Normalising the Crisis in Africa

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Developmental relief has become the central doctrine of ‘good practice’ in humanitarian responses to complex political emergencies. This is despite the fact that a proliferation of such emergencies reflects a failure of development for people in those countries in crisis. Drawing on case study material from Sudan, Somalia, Rwanda and Uganda, this paper challenges assumptions made about the efficacy of developmental relief models in complex emergencies. The trend towards developmental relief practices coincides with an increasing acceptance of higher levels of humanitarian distress in Africa. Myths of aid dependency and the pursuit of sustainable programming in the midst of war are linked to a global reduction in aid. The mantra of ‘local solutions to local problems’ locates the causes of crises firmly within those societies in crisis. It provides a premise for international disengagement, and the denial of international responsibility for the genesis and prolongation of humanitarian crises in Africa. Assigning solutions to the poor, the marginalised and victimised through enhanced ‘participation’ and local financing of services sustains a myth that development is occurring, when in fact levels of distress are rising.

Key words: relief-development continuum, aid policy.

Introduction

The critique of conventional relief strategies in complex political emergencies is well developed (Duffield, 1994; Macrae and Zwi, 1994). This critique, however, has not been accompanied by an analysis of the effectiveness of development aid on conflict management and reduction. This paper draws upon a number of studies conducted by the author on behalf of UN agencies and NGOs in Sudan, Somalia, Rwanda and Uganda over the period 1996–8. It examines what Joanna Macrae (1998) has called the ‘developmentalist attack’ on humanitarian principles by looking at developmental approaches to humanitarian relief which have gained currency in aid policy and practice. The paper seeks to highlight two subjects. First, shortcomings in applying developmental relief models and strategies in complex political emergencies. Second, the negative impact that such developmental approaches to relief assistance can have on the rights, welfare and livelihoods of populations in distress.
Peace from within

In Sudan, the 1996 Review of Operation Lifeline Sudan (OLS) concluded that a key weakness with the UN operation in northern Sudan was the absence of any analysis of the ‘mainstream development process’ (Karim et al., 1996). At the outset of OLS, in 1989, a key UN document for emergency assistance to the displaced proposed to:

help the government of the Sudan to put sizeable amounts of its displaced citizens back into the mainstream development process of the country (cited in Karim et al., 1996: 87. Italics added).

In northern Sudan the international community continues to pursue this objective through programmes such as the UNDP area rehabilitation schemes in war-affected areas of the country. On the premise that peace can only be achieved through development, these rehabilitation schemes are directly linked to the UNDP/UNESCO culture for peace programme. These schemes are being developed in ‘peace villages’ created by the government for war-displaced populations, as part of the government policy of ‘peace from within’ (salam min al dakhal); a policy that promotes self-reliance. The creation of ‘peace villages’ is also directly linked to government military strategy.1 In such places these UN-supported rehabilitation schemes, neatly packaged in project proposals tied up with the language of participatory development, village committees and empowerment, are intended to boost agricultural production and ‘reduce dependence on emergency assistance in areas affected by civil strife’ (UNDP, 1996: 1).

In government-held areas of the Nuba Mountains one such project proposed to ‘resettle [returnees] in peace villages and then promote agricultural development to strengthen their attachment to land’ (ibid. Italics added).

Given that the ‘returnees’ are Nuba who have been cleansed from their former lands by the military, or dispossessed by private or internationally financed parastatal mechanised farming schemes, this objective at best suggests an ignorance of the context, at worst an accommodation with, if not support for, government disaster-producing policies.

In Sudan displacement is not an unintended consequence of war. The history of the war and an examination of labour flight from the south, suggests that displacement is an objective of the warring parties, and part of the ‘mainstream development process’. From such cases one begins to question developmental approaches to relief.

The orthodoxy

The first thing to note is that the developmentalist model of relief is pervasive. Whether in Sudan, Somalia, Rwanda or northern Uganda, crises which have different histories, local characters and dynamics have striking similarities in international aid policy and practice. Whether formulated as the relief-to-development continuum, or linking relief to development, preventive development, or capacity building, developmental approaches are now a central tenet of ‘good practice’ in relief operations. If discussions about the relief-to-development continuum are considered by many to be an old debate, this is probably because it is already part of mainstream
and policy. Whether one talks of official donors, UN or NGOs, the language and strategy is largely the same.

In Sudan, for example, the UN resident co-ordinator asserts that ‘relief should always be administered with the continuum in mind’ (UNCERO, 1996). In Somalia, the relief-development continuum is a living concept. The bimonthly situation report of the office of the UN humanitarian and resident co-ordinator for Somalia goes under the title ‘From Relief to Development in Somalia’. And in what was a serious move to develop a strategic plan for Somalia, the 1997 UN Consolidated Appeal demarcated the whole of Somalia along a continuum from relief to development; dividing the country into crisis zones, transitional zones and recovery zones. Similarly in Rwanda, linking relief and development was an explicit strategy of agencies in the immediate post-genocide period (Macrae and Bradbury, 1998).

Significantly, the developmental orthodoxy is not confined to international relief and development agencies. In Sudan, the government and rebel movements are both fluent in the language of the development continuum. This is not because they share the same development objectives, but rather because as volumes of overseas development aid in Sudan have declined the incentive for authorities to capture development aid resource has increased. Furthermore, as a direct transfer, bilateral development aid helps to legitimise their political claims (see Karim et al., 1996).

Similarly in Rwanda, long-term developmental goals of aid agencies resonate with those of the government, who in 1996, after the refugees returned from Zaire, served notice to the international community that the ‘emergency is over’, and that development assistance was what was needed. Following this line, UNDP in December 1997 tendered a consultancy for a study on ‘The impact of humanitarian assistance on Rwanda and how to ensure a sustainable transition to development’. This was at a time when the UN itself had access to only 50 per cent of the country.

The normalisation of crisis

The second point to note is the way in which situations of chronic instability and accompanying humanitarian crises are redefined as opportunities for development. A central assumption of developmental models of relief is that these crises are temporary phenomena. As developmental relief not only postulates a return to normality, but seeks to engineer it, emergencies become a process of transition to development.

Yet clearly the crises in Sudan, Somalia, Rwanda and northern Uganda are not temporary. In redefining them as opportunities for development, what we are seeing is a process of ‘normalisation’. This normalisation is characterised by a creeping acceptance of higher levels of vulnerability, malnutrition and morbidity.

In Sudan this is evident in continuing high rates of malnutrition among war-affected communities (Karim et al., 1996). In 1989, malnutrition rates of between 10 and 20 per cent (< 80 per cent WFH) were sufficient to trigger the major relief intervention that became OLS. Now rates above 30 per cent among displaced populations in northern Sudan are considered ‘normal’.²

A recent monitoring mission by the UK Department for International Development to Sudan, to review emergency food distributions in the Red Sea State proposed in 1996, initially concluded that, despite malnutrition rates of between 30 and 60 per cent (< 80 per cent WFH) and above-normal mortality rates in some rural areas, there was
no evidence of a widespread and severe humanitarian crisis to justify large-scale food distributions.³ Perceptions of what constitutes an emergency have clearly changed.

Similar changes in the definition of famine and crisis have occurred in Somalia (Bradbury, 1997a). In 1992, with some 3,000 people a day dying from starvation, the situation in Somalia was described by one US diplomat as ‘the worst humanitarian crisis faced by any people in the world’. By the end of 1993, as US troops prepared to pull out, the acute emergency was considered to have ended, and donors began to focus on rehabilitation rather than emergency needs.⁴

Yet Somalia by most standards remains in a state of chronic disaster. Early last year before the floods, infant and maternal mortality rates were among the highest in the world (UNDHA, 1996a: 13). Some 12,000 children and others were still receiving supplementary feeding in Mogadishu (UNSC, 1997). Cholera was believed to be endemic.⁵ Crop production, although improved, remained at half pre-war levels (UNCU, 1996). Other social sectors remained in a desperate state. In early 1997, however, according to the UN, there was no longer a major humanitarian crisis in Somalia. In their words, daily life for most Somalis simply remained ‘very difficult’ (UNSC, 1997: 7).

In Rwanda, following the return of old and new ‘caseload’ refugees in 1996, agency programmes have by and large fallen in with the government’s view that ‘the emergency is over’. Programmes are planned with a view that the country is progressively moving towards rehabilitation and development, despite the absence of any indicators to prove this.⁶ As one senior UN official noted:

The phrase the ‘emergency is over’ is just a sound bite. The ‘loud’ emergency is over. The question is whether it is a priority to deal with the emergency or structural problems? There are still critical problems that need to be dealt with. There are 130,000 in prison. There are 1.6 million repatriated that need to be dealt with. 60,000 child-headed households. These are not ‘normal’ structural problems (Macrae and Bradbury, 1998: 41).

In Uganda, a country perceived as an exemplar of successful development in sub-Saharan Africa, progress is threatened by renewed insecurity. According to one UN report: ‘Almost one-third of the country is engulfed in a brutal conflict which has resulted in massive death, destruction and displacement’ (ibid.). By late 1997 in Uganda’s northern districts, the numbers of people displaced by the war between the Lord’s Resistance Army and the government were estimated to be as high as 479,000, with another 125,000 displaced by fighting in the west. Therapeutic feeding centres in Gulu town were reported to be receiving up to 30 children per week, with increasingly high levels of malnutrition evident among adolescents and adults. Despite this, there has been a reluctance by UN agencies to respond, and to use the term ‘emergency’, for fear of jeopardising long-term country-wide development programmes.

Two conclusions suggest themselves. First, an analysis or model that posits an early return to stability either fails to understand or ignores the nature of these emergencies. As David Keen (1994) and others have pointed out, large-scale population displacements, as seen in Sudan, northern Uganda, southern Somalia and Rwanda, serve military, political and economic functions. To argue that these are environments for development is to ignore the political, military and economic strategies that continue to ensure that certain populations do not develop. Second, responses to these
crises are selective. The political acceptance that the emergency is over in Rwanda, the ease with which the international community has marginalised the problems in northern Uganda, the apparently ‘acceptable’ rates of malnutrition in Sudan and the acceptance that Somalis will periodically suffer hardships, suggests there has been an accommodation with these crises. Explicit criteria or standards for defining when an emergency is an emergency are missing. Mandates are slipping or not being adhered to. With this comes an acceptance of different life chances for different populations.

This is clear in Somalia. In 1993, with the creation of UNOSOM II, it was immodestly claimed by Madeleine Albright that the international community was there embarking on: ‘an unprecedented enterprise aimed at nothing less than the restoration of an entire country as a proud, functioning and viable member of the community of nations’ (Jan, 1996: 3).

Since the demise of UNOSOM, the international community’s goals, as represented by the UN, have become more modest. In the 1997 Inter-Agency Appeal, the UN strategic framework defined its actions, among others, as being to strengthen those rehabilitation efforts: ‘which represent the most minimal, essential needs required for Somalia to exit its current state of crisis’ (UNDHA, 1996, cited in Bradbury, 1997a). In other words, we see a shift from nation building to a focus on minimal needs.

This is also reflected in Somaliland, where a UN programme to reformulate health policy has involved persuading the authorities there that universal free health is impractical, and to focus on developing a ‘minimum package’ of health services. The rationale for this is: ‘the need to achieve sustainable development of health services in Somaliland through efficient and strategic utilisation of the available limited resources’ (Somaliland Ministry of Health, 1997: 1).

**The developmentalist creed**

This latter quote highlights two key aspects of developmental relief: the end goal of sustainable development, and the local financing of this. Not only are entitlements to acceptable health services being compromised, but these minimal services must be paid for by resource-poor communities. This relates to two aspects of the normalisation of crisis: the ‘myth of dependency’, and what one might call the ‘internalisation of war’.

If developmental relief has become the creed, then its pillars are common ‘good practice’ wisdoms of self-reliance, sustainability, capacity building, and more recently peace building (see *IDS Bulletin*, 1994). The developmental critique of relief is couched in terms that it is unsustainable, dependency creating and disempowering; that relief aid should not only seek to save lives, but save livelihoods, promote self-reliance and sustainability. We need to re-examine these wisdoms in the context of political emergencies.

**The myth of dependency**

A commonly articulated rationale for making relief more developmental is the view that relief assistance creates dependency. The sentiment of an NGO worker in Sudan that ‘relief is not good for anyone’ is common. Fear of creating relief dependency and ‘institutionalising relief’ drives agency strategies in northern Sudan, and is used to
rationalise cuts in food rations (see Karim et al., 1996). A more extreme view is that free food delivery to conflict-affected populations should be replaced by a ‘humanitarian ban’ in order to prevent people developing a ‘beggar mentality’.

The view that people in distress willingly abandon their coping strategies and independence in the face of crisis has long been dismissed in studies of famines (see, for example, de Waal, 1988). Famine victims, we are told, are not passive. Yet the view persists that relief creates dependency. The approach of the UN in Sudan is mirrored by that of an NGO programme in southern Somalia.

The NGO, which has worked in Somalia for many years, is supporting some of the poorest and most vulnerable communities in southern Somalia. These are small Somali agro-pastoral clan groups, and non-Somali ‘Bantu’ agriculturalists. A key premise of the programme in 1994, in the wake of UNOSOM, was that international emergency relief had created a ‘relief mentality’ and a ‘dependency syndrome’, and that this was an obstacle to sustainable development. The programme therefore aimed to ‘strengthen the capacities of communities in [the area] to be self-sufficient under conditions of conflict and reduce their reliance on food relief’ (Bradbury, 1997b). In fact, our evaluation found no evidence of a relief mentality in any of the villages in which the agency was working, nor proof that people had willingly abandoned their farms or independence during the famine. Historical time and trend lines collected in villages during the evaluation in fact suggested the opposite.

First, not everyone suffers equally in war and famine. During the Somali famine of 1991–3, those who died in their greatest numbers in southern Somalia were the minority Somali and non-Somali ethnic groups such as the Bantu, who had no recourse or defence against the warring factions. For the Bantu, their vulnerability arises from their political marginalisation within Somali society, and from the alienation of their lands under the former Barre government for private and internationally financed para-statal agricultural schemes (Menkhaus, 1996).

During the war a combination of factors led to a breakdown in normal coping strategies. Bantu villages were deliberately targeted by the militias and, like people of weaker Somali clans, they were stripped of their assets. An interesting insight from trend lines constructed with villagers during the evaluation, was that while villagers reported declines in cattle holdings during the famine period, cattle holdings among town dwellers increased.

Second, it is known that much food aid was diverted during the famine in Somalia. It was estimated that in this particular area perhaps only 10 per cent of rations reached the poor outlying villages. If true, it is unclear how these communities could ever have been dependent on food aid. Self-dependency rather than relief dependency more readily epitomises the condition of disaster-affected populations. People either survived through their own initiative, sought out relief kitchens or perished. In one village visited by the author, up to one-third of its population was reported to have died during the famine.

International aid agencies frequently argue that pursuing developmental relief strategies is necessary in order to avoid dependency on international relief. Yet that such dependency exists is assumed rather than proven. Overemphasis on the ‘dependency’ of victims serves to obscure the fact that aid supplies are often manipulated by the politically powerful. It is no coincidence that those who define populations as dependent are the very people who control the aid, including local officials, NGOs, the UN and donors.
Sustainability and internalising the costs of war

Sustainability is another pillar of the developmentalist creed. The notion that it is feasible for war-displaced people to achieve sustainability in food production or welfare service provision in the context of an ongoing war is highly questionable. The claim that developmental interventions are more cost effective than relief also merits examination. If rehabilitative programming implies the restoration of infrastructure, investment in human resource development and so on, then rehabilitation is likely to be more expensive than relief. Sustainable improvements in welfare service provision will be dependent on adequate public financing.

Behind the rhetoric of sustainability lies the problem of sustaining the financing of large-scale humanitarian relief operations. The global decline in aid transfers and the persistent under-funding of UN operations in countries like Somalia and Sudan attests to this. In Rwanda UNICEF’s expenditure has declined from US$100 million between 1994–7, to $36 million for the three years 1998–2000 (Macrae and Bradbury, 1998).

In many instances, reductions in relief budgets of international agencies are unparalleled by an increase in development assistance through other channels. Interviews with agency personnel in the field consistently confirm that an important factor determining the form that the transition from relief to development takes is the limited availability of funds to sustain basic services (see, for example, Macrae and Bradbury, 1998).

The more modest goals of the international community in Somalia noted earlier reflect a severe decline in assistance for that country. From an operation of $1.5 billion for UNOSOM II in 1993, in 1996/7 the annual inter-agency appeal requested $100 million; only 30 per cent of this was funded (Bradbury, 1997a). Several factors account for such a decline. Most critical has been the view that the emergency in Somalia ended in 1993, after which needs were redefined in rehabilitation rather than emergency terms. In the absence of a political settlement in Somalia, however, donors have been reluctant to commit longer-term development funds. The now-popular view that the only solutions to Somalia’s problems are internal, provides a rationale for reduced assistance. UNDP’s relief-to-development strategy, for example, is based on the principle ‘that the main resources required to improve the conditions of these communities will come from the Somalis themselves’ (UNDHA, 1996b: 5).

The aim is to assist populations to attain sustainable livelihoods. The strategy is for community participation and local capacity building to ensure this sustainability. The assumption is that Somalis will take responsibility for their own development. By redefining the crisis in Somalia as an ‘internal’ development problem, responsibility and costs can be passed on to Somalis.

It is clear, however, in Somalia, Rwanda, Sudan or Uganda that the capacity of local populations to sustain services is highly limited. In Rwanda, for example, teachers’ salaries have deteriorated from pre-war levels. Ranging from RF7,000–25,000 per month, teacher salaries are well below the estimated minimum of RF60,000–80,000 required to keep a family in food alone for one month.

In Somalia people have less capacity to sustain development today than they did before the war. A survey of pastoral and agro-pastoral areas in Somaliland in 1996, for example, revealed deepening poverty in rural communities (Ahmed Mohamed Hashi, 1996).
In Sudan, the wider economic crisis in the country and weak public financing means that 'host' populations are encroaching on humanitarian resources intended for those defined as disaster-affected or the internally displaced.\(^{13}\) In the absence of international development investment or government finance for basic welfare services, developmental relief interventions cannot be sustained.

Aid agencies face real dilemmas here. Declining resources mean they are failing to sustain service provision. To continue sustaining service provision would weaken the obligations of local authorities to provide for their own populations. The problem is that agencies are not being transparent about these dilemmas. Clearly, response on the ground is being shaped by international aid policy. Yet agencies are not challenging this. Instead basic cuts in entitlements are being justified on the grounds of sustainability (Macrac and Bradbury, 1998).

It is in this context that one can begin to understand the negative impact, and what Joanna Macrac has called, the 'anti-humanitarian' consequences, of developmental relief strategies (1998). With donors, national governments and aid agencies unwilling or unable to pay for public investment, the burden shifts to the level of the local community. It is in this context that one can understand minimum health packages in Somaliland, reductions in food rations in Sudan, selective responses to emergencies such as in northern Uganda and declining standards in international responses to humanitarian crises. The real danger is that as programmes change from relief to development, far from there being a progressive shift towards the provision of sustainable services, entitlements and access are actually being cut.

**Conclusion**

This internalisation of the costs of war reflects a broader view of contemporary wars in Africa — that they are internal wars, and that their causes and solutions lie within. In programmatic terms capacity building, institutional strengthening, together with trauma, psycho-social programming, as well as conflict resolution, reflect a tendency to analyse these wars in terms of internal causes. What does this mean in terms of humanitarian principles?

First, acceptance by the international community that there can only be 'Somali solutions to Somali problems', and by extension Rwandan solutions to Rwandan problems and so on, is to renounce responsibility for its own role in the genesis of these crises. It also neglects the ongoing political and commercial involvement by the international community in these crises — whether in the form of arms supplies to the Horn of Africa’s ‘frontline states’, diamond exports from Sierra Leone or the Democratic Republic of Congo, timber from Liberia, or banana exports from Somalia.

Second, by locating the problem to be within, blame for the causes of conflict, of poverty, or marginalisation are effectively laid at the feet of the poor and marginalised. In a climate of declining overseas development aid, assigning also the solutions to the poor, the marginalised and victimised through enhanced community ‘participation’ and financing of social services, not only sustains a myth that development in such situations can achieve something, but risks compromising people’s rights to basic standards of care.

Finally, as some of the cases reviewed here suggest, the very ‘victims’\(^ {14}\) of development — be they Nuba or Somali Bantu — those alienated from the ‘top-down’
internationally sponsored state development and the ‘victims’ of war are, in the main, one and the same. Now also the victims of cuts in entitlements that come with the erosion of humanitarian standards in the pursuit of development, the very humanitarian objectives of development — equity and justice — end up corrupted.

Acknowledgement


Notes

1 In the southern garrison town of Wau, the creation of ‘peace villages’ on the town’s perimeters in 1992 enabled the government to secure its military defence of the town.
2 The 1996 Inter-Agency Appeal for Sudan recorded global malnutrition rates in 1995 ranging from an ‘acceptable’ 13.7 to 36.0 per cent in displaced camps around Khartoum, and from 16.1 to 30.0 per cent in the transitional zone and Government-held areas of southern Sudan (Karim et al., 1996).
3 Susanne Jaspars, personal communication.
4 The Fourth Coordination Meeting on Humanitarian Assistance for Somalia in November 1993, chaired by the World Bank, and at which the Somali Aid Coordination Body was established, was a key moment in setting the parameters for international aid in Somalia.
5 Prior to the war, the last year cholera was reported in Mogadishu was 1972.
6 Evidence of the return to ‘normality’ is the return of refugees, the restoration of some social services, the rehabilitation of government institutions and the fact that per capita GNP has recovered from an all-time low of $80 in 1994 to $180 in 1996. The latter indicator of success is relative to a 1985 GNP of $280. Other political, social and physiological indicators of progress are uncertain. By December 1997, 50.0 per cent of the country had again become insecure and numbers of displaced were again increasing. The High Commission Field Operation in Rwanda continues to report on a permanent human rights crisis.
7 The aid worker went on to say ‘We like to work in communities which can provide inputs . . we demand some participation, to create an environment where people take control of their own development’ (Karim et al., 1996).
8 A concern voiced by the UN resident co-ordinator in Sudan in March 1996 to the OLS Review team.
9 The Bantu-speaking people are primarily peasant farmers practising agriculture in southern Somalia’s fertile riverine areas. Although the Bantu are not a homogeneous group with differing ethnographic histories, commonly they have been politically marginalised within the Somali state outside the dominant Somali lineage structure.
10 The collapse of government projects removed alternative sources of income. Insecurity meant people could not farm. The river dried up so irrigation was not possible. Bantu villagers had their grain stores dug up. Pastoralists had their livestock looted. Movement was restricted by the laying of mines. People had no choice but to seek outside assistance.
11. This is a small rural town, but settled by Somalis from the major clan families. There was some evidence that the cattle were sold in Kenya.

12. This includes the fact that less than 5.0 per cent of the UNOSOM budget actually went to Somalia, but was spent on logistics and security systems. Other factors included the crisis in the Great Lakes, and the withdrawal of NGOs from Somalia in the wake of UNOSOM’s departure.

13. In a health centre in one displaced-persons’ camp in Khartoum the OLS Review team noted that 33.0 per cent of those attending the centre came from outside the camp (Karim et al., 1996: 214).

14. ‘Victim’ is not used here pejoratively. However, people’s remarkable capacities to cope with and survive disasters, and their right to retain control over their lives and be treated with dignity, should not detract from the fact that their humanitarian distress more than often arises from their political vulnerability, victimisation and persecution.

References


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