

Comments on the draft

"Framework for the CARE Review of its Food Aid Programming"

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My most general reaction to the draft paper is to be somewhat confused about what the exercise is about. The paper starts out by stating that CARE definitely does not have control over certain important policy variables affecting what it does, and then sets out a series of issues which, in contrast, are said to be CARE-relevant. The issues listed, and the related questions, look like a summary of what we already know from the more general literature on food aid. There is no linking of these general literature issues to the evolution of CARE's thinking, experience, or concern. So one has no sense of whether CARE would indeed have any control over the variables it raises questions about, of what CARE would do if the questions were answered negatively or positively (most of them are yes-no questions), and of how CARE might go about exercising some control. This leaves the reader in doubt about the purpose of the exercise: how is it different than a simple discussion of the issues about food aid already raised in the literature? Should the exercise not attempt to relate CARE projects and policy to those issues? I assume the answer is the latter, in which case the paper should be more focused on the nexus between the issues and CARE programs and policies.

Before continuing, I want to mention a related aspect of the draft paper that adds to the reader's uncertainty about the nature of the exercise. The reader needs to know what kinds of resources, staff input, and time, CARE intends to commit to the exercise. Many of the

questions posed have been subjects of research and evaluation over the last several years--often with uncertain findings. To make a serious addition to existing knowledge about these particular questions, CARE would have to do considerable additional probing into its own experience. Whether it plans to do so is not clear; this makes it difficult to know what kinds of issues can realistically be raised.

Does CARE hope to address the issue questions by sponsoring additional research? by conducting new field evaluations? by consulting extensively with its field staff on these questions? (e.g., have their reactions to the draft proposal been solicited?) by assigning headquarters staff to the writing of a statement based mainly on internal discussions--some including outsiders, such as that planned for June? From what I understand of this exercise, I assume that a CARE-sponsored research exercise or comprehensive field evaluation of projects is not intended. If that is the case, then the exercise will not be able to add much to what is known about the questions as set forth in the draft paper. For this reason, I think the questions should be posed in a much more CARE-specific way.

Here are some examples of the kinds of more focused questions I am thinking about: What can be brought to bear on the general questions raised in the paper from CARE's own experience? Under what circumstances, from CARE's project experience, have the assertion-questions listed in the paper been true or not true? What issues, though perhaps important, are completely beyond CARE's control? Over which issues does CARE have

more control? And control of what nature? What could CARE do to improve things, that is, if the answers to the questions posed turned out to be in CARE's disfavor? What could CARE do, for example, if it were determined that food supplements cause substitution of food rather than addition to consumption? Would it abandon such programs? Do research on the conditions under which food supplements were additional rather than substitutional? Propose to continue food supplement programs anyway because "the evidence isn't conclusive"? Choose to ignore the evidence?

The approach one takes to such a policy exercise is very much dependent on which of the above answers represents CARE's likely response--and which of the above alternatives is highly unlikely. More generally, one would like to see some of the issues posed as tentatively accepted findings from the literature (rather as "innocent" questions to which the answer might as well be yes as it is no), what CARE thinks about these findings, and what ideas it has about changing project designs (based on its rich field experience) that would make some of the adverse findings likely to occur less frequently.

As another way of suggesting how the questions might be more CARE-specific, I want to call attention to the fact that most of the issues raised are in the form of dichotomous questions that ask for an answer of yes or no: "Does the infusion of external food cause 'system overload' on an already underdeveloped transportation and

storage system?" "When foods that cannot be produced locally are imported, does it...reinforce the recipient country's dependence on the donor...?" "Does the provision of relatively inexpensive imports... discourage governments from investing in agriculture...or create a long-term dependency...?" "Is food aid used by recipient governments as a reward for political support?" "Does the aid function as a palliative...?" "Does food aid...have an adverse impact on community self-help initiatives?" "Does food for work exacerbate patronage systems inimicable to development?" "Does the use of donated food distort the true cost of the program...?" "...is there any evidence that supplementary feeding actually improves the nutritional status of its intended beneficiaries?" "...does the use of [imported] food retard the development of an indigenous supplementary feeding or nutrition program?"

These questions are an excellent summary of the concerns about food aid. But their yes-no form is problematic, for various reasons. (I have marked all the yes-no questions with "yn" in the draft I return to you.) Empirical reality often does not take this dichotomous form; the answer to many of the questions is likely to be yes under certain conditions, and no under others. What one wants to know, then, is the conditions under which the answer is yes (or no), rather than whether the answer is yes (or no). Even if there are some questions for which empirical research could provide a yes-no answer, the state-of-the-art may be such that one can make a respectable empirical argument

for either side of the case--as has occurred with many food-aid issues. As often happens in such cases, one's pre-existing sympathies determine the answer one chooses to accept, and little is gained by going through the exercise--except for providing oneself with additional evidence for arguing a previously held position. Though there is nothing wrong with using information this way--we all do it--it may not be sufficient for an area like food aid, where existing approaches have come under such fire. More nuanced questions about the conditions under which certain things do or do not happen--or the conditions under which the outcomes one desires do happen--are more amenable to the kind of quick evaluation effort CARE wants to do (one can poll one's own field staff, for example). And one can end up knowing more than one did before.

Another problem with yes-no questions--and this particular set of them--is that they raise doubts in the reader's mind about the sincerity of the organization asking the questions. The questions are posed in such a way that a positive answer (e.g., food aid does not undermine local development efforts) means that CARE can continue with "business as usual"; a negative answer, in turn, means that CARE should not do food-aid projects--i.e., that it should get out of the business. Is CARE really interested in subjecting itself to rigorous and objective evaluation of the evidence on questions, a yes-answer to which (or no answer, depending on the question) might cause it to fold as an organization?

If I were an organization, and if there were already substantial support from the literature for adverse answers to the questions, I certainly would not ask them--not because I wanted to be devious and ignore the literature, but because I wanted to continue existing as an organization. I would ask, rather, how I might change what I do so as to reduce the adverse outcomes. To do this, I would need to know under what circumstances these undesirable results tended to occur more, and under what circumstances less--questions that, I think, should be the subject of the exercise. Given the matter of organizational life and death that underlies these questions, in sum, it is hard for an outsider to believe that an organization would ask them in objective innocence. They can be re-phrased in more believable, life-protecting, and still honest ways.

Another way of stating the above points is that asking questions in a yes-no, life-threatening way is to unnecessarily charge the questioning process, let alone the results, with considerable political tension. Management staff responsible for organizational survival will be afraid of truthful answers to the questions, because of the dire results that could ensue if the true answer turns out to be the adverse one. This augments the organizational tension surrounding the policy or evaluation exercise--both within the organization, and between the organization and outsiders called in to participate.

In particular, yes-no questions can augment the tension between headquarters and field staff. Field staff, impatient to obtain

authority to make improvements in project design based on their field experience, will be sympathetic to trenchant criticisms (including adverse answers to the yes-no questions) as a way of paving the way for such improvement. Headquarters, preoccupied with publicity and organizational continuity and survival, will be concerned with the adverse political impact, as well as the extra work that would result, from an exercise that came up with the "wrong" answers to the yes-no questions. This headquarters-field tension can be reduced markedly by asking the questions in a different way--i.e., "under what kinds of programming and project design might the adverse impacts be lessened, or the good impacts maximized?"

Another problem with the yes-no questions, perhaps obvious by now, is that they do not help you to decide what to do after you get the answer. And questions about "what to do" are where the exercise should start, not end; one should not be in the position of asking the what-to-do question only after finishing the exercise--especially since the literature has given us enough raw material for provisional answers to some of the questions.

Finally, many of the yes-no questions of the draft paper are difficult to answer empirically. When one asks such questions, and when they are charged with such significance for the life of the organization, then the answers one comes to--especially through such a short-lived exercise--are not going to have too much more empirical weight than what one already knows from the literature. Asking less



ambitious questions--based on CARE's experience with this or that type of project, and with what has worked well and poorly--will often lead to more empirically trustworthy results.

In the early part of the paper, the writers say that CARE has no control over certain variables determined by donors and political circumstances. What I have been saying so far is that CARE also may have little control over the issues it poses as within its purview--because of the way in which it poses them. I would suggest, then, that CARE clearly state, early on in the paper, what it does have control over--and go on to say how this control could be brought to bear in the various issue areas. If, with respect to some issues, CARE has no control through the way it designs its programs and runs its projects, then it may be of no use to raise the issue in this particular exercise--unless, again, CARE can bring some additional wisdom to bear on the existing literature.

A more CARE-focused approach to the questions would also help provide a guide for limiting the breadth of the exercise. The list of issues is already quite broad for such a limited exercise, and every reader will add on his favorite "missed" issue. Though the result of these accretions will be a more faithful rendering of all the questions about food aid, it will make it more difficult for CARE to come up with findings that help it to do something.

One way to present some helpful constraints to the analysis-- and to make things clearer to the reader--is to pull out some statements that occur later in the paper, almost parenthetically, and introduce them as the constraints and the contexts in which the issues and the experience are to be discussed. Four examples of these statements are: (1) "The choice for CARE is to use food or not to use it"; (2) "80% of CARE donations are food aid"; (3) "people make donations to CARE for food aid, but not other things" (like development assistance); (4) "all of CARE's food aid is channeled through only three missions (India, Bangladesh and Sri Lanka)." As CARE itself points out in passing near the end of the paper, all these statements mean that any radical altering of Title II food aid, let alone termination, could have "significant organizational ramifications" for CARE. This means that CARE has a tremendous vested interest in the way the issue-related questions are posed and answered, which it should not feel shy about stating at the start.

That CARE's vested interest in the answers to the issue questions is so great means that one needs to know what the "significant organizational ramifications" would be, and what ideas CARE has about the feasibility of such changes. Is CARE willing to blithely accept the answers to its yes-no questions, many of which (the answers) could mean "a choice not to use food aid" or a closing down of its three largest missions? If the answer to this question is no (and I assume it is), then CARE should be posing different questions, which relate

more to how it can improve on the outcomes of what it is doing. One needs to ask, for example, not simply whether "food aid is cost-effective" but, rather, what CARE has to say about which of its programs are least cost-effective, which are the most, why, and what it might do to improve its cost-effectiveness. The same questions should be asked about the other issues--food dependency, undermining local development efforts, food substitution vs. addition. The issue-questions, in sum, should underlie the questions asked in this exercise, but they should not be the questions--unless CARE plans to undertake a major evaluation effort, the results of which will make substantial additions to what is already known.

To raise the "literature" questions as is done in the draft paper has a certain "naïve" quality about it that I am sure is not characteristic of CARE. It is as if the questions had only been recently discovered, and that one really had no starting ideas about what some of the answers might be. As already stated, however, the questions have been aired in the literature for some time and, moreover, there is already a presumption as to the answers to many of them--at least under certain circumstances. One knows, for example, that the more you try to target food aid, the more expensive it gets, or that food aid in certain circumstances definitely undermines development efforts. Not only do we have some presumptions as to the answers, then, but it is going to be very difficult to ever obtain solid empirical evidence for some of these questions. Many of our

decisions, then, have to be based on informed hunches and acutely open and critical minds. In lieu of solid empirical information, moreover, our decisions will be based, in many cases, on our pre-existing bias; each side of the issue will be able to bring respectable empirical evidence to bear for that position.

For all these reasons, I think that a more modest and sincere approach to these problems is to start with some of the informed opinion or hunches that have arisen in response to these questions and to ask, rather than the issue-questions, "how can we do better?" and "based on our experience, what types of projects and project designs yield less of the undesirable outcomes and impacts?" It is in this area where CARE is very much the expert and has a rich experience to draw from, rather than in the area of resolving the questions posed in the paper. With more CARE-focused questions, CARE could turn to its own advantage, and deal with quite constructively, some of the judgments made by its strongest critics. And it would not necessarily have to come up with an empirically respectable answer to the issue questions. One could take the list of criticisms from Tony Jackson's Oxfam pamphlet (Against the Grain), for example, and ask (1) in what types of projects and programs were these adverse impacts found not to be the case? and (2), based on this experience, how might one alter projects and programs so as to avoid the adverse outcomes Jackson refers to? Going back to my uncertainty about the scope of this exercise, I would expect that many of these "constructive" questions

could be at least as profitably explored by consulting intensively with CARE's field staff as with food-aid consultants and other outsiders like myself.

A companion approach to the kinds of questions CARE should ask in such an exercise is to assume the worst answer to each issue question-- e.g., food aid does benefit only the better off, food aid does displace indigenous agriculture, food aid does substitute rather than add to food consumption--and then ask what alternative activities, or radically-modified food-aid activities--CARE might engage in. After all, the food-for-cash programs that CARE is about to become involved in might have been seen as unthinkable for CARE some years ago, yet now they have come to be. CARE should force itself to engage in this kind of radical-alternative thinking, not only because it makes for an open mind, but because it can also have an impact on the policy environment--especially as contributed to by an organization like CARE, which devotes considerable efforts to public appeals for, and explanations of, what it does. Considering these more sweeping alternatives also gives the exercise more legitimacy: not only does one dare to ask if food aid undermines indigenous development efforts, or has no impact on health, but one is serious enough about asking the question that one has thought carefully about what one would do if the answer were yes. (Hence proposals like "triangulation" should be raised in some form--as one alternative to the problem, if it exists, of displacement or neglect of local food production efforts.)

One brief comment, to conclude, about CARE's pointing out early in the paper that it is "an intermediary" in project food aid and must accept policy decisions and restrictions of donors, and that the reader should "keep CARE's intermediary role in mind during the discussion that follows" (p. 2). This disclaimer is repeated several times in the course of pp. 2 and 3 (I have marked the passages with an "I"), and I find it somewhat grating and confusing. Perhaps because of the repetition, it takes on a defensive quality--a quality of "we're not accountable and we're only acting on orders from others"--which I am sure CARE did not intend it to have.

Because the disclaimer about the "out-of-control" policy environment is right at the beginning of the paper, the reader is led to expect the rest of the paper to follow with a discussion of "in-control" matters. Yet the list of food aid issues presented in the bulk of the paper, and the related questions, do not seem so much in CARE's control--at least in contrast to the "disclaimed" policy environment. Indeed, one would think that donors and recipient governments would have at least as much control as CARE over the issues laid out in the body of the report. This boils down the disclaimer to a cautionary note about CARE's being affected and constrained by the outside world, which is true of most organizations and therefore may not be worth mentioning.

The disclaimer, finally, seems somewhat uncalled for because CARE, as an organization investing considerable time in explaining

itself to the public, has some power to influence the policy environment. As a humanitarian organization, it has the responsibility of, and a great interest in, making public the findings about food aid that, although it may have no power to change, have a major impact on the quality of what it does. That's how policies get changed--sometimes.

To avoid the confusion about the disclaimer, it might be useful to list briefly the actual variables that are "out-of-control" in the beginning of the paper--and contrast them to an in-control list that introduces the body of the paper. Since I think it will be difficult to find the contrast when one tries to make such a concrete list, it may be more efficient and accurate to limit the disclaimer to one sentence, or leave it out completely.