on policies and decision-making and more efficient allocation of available resources.

The collection of comprehensive and accurate information cannot stand alone as a successful effort, however. The appropriate use of information by decision-makers and social actors must be an equal concern. Identifying and including the users throughout the information gathering and disseminating process is key to the effective employment of information and ultimate positive impact on food security. It is therefore essential to understand how information should and could be targeted and most effectively packaged. There is a variety of ways in which information is used, including awareness-raising, policy advocacy, programme targeting, monitoring and evaluation, research, and grassroots empowerment. Though it can often present significant challenges, user information requirement analysis is a valuable component of any information system. Understanding the decision-making process is equally important. Early Warning Information Systems are frequently undermined and undervalued by restricting their utilization to quantitative data, rather than for qualitative and targeting purposes. As part of FIVIMS' commitment to improve how information is used, the Secretariat is assembling examples of where nutrition and food security information made a difference. The

Secretariat seeks to document such examples and draw lessons from them which consequently can be shared with partners.

Information is also a means of empowerment. At the WFS:fyl, this was especially emphasized by key note speaker, Prof MS Swaminathan, head of the UNESCO Chair in Ecotechnology and SCN Distinguished Nutrition Advocate. Prof Swaminathan identified education as a key area that should be strengthened to improve awareness of entitlements and nutritional status as a whole.

How information is perceived and interpreted is important too. Information on food security should not be lim-

ited to a discussion of tons of food grains or agricultural outputs/inputs, for example. It encompasses details on live-lihoods, coping mechanisms, food consumption, purchasing power, knowledge, capacity, and human rights. It is these details that allow a more accurate and comprehensive assessment of the status of vulnerability and food insecurity in a given location. It is important to recognize that it be recognized that keeping such details up-to-date and channelled effectively, assists in paving the way to a successful and sustainable reduction in food insecurity.

Contact: FIVIMS Secretariat annalea.jenny@fao.org

Looking forward to Johannesburg...

Editor's Note: These are excerpts from the draft Declaration and Plan of Implementation of the World Summit for Sustainable

Development, taking place in South Africa 26 August—4 September 2002

www.johannesburgsummit.org

We reaffirm our pledge to place particular focus on...the fight against the worldwide conditions that pose severe threats to sustainable development...poverty, unsustainable patterns of consumption and production, environmental degradation, chronic hunger, foreign occupation, armed conflicts, illicit drug problems, organized crime, terrorism, intolerance, and endemic, communicable and chronic diseases, in particular HIV/AIDS, malaria and tuberculosis.

[Agreed] ...Enhancing the role of women at all levels and in all aspects of rural development, agriculture, nutrition and food security is imperative... (a) [Agreed] Achieve the Millennium Declaration target to halve by the year 2015, the proportion of the world's people who suffer from hunger and realize the right to a standard of living adequate for the health and well-being of themselves and their families, including food, including by, promoting food security and fighting hunger in combination with measures which address poverty, consistent with the outcome of the World Food Summit...



letters letter

Dear SCN News,

Thank you so much for including my letter to the Editor in SCN News #23, I have received two responses up to now!

Prof. M.S. Swaminathan is definitely the best and the most levelheaded among all the nutrition-experts in India. I also enjoyed reading your hard-hitting editorial on "Civil Society and the UN System: debate in the Food Security Arena." David Wilcock's article on page 14 was good. How come so much of donor funds go to Africa when it is Asia that has the greatest numbers of underfed? How come developmental nutrition scientists from Asia are not recruited to do more assignments for the UN System?

I also liked Cecilia Florencio's letter (page 51). Why doesn't the Asian Development Bank use some of us for Nutrition Policy papers?

Thanks, Warm regards, Tara Gopaldas, MSc, PhD Director, Tara Consultancy Services Bangalore, India keroo@bgl.vsnl.net.in Dear SCN News,

With great interest I read the SCN News (#23).

I was pleased to see the reference to our SIGHT AND LIFE Guidebook on Vitamin A in Health and Disease. We are now in the process of preparing a French version.

I would like to correct a common misunderstanding about Roche. Roche is a basic producer of vitamin A, however, the capsules that SIGHT AND LIFE donates are not at all a Roche product. They are produced instead by other pharmaceutical companies, such as Rp Scherer.

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I hope this clarification is useful information.

Many thanks again for referring to our Guidebook.

Yours sincerely, Task Force SIGHT AND LIFE Martin Frigg Sight.life@roche.com



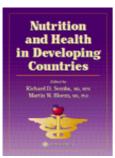
PUBLICATIONS

Editor's note—once again the SCN Secretariat is grateful to the many authors, printers, publishers and participating agencies who have sent us copies of their publications. Space is limited so SCN News editors try to select those titles which, together, cover the breadth of nutrition as well as titles that may become standard references for policy makers. SCN News is especially interested in publications that present nutrition thinking in a new way or summarize trends in key indicators for a wide audience.

Also included for this issue of SCN News are several widely-disseminated reports that have neglected nutrition almost entirely.

NUTRITION AND HEALTH IN DEVELOPING COUNTRIES

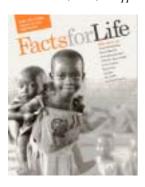
Edited by Richard D. Semba and Martin W. Bloem, with a foreword by Nevin Scrimshaw Humana Press, 2002, 569 pp.



This is a comprehensive and authoritative text, a tour-de-force. It is well placed to take on the stature in years to come of the influential monograph by Scrimshaw, Taylor and Gordon published by WHO in the 60s, Interactions of Nutrition and Infection. This book examines nutrition and health, past, present and future in developing countries. It provides clear guidelines for improving nutrition and health in developing countries into the 21st century. It goes well beyond the epidemiology of nutrition, to discuss issues such as urbanization, food and nutrition security, the impacts and costs of programmes, and the demographic transition. The editors started with the underlying conviction that nutrition is the main cornerstone of health in developing countries. Each chapter is written by an authority in the field: low birthweight by Michael Kramer and Cesar Victora, child growth by Mercedes de Onis, zinc deficiency by Roger Shrimpton, nutrition transition by Barry Popkin, economics of nutrition interventions by Sue Horton, research directions by David Pelletier. The book contains 22 chapters, each heavily referenced.

Available from: http://humanapress.com

FACTS FOR LIFE UNICEF/WHO/UNESCO/UNFPA/ UNDP/UNAIDS/WFP/World Bank Third Edition, 2002, 153 pp.



With a foreword signed by no less than eight UN agency heads, a write-up in a recent issue of The Economist, and 15 million copies in use worldwide in 215 languages this book aims to make life-saving and lifeimproving knowledge easily available to everyone. It presents the most important facts that people have a right to know to prevent child deaths and diseases, and to protect women during pregnancy and childbirth. Nutrition messages are present throughout. The book opens with a guide to communication, with sections on reaching the caregivers, factors that influence communication, translating and adapting messages, effective communication and communication breakdowns. consists of 13 chapters, each dealing with one major cause of childhood illness and death. Every chapter has three parts: an introduction, several key messages and supporting information. Introductions provide a brief and powerful call to action, basically the extent of the problem and why taking action is so important. Key messages are then addressed to parents and other caregivers, and supporting information elaborates on the key messages.

Available from: http://unicef.org/ffl

NUTRITION TODAY MATTERS TOMORROW

A Report from the March of Dimes Task Force on Nutrition and Optimal Human Development 2002, 154 pp.



The March of Dimes is a US foundation started by President Roosevelt in 1938 to save US youth from polio; it began as a partnership between volunteers and researchers. The mission of the March of Dimes is to improve the health of babies by preventing birth defects and infant mortality. March of Dimes funded important work on folic acid and spina bifida in the early 90s and advocated for folic acid fortification of wheat flour in the US. March of Dimes interest in nutrition continues to expand. In 1999 the March of Dimes con-

vened an international, interdisciplinary group of 29 nutrition scientists, administrators, public health experts and policy makers to address ways to promote nutrition for optimal human development. Task Force reviewed the scientific evidence and proposed ways to improve health outcomes around the world for two vulnerable groups, women of childbearing age and children under two, through better nutrition. Of special interest to the Task Force was food-based dietary recommendations and a life cycle perspective. This report, with a Foreword by Sir Richard Jolly, former SCN Chair, contains recommendations and suggested implementation strategies covering prevention of micronutrient deficiencies, promoting healthy weight for women, reducing risk of low birthweight, encouraging breastfeeding and optimal growth for children. The report is both readable and practical.

Available from: kbartley@modimes.org

COORDINATES 2002: CHARTING PROGRESS AGAINST AIDS, TUBERCULOSIS AND MALARIA

UNICEF/UNAIDS/WHO, 2002, 23 pp. This report is based on presentations given in Geneva in January 2002 by UNAIDS Executive Director Dr. Peter Piot and WHO Director-General, Dr. Gro Brundtland to the board of the newlycreated Global Fund to Fight AIDS, Tuberculosis and Malaria. Coordinates 2002 is an evidence-based, consolidated review of the three different but interacting diseases. The report summarizes the burdens of these diseases, assesses the tools used to fight them, and discusses the barriers to progress. The report recognizes that these diseases have vastly different biological, political and cultural contexts. For example, the first effective quinine-based treatment for malaria was given to Europeans in the early 1600s. Highly active antiretroviral therapy did not become standard practice, in industrialized countries, until 1996. While prevention efforts for malaria are aimed at encouraging parents to put their children under bed nets, the challenge in preventing HIV infections is to motivate young people to alter sex and drug use behaviours. TB, on the other hand, has been addressed by public health in an organized way for more than a century. The report highlights the interactions between the diseases. For example, HIV makes TB more deadly and complicates control efforts. The report reaffirms the value of prevention, but finds that prevention tools are little used. Fewer than 10%, often fewer

than 1%, of children under five sleep under insecticide-treated bed nets. The report includes sections on burdens and trends, tools, targets, results, and funding gaps. Some of the facts seem very bleak indeed (eg "in many parts of Africa, the prevalence of malaria infection in children simply could not get much higher"), on the other hand, the evidence presented here confirms these diseases can be controlled. Absent though is any analysis of a role that nutrition interventions can play in the fight against these three infections.

Available from: www.who.int

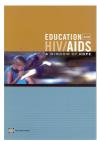
PREVENTION OF MOTHER-TO-CHILD TRANSMISSION OF HIV: SELECTION AND USE OF NEVIRAPINE

World Health Organization WHO/RHR/01.21, 2001, 16 pp.

The UN agencies recommend a threepronged strategy to prevent transmission of HIV to infants: a) primary prevention of HIV among parents to be, b) prevention of unwanted pregnancies among HIV-infected women, and c) prevention of HIV transmission from HIV-infected women to their infants through the provision of antiretroviral drugs to HIV-infected pregnant women and their infants, safe delivery practices, and counselling and support for safer infant feeding practices. A technical consultation on the prevention of mother-to-child transmission of HIV was convened by WHO in Geneva in October 2000. Participants reviewed available evidence on the efficacy and safety of antiretroviral prophylactic regimens used for the prevention of mother-to-child transmission in resource limited settings. The consultation concluded that all regimens that have been shown to be effective in controlled clinical trials can be recommended for use in prevention programmes in such settings. This technical note provides summary information on the nivirapine trials, and the technical basis for recommendations. Work currently underway in South Africa will provide further information on the effects of exclusive breastfeeding combined with nivirapine therapy on transmission rates and infant health and nutrition outcomes. Available from: http://www.who.int/ HIV_AIDS/MTCT/Nevirapine/en/

EDUCATION AND AIDS:
A WINDOW OF HOPE
The World Bank, 2002, 79 pp.

who_hiv_aids_2001.03.pdf



This document was prepared by members of the World Bank's Education team led by Don Bundy (Chair of the SCN Working Group on Nutrition of the School Age

Child from 2000-2002) and Manorama Gotur. The central message is that the education of children and youth merits the highest priority in a world afflicted by HIV/AIDS. This is because a good basic education ranks among the most effective, and cost effective, means of HIV prevention. It also merits priority because the very education system that supplies a nation's future is gravely threatened by the epidemic, particularly in areas of high or rising HIV prevalence. The document argues for a broad strategic response to HIV rooted in education and set within a national, multisectoral context. Responses to the epidemic have too often been piecemeal, small scale, health focused and weakly integrated into related efforts. Strong political commitment is key to addressing such shortcomings. With sections on HIV and why education matters, the impact of HIV on education, case examples of country responses and action strategies, this document covers a lot of the basic ground concerning linkages between education and various development outcomes, and how these relationships as changing in the face of HIV/AIDs. One surprising gap is the lack of any guidance on the use of food in the school setting, for education and for nutrition.

Available from: www.worldbank.org

WE THE CHILDREN: MEETING THE PROMISES OF THE WORLD SUMMIT FOR CHILDREN

UNICEF, 2001, 102 pp.



This report is issued by UN Secretary General Kofi Annan. The report assesses the progress made in meeting the commitments made to children at the 1990 World Summit for Children. It also includes best practices and lessons learned, obstacles to progress, and a plan of action for building a world fit for children. This report is an updated and adbridged version of the Secretary-General's report (with the same title), released in May 2001, summarizing end-ofdecade accomplishments. What has been achieved for nutrition? The goal to reduce underweight in underfives by half has been only partially achieved. More than 40 countries are reaching the large majority of their children (over 70%) with at least one high dose vitamin A supplement each year. As many as one million child deaths may have been prevented in this way in the last three years alone. However, many countries are now dismantling national immunization days and a new distribution system needs to be found. Exclusive breastfeeding rates increased over the decade, however, only about half of all infants are exclusively breastfed "for the first four months". There has been no change in rates of iron deficiency anemia rates. We the Children will be especially useful to policy-makers, journalists and students as a reference tool and a study of the progress that can be achieved through goal-oriented development planning.

Available from: http://www.unicef.org/pubsgen/wethechildren/index.html

GLOBAL SCHOOL FEEDING REPORT 2002

World Food Programme, 2002, 55 pp.



With an introduction by Catherine Bertini, this report is the first on WFP's global school feeding campaign. While recognizing that the use of food to support education is not a new idea, the report reflects on the new strategies employed in WFPassisted school feeding programmes. WFP continues to emphasize the importance of girls' education. To help close the gender gap in schools, WFP provides take home rations to families. These help to compensate for the loss of their daughters' labour and earning potential, so that they can attend school. Take home rations are also provided to families caring for children who have lost parents to AIDS, war or natural disasters. WFP also provides deworming treatment for school children, where prevalence of helminths is high and the problem untreated. The report describes this work in pictures and pie charts. It also presents information about the Argos Satellite and Monitoring System, a sturdy, weather proof device equiped with a touch screen or keypad, a processing unit, an Argos satellite transmitter and an antenna. This device can be used by teachers to enter attendance records, food aid commodity counts, ration servings and other data and transmit directly from the school, via France, to WFP in Rome. The device was tested by WFP in 2001 in eleven countries with encouraging results. WFP has also prepared Basic Guide: School Feeding, which provides simplified guidelines on policy rationale and objectives of school feeding, and practical information on rations, food safety, health and sanitation, and monitoring and evaluation (available from the WFP School Feeding Support Unit, WFP in Rome).

Available from: www.wfp.org or email: schoolfeeding@wfp.org



STATE OF THE WORLD'S NEWBORNS
Save the Children, 2002, 49 pp.

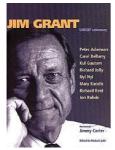


Each year an estimated 4m babies die before they reach the age of one month, and 4m more are stillborn, dying between 22 weeks of pregnancy and birth. 98% of these newborn deaths take place in developing countries, and for the most part these newborn deaths occur at home in the absence of any skilled health care. There are enormous disparities worldwide; a mother in Africa is 30 times as likely as a mother in western Africa to lose her newborn in the first month of life. This State of the World's Newborns reviews the most recent data on the newborn. The report reveals alarmingly poor health and quality of health care for mothers and newborns in all developing countries. While there has been a dramatic reduction in underfive mortality in the past 20 years, there has been relatively little change in newborn mortality. Proven cost effective solutions exist to save many of these lives. The report points out that low birthweight is a secondary cause of 40-80% of newborn deaths. It advocates for the broad use of food and vitamin supplements to improve maternal nutrition as part of a development effort aimed at alleviating poverty, ensuring household food security and promoting healthy diets. Statistical tables provide information for 163 countries regarding 12 indicators relevant to new born health and survival. The countries in the tables represent over 99% of the world's births. The foreword is by Melinda Gates, co-founder of the Gates Founda-

Available from: www.savethechildren.org

JIM GRANT: UNICEF VISIONARY

Edited by Richard Jolly, with a foreword by Jimmy Carter UNICEF, 2002, 173 pp.



Edited by Sir Richard Jolly who worked with Jim Grant as UNICEF's Deputy Director of Programmes from 1982 to 1995, this book gives glimpses, many very per-

sonal, of Jim Grant's leadership and achievements during his period as Executive Director of UNICEF. Jim Grant was appointed by Jimmy Carter to head UNI-CEF in 1980, he served in this position until 1995. Each piece is written by one of Mr. Grant's close colleagues: Peter Adamson writes about "the mad American", Jon Rohde about the early influences on Jim Grant's life and his childhood in China, Nyi Nyi on building foundations for a new perspective at UNICEF, Richard Reid on stopping wars for children, and Kul Gautum on the ten commandments of Jim Grant's leadership for development. A closing chapter provides some ten pages of Jim Grant's own words. This book is very special, a celebration of great achievement. The origins of the GOBI movement, the child survival and development strategies, the settings of goals and targets for nutrition, the Children's Summit of 1990 are all explained in intriguing detail.

Available for \$10.— from Amazon.com or from: http://www.unicef.org/pubsgen/jimgrant/

WEAVING THE SOCIAL FABRIC: 3 STRANDS OF AN INTEGRATED HEALTH-COMMUNITY RESPONSE TO HIV/AIDS

WHO, 2002, 6-page fold-out

This is a memory card describing how WHO will contribute to the global effort against the HIV/AIDS pandemic by intensifying its activities, and by providing support to national authorities as they seek to scale up their responses. The three strands are improving knowledge, preventing infection and providing care and support. The absence of affordable drugs to treat HIV infection and AIDS-related conditions has resulted in enormous strains being placed on health care infrastructures. WHO supports provision of voluntary testing and counselling, comprehensive care packages to include management of opportunistic infection, and ARV standardized protocol for resource poor settings. The essential care package is explained. Nutrition is not mentioned.

Available from: www.who.int

THE OPTIMAL DURATION OF EXCLUSIVE BREASTFEEDING —A SYSTEMATIC REVIEW

by Michael Kramer and Ritsuko Kakuma, WHO, (WHO/NHD/01.08), 47 pp, 2002; and Report of an Expert Consultation, Geneva, March 28-30, 2001, also published by WHO in 2002

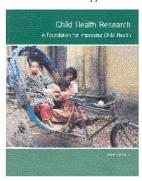
There has been a long-standing debate over the optimal duration of exclusive breast-feeding centering on the so-called "weanling's dilemma" in developing countries: the choice between the known protective effect of exclusive breastfeeding against infectious morbidity and the theoretical insufficiency of breastmilk alone to satisfy the infant's energy and micronutrient requirements beyond four months of age. The primary objective of this review was to assess the effects on child health, growth and development, and on maternal health, of exclusive breastfeeding for six

months versus exclusive breastfeeding for 3-4 months with mixed breastfeeding, thereafter through six months. The researchers found that infants who are exclusively breastfed for six months experience less morbidity from infection than those who are mixed breastfed as of three or four months, and no deficits in growth among infants who are exclusively breastfed for six months. Moreover, mothers of these infants have more prolonged lactational amenorrhea. Exclusive breastfeeding for the first six months of life in all country settings is thus recommended public health policy. This work was first presented to the SCN in Nairobi in April 2001.

Available from: www.who.int

CHILD HEALTH RESEARCH— A FOUNDATION FOR IMPROVING CHILD HEALTH

Global Fund for Health Research and WHO, 2002, 30 pp.



Progress in public health depends on the systematic critical review and analysis of current practice with a view to doing things better in the future. This is the essence of research. Although child health has improved overall, three of the ten most important conditions of the global burden of disease still are diseases of childhood -respiratory infections, perinatal conditions and diarrheal diseases—causing over half of child deaths. This publication summarizes some of the ways in which research findings have lead to very significant improvement in child health: eg, diarrhea management, breastfeeding promotion, prevention of mother to child transmission of HIV and controlling vitamin A deficiency. An updated figure shows the contribution of malnutrition to child deaths as 60%, rather than 54% seen in previous WHO publications.

Available from: http://www.globalforumhealth or www.who.int

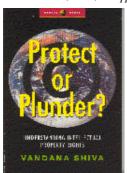
DIALOGUE OR ENGINEERING OF CONSENT? OPPORTUNITIES AND RISKS OF TALKING TO INDUSTRY

Judith Richter, IBFAN-GIFA, Geneva, 24 pp. Campaigns which challenge large corporations to act in socially responsible ways are not new. Since the 70s, citizen action groups have been attempting to achieve change by means of public awareness raising, boycotts, shareholder resolutions, postcard mailings, court cases and other strategies. At first, most of the corporations and business associations which were the ob-

jects of criticism reacted either by denying responsibility or by attempting to discredit those who criticized them. Today, however, the corporate community casts "dialogues" with critics as one of the best ways to deal with contentious issues. What lies behind the offers of large corporations and business associations to enter into dialogue with them? This publication looks to various sources to answer questions like this: public relations textbooks, academic publications on propaganda, and analyses of citizen action groups, to name a few. Available from: email: info@gifa.org

PROTECT OR PLUNDER: UNDERSTANDING INTELLECTUAL **PROPERTY RIGHTS**

Vandana Shiva, 2002, 146 pp.



This new series published by Zed Books in collaboration with a number of NGOs (including Third World Network and the Dag Hammarskjold Foundation) tries to deal with leading global issues and to stimulate new thinking and social action. This title, by a world renowned environmental leader and activist, deals with intellectual property rights, TRIPs and patents. Shiva shows that the kinds of ideas, technologies and identification of genes, even manipulations of life forms that can be owned and exploited for profit by corporations is a vital issue to all concerned with food security and nutrition. She argues that the unprecedented widening of the concept of intellectual property does not in fact stimulate human creativity and the generation of knowledge, on the contrary it increases vulnerability of the poor.

Available from: Zed Books—http://www. zedbooks.demon.co.uk/

BUILDING PARTNERSHIPS FOR FOOD SECURITY

UN System Network on Rural Development and Food Security FAO, 2002, 48 pp.

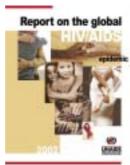


The SCN Secretariat is often asked about the connection between the SCN and the ACC Network on Rural Development and Food Security, based at FAO. The Network recently took a new name, the UN System Network on Rural Development and Food Security, and was set up in 1997 to act as a coordination mechanism at the country level for follow-up to the World Food Summit. Lavishly illustrated, this publication explains the work of the Network. The Network develops partnerships. It brings national stakeholders together to help governments translate the World Food Summit Plan of Action into concrete. practical action. The Network also reinforces ties between UN system organizations and other stakeholders to foster complementarities and synergies. It operates via national thematic groups working on rural development and food security. Promoting cassava research and production in the Congo, promoting poverty reduction efforts in Ethiopia, strengthening capacities in agricultural training in the Gambia are examples of the country-level work spearheaded by the Network.

Available from: www.rdfs.net

REPORT ON THE GLOBAL HIV/AIDS EPIDEMIC

UNAIDS, 2002, 226 pp.



This global report is published every two years, timed to coincide with the world AIDS congress. It is written by staff of UNAIDS drawing on expertise from the co-sponsoring agencies (there are now eight). In the preface, Dr. Peter Piot, Executive Director of UNAIDS, laments the fact that the epidemic has turned out to be far worse than predicted. The epidemic is still in its early stages, effective responses are possible but only when they are politically backed and full scale, and unless more is done today, the epidemic will continue to grow. The report describes a series of shifts in fundamental thinking about the epidemic. For one, access to comprehensive care and treatment for HIV/AIDS is not an optional luxury. Access to care is a basic necessity in programming in every setting and needs to encompass the full continuum, including home based and palliative care, treatment of infections and ARVs. The chapter on care and support contains just less than one page on the role of nutrition, beginning with "the inclusion of nutrition as a core part of any HIV care package is essential". SCN News asks, is there an evidence base to say more?

Available from: http://www.unaids.org

THE LEAST DEVELOPED COUNTRIES **REPORT 2002:**

ESCAPING THE POVERTY TRAP UNCTAD, 2002, 265 pp.



Forty-nine countries are currently designated by the UN as least developed countries. The list is reviewed every three years by ECOSOC. The UN has hosted three conferences on the LDCs. Kofi Annan urged governments to ensure that the third conference, unlike the first two, would mark "a real turning point in the everyday life of poor people in the poorest countries". The purpose of this report is to contribute to that vision by providing an analytical base for national and international policies designed to promote poverty reduction in these countries. The central message of this report is that there is a major, but underestimated, opportunity for rapid reduction in extreme poverty in the LDCs through sustained economic growth. However, this opportunity is not realized in most LDCs because of an international poverty trap, i.e., poverty has effects which act as causes of poverty. The report argues that poverty reduction strategies should work for LDCs but don't, and suggests an alternative approach as well as new poverty estimates (using something called a "national-accounts-consistent" method). The new poverty estimates show that most LDCs are characterized by a situation in which absolute poverty is all-pervasive throughout society. The incidence and the depth of poverty are particularly severe in African LDCs; while rates are very high in Asia, Asian poverty is relatively less severe. The incidence of extreme poverty is increasing in LDCs as a whole. A section on human development targets includes mention of "malnourishment". Some 13 of the 34 LDCs with data are on track to achieve the goal of halving malnourishment by 2015. Curiously, halving malnutrition among pregnant women in LDCs by 2015 is listed as a suggested indicator for monitoring progress towards human development goals, but the report notes that there are no specific data available on nutrition of pregnant women.

Available from: http://www.unctad.org/../en/ pub/ps1ldc02.en.htm

HIV/AIDS: A GUIDE FOR NUTRITION, CARE AND SUPPORT

Food and Nutrition Technical Assistance Project, AED. Washington DC. 2001, 55 pp.

This guide provides information for affected households and communities on how to live a healthy life from the time of infection with HIV through the progres-



food and diet messages included in this guide first draft, "an idea" for discussion. are appropriate to help all adults and children Available from: www.fao.org lead healthier, more productive lives. The guide does not cover drug treatment and preventive practices, but complements other references on this topic. The guide refers to the nutritional care and support needs of individuals infected with HÎV; that is, they have the virus with or without signs of AIDS. The In September 2001, IFPRI and its 2020 Vision guide is also designed for individuals, families Initiative sponsored an international conferand communities affected by HIV; that is, they may or may not be HIV-infected but are experiencing the social, economic and often hunger, malnutrition and unsustainable natudesigned with the view that sound nutrition who attended the conference considered the practices will benefit both infected and afbasic facts, coping with HIV, food managesymptoms and illnesses, nutritional issues concerning medical therapies (both modern and children, food based approaches to support affected households and communities. Relevant references are included for each module; many of these references are guidebooks, pamphlets and drafts produced by African ministries of health, agriculture, or social services. Several key references were they "slam the door on opportunities". Acproduced by prominent African NGOs, for example the Network for African People Living with HIV/AIDS based in Kenya. This resource management. High-priority policy guide is well written and very practical.

ANTI-HUNGER PROGRAMME. REDUCING HUNGER THROUGH AGRICULTURAL AND RURAL DEVELOPMENT AND WIDER ACCESS TO FOOD 1st draft.

FAO, Rome, May 2002, 23 pp. This publication, and the proposed Alliance against Hunger that it describes, were launched by the Economic and Social Development Department of the FAO at the recent World Food Summit—5 yrs later event. The Alliance is aimed at mobilizing political will, technical expertise and financial resources so that the target of reducing hunger by at least half by 2015 can be achieved. (The terms hunger, malnutrition and malnourishment are used synonymously in this report.) The Alliance would bring together governments of poor and rich countries, the international community and civil society, from parliamentarians to concerned citizens. This report describes the economic benefits of accelerating the achievement of the 1996 goal as being in the range US\$120b per year. Achieving the goal would also improve the chances of meeting the Millenium Development Goals, not only for poverty but also for education, child mortality, maternal health and disease. So, hunger is a moral outrage and imposes huge costs on societies. Why then is so little done? The report argues that this is because political will is lacking and, consequently, resources have not been adequately mobilized. An incremental set out. Total proposed investment costs institutions—formal and informal, national amount to US\$23.8b, the largest part of this and international—shape human progress. It Held to RanSom, a press kit of the International

people may not know their HIV status, the about its work is unclear, however, this is a advance the human development of all peo-

REACHING SUSTAINABLE FOOD SECURITY FOR ALL BY 2020 **GETTING THE PRIORITIES** AND RESPONSIBILITIES RIGHT

IFPRI, May 2002, 34 pp. ence in Bonn to bring together the actors needed to achieve a world free from poverty, driving forces that will determine the difficulty steps required to achieve it. Amongst the and continuing health and nutrition crises. Micronutrient deficiencies, HIV/AIDS, tubertions must address the causes of food insecurity, malnutrition and unsustainable natural actions are needed in seven broad areas: investing in human resources, improving access to productive resources, improving markets, expanding research efforts, improving natural resource management, promoting good governance and supporting sound trade policies. The first of these, investing in human resources, includes improving access to health care, clean water and sanitation and child care, fighting micronutrient deficiencies, food safety and educating girls and boys. Nutrition also appears, logically and prominently, in

Available from: www.ifpri.org

sections on other policy actions.

HUMAN DEVELOPMENT REPORT 2002 DEEPENING DEMOCRACY IN A FRAGMENTED WORLD UNDP, 2002, 277 pp.



With special contributions from Nobel laureates Kyi and Williams and rock star Bono of average annual public expenditure required U2 (on p 104), this year's Human Developfor a multicomponent programme intended to ment Report is about politics and human de- K. Oniang'o, Editor-in-Chief. < www.ajfns. lead to the achievement of the goal by 2015 is velopment. It is about how political power and net> would be expansion of rural infrastructure and is also about what it will take for countries to Planned Parenthood Federation on the occa-

sion of the disease. Because a majority of market access. How the Alliance would go establish democratic governance systems that ple, in a world where so many are left behind. Politics matter for human development because people everywhere want to be free to determine their destinies, express their views and participate in decisions about their lives. These capabilities, it is argued, are just as important for human development as being able to read or enjoy good nutrition. The Report surveys the dramatic progress in opening up political systems and expanding political freedoms throughout the 80s and 90s, as well as the sombre realities of the post-cold war era. It argues that countries can promote human health consequences of the virus. The guide is ral resource management. The 900 people development for all only when they have governance systems that are fully accountable to all people. The first chapter provides a sumfected populations. There are six modules: of achieving this vision and articulated the mary of progress against the Millennium Development Goals. These eight goals for develment for adults living with AIDS-related nine driving forces is emerging, re-emerging opment and poverty eradication are to be achieved by 2015 (see SCN News 23, p 49-50). Many countries have made progress, but and traditional), recommendations for infants culosis and malaria and chronic diseases all much of the world, generally the poorest compromise food and nutrition security in countries, seems unlikely to achieve the goals. many development countries. Most develop- The Report cites child underweight data as ing countries also face a double burden of well as the FAO indicator of dietary energy malnutrition: extensive undernutrition and supply as evidence for progress towards elimiovernutrition often in the same household. nating hunger. Other chapters cover deepen-These crises not only destroy human lives, ing democracy by tackling democratic deficits, democratizing security to prevent conflict and to build peace and democracy at the global

PROGRAMMING OF CHRONIC DISEASE BY IMPAIRED FETAL NUTRITION

EVIDENCE AND IMPLICATIONS FOR **POLICY AND INTERVENTION STRATEGIES**

Helene Delisle., WHO (NPH/02.1), 2001, 93 pp. The purpose of this very comprehensive review is to assess recent evidence of the link between fetal nutrition and cardiovascular disease risk markers in later life, the mechanisms, and the causal pathways, based on epidemiological and experimental data, and to highlight some implications for policy and intervention strategies from developing country perspectives. The focus is on fetal programming, while acknowledging that the process may also extend to early postnatal life. The link between poor fetal growth and cardiovascular disease risk is given emphasis, rather than the determinants of impaired fetal growth per se. There are chapters on the concept of fetal programming of chronic diseases, experimental models of fetal programming and possible mechanisms, underlying mechanisms, the role of maternal nutrition, and susceptibility to post natal influences. A final chapter covers controversial areas and related hypotheses, such as folate deficiency, the thrifty genotype and low socioeconomic status as a confounding factor.

OTHER PUBLICATIONS RECEIVED BY THE SCN SECRETARIAT OVER THE PAST SIX MONTHS

African Journal of Food and Nutritional Sciences, Volume 2, No 1, March 2002. Professor Ruth

sion of the one year anniversary of George Bush's global gag rule.

Press kit prepared by FAO for the World Food Summit - 5 years later. This contains an important excerpt (a graphic) from the Commission on the Nutritional Challenges of the 21st Century, chaired by Professor Philip James, which reported to the ACC/SCN in 1999. The final report of the Commission was published by the Food and Nutrition Bulletin in September 2000.

Mobilizing the political will and resources to banish world hunger. Technical background document for the World Food Summit - 5 years later. FAO, 2002, 104 pp.

Macroeconomics and Health: Investing in Health for Economic Development Report of the Commission on Macroeconomics and Health, Jeffrey Sachs., 2001, 202 pp.

South African National Guidelines on Nutrition for People Living with TB, HIV/AIDS and other Chronic Debilitating Conditions. Department of Health, South Africa and UNICEF, 2001, 28 pp.

Living Arrangements of Older Persons—Critical Issues and Policy Responses. Population Bulletin of the UN. Special Issue Nos. 42/43. Department of Economic and Social Affairs. UN, New York, 2001, 392 pp.

Handbook for Emergencies. 2nd Edition. UNHCR. Undated, with a foreword by Ms. Ogata, who mentions that the 1st edition was printed 17 years ago, 405 pp.

Prevention of Mother-to-Child Transmission of HIV in Asia. Practical Guidance for Programs. By Elizabeth Preble and Ellen Piwoz, Linkages Project, June 2002, 73 pp. The 10/90 Report on Health Research 2001/2002. Global Forum for Health Research, Geneva, 2002, 224 pp.

Anemia, iron deficiency and iron deficiency anemia. INACG Statement prepared by Penelope Nestel and Lena Davidsson. March 2002. <inacg.ilsi.org>

Attacking the Double Burden of Malnutrition in Asia and the Pacific. By Stuart Gillespie and Lawrence Haddad. ADB and IFPRI, 2001, 178 pp.

The Science of Infant Feeding. Edited by Arun Gupta, 310 pp.



PLEASE CONTINUE SENDING IN YOUR REPORTS AND PUBLICATIONS

— We will do our best to include them in an upcoming issue

Congratulations India!

To commemorate India's commitment to the elimination of IDD, this stamp was released on IDD Day, October 21, 2001





RULLETIN BOARD

Courses

The Leeds Course in Clinical Nutrition in "Managing Clinical Nutrition" 3-6 September 2002

This course is intended to provide a thorough grounding in all aspects of clinical nutrition and will appeal to clinicians, dieticians, hospital pharmacists, nursing staff, nutritionists and others with interest in patient nutrition. Information and applications forms can be obtained by contacting: s.armitage@leeds.ac.uk and www.clinical-nutrition.co.uk

Conferences

Short Course in Evaluation of Health Programmes in Complex Emergencies at the London School of Hygiene & Tropical Medicine 16-20 September 2002

This innovative course provides an introduction to the theory, practice and methodologies required for the evaluation of health sector interventions in situations characterised as conflict induced humanitarian emergencies. Total course fee is £650.

For further information contact Dr. Egbert Sondorp at +44 (0)20 7612 7883 or egbert.sondorp@lshtm.ac.uk

Regional Course in Participatory Approaches to Sustainable Agriculture for East and Southern Africa Sponsored by the Sustainable Agriculture Centre for Research, Extension, and Development in Africa (SACRED Africa), this course will take place in Jinja, Uganda from October 13-18, 2002. Deadline for registration is September 1, 2002 and course fee is US\$500.

Contact Eusebius J. Mukhwana at email sacred@africaonline.co.

World Breastfeeding Week, 1-7 August 2002!

This year's theme is promoting *Breastfeeding: Healthy Mothers and Healthy Babies.*

For more information and materials contact: www.waba.org.br

4th Biennial Agricultural Biotechnology International Conference 15-18 September 2002

Visit www.abic.net for more information on how to register

Call for Abstracts!

The 5th International Conference on Dietary Assessment Methods, hosted by the Institute of Nutrition, Mahidol University, Thailand, will be held on 26-29 January 2003 in Chiang Rai, Thailand

Conference will have updates on the latest development in areas of dietary assessment and share valuable information and experience among those interested in dietary assessment methods.

Abstract form can be downloaded at www.inmu.mahidol.ac.th/dietconf and are due 31 August 2002

1st African Nutritional Epidemiology Conference

The Centre for Food, Nutrition and Public Health (University of Westminister) and the Department of Hospitality and Food Consumer Science (Vaal Triangle Technikon) aim to integrate the study of social, cultural, dietary and behavioural characteristics to promote health for society. 19-21 August 2002. Auditorium 200, Vaal Triangle Technikon, Andries Potgieter Boulevard, Vanderbijlpark, South Africa.

Contact Ms. Alinah Mokoena alinah@nt.tritek.ac.za

World Summit on Sustainable Development 26 August to 4 September 2002 in Johannesburg, South Africa

This summit will bring together UN Member States, NGOs, business and other major groups to focus on actions to achieve sustainable development and to strengthen the implementation of Agenda 21, adopted at the 1992 UN Conference on Environment and Development in Rio de Janeiro.

Contact www.johannesburgsummit.org/ for more information

WABA Global Forum 2 Nurturing the Future:

Challenges to Breastfeeding in the 21st Century 23-27 September 2002, Arusha, Tanzania.

The forum brings together a diverse group of individuals and organizations and provide a unique opportunity to discuss and formulate strategies to improve infant and young child nutrition and care through the protection and support of breastfeeding, with the focus on the community.

Contact www.waba.org.br for more information

25-28 September 2002 Forum on Common Challenges for Health and Care in Bad Hofgastein, Salzburg, Austria

The 5th EHFG will gather participants from the European Institutions and all relevant societal sectors (patients & consumers, politics & administration, business & industry and science & academia) with the aim of providing a platform for discussion between stakeholders.

Visit www.ehfg.org for more information on registration.

The International Agency for Research on Cancer will hold a Conference on Alcohol and Cancer 7-8 November 2002, in Lyon, France to review the evidence and present new results on the link between alcohol beverage drinking and cancer.

Participants wishing to register free of charge can do so at: www. iarc.fr/alcohol.html

Forum 6 of the Global Forum for Health Research will be held in Arusha. Tanzania 12-15 November 2002. A parallel session on child health and nutrition research will be held on 14 November. Registration fee for OECD countries is US\$250 and US\$50 for others.

For more information and registration details contact www. globalforumhealth.org

1st Central European Congress on Food and Nutrition and 2nd Slovenian Congress on Food and Nutrition, Ljubljana, Slovenia 22-25 September 2002

Contact: Prof. Peter Raspor, Programme Chair, Scientific Secretariat, Biotechnical Faculty, Jamnikarjeva 101, S1-1000 Ljubljana, Slovenia, Tel: +386 (0) 1 423 1161 or peter.raspor@bf.uni-lj.si

Third International Conference and Exhibition on Nutraceuticals and Functional Foods 17-20 Novem-

ber 2002, Beijing, China. Contact cifst@public.bta.net.cn

Food Summit in China 13-16 November 2002, Shanghai, China

Jointly sponsored by the China Institute of Food Science and Technology (CIFST) and the Institute of Food Technologists (IFT).

Contact Prof. Owen Fennema ofennema@facstaff.wisc.edu or Ms. Shao Wei cifst@public.bta.net.cn for more information

XXI International Vitamin A Consultative Group (IVACG) Meeting and 2003 International Nutritional Anaemia Consultative Group (INACG) Symposium 3-7 February 2003, Marrakech, Morocco

Contact IVACG/INACG Secretariat hni@ilsi.org for more information on registering

Workshops for the International Resource Laboratories for Iodine (IRLI). 12 established laboratories (2-3 in each major geographical areas) have been tentatively selected as the initial resource labs for the IRLI network. Plans are to begin with an initial coordinating workshop for representatives from these labs in November 2002 in Cape Town, South Africa.

Contact John T. Dunn jtd@unix.mail.virginia.edu for more information

Save the dates!

12th World Congress of Food Science and Technology, Chicago, Illinois, USA, 16-20 July 2003

The theme of the Congress is 'Feeding the World... Opportunities without Boundaries'. The technical program will consist of plenary lectures, discussion sessions related to the plenary lectures, symposia, roundtable discussions, student symposia and posters.

Visit www.ift.org/meetings/conferences.shtml for more information



Would you like to post an announcement on this bulletin board?

The next issue of SCN News will go to print in December 2002

Contact accscn@who.int



Resources

FREE e-publication from the USAID Development Experience Clearinghouse (DEC). Provides

downloading of latest USAID reports. To subscribe visit: www.dec.org/addtolist.cfm Arbor Clinical Nutrition Updates are now available in French and Russian! The Updates are provided as a free public health service to health professionals and students. They are currently produced in English, Spanish, Portuguese and Japanese, as well as the two new editions.

To request the receive the Clinical Nutrition Updates, please send an email requesting your preferred language to upL@arborcom.com

New emergency nutrition website! www.nutritionnet.net

NutritionNET offers a unique opportunity for nutrition professionals to share detailed knowledge about nutritional research and operations. It aims to promote discussion between nutritionists, field workers, academics, INGOs and donors about nutrition in the emergency context.

Published papers from the Bellagio Conference on the *Nutrition Transition in the Developing World* and its Health Implications held 20-24 August 2001, can be downloaded by visiting the Nutrition Transition website:

www.nutrans.org and clicking on the Bellagio Conferences papers

New Journal! African Journal of Food & Nutritional Sciences

AJFNS disseminates both academic and nutrition programme information, including sections on policies, research, and student contributions, from Africa. Articles are written both in English and French.

For subscription information, contact: www.ajfns.net

IBFAN has posted a report on infant feeding issues at the 55th World Health Assembly on its site: www. ibfan.org/english/news/press/press21may02.html. Also available on the site is the text for a new resolution on infant and young child nutrition. The resolution endorses a new Global Strategy for Infant and Young Child Feeding, the outcome of a 4-year consultative process involving all member states.

New from UNHCR *Health, Food and Nutrition Toolkit*

This CD-ROM contains two sections: The Essential Reference Collection - an essential set of publications from WHO, UNHCR, other UN agencies and NGOs-and the Health, Food and Nutrition Toolkit - checklists, formats, guidance materials and other useful report forms to aid in programme management and co-ordination. The Toolkit is available also in hardcopy upon request.

Contact HCDS for further information: hqts00@unhcr.ch

WHO and top publishers launch the "Access to Research" internet initiative for developing countries

The initiative makes more than 1,000 journals available free or at reduced charge to institutions in about 70 developing countries.

Visit the website: www.healthinternetwork.net for more information

Representatives of NGO/Civil Society participants to the SCN Steering Committee are:

Flavio Valente flvalente@tecnolink.com.br Ruth Oniang'o oniango@iconnect.co.ke David Sanders dsanders@uwc.ac.za







FAO, through its FIVIMS programme, hosted an international scientific symposium on measurement and assessment of food deprivation and undernutrition, June 26-28, 2002 in Rome. The Symposium was funded by the Netherlands. The first day featured six key note addresses: FAO methodology for estimating the prevalence of "undernourishment" by Logan Naiken, the use of household expenditure surveys for the assessment of food insecurity by Lisa Smith, individual food intake survey methods by Anna Ferro-Luzzi, measures of nutritional status from anthropometric survey data by Prakash Shetty and qualitative measures of food insecurity and hunger by Eileen Kennedy. The full papers are downloadable from the FIVIMS website. At the outset of the symposium Harwig de Haen of FAO noted that while work towards refining the FAO methodology (the basis of the yearly FAO Food Insecurity Reports) continues, there is room for complementary measures which reflect slightly different aspects of hunger. Micronutrient malnutrition received scant attention, except in a paper by John Mason, who writes: "Food intake is important for more than dietary energy and inadequate diets have serious consequences beyond hunger, growth failure and thinness. The sensation of hunger probably results from lack of food energy, which is why the concern for hunger has largely meant total food. Micronutrient deficiencies have been referred to as "hidden hunger" although the term never really caught on. Lack of nutrients aside from lack of energy has profound effects for health, for behaviour and economically. Moreover, in theory, the extent of inadequate diet quality is likely to be greater than for quantity ...". The outcomes of the symposium will be reported by FAO in the near future.

The Straits Times of Singapore has an interest in public health and nutrition The Times ran a story on July 17th about a meeting convened by WHO in Singapore in July concerning body mass index in Asians and cut-offs to define overweight and obesity. The Times quotes WHO experts as having decided that cut-offs of 25 and 30 for overweight and obesity, respectively, are not appropriate for Asian adults. The experts noted, according to the Times, that Asians have smaller frames but more fat than Caucasians. They also found that Asians over the age of 18 start to experience an increased risk of obesity-related diseases starting at a BMI of 23. This is lower compared to Caucasians, where risk starts at 25. Appropriate BMI categories for the Singapore population will be released later this year by public health authorities in that country. As cut-offs are reduced, numbers will go up. Causes are largely environmental: food intake and physical activity. Professor Philip James, chair of the International Obesity Task Force (and chair of a major report to the ACC/SCN on nutrition challenges in the 21st century published in 2000), is quoted as saying at the WHO meeting, "Singapore has been designed so you do as little physical activity as possible. It is a society of cars and machines. No one has to do much."

The XIVth International AIDS Conference took place in Barcelona, July 7-12 The theme was knowledge and commitment for action. The conference programme was full and varied, to say the least, and provided the opportunity to learn, share, participate and develop understanding. In the words of the Chair of the conference policy committee, Shaun Mellors, "we need to ensure that these conferences are not seen in isolation \dots but that we use them to account for our responses and actions". Peter Piot, Executive Director of UNAIDS, speaking for Kofi Annan at the opening session said "The only effective treatment at present is antiretrovirals. However, inadequate media attention has been given to the importance of good nutrition." In a plenary address of breathtaking clarity Dr. Bernhard Schwartlander surveyed trends in the epidemic and provided projections. Some of this material appears in the UNAIDS 2002 report (see publications section). Dr. Schwartlander mentioned declining nutritional status caused by high health care costs. Robert Siliciano said, in his presentation on prospects for the eradication of HIV infection: "HIV is intrinsically incurable with antiretrovirals alone". In the scientific sessions new evidence of the large interaction between HIV, malaria and tuberculosis was presented. There were two sessions on nutrition and food security; the first organized by Ellen Piwoz of the Academy for Educational Development, and the second by four UN agencies working together (FAO, IFAD, WFP and WHO). In commenting on the very small room allocated for the session on nutritional care and support for people living with HIV/ AIDS, Professor Kotler of Columbia University said that given that 95% of AIDS patients are malnourished the condition of the meeting room was "an outrage". During discussions of food security and HIV/AIDS, Professor Tony Barnett of the University of East Anglia said that although the UN agencies had documented the impacts of the epidemic in the 80s and early 90s, they " did nothing". The next AIDS congress will be in Bangkok, July 11-16, 2004.

The 7th Dr Abraham Horwitz Lecture Announcement and Call for Proposals

The SCN Secretariat in Geneva announces the 7th Dr Abraham Horwitz Lecture, which will take place in Chennai, India on March 4, 2003. Proposals are invited from young professionals studying or working in the field of international nutrition.

Dr Abraham Horwitz served as the Chair of the SCN between 1986 and 1995. He died on July 10, 2000, at the age of 89 years. In an interview published in *SCN News* in late 1995, just after his retirement, Dr Horwitz sent a message to those working in nutrition:

"Keep the faith that you are committed to a most noble cause, the well-being of people whom you do not know but whose needs you feel intensely. Redouble your efforts in whatever you do in nutrition while being bold and imaginative."

The aim of this Lecture series, established by Sir Richard Jolly in 1996, is to continue Dr Horwitz' heartfelt, highly-valued and extremely generous tradition of mentoring young talent and their ideas for nutrition programmes. Each year a young guest lecturer who possesses the knowledge and commitment to prepare an exceptional paper is invited to make a presentation at the SCN Session. The 7th Lecture will take place in the context of a one-day SCN symposium. The theme of the symposium will be *Mainstreaming Nutrition*. The focus of the Lecture should be on communicating nutrition. The lecture should deal with any aspect of using communication strategies or techniques to convey information about the causes, costs or consequences of malnutrition that help to put nutrition on the development agenda at the local, district or national level. While all proposals dealing with *communicating nutrition* will be considered, preference will be given to those which reflect original thinking, new ideas and first-hand field experience. The symposium will be opened by a high official of the Indian Government, followed by a distinguished keynote speaker.

Young nutrition professionals are invited to submit a three-page (double-spaced) concept paper to the SCN Secretariat in Geneva by Monday, December 9, 2002. Proposals will be accepted by email, regular mail or by fax. The content of the proposed Lecture should relate directly to the theme of the symposium. All proposals meeting the basic criteria (set out below) will be considered, however, preference will be given to those describing new programmatic or policy approaches.

The proposal should contain:

- □ A cover letter containing the applicant's full name and contact details.
- ☐ A one-page summary CV.
- □ A three-page concept paper explaining the scope of the Lecture and the key issues to be presented.
- □ A letter from a professor or other senior professional colleague who is willing to provide guidance during the writing and preparation of the Lecture.

The SCN Secretariat will select the best proposal and the successful candidate will be notified by December 20, 2002. Proposals will be evaluated against three criteria: clarity, innovation, and demonstrated knowledge of the field.

The Lecture will be published as part of the Symposium proceedings in the SCN's Nutrition Policy Paper series. Travel to and from India next March and hotel/living expenses while attending the meeting will be covered by the SCN. The Lecturer will also receive a honorarium of \$500.

Statement by the SCN at its 29th Session

Nutrition in Conflict and Crisis

15 March 2002

We, the SCN, recognize that the humanitarian imperative in complex emergencies is all too often frustrated and undermined by the politicization of humanitarian assistance, including food aid allocations.

Further, as a result of narrowing diplomatic, political and economic engagement with marginalized countries, donor priorities have moved away from funding longer term development needs to a concentration on disaster relief. This has created a situation where humanitarian assistance is forced to focus on life saving activities and meeting immediate emergency needs, not in addressing the root causes of hunger and chronic food insecurity. As a result, emergency humanitarian agencies are faced with the double burden of chronic and acute needs.

There are major disparities in international emergency response. "Forgotten" emergencies, those in low profile areas, suffer from a lack of international agency presence, under-resourcing and minimal media coverage. This is clearly linked to the politicization of humanitarian aid and is a major problem of the international aid system that needs to be urgently addressed.

It is now recognized that nutritional outcomes are a result of complex interactions between physiological, socio-economic, cultural and political determinants of malnutrition. However, this is not always reflected in the policies guiding the allocation of resources, and operational practice, of the international community and national governments.

Furthermore, although the current conceptual framework promotes multisectoral interventions, many agencies find it difficult to cover all sectors and there is an increasing tendency towards agency specialization. Although specialization can improve effectiveness of humanitarian intervention, it can also create gaps in intervention capacity and often means that some of the emergency needs of a population are missed. This problem could be resolved through more clearly defined MOUs between agencies.

We, the SCN, recommend the following actions:

- 1. There is a need for greater resources to be put towards the implementation of longer term more sustainable programmes that promote food security and actively seek to reduce vulnerability and risk of future disaster.
- 2. Food aid resources should be part of a more flexible system of response to nutrition crises. In addition, more resources should be made available for non food costs required to support nutrition programmes, such as health, water, and sanitation activities, and to promote recovery.
- 3. The scarcity of resources for humanitarian interventions often requires that aid is targeted to the groups considered most vulnerable. However, vulnerability is often defined using pre-existing assumptions (e.g. women, children, and female headed households), which may or may not hold true within a particular context. It is imperative that vulnerability and population needs be accurately assessed, and assistance allocated accordingly.
- 4. Food and nutrition interventions in conflict situations require more careful analysis of all the potential impacts (positive and negative) of delivering humanitarian assistance and should seek to maximize good and minimize harm.
- 5. There is an urgent need for all actors to be engaged in rigorous debates on the complexities of aid in crisis situations. This debate is particularly important between policy-makers and technicians and should be furthered by a careful analysis of the politicization of humanitarian assistance, and particularly of food aid.