

**A CALL TO ACTION ON FOOD SECURITY:
THE ADMINISTRATION'S GLOBAL STRATEGY**

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Subcommittee on Africa and Global Health**

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Mr. Chairman, Representative Smith, Members of the subcommittee. Thank you for the opportunity to join this important discussion about global hunger and food security.

I speak today on behalf of CARE, an international humanitarian organization that has worked for more than 60 years in some of the poorest communities in the world. CARE fights root causes of poverty in these communities, last year reaching more than 55 million people in 66 countries. CARE places special emphasis on investing in women and girls because our six decades of experience show that their empowerment benefits whole communities and is critical to moving them out of poverty. This is particularly relevant to the issue we are here to discuss today, as the majority of smallholder farmers are women. Researchers estimate that rural women produce half of the world's food and, in developing countries, between 60 and 80 percent of food crops.¹

Last year, a global food crisis brought much needed attention to world hunger. We need to maintain that focus. Because the crisis is more than just last year's spike. Today more than one billion people, nearly one-sixth of the world's population, suffer from chronic hunger, most of these people living on less than \$1.25 per day

While global child mortality has dropped in recent years, an estimated 8.8 million children still die every year before their fifth birthday, the majority of these deaths from hunger and malnutrition.² This is unacceptable.

People in extreme poverty and hunger live every day on the edge of crisis. To make matters worse, climate change poses an additional threat to our international community's efforts to reduce chronic hunger. A recent report by the International Food Policy Research Institute estimates that rising temperatures could devastate smallholder farmers, particularly in sub-Saharan Africa and South Asia, forcing 25 million more children into hunger over the next several decades.

Climate change and the current fiscal crisis threatens to compound the problem and the likelihood of meeting the first U.N. Millennium Development Goal (MDG) of cutting extreme poverty and hunger in half by 2015.

Thankfully, both the White House and Congress are demonstrating extraordinary leadership in responding to this problem. I congratulate the Obama Administration and Congress for your interest and leadership in fighting global hunger and extreme poverty and working to achieve food security for the most vulnerable populations.

Today, we find an extraordinary convergence of attention in both in the Executive and Legislative branches of government on addressing global hunger and food security. This effort began even before President Obama took the oath of office, with a bipartisan letter signed by you, Mr. Chairman, along with 115 of your colleagues in the House, urging President-Elect Obama to develop and implement a comprehensive, long-term strategy to address global hunger and food security.

The Obama administration has clearly placed food security as a high priority, evident in its first budget request to Congress, as well as its recently released Global Hunger and Food Security Initiative Consultation Document. Legislation to address global hunger and food security has been introduced in both the House and Senate. President Obama, during at the G8 meeting in L'Aquila pledged over \$3.5 billion over next three years, with more than \$1 billion requested in fiscal year 2010 (FY10). This funding is included in both the House-passed and Senate committee-passed FY10 State Foreign Operations appropriations bill.

Mr. Chairman, your leadership on this issue has been critical, and we appreciate your subcommittee making the time for this important hearing today, as well as the hearing you held in June on local and regional purchase of food aid. Your requested GAO reports on the subject, including most recently, the report on how local and regional procurement can enhance the efficiency of U.S. food aid, have helped educate and raise public awareness of global hunger and food insecurity. We also appreciate that you were an original cosponsor of H.R. 3077, the Global Food Security Act.

CARE is also actively involved in the Roadmap to End Global Hunger coalition, a broad-based coalition of NGOs that released the Roadmap to End Global Hunger report with recommendations for a comprehensive plan to address global hunger and food security. CARE believes that to successfully address global hunger and food security, we must take a comprehensive, whole-of-government approach. We are pleased that this is a central element in the Obama Administration's global hunger and food security initiative, as well as similar congressional efforts.

Mr. Chairman, I speak to you today on what CARE has observed in our decades of experience in fighting global hunger and food insecurity. The United States has a tremendous opportunity to play a leading role in this challenge. To be successful, our food security efforts must be comprehensive. From CARE's perspective, global food security is not only about agricultural development, it is also about the empowerment of women, and ensuring that we are flexible in our food assistance programs.

Obama Administration Global Hunger and Food Security Initiative

The “Global Hunger and Food Security Initiative Consultative Document” released on September 28th by Secretary of State Clinton laid out a new strategy to reducing hunger and ensuring global food security. The strategy is guided by five principles:

- Work in close collaboration with partner countries from a community and country-led approach.
- Address the underlying causes of hunger and food insecurity by investing in everything from research to the development of better seeds, to innovative insurance programs. Women will be at the center of these efforts, because the majority of the world’s farmers are women, they are a wise investment, they invest their earning into their families and communities, and pay back loans at a higher rate.
- Improve strategic coordination at the country, regional, and global level.
- Leverage benefits from multilateral institutions
- Deliver on long-term commitment and accountability

CARE supports the principles outlined in the administration’s food security initiative. This country-led, collaborative approach is critical to the ultimate success of any food security initiative.

CARE strongly supports the idea that to accomplish true food security, we must address underlying causes of hunger. We are pleased this is a central focus to both the Administration’s proposed initiative, as well as legislative efforts here on Capitol Hill. In order to achieve measurable improvements in food security, it is essential to identify who the food insecure are, to monitor their access to food and nutritional status over time, prompt early action to avert impending food crisis, and to evaluate the impact of food security initiative programs on these conditions.

A central focus of both the Obama Administration and congressional efforts to address global hunger and food insecurity is to increase agricultural production. CARE supports this approach and we are involved in hundreds of agricultural development projects around the world. We must develop a new paradigm for agricultural development that emphasizes increased productivity that is more environmentally sustainable. Since 2004, CARE has been developing a diverse portfolio of regenerative and conservation agriculture projects to develop robust and climate-resilient agricultural livelihoods in vulnerable communities, particularly in sub-Saharan Africa.

CARE is currently working in 11 countries in Sub-Saharan Africa (Mozambique, Tanzania, Angola, Mali, Ghana, Sierra Leone, Liberia, Zambia, Zimbabwe, Malawi and Lesotho) as well as a growing number of countries in Central America and the Caribbean. Our specific focus on regenerative and conservation agriculture (RCA) addresses some of the fundamental problems undermining food production in Africa: those of poor and declining soil fertility and inadequate and unpredictable rainfall, which is becoming a growing problem as a result of climate change. RCA has been widely adopted in the West and can have a substantial effect on farming households by increasing incomes and decreasing vulnerability to unfavorable soil and climatic conditions.

That said, while agricultural development is a critical element of a successful food security initiative, it is not enough to assume that improvements in agricultural production alone will achieve global food security. A comprehensive food security initiative to combat global hunger must also incorporate a number of key areas:

- flexible food assistance
- gender and women's empowerment
- social safety nets
- nutrition support

Flexible, Balanced Approach to Food Assistance

Ensuring that our nation's food assistance programs achieve success at reducing hunger around the world is a critical challenge for all of us. As the largest international food aid donor, contributing over half of all food aid supplies to alleviate global hunger and support development, the United States plays an important role in ensuring global food security. CARE believes the key to any successful global hunger/food security initiative is flexibility. There is no "one-size fits all" solution. The effectiveness of both short-term emergency aid and long-term development programs could be greatly improved if donors would allow humanitarian organizations to choose the most appropriate, cost-effective approach to respond to any given food security situation. Practitioners should be free to use imported food aid where it is most appropriate; free to purchase food locally or regionally, where that would be more appropriate; and free to use cash transfers, vouchers, cash for work, and other non-food interventions, where those are most appropriate. The effectiveness of these programs also would be greatly enhanced by ensuring that early action is supported when the first signs of an impending food crisis are identified through early warning systems.

CARE is particularly pleased that one of the three key objectives in the Obama Administration's comprehensive approach to addressing the underlying causes of hunger is to increase the impact and maximize the effectiveness of humanitarian food assistance. The initiative calls for "the use of right tools" in determining the type of humanitarian assistance to apply. Too often, we may be using the "wrong tool" in our food assistance policy. Decisions about whether to distribute vouchers, local or regionally purchased food, or food sourced in the United States, should be based on two factors: (1) local market conditions; and (2) local or regional availability of food in sufficient quantity and quality to meet local needs. Where markets work well and food is locally available in sufficient quantities and qualities, cash transfers or vouchers are generally the most efficient (quickest and least expensive) form of assistance. Cash transfers and vouchers can also stimulate local production and trade, thus addressing underlying causes of chronic hunger. Where food is locally available, but markets do not function well, direct distribution of local or regionally purchased food is likely to be the most appropriate form of transfer. Where food is not locally or regionally available in sufficient quantity and quality, transoceanic shipments may be called for.

Tied food aid, in other words, shipping food from the United States to developing countries, is expensive, slow, and unpredictable. The cost of tied food aid has been shown to be sufficiently higher – in many cases 30-50 percent higher – than alternative, non-tied sources of food aid. It

does not make sense to spend 65 cents of every dollar in food aid on transportation.³ Moreover, UN World Food Program data shows that between 2004 and 2008 international in-kind food aid donations to 10 countries in sub-Saharan Africa took, on average, 147 days compared with about 35 days for locally and regionally procured food.⁴ As reported in a 2008 Bloomberg series on America's food assistance program, "Dead Children Linked to Aid Policy in Africa Favoring Americans," not only is our food assistance system inefficient, but it has deadly consequences. The series tracked a USAID shipment of food from North Dakota to southern Ethiopia that took more than six months to reach its destination. In the meantime, seven grandchildren of a Bena tribesman died waiting.⁵

In the current fiscal crisis, everything possible must be done to reduce costs and improve the effectiveness of food aid. The United States is now spending nearly 20 times as much on food aid in Africa as it is spending to help African farmers grow more of their own food.⁶ When the U.S. government allows the local or regional purchase of food commodities, humanitarian organizations like CARE can do more with less money.

I have been proud to serve on the Center for Strategic and International Studies (CSIS) Task Force on the Global Food Crisis Task Force, chaired by Senators Robert Casey (D-PA) and Richard Lugar (R-IN) that provided findings and recommendations that led to legislation introduced by the co-chairs, S. 384, the Global Food Security Act. One of the five priority recommendations issued by the Task Force was to modernize emergency assistance. This included doubling the U.S. annual commitment to emergency food relief from \$1.6 billion to \$3.2 billion, while also requiring that no less than 25 percent and as much as 50 percent of these expanded emergency funds be available for local and regional purchases.

Monetization

CARE believes that moving away from the practice of monetization is a critical part of modernizing our food assistance system, and necessary for an effective global hunger and food security strategy.

The American people have generously responded to the needs of hungry people around the world throughout our history. For more than 50 years, the U.S. government's principle strategy for addressing hunger has been to ship American food overseas, either to be distributed to people in need, or to be sold in open market to generate cash to pay for humanitarian programs. CARE used this practice of "monetization" (selling U.S. government food to fund food aid and other anti-poverty programs) for decades. However, our approach to food assistance has evolved over the years. In 2007, CARE made the decision to stop participating in monetization, and we are currently in the process of phasing out our participation in such projects in the developing world completely. CARE found three major problems with monetization:

- 1) Monetization requires intensive management and is fraught with risks. Procurement, shipping, commodity management, and commercial transactions are labor intensive and costly;
- 2) Monetization is economically inefficient. Purchasing food in the United States, shipping it overseas, and then selling it to generate funds for food security programs is far less cost-effective than the logical alternative—simply providing cash to fund food security programs.

3) When monetization involves open-market sale of commodities to generate cash, which is almost always the case, it inevitably causes commercial displacement. It can therefore be harmful to local farmers and traders and can undermine development of local markets, which is detrimental to longer-term food security objectives.

CARE did not make this decision lightly, as it is estimated to cost our organization approximately \$45 million a year. But we are not alone in this view. The Government Accountability Office also concluded the system is “inherently inefficient.” The Chicago Council on Global Affairs, in a 2009 report, calls for improving America’s food aid policies as one its top recommendations.

When it comes to food aid, CARE’s central focus is on helping poor and vulnerable people overcome food insecurity. Our objectives are to save lives, protect livelihoods, reduce vulnerability, and address underlying causes of hunger and poverty – while monitoring for and minimizing any potential harm from using this resource. CARE is committed to maximizing efficiency and impact, and minimizing unintended harmful consequences. Ending the practice of monetization and supporting local/regional purchase of food are means to this end.

Gender and Women’s Empowerment

CARE strongly supports the central focus on the role of women in the Obama administration and Congressional proposed food security initiatives. Women are critical in efforts to improve food security as they make up the majority of agricultural producers in developing countries and the vast majority of primary caregivers. Women make up an estimated 70 percent of smallholder farmers in Sub-Saharan Africa, and 60 percent globally. Rural women produce half of the world’s food and, in developing countries, between 60 and 80 percent of food crops, yet they own only one percent of registered land.⁷

Gender must be a cross-cutting element of any successful food security initiative. Programs that empower women, specifically addressing the needs of women farmers and helping them build their capacity, are extremely important. These include providing new market opportunities for women’s farmer co-ops or helping women learn new techniques to increase the value of their goods through post-harvest activities. It is also important that approaches to combating food insecurity consider the roles of both women and men and address gender-specific barriers to accessing resources, like education, credit, and land tenure. Interventions should be designed, monitored and evaluated through a gender lens to ensure that dynamics at the community and household level are well understood and interventions are designed and implemented accordingly.

Women are, unfortunately, too often left out of decision making bodies and gender inequality needs to be recognized as one of the key challenges to improving food security. Programs that empower women, specifically addressing the needs of women and helping them build their capacity, are extremely important. The International Food Policy Research Institute (IFPRI)’s 2009 Hunger Index Report documenting that hunger and food insecurity is often greatest in countries where there is gender inequality in education, health and nutrition only further

solidifies the argument that without addressing gender inequality in a country specific context food security interventions will not be as effective.

Women's access to and control over key assets, especially land is critical. Specifically, CARE supports the concept of linking women and the very poor to new opportunities throughout agriculture and market value chains. CARE has paid a great deal of attention to this issue and is working to scale up our work in value chains with the goal of empowering 10 million vulnerable women and girls and their families to lift themselves out of poverty.

Gender inequality and the resulting losses in productivity, health and social capital cripple the efforts of poor families and entire communities to obtain and maintain food and livelihood security. Gender inequity also stalls or impedes economic growth, further complicating food insecurity. Recognizing the role of gender inequity in chronic food insecurity, CARE has developed and is beginning to apply an analytical tool, the Women's Empowerment in Agriculture (WEA) Framework to our work. The WEA Framework identifies three key domains of gender empowerment and illustrates how each affects the ability of women and men to pursue their full potential in agriculture. The three domains of the WEA Framework are:

1. Agency: enhancing the capacity of women as individuals to take action and secure shared control over resources and decision making and of men and boys to empower women
2. Relations: building relationships, coalitions and mutual support to expand agency and alter structures
3. Structure: supporting gender-equitable shifts in societal norms and institutions that codify and reinforce equitable gender relations at every level of society

By applying this multi-tiered approach to our agricultural and economic development work, CARE seeks to a) leverage opportunities to build the capacity of individual farmers and poor households while enhancing their ability to produce, add value, and gain access to services they require, b) promote relationships and policies that are more conducive to the equitable participation of women in agriculture and c) foster increased competitiveness, growth, and productivity in the agriculture sectors, in which women and men earn their livelihoods and there is gender equitable distribution of benefits from these activities.

This work led CARE to launch the "A Place to Grow" in February 2008 with funding from the Howard G. Buffet Foundation. The purpose of the initiative is to elevate the issue of gender inequality and women's empowerment in CARE's agriculture and value chain development agendas.

Social Safety Nets

We are pleased that one of the three key objectives of the Administration's comprehensive approach is to increase the impact of humanitarian food assistance and social safety nets. We must help countries create social safety net systems that prevent people on the margins from falling into extreme poverty. Examples of these social protection "safety net" programs are early cash transfers to households to protect livelihoods, and risk mitigation programs.

In many parts of the world, the rural poor live in high risk situations and are utterly uninsured. Natural disasters, crop failures, illness or conflict can force them to use their meager savings, go into debt, eat their seed stock or sell off other economic assets that they need to make a living. It is through scenarios like these that the rural poor can fall into “poverty traps” from which there is little hope of escape. It is for this reason that vulnerable rural households are oftentimes risk-averse – hesitant to adopt new business models or technologies for fear those innovations will expose them to new risks. This is why efforts to help link the rural poor to markets and gain greater access to new technologies and micro-finance services, should be accompanied by increased access to insurance and improved risk mitigation strategies. Evidence shows that helping rural households cope with risk can increase rates of technology transfer and returns to investment in agriculture.

Safety net programs can help people access credit and encourage greater investment in productive inputs and assets. It can also help prevent people who experience transitory poverty following a weather or climate shock from becoming chronically poor.

CARE is working on a collaborative program with the government of Ethiopia and a host of other stakeholders to implement the “Productive Safety Net Program” (PSNP) for highly vulnerable and food insecure households. The program has been recognized for the invaluable assistance it has provided to food insecure households by providing the basis for asset building. However, PSNP has also illuminated the need for additional support to prevent beneficiary households from backsliding into food insecurity and poverty. Graduation from food insecurity depends upon integrated, market-led interventions including “push” mechanisms such as cash transfers and access to financial services and “pull” mechanisms such as enhanced access to growing markets among food insecure producers. In response, CARE is working with USAID and the Government of Ethiopia to implement PSNP Plus. A practical illustration of how CARE coordinates our work in savings-led financial services through Village Savings and Loan Associations (VSLA) and value chain development, PSNP Plus provides select PSNP cash transfer recipients with opportunities to accumulate savings and access to credit through VSLAs while also supporting VSLA members to improve their ability to access growing markets. By 2011, the program is designed to empower over 40,000 poor households to make informed decisions about scarce resources, while facilitating their entry into markets and access to informal and formal financial products and services.

Women and safety nets

It is critical to understand the role of gender when implementing social protection “safety net” programs. In Bangladesh, women in rural communities who have been divorced, widowed or abandoned by their husbands must struggle to survive. Their options are few: some work as domestic servants in their villages, earning 10 cents or less a day; others become beggars; and still others turn to commercial sex work. CARE started the Rural Maintenance Program (RMP) in 1983 to give these women a chance to support themselves and their children.

RMP employed about 42,000 formerly destitute women every year to maintain 84,000 kilometers of unpaved, rural feeder roads across the country. Unions (local governments) oversaw the maintenance of the roads and paid 50 percent of the women’s daily wage of 84

cents (for six hours of work), while CARE covered the other 50 percent. The women put 20 percent of their daily wages into a savings account. They also received training from CARE in health, nutrition and business management. Since 1983, more than 160,000 women graduated from RMP. Thousands of women have gone on to start successful small businesses and have gained the respect of their communities. More than 60 have even been elected to governing councils in their districts.

Norjahan is one such RMP graduate. Her husband died more than 20 years ago, leaving her with two young sons under two. Unable to read or write, Norjahan earned a little income as a seamstress. But it was not enough to feed her children, buy clothing, or pay for health care. She joined RMP in 1993, saved a portion of her daily wages, received business training from CARE, and eventually established a small grocery shop, five chicken farms, and a tree plantation. Now her sons help run the businesses. She also pays other women to tend to the 500 or so chickens in each of the five farms. A few years ago, Norjahan lost 100,000 taka (US\$1,700 at the time) during the bird flu panic. People wouldn't buy her chickens, so her prices dropped by more than 75 percent. Later, she was dealt another blow. She lost 700 diseased chickens. When asked how she coped, Norjahan had the pragmatism of a seasoned entrepreneur, "In business, there are always gains and losses. If I lose this business, I will be lost. I have to eat, so I have to recover." Norjahan received veterinary assistance from the union government and CARE, and worked hard to rebuild her business.

Nutrition

CARE is pleased that preventing and treating under-nutrition is one of the three key objectives under the Administration's Global Food Security Initiative to comprehensively addressing the underlying causes of hunger. Hunger and malnutrition are the primary risks to global health, killing more people than AIDS, malaria and tuberculosis combined. Additionally, chronically malnourished children are unable to develop their cognitive capacities adequately, thus reducing their ability to learn at school and to compete later as adults in the marketplace. It is well recognized that the U.N. Millennium Development Goals (MDGs) cannot be met unless the global issues of malnutrition are resolved. We suggest that nutritional impact play a key role in the food security initiative, and that nutritional status is used as a key indicator of the initiative's effectiveness. Comprehensive nutrition for pregnant women and children under the age of two is critical, requiring not only a focus on availability and access to food, but an emphasis on maternal and child-care practices as well. The most significant way of preventing malnutrition and mortality in infants and young children is to ensure their optimal feeding and care.

Women and nutrition

The number of malnourished children in Africa has increased since 1990, with 13 countries experiencing deteriorating nutrition status, partly due to the mutually reinforcing relationship with HIV and under-nutrition. (UNICEF 2006, World Bank 2006a as cited in Basset 2008) This is a concern for organizations like CARE, which are trying to end extreme poverty.

Malnourished children have impaired immunity, which increases their likelihood of infection. Iron deficiency disorders can lead to irreversible mental retardation, reproductive failure and increased child mortality. Undernutrition is associated with poor educational outcomes and reduced adult earnings. Malnourished children enter school later, repeat grades more often and have higher dropout rates compared to healthy children. Short height among adults (a result of childhood stunting) has been associated with reduced adult earnings in 55 countries.⁸ The cycle repeats itself as malnourished children become adults who are more likely to have children who are malnourished.

Nutritional consequences take their greatest toll from pregnancy through age two, the period during which children's growth rates and nutritional outcomes are highest. Due to weak immune systems and living conditions of poor hygiene and sanitation, young children are highly susceptible to infection, which can exacerbate undernutrition. Damage that accrues during this period is largely irreversible. Early actions during the window of opportunity have the greatest potential for impact. This is why it is so important to increase support for nutritional programs aimed at pregnant and lactating women and children under two.

In recent years, CARE Peru succeeded in using the evidence from its highly effective project in Peru, Sustainable Networks for Food Security, that addressed chronic child malnutrition to advocate for a national policy on this issue. The external evaluation concluded that the project had achieved significant impact among the nearly 300,000 people who participated in the program by cutting chronic malnutrition in children under three by nearly 10 percentage points (34.2% to 24.3%). CARE then led the formation of a coalition of civil society organizations and donors (including USAID and UN agencies) to influence national policy, resulting in a 2006 commitment by the new government of Peru to reduce malnutrition for children under five years of age by five points over five years.

Mr. Chairman, Members of the Committee. You have an opportunity to make an extraordinary difference throughout the world by taking bold action to advance a comprehensive Global Hunger and Food Security Initiative. While this is an exceptional global challenge, to quote Secretary Clinton: "The question is not whether we can end hunger, it's whether we will." The time to act is now. This hearing is an important step. Next, I ask this committee to mark up global hunger and food security legislation – The Global Food Security Act (HR 3077) and the Roadmap to End Global Hunger Act (HR 2817) and stay the course toward comprehensive, flexible food security policies focused on those most vulnerable.

¹ FAO Focus on Women and Food Security. FAO. <http://www.fao.org/focus/women/sustin-e.htm>

² UNICEF "Global Child Mortality Continues to Drop" September 10, 2009.

³ GAO "Various Challenges Impede the Efficiency and Effectiveness of U.S. Food Aid, GAO 07-560

⁴ United States Government Accountability Office "International Food Assistance: Local and Regional Procurement Can Enhance the efficiency of U.S. Food Aid, but Challenges May Constrain Its Implementation, May, 2009

⁵ "Dead Children Linked to Aid Policy in Africa Favoring Americans, Bloomberg, December 08, 2008

⁶ Renewing American Leadership in the Fight Against Global Hunger and Poverty, The Chicago Council on Global Affairs, 2009

⁷ Doss, C. 2001. Designing Agricultural Technology for African Women Farmers: Lessons from 25 Years of Experience.

⁸ Grantham-McGregor et al. 2007 as cited in Basset 2008