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Chapter V
A Vision Revisited

> Had Alfred Nobel been born, not in 1833 but even in 1965, in a steamy, isolated village of Asia, Africa, [or] Latin America, what would be his chances of survival and of success?
>
> Henry R. Labouisse, Executive Director of Unicef, on accepting the Nobel Peace Prize for Unicef, 10 December 1965[1]

Fighting Hunger

With the beginning of the 1960s, the fight against hunger was injected for the first time since Orr with a burst of idealism hailing from many sources: President Kennedy in the White House and his hunger-concerned adviser George McGovern, Unicef's Nobel Peace Prize in 1965, and B.R. Sen at FAO and his Freedom from Hunger Campaign (FFHC). The notes these groups struck during the first years of the decade alluded to Orr's endeavours at the end of the 1940s and Roosevelt's advocacy of Freedom from Hunger as one of the Four Freedoms. Politics and pragmatism on nutritional issues collided and produced ambiguous results. The U.S. and other developed nations eagerly promoted plans to distribute their food surpluses through the developing countries in order to foster democracy and emerging markets while nutritionists and policy makers recognized the need for country-based programming for long-term development. According to one member of the U.S. Congress excited over the Food For Peace programme, American agriculture could be greatly expanded "so as to make food a major weapon in the fight for peace."[2] As U.S. politicians were advocating food distribution for spreading democracy and in the hope that developing countries "will become dollar customers as their economies improve",[3] agency administrators such as Donald Sabin, then the Unicef food conservation co-ordinator, were stating that while many technical problems then had solutions, "Applying and

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[1]Henry R. Labouisse, 'Acceptance speech, Nobel Peace Prize', Oslo, 10 December 1965, in John Charnow and Sherwood G. Moe (eds), *Henry R. Labouisse, Unicef Executive Director, 1965-1979*, New York, Unicef, 1988, CF/HIST/MON/88-011, p. 16.

[2]Robert W. Kastenmeier, letter to Mr. Maurice Pate, Washington, D.C., 28 March 1962, UN Archives, CF-NYHQ-09.P, DSU: CF/NYHQ/EXD/PRO, folder D0405.

[3]See: Nelson J. Post, 'Food For Peace: plans and objectives', in *Proceedings of Conference on Soybean Products for Protein in Human Foods*, Peoria, Illinois, 13-15 September 1961, 21-25, on p. 24.

adapting these solutions" had become the focus of their work.[4] Black, in her history of Unicef, called the 1950s a time for assailing communicable diseases like malaria, tuberculosis, yaws, and syphilis. In contrast, the 1960s, dubbed by the UN as the first UN development decade, represented an "international crusade to bring to an end centuries of rural stagnation and neglect."[5] The spirited idealism that reshaped the basic contours of hunger issues generally came from the policy makers and not from the scientists and nutritionists. While policy makers praised nutritionists for their past identification of protein deficiency in weanlings and development of protein-rich foods, they began an inconspicuous withdrawal from their earlier days of reliance on technicians for solutions and turned to other methods.[6]

Crucially new in nutrition policy from the early-1960s at both FAO and Unicef was active interest in the notion of national nutrition planning. At the Fifth International Congress on Nutrition, B. R. Sen, FAO's Director-General, asserted that FAO's role in nutrition was to "indicate the changes in food supply and consumption needed to make deficient diets more satisfactory for health."[7] Further, he explained that FAO would work with countries on national food and nutrition policies that reflected these plans. FAO had begun to de-emphasize localized nutrition programmes per se, and had concluded that only national planning had the strength to promote substantial change, since hunger and "hidden hunger" were overwhelming the lives of billions of people. FAO used the term "hidden hunger" to describe a non-clinical state of hunger in which a person did not receive the recommended intake for nutrients but did have adequate intake to avoid clinical symptoms of deficiency. We have already heard some of the symptoms attributed to this non-medical hunger -- when publications and speakers mentioned people who were not well nourished enough to solve their own problems, they were referring to this nebulous disease.[8] Out of his desire to attract attention to hidden hunger and national planning projects, Sen, from

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[4]Donald R. Sabin, 'Implementation of the WHO/FAO/Unicef Protein-Rich Food Program', in *Proceedings of Conference on Soybean Products for Protein in Human Foods*, Peoria, Illinois, 13-15 September 1961, 15-20, on p. 20.

[5]Maggie Black, *The Children and The Nations: The Story of Unicef*, Hong Kong, Unicef, 1986, p. 17.

[6]See: Maurice Pate, 'Statement at the 6th International Congress on Nutrition, Edinburgh, 9-15 August 1963', August 1963, Unicef Archives, 88R025, Box T-006, Teply files.

[7]Binay Ranjan Sen, 'Problems of food and nutrition-views and programs of FAO', in Proceedings of the Fifth International Congress on Nutrition, Washington, D.C. September 1-7, 1960, *Federation Proceedings*, March 1961, Supplement no.7, 384-86, on p. 384.

[8]See: Ritchie Calder, 'Food as a function of history', in *Proceedings of the Sixth International Congress of Nutrition, Edinburgh, 9-15 August 1963*, Edinburgh and London, E. & S. Livingstone LTD., 1964, 444-48, on p. 446.

his pulpit atop FAO, in 1960 launched the FFHC, a world-wide attempt to bring the world's obfuscated nutritional problems into focus and address them.

Unicef's approach to national nutrition planning differed dramatically from FAO's. After a review of MCH services in 1960, Unicef increased emphasis in MCH services on integration of nutrition into broader health services such as immunization. At that time, Unicef estimated that its MCH programmes, including nutrition and health projects, were benefiting 56 million children and nursing or pregnant mothers.[9] Nevertheless, for Unicef's administrators, programmes that held the promise of only reaching a small percentage of needy children left them feeling unsatisfied. Out of the desire to deal with hunger in a revolutionary new manner and to affect greater change, Pate, still Unicef's Executive Director, organized a conference at Bellagio in 1964 to stimulate co-ordination of childhood needs with national planning priorities. The ideology that emerged from Bellagio, though in accordance with FAO's Nutrition Division, represented a unique new approach. FAO advocated improved food supplies through national policy-making; Unicef promoted national policies, in economic planning for example, that considered the plight of children. These tactics define many of the nutritional developments of the 1960s. FAO and Unicef together acknowledged that they alone could not arrange for extensive, successful development.

While policy and propaganda attracted the attention of Unicef and FAO, protein continued to monopolize the scientific efforts and dialogue of nutritionists and physicians alike. Calls for continued concentration on protein needs reverberated in the lecture halls of nutritional conferences as speakers proclaimed that "the great hunger of the world is a nitrogen [protein] hunger".[10] Such manifestations of ongoing scientific interests suggest the first delineable parting of ways between policy makers and scientists. While FAO, WHO, and Unicef were increasingly looking toward country-based policy solutions, scientists were intensifying their protein interest. At the World Food Congress attended by the directors of WHO, FAO, and Unicef, Henry Sebrell, then the head of the Institute of Nutrition Sciences at Columbia University and a formidable PAG member, presented a stirring tribute to the greatest nutrient of them all: protein. After remarking on the veritable superiority of protein over carbohydrates and fats, Sebrell proclaimed that it was "no accident that the

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[9]'Milestones in Unicef's History 1946-1985', January 1986, Unicef Archives, PR-NU-001, p. 3.

[10]Hugues Gounelle, 'Major human nutrition problems today', in Proceedings of the Fifth International Congress on Nutrition, Washington, D.C. September 1-7, 1960, *Federation Proceedings*, March 1961, Supplement no. 7, 389-92, on p. 389.

underdeveloped people in the world today are those on poor protein foods."[11] Thus, according to him, protein deficiencies were not only responsible for kwashiorkor and stunted physical growth but for underdevelopment itself. If the cause of underdevelopment were a lack of protein, then protein production would be one of the solutions that had to be pursued furiously. It is notable that while much of discussion about solving hunger problems had turned to community and national policy approaches, physicians and nutritionists were filtering such talk through their own interests and consistently arriving at a protein focus. Nevertheless, Sebrell himself noted that WHO, FAO, and Unicef programmes could make progress, albeit on protein only, if they focused on the resources available in individual countries and looked toward broad national programmes.[12] For all the rhetoric about national planning, there were few examples of successful co-operation and no blueprints for pursuing this approach.

The Freedom From Hunger Campaign

The 1960s began with the implementation of the FFHC, the largest project ever undertaken to draw profound international attention to the massive toll of hunger and malnutrition in developing countries. The FFHC was the brainchild of FAO's Director-General, B. R. Sen. Soon after assuming office in 1958, he first sketched the programme which was refined and presented to the Conference late in 1959. The FFHC was built on a platform that acknowledged that progress in developing countries in the fight against poverty had been widely unsuccessful and that acute population pressures threatened to exacerbate the situation.[13] The multifarious goals of the FFHC included increased agricultural output, increased income, and industrial development.[14] The call for increasing agricultural production revolved around FAO's fears that production was not keeping pace with population growth, a theme which FAO frequently emphasized.[15] The economic focus of the FFHC represented a

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[11]W. Henry Sebrell, Jr., 'The prospect of meeting protein needs', in Proceedings of the Fifth International Congress on Nutrition, Washington, D.C. September 1-7, 1960, *Federation Proceedings*, March 1961, Supplement no. 7, 393-97, on p. 393.

[12]Ibid.

[13]*Report of the 10th Session of the Conference 31 October - 20 November 1959*, Rome, FAO, 1960, p. 48.

[14]Ibid., p. 49.

[15]For example see: *Population and Food Supply*, New York, United Nations Office of Public Information, FFHC Basic Study no. 7, 1962 and *Report of the Twelfth Session of the Conference, 16 November-5 December 1963*, Rome, FAO, 1963, p. 22, paragraph 96.

departure from the straightforward application of technology that had coloured so many development programmes during the previous decade. FAO sought to foster economic growth in order to attack hunger and malnutrition though the means for achieving this growth were not elucidated. In summary, the broad goal of the campaign was "to promote a climate of opinion throughout the world in which the problems of hunger and want would be faced realistically, their causes analysed objectively, and appropriate remedies boldly and courageously applied."[16] Aykroyd, for his part, hoped that the FFHC would aid in the application of existing nutritional knowledge.[17] Dr. M. Ezekiel, an FFHC director, believed that the FFHC would only be successful if it increased the total international expenditures on expanded food production and consumption. He further worried that the developing countries conceived of the campaign primarily as an action programme instead of an educational and informational undertaking.[18] To these ends, FAO called for the establishment of national FFHC committees to raise consciousness about hunger and malnutrition. By the end of 1961 there were thirty-three such national committees hard at work fund-raising for FFHC projects, many of which were FAO- and Unicef-managed programmes.[19] The five-year FFHC originally sought to harness the strengths of WHO, FAO, Unicef and all other international and national agencies working on hunger issues and to direct them toward laying sound policies for ending hunger. Sen further believed that nutritional scientists would play a major role in accomplishing these lofty goals.[20]

In spite of the initial enthusiasm that fuelled an FFHC media blitz, the manner in which the campaign proposed to channel resources into long-term solutions remained elusive. The summary solution for the world food problem chimed by FAO staff at conferences often sounded like ideas that had previously been labelled "unfeasible" or "inappropriate". In *Hunger: Can it be averted?*, Norman Wright, FAO's Deputy Director-General, opined that the only lasting solution to hunger and

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[16]*Report of the 10th Session of the Conference*, op. cit., note 13 above, pp. 49-50.

[17]W. R. Aykroyd, letter to W. H. Pawley, 6 July 1959, FAO Archives, FAO office of ADG, Dr. M. Ezekiel, FFHC files, titles A-E. From the beginning, Aykroyd had feared that FFHC would be viewed as "nothing more than an attempt to boost FAO's long-term program and budget." He therefore suggested that the FFHC expand nutritional endeavours to include projects for attacking protein malnutrition such as protein-rich food promotion campaigns. W. R. Aykroyd, letter to Frank W. Parker, 13 May 1959, FAO Archives, FAO office of ADG, Dr. M. Ezekiel, FFHC files, titles A-E.

[18]M. Ezekiel, letter to B. R. Sen, 12 November 1959, FAO office of ADG, Dr. M. Ezekiel, FFHC files, titles A-E.

[19]*Report of the Eleventh Session of the Conference 4-24 November 1961*, Rome, FAO, 1962, pp. 18-20.

[20]Sen, op. cit., note 7 above, p. 386.

malnutrition "is to secure by the widespread application of the recent scientific and technical advances the necessary increase in food production within the less developed countries themselves."[21] His opinion and the general platform of the FFHC were epitomized in the seminal publication of the FFHC, the *Third World Food Survey*, the second follow-up to the momentous examination of international hunger and malnutrition first conducted under Orr's leadership. The world food surveys suggested that half of the world's population, mainly residing in developing countries, suffered from undernutrition and malnutrition. The third survey, however, was qualitatively improved since it relied on food balance sheet data for more than eighty countries that represented over 95% of the global population.[22] Following historical trends it then extrapolated an estimated rate at which food production in developing countries would have to expand in order to keep pace in "the race against population growth" and improve nutritional status.[23] One of the broadest conclusions of the third survey was that high infant mortality rates, low work efficiency, and low resistance to infection all indicated rampant malnutrition which, according to the authors, was "not surprising, since in these areas the level of **animal** protein intake is only one fifth of that in the more developed areas." (emphasis mine)[24] In light of the mounting interest in **vegetable** protein concentrates, the survey's identification of animal protein as a serious food deficiency in the world was ironic. Perhaps there was a major gap in communication between FAO's nutritionists and its surveyors. In any case, the intimidating conclusion based on projections stated that world food supplies would have to rise by 50% by 1975 in order to promote meaningful change in the nutritional levels of developing countries.

It was against this confusing backdrop of grim statistics and feverish optimism which Sen and the FFHC had roused that Dr. Donald McLaren, a frequent critic of WHO and FAO and a professor at the prestigious nutrition unit at the American University of Beirut, launched what would be his first of many public attacks against

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[21]Norman Wright, 'The current food supply and present trends', in E. John Russell and Norman Wright (eds), *Hunger: Can it be averted?*, London, The British Association for the Advancement of Science, 1961, 1-14 on p. 13. The FAO Conference took a more pessimistic view and stated alternatively that "the application of modern science and technology could not solve the problems of hunger and malnutrition throughout the world, unless the people, individually, nationally and as a world community, become completely involved in the undertaking." *Report of the Twelfth Session of the Conference*, op. cit., note 15 above, p. 23, paragraph 103.

[22]*Third World Food Survey*, Rome, FAO, FFHC Basic Study no. 11, 1963, p. 7.

[23]Ibid., chart 3.

[24]Ibid., pp. 8-9, on p. 9. More advanced techniques were being developed and implemented to assess the prevalence of malnutrition and undernutrition. See: *Expert Committee On Medical Assessment of Nutritional Status*, Geneva, WHO, WHO Technical Report Series no. 258, 1963.

the hunger-fighting establishment. In a prominent scientific forum, the "Points of View" section of the *Lancet*, McLaren complained that Sen and FAO had mistakenly identified low agricultural productivity as the cause of world hunger. While McLaren acknowledged that better crops in greater quantities were a fine idea and that food scarcity was a cause of hunger for some people, he contended that "the main reason for the illness and deaths of children is not this scarcity. It is ignorance of infant care and infant feeding."[25] This commentary was not in direct conflict with the means being promoted by the FFHC; in fact, Sen had popularly advanced the elimination of nutritional ignorance as one of the key avenues to ending hunger. Nevertheless, McLaren was formulating an argument for how programmes should be focused: yes, he would acknowledge, in some cases supplemental feeding and improved food stocks would help, but in general "these measures will do little to prevent nutritional disease in children."[26] For McLaren, his recent experiences in Beirut had further illuminated what he perceived to be the causes of hunger. He recounted:

> I had a metabolic unit with 10 beds with malnourished marasmic infants from Lebanon...and you could see them there, their histories, and all but one of those were Muslims, Sunni Muslims...and that was reflected in the nutritional state of their children, that was so deep in politics, economics, it wasn't going to be remedied by FAO, WHO, World Bank or anyone else with a quick fix.[27]

In his article, McLaren concluded that hunger education at the family level and re-education at the level of the community health workers, when presented in a palatable and sensitive manner, were the best hope for solving childhood malnutrition and hunger. His focus on solutions rooted in family education was addressed in passing by the *Third World Food Survey* which had afforded the following relevant comment only a footnote in the text:

> It is recognized that food is not equitably distributed in proportion to the needs of individual members, especially in poor households...In generalizing the conclusion regarding the proportion of undernourished households to undernourished populations, it is assumed that these two groups [family members who eat sufficiently and those who do not] broadly counterbalance each other.[28]

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[25]D. S. McLaren, 'World hunger: some misconceptions', *Lancet*, 13 July 1963, pp. 86-7.

[26]Ibid., p. 86.

[27]D. S. McLaren, interview, 6 October 1995.

[28]*Third World Food Survey*, op. cit., note 22 above, p. 41.

The survey, however, abstained from claiming that improved food supplies would be sure to improve nutritional status and weakly asserted that it only sought to provide a rough idea of the magnitude of improvement required in food supplies in order to allow for improved nutrition.[29] Nevertheless, the survey failed to address how this particular problem might be solved simply with increased food production -- the central assumption was that the more food produced in a country, the greater the quantity consumed by every person would be. Issues of transportation networks, distribution channels, and income levels were overlooked.

McLaren's comments were not inherently revolutionary since they advocated a shift that had been occurring for years in the orientation of hunger and malnutrition programmes at the UN agencies. However, McLaren did highlight a philosophy -- nutrition education and ANPs -- that had only minor institutional support.[30] At FAO, only a small percentage of funds were being allocated to applied nutrition activities (and many of these were Unicef funds) while the vast majority were funding the other divisions. FAO acknowledged the possible benefits of ANPs but contended that increased food production would be necessary to bolster such efforts:

> stringent public health measures and nutrition education may be sufficient to avoid some of the worst consequences of malnutrition [i.e. kwashiorkor, xerophthalmia, and marasmus]. But...a stage is clearly reached when the knowledge, control, and education required to avoid all the consequences of malnutrition are so great that the only practical policy is to raise the general quality of the diet.[31]

Thus, for FAO, quality and quantity of nutrients were the critical issues for the coming years. In Unicef, despite its attentiveness to emerging thought in applied nutrition, only a small percentage of its funds directly benefited such projects. The vast majority continued to fund communicable disease projects and other vertical programmes.[32]

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[29]Ibid., p. 58.

[30]Henceforth, ANP or applied nutrition programme will refer to all comprehensive nutrition activities as well as any application of nutritional knowledge for the improvement of nutritional status. Through the 1950s ANPs were called "expanded nutrition programmes" and during the 1960s were frequently referred to as "nutrition education and related activities." The term "applied nutrition" was not widely used until the mid-1960s. *Report of the Joint FAO/WHO Technical Meeting on Methods of Planning and Evaluation in Applied Nutrition Programs, Rome, 11-16 January 1965*, Rome, FAO, FAO Nutrition Meetings Report Series no. 39, 1966, pp. 1, 7.

[31]*Third World Food Survey*, op. cit., note 22 above, p. 50.

[32]Between 1960-1964, Unicef allocated 67% of its total budget ($89.3 million) to health services and disease control. 'Unicef's Part in the Development Decade, 1960-1964: a note prepared for the 1965

FAO's philosophy was hardly as narrow as some of its comments suggested since, in fact, it did recognize the possible benefit of expanding the FFHC to include hunger, disease, and ignorance in its calculus of activity. However, most delegates in the 1963 FAO Conference preferred that the campaign maintain its original focus on increased food production to keep pace with population growth.[33] A major highlight of the FFHC came in March 1963 when its "World Freedom from Hunger Week" attempted to attract attention world-wide to population growth outstripping agricultural production. FAO reported that events around the world had stirred consciousness of hunger issues. Among the activities were the following: thirty students held a 12-hour fast in London, twenty girls in Malaya recorded the FFHC song for the radio, the U.S. hosted an Ambassadors' Dinner in Washington for one thousand guests, farmers in Ghana commissioned the recording of a somber song about food, and Catholic priests around Latin America devoted their sermons to the week.[34] World-famous intellectual and political figures such as Earl Attlee, the former British Prime Minister, Aldous Huxley, John Boyd Orr, and Nobel Laureates C. F. Powell, E. L. Tatum, E. B. Chain, and Salvatore Quasimodo, gathered before the week's festivities to draft a manifesto drawing further attention to hunger.[35] Three months later, the World Food Conference continued the momentum built up by the FFHC as 1300 participants from 107 countries descended on Washington to discuss the issue. Given the popularity of the campaign, it seemed only natural for the FFHC in 1964 to be granted approval for continuing its work until 1970. By the time of the FFHC's extension, it had raised $22 million from individuals and governments for projects world-wide.[36]

Rallying the Public and Governments

Prior to the 1960s, nutrition advisors and consultants had viewed national nutrition planning as a failure. Their experiences demonstrated that co-ordination of objectives within developing countries at least required issues which leadership considered important: nutrition was not among them. According to Scrimshaw,

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Progress Report to ECOSOC on the Development Decade', New York, 30 October 1964, Unicef Archives, CF/HST/1985/034/Anac 03/10, p. 10.

[33]*Report of the Twelfth Session of the Conference*, op. cit., note 15 above, p. 23, paragraph 99.

[34]*Freedom from Hunger Campaign News*, 1963, 4(23), pp. 2-5.

[35]For details of the week see: Ibid., pp. 8-11.

[36]'Report of the Fifth Session of the FAO/Unicef Joint Policy Committee', New York, 31 March-2 April 1965, E/ICEF/510, pp. 37, 38.

> there was a big push by 57 to get ministers of health and education to look at the importance of nutrition. FAO was pushing this, and they were successful in getting quite a number of countries to establish inter-ministerial cooperation...in the first meeting the ministers would come, then [at the second meeting] the deputies, then [at the third] the deputies to the deputies and then they just disappeared.[37]

Undaunted by poor results, Autret at FAO remained an obstinate national nutrition planning enthusiast and in 1959 articulated the ambitions he believed nutritionists should pursue. He wrote:

> It is the duty of the nutritionist to make himself heard at the highest government levels and to contact the departments concerned with the establishment and execution of the programs, such as agriculture, public health and education. To this end, he should propose the creation of a body which will enable general discussion to be held on technical and administrative, as well as financial and economic problems, and permit the choice of solutions; in other words, a national committee on food and nutrition, with adequate staff, authority and financial means at its disposal.[38]

Although it would take some time, Autret's idealistic thoughts eventually came to have a forum among the UN agencies.[39] Up until the 1960s, although conferences and agency objectives had elaborated the benefits of regional nutrition planning and partnership with existing ministries of education and health, practical action had rarely involved top-level governmental connections.

In 1963, just prior to the Sixth Congress of Nutrition, a small group of nutritionists and policy makers met at the Rockefeller Villa Serbelloni (Bellagio) to discuss, under the auspices of the Congress of Nutrition, methods for protecting every community's most vulnerable members, pre-school children. The symposium adopted a two-tiered approach that involved governmental planning alongside swift action to treat and prevent malnutrition.[40] Their proposals were passed along to the Congress,

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[37]Nevin S. Scrimshaw, interview, 26 July 1995.

[38]*Report of the FAO/WHO Seminar on Problems of Food and Nutrition in Africa South of the Sahara*, Rome, FAO, FAO Nutrition Meetings Report Series no. 25, 1961, p. vii.

[39]Aykroyd left FAO's Nutrition Division abruptly in the spring of 1960. Autret left his post as head of the Applied Nutrition Branch and took the reins of the division in August. Marcel Autret, interview, 15 April 1996.

[40]For a detailed description of this symposium see: Paul György and Anne Burgess, *Protecting the Pre-school Child*, London, Tavistock Publications Limited, 1965.

which concurred, and whose first recommendation for the treatment of malnutrition in young children was to encourage governments to accept the role of nutrition in the health of pre-school children. The second, third, and fourth recommendations all dealt with the need for national planning to account for the nutritional needs of young children.[41] Given the weak responses to date, FAO and WHO advisors suggested that the agencies help to establish national nutrition councils that would work with all sectors of government to co-ordinate national nutrition plans. These councils would serve as the main liaison for the UN agencies, and in-country development projects would place nutrition farther under the spotlight in national planning.[42] FAO would incorporate elements of these approaches into its FFHC programme. For the policy makers concerned, however, the establishment of national policies or committees was an intimidating task that demanded a previously unseen level of government support. According to nutrition experts, national nutrition programmes on every level required co-ordination with government ministers. For education and training projects in nutrition, for example, FAO optimistically expected that national leaders in education, health, and agriculture "should know, or should learn, what education in nutrition can contribute to the segment of the national welfare entrusted to them."[43] Thus, means for engendering governmental interests in nutrition policies had to be designed. Part of the motivation for the concern in stimulating government involvement was the demographic observance of massive migration to urban centres, a development that would play an increasingly important role in the design of nutritional programmes.[44]

As national planning initiatives began, it became clear that humanitarian interests alone could not rally support and funding for nutritional programmes. In a number of fields, therefore, initiatives were taken to demonstrate how an improvement in nutritional status of people in the developing world could contribute both to the livelihood of the said country and as well as to the industrialized world. The tactic, perhaps unintentionally, sought to respond to three lurking questions thrown into the public forum by critics, politicians, and even some nutritionists. Altruistic motives aside, the key questions were: 1)What does the West have to gain by supporting

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[41]'Recommendations of the Symposium on "How to Reach the Pre-school Child"', 1963, New York, Unicef, UN Archives, CF/NYHQ/EXD/LAB, G0012.

[42]*Joint FAO/WHO Expert Committee On Nutrition, Sixth Report*, Rome, FAO, FAO Nutrition Meetings Report Series no. 32, 1962, pp. 29-33.

[43]*Education and Training in Nutrition*, Rome, FAO, FFHC Basic Study no. 6, 1962, pp. 42-3.

[44]See: F. T. Sai, 'The impact of urban life on the diets of rural immigrants and its repercussions on the nutritional status of the community', 19 August 1963, Dacca, East Pakistan, WHO, WHO/Occ.Health/30, Working Paper no. 4, WHO Inter-Regional Seminar on the Health Aspect of Industrialization, LSHTM Archives, WHO reports box.

nutritional programmes in the developing world? 2)What do developing countries' governments have to gain by using their limited national resources to buttress nutritional programmes? and 3)Will business have a role to play in such programmes? The answers to these questions came in a variety of forms which frequently included citation of economic growth and opportunity and of the improvement of working efficiency through nutrition.

Hunger as an Economic Issue

While the vast majority of nutrition programmes benefited mothers and children, FAO and other agencies explored alternative routes for reaching other hungry and malnourished family members who played a role in family nutrition levels. Often this desire led to nutritional work for industrial workers, who were usually male. Perhaps the most illuminating example of the increased ties between hunger and economic development can be found in the FFHC's concentration on the role of nutrition in working efficiency. Although it was widely known that mothers and children were the most undernourished members of the family in developing countries, the FFHC was attempting to garner support from an economic analysis of hunger and malnutrition: hungry workers were less productive. This was an idea that had come up for decades in discussions of agricultural productivity and continued to be applied in this vein: agriculturists could not rise far above starvation because they were too hungry to increase productivity.[45] Additionally, FAO hypothesized that with increased urbanization, particularly in Africa, the health of those who previously had tilled the land would deteriorate further: "the traditional diet which previously was more or less adequate to a tribal way of life requiring little sustained effort, is found to be insufficient for a worker from whom a regular, sometimes strenuous effort is called for".[46] But such concerns only figured superficially in the calculus of workers' nutrition. Most importantly, FAO asserted, underfed workers were lethargic, likely to be ill or absent, and accident-prone.[47] The break that this new conceptualization of hunger problems represented was enormous. For the first time, FAO was presenting hunger policy not merely as a humanitarian gesture, but as an opportunity for economic gains. The Food For Peace programme of the U.S. government mirrored

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[45]For a Nigerian example of this assertion see: I. S. Dema, *Nutrition in Relation to Agricultural Production*, Rome, FAO, 1965, pp. 108-109.

[46]*Nutrition and Working Efficiency*, Rome, FAO, FFHC Basic Study no. 5, 1962, p. 4.

[47]Ibid., p. 6.

this new thinking, and WHO expressed interest in feeding plans for industrial workers.[48]

The irony of worker efficiency nutrition programmes was that, although they never became a central component of any UN agency's agenda, they perpetuated the highly criticized practice of transferring nutrition lessons learned in developed nations to developing ones. In the FFHC publication cited, photos appeared of workers in canteens in France and of a modern kitchen at an automobile factory in Germany.[49] Since the broader institutional concerns of FAO and Unicef involved mothers and children, the worker efficiency development reflects how FAO was trying economic avenues to inspire developing and developed countries to actively support nutritional programmes. Even nutrition for children came to have an economic connotation. From its vantage point in 1965, Unicef considered the great achievement of the first four years of the Development Decade to have been the epiphany of the need to tie economic development to the attack against

> disease, hunger, ignorance, and poverty...These sharpened insights into the character of national growth have put the work of Unicef into a new perspective. While the generous and human motives for helping children are in no way diminished, it is now widely recognized that helping children to become the citizens and workers of tomorrow is also a basic component of the most hard-headed development planning.[50]

Unicef continued to emphasize the need for development planners -- economists, government ministers, and sociologists -- to take into consideration the plight of children in their plans and to attract attention by highlighting the societal gains achievable by a healthy and well-nourished population. Conceptually, the idea did not hold the aura of rapid and vertical one-shot communicable disease campaigns or school-building programmes. Rather, nutritional plans depicted long-term programmes that required massive inputs of supplies and funding in order to achieve results in the future -- results that were often hard to evaluate. The language of the relationship between hunger and development was popular with policy makers and nutritionists alike. In a presentation at the Sixth International Congress on Nutrition, Pate crystallized the then widely held sentiment that development hinged on ending

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[48]R. C. Burgess, letter to M. Autret, 6 November 1961, WHO Archives, box A.0916

[49]*Nutrition and Working Efficiency*, op. cit., note 46 above, pp. 34, 39.

[50]'Unicef's Part in the Development Decade, 1960-1964', op. cit., note 32 above, p. 1.

hunger: "Poorly fed people simply do not have the physical and mental energy they need to solve their own problems."[51] For nutritionists, these statements instilled a new sense of importance. Their mission of solving hunger problems was no longer simply altruistic and appealing for its humanism; their work conferred socio-economic advantages.

While the treatment and prevention of PCM was more frequently couched in economic terms to make the task seem appealing to developing countries (and in the long-term industrialized nations), there was another side to the economic equation which involved enticing food producers to produce protein-rich products for developing countries. Perhaps the best summary and representation of this movement and demonstration of how corporate tropes were entering the substance of hunger policy was contained in a report entitled *The Protein Paradox: Malnutrition, Protein-rich foods, and the Role of Business*, written by several students at Harvard Business School. The purpose of the report, in the words of the students was, in light of the stodgy attitude with which protein products had to date been considered, "to provide management with type of information that will lead to more action." (emphasis theirs)[52] The report attracted the attention of prominent nutritionists, as shown in the introduction written by Scrimshaw.[53] The authors asserted that economic development demanded a range of inputs and that elimination of malnutrition was an integral component of the process.[54] The report provided an analysis of the enormity of protein problems in developing countries and a diagram for how U.S. businesses could produce high-protein food supplements and thereby aid the needy, make a profit, and open up a new market in the future. Although their investigation showed promise, it did not conclusively establish that this tactic was economically desirable.[55] Further, it highlighted the rift between nutritionists and food technologists who wanted low-cost high-protein foods marketed and companies that felt such operations could be fiscally unwise.[56]

FAO, WHO, and Unicef had been advocating commercial production of healthy infant foods for years, U.S. food firms were promoting carbohydrate supplements which in many cases had a deleterious effect on infant nutrition in

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[51]Pate, op. cit., note 6 above.

[52]G. C. Belden, Jr., W. L. Congleton, W. R. Devoto et al., *The protein paradox: malnutrition, protein-rich foods, and the role of business*, Boston, Management Reports, 1964, pp. 9, 125.

[53]Ibid., pp. iii-iv.

[54]Ibid., p. 3.

[55]Ibid., p. 125.

[56]Ibid., p. 126.

developing countries. One such product, a corn starch called "Maisena", was then being marketed in Brazil in poor slum areas. Rather than mixing the corn starch with milk, as indicated, these mothers were mixing it only with water, and protein malnutrition was the result. In a letter from Max Milner, Unicef's senior food technologist, to U.S. Senator Hubert Humphrey, then on the Committee on Foreign Relations, Milner expressed his concern about U.S. firms taking advantage of commercial marketing and promotion in developing countries with nutritionally inadequate foods. Milner further told Humphrey that Unicef was working with nutritionists to lobby these firms to market high-protein supplements that would convey a health benefit.[57] The nutritional landscape was thus sprinkled with concerns about companies that were promoting such dangerous foods, and the political methods for convincing them to do otherwise.

Applied Nutrition Programmes: The Fad that Faltered

Although men and workers received some increased concern from nutrition programmes, such initiatives were dwarfed by applied nutrition. With milk supplement programmes' stagnation in 1959, Unicef finally began to attract attention to the applied nutrition programmes which it had been openly encouraging since 1957.[58] According to Arthur Robinson, in the Caribbean region it was not until the milk crisis that country governments, ministries of health, and local agencies were willing to look beyond feeding programmes and toward alternative solutions for childhood malnutrition.[59] To Robinson, applied nutrition essentially consisted of education to overcome ignorance and superstition, and demonstration to show people how to produce foods rich in protein and vitamins. Indeed, applied nutrition projects were a central point of funding during the early-1960s. Out of the twenty-one projects which the Unicef Executive Board approved for nutrition aid in 1961, eighteen were applied nutrition projects, two were for milk conservation, and one involved high-protein weaning foods. When fully funded these projects required nine million dollars -- over

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[57]Max Milner, letter to Hubert H. Humphrey, 10 February 1964, Scrimshaw personal collection.

[58]See: Maurice Pate, 'Expansion of UNICEF Aid to Maternal and Child Nutrition Note and Recommendation by Executive Director', 9 July 1957, E/ICEF/l.1123. Nevertheless, dry milk distribution continued, and Unicef provided it for schools and health programmes in 76 countries in 1962. *Children of the Developing Countries*, Cleveland and New York, The World Publishing Company for Unicef, 1963, p. 59. This report provides a reasonably detailed view of Unicef's programmes in nutrition.

[59]Arthur Robinson, 'Practical and Policy Aspects of Unicef Assistance to Programmes for Improved Nutrition', 1961, Unicef Archives, CF-NYHQ-05AT.

twenty-eight percent of Unicef's total budget.[60] The vast majority of them concentrated on education and training by providing funds for applied nutrition training programmes. In the long-term, all these projects looked forward to opening other applied nutrition centres, raising nutrition levels, increasing food availability, and preventing malnutritional diseases.[61] Generally, the ANPs allowed community health workers and others in related fields opportunities to study nutritional needs and methods for encouraging more varied crop production and consumption of protective foods.[62] FAO supported these projects though it stressed the need for applied nutrition initiatives to establish a demonstration project and replicate it.[63] A typical applied nutrition project involved the following components: a base-line nutritional survey, education and training of field staff, nutrition education of the population, projects for production of high-protein foods through school, community and home gardens. Unicef usually provided gardening supplies, funds for poultry raising and fisheries, transportation, manuals, and training stipends.[64] Reports of successful projects along these lines were rarely heard.

Applied nutrition rapidly came to refer more to training and education than to the actual realization of sample development projects such as home gardens. Platt, along with two other consultants in 1962, independently assessed the integrity of the WHO, FAO, and Unicef programmes in nutrition training and education. Their perceptive analysis crystallized for some the perpetual problems in fighting hunger. While the consultants cited ignorance and poverty as the principal causes of undernutrition and malnutrition, they explained that the problem of ignorance could not be confined to hungry people alone. Rather, it was the politicians and people with power who were ignorant of nutritional concerns and were also culpable.[65] Thus they believed that while on a village level ignorance had to be combated through nutritional demonstration projects -- applied nutrition, fish farming techniques and similar projects

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[60] *Report of the Executive Board 280th to 293rd meetings 4 June 1962*, New York, Unicef, E/ICEF/454, 1962, pp. 30-31

[61] ANPs were frequently jointly funded by Unicef and the local or national government. WHO and FAO at times paid for required personnel. In Vietnam, for example, Unicef provided $23,000 for an ANP while WHO provided a nutrition educator and a fellowship, and the Government of Vietnam offered $73,000 for the first two years of operation. 'Plan of operation for an applied nutrition project in Viet-Nam', December 1964, WHO Archives, box A.0909.

[62] *Report of the Executive Board 280th to 293rd meetings*, op. cit., note 60 above, pp. 30-31.

[63] Ibid., p. 31.

[64] 'Unicef's Part in the Development Decade, 1960-1964', op. cit., note 32 above, p. 27.

[65] B. S. Platt, A. Angladette, and L. A. Maynard, *Report of a Joint WHO/FAO/UNICEF Survey of Education and Training in Nutrition*, New York, Unicef, August 1962, p. 14.

-- on a national level, nutritionists had to inform public leaders of the gross inadequacies in the national diet. Platt and his colleagues attributed the failure of many well-intentioned national programmes to this public ignorance: "Examples of efforts rendered futile because they have been made without full and continuous government support are depressingly numerous and familiar."[66] Platt's belief that ignorance ought to be identified as much with leaders as with hungry people was hardly infectious. To many, ignorance remained the root cause of malnutrition and hunger.

An FAO publication in 1962 mocked contemporary comments such as "'the diet of a rural population is determined by the foods grown in the area, [and]...improved diets can result only from increased income'" because they failed to proclaim ignorance the cause of nutritional problems.[67] In response to those who placed socio-economic status higher on the ladder of causality than ignorance, the author added to the already rich literature of tales of ignorance from the field: "in Bantu homes, girls and women of child-bearing age are usually forbidden to drink milk and may not be marriageable if they do, because milk is believed to cause sterility in females...in Indonesia...some children suffering from protein deficiency are forbidden to eat dried fish" due to fear of worms.[68] The tales continued and aimed to justify the need for nutrition education. Notably, when countries were cited that had utilized nutrition education to raise nutritional status, the examples given were invariably in industrialized countries -- successes in developing countries were sparse. The consequence of such appraisals of malnutrition often were recommendations that entirely subverted facts demonstrated by Orr decades earlier in England. Whereas Orr had shown that poor people, often regardless of their level of nutritional knowledge, were not as well-nourished as wealthier people, information packets and related propaganda, particularly from FAO, insisted that malnutrition was usually just the result of poor food choices.[69]

Unicef and FAO administrators alike allocated substantial funding to the printing of nutritional literature. In 1962 correspondence by Les Teply, the Unicef chief of applied nutrition, he stated that he had "long felt that one of the best ways of putting Unicef dollars to work for better nutrition of children and mothers is to assist

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[66]Ibid., p. 11.

[67]*Education and Training in Nutrition*, Rome, FAO, 1962, FFHC Basic Study no. 6, p. 7.

[68]Ibid.

[69]For a representative illustration, see John Fridthjof, *Encouraging the Use of Protein-Rich Foods*, Rome, FAO, 1962.

in production and large scale distribution of appropriate literature."[70] While Teply recognized that poor women were usually illiterate, he argued that most of them had children and husbands who could read. In Teply's mind, the major obstacles to greater organizational support for nutritional literature were the difficulties in producing them locally and FAO's time-consuming insistence that it approve every word at headquarters.[71] Supply of textbooks and manuals in addition to well-trained personnel were the primary impediments to effective applied nutrition programmes. WHO and FAO saw their role in the matter as developers of nutritional information, publishers, and trainers of nutritionists.[72] The 1961 Joint FAO/WHO Expert Committee on Nutrition identified the dearth of trained nutrition workers as "the limiting factor in many of the activities carried out by these two international organizations.[73] Given FAO's continuing financial instability, the committee's words were certainly an exaggeration. However, the committee did provide fuel for the numerous FAO conferences which were a good deal simpler to organize than community-level applied nutrition. At a conference, success was usually gauged by the number of participants. The agencies promoted regional training projects for a couple hundred health workers every year. Unicef also took part and boosted its allocations to training from 10% of total allocations in 1960 to 33% in 1963 and 1964.[74]

By October 1963, WHO, FAO, and Unicef had among them fifty-eight applied nutrition projects operating in forty countries.[75] In most regions ANPs were still being approached cautiously and were viewed as "new", although they had been implemented for six years.[76] A confidential evaluation of these projects by anonymous consultants sharply criticized their failure to work with local and national government plans and to establish baseline information about local nutrition levels in order to evaluate progress. Moreover, evaluators asserted that due to a lack of country

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[70]Les Teply, letter to S. M. Keeny, New York, 5 September 1962, Unicef Archives, 88R025, Box T-006, Teply files.

[71]Ibid.

[72]For an example of a typical textbook published by FAO, Unicef, and WHO see: Michael C. Latham, *Human Nutrition in Tropical Africa*, Rome, FAO, FAO Food and Nutrition Series no. 11, 1965.

[73]*Joint FAO/WHO Expert Committee On Nutrition, Sixth Report*, op. cit., note 42 above, p. 48.

[74]'Unicef's Part in the Development Decade, 1960-1964', op. cit., note 32 above, p. 11.

[75]'Applied Nutrition Programmes FAO, WHO, Unicef', Draft paper for the meeting of WHO Country Representatives, October 1963, LSHTM Archives, WHO reports box, p. 2.

[76]'Nutritional needs and problems of children in Asia', 19 November 1963, New York, E/ICEF/475, p. 8.

infrastructure, the projects had had "doubtful" impact on childhood malnutrition[77] and were apt to fail as soon as experts left the area.[78] The establishment of school gardens for teaching better nutrition at schools had had "irregular" results.[79] Due to this scathing evaluation, ongoing projects were pronounced irretrievably flawed and "WHO realized that due to a series of circumstances...the activities in the Applied Nutrition Programmes directed towards prevention of malnutrition in young children are not sufficiently developed to produce any significant impact in the reduction ofthe [sic] prevalence of this condition."[80] The WHO negative viewpoint aside, ANPs continued to dominate nutrition planning discussions for years to come.

With the advent of national planning approaches in the mid-1960s, applied nutrition strategies were modified to include joint planning with governments and different ministries, rather than merely with, for example, ministries of agriculture. Moreover, FAO and Unicef sought to target, as accurately as they could, mothers and children as the most important beneficiaries of ANPs. While neither organization wished to exclude other family members, they did wish to formulate projects strictly directed at the needs of mothers and children. Since FAO and Unicef were the primary sponsors of ANPs and frequently found their responsibilities overlapping, they decided that FAO would be responsible primarily for promoting national and international projects to raise overall nutritional status while Unicef would focus specifically on childhood nutritional conditions and their improvement.[81] Ironically, Unicef was increasingly interested at the same time in national policy-making, thus these types of general policy boundaries -- which are drawn directly from FAO and Unicef meetings -- cannot be taken at face value. For historical accuracy, it is important to note that while rhetorically these agencies attempted to distinguish their work, there was mutual encroachment on individual agency responsibilities. ANPs will continue to be discussed since they continued to be the programmatic philosophy on which many nutritional initiatives were pivoted. However, in Scrimshaw's view, applied nutrition reached its heyday in the early-1960s and would later be considered a noble, failed effort.[82] His viewpoint is significant since, as we have seen, ANPs seemed only to be in a growth phase during this time period.

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[77]'Applied Nutrition Programmes FAO, WHO, Unicef', op. cit., note 75 above, p. 5.

[78]Ibid., pp. 3-4.

[79]Ibid., p. 8.

[80]Ibid., p. 12.

[81]'Report of the Fifth Session of the FAO/Unicef Joint Policy Committee', op. cit., note 36 above, paragraphs 13-50.

[82]Nevin S. Scrimshaw, interview, 25 July 1995.

Unicef's Country Approach

Early in 1961, Pate's progress report to the Board of Unicef highlighted a shift in Unicef's emphasis from communicable disease cure and treatment toward hunger and malnutrition: "Underfeeding and malnutrition play a considerable part in the pathology of childhood. Their importance was rather underrated in the past, but is now recognized throughout the world."[83] Although his words did not report a new concentration for Unicef -- after all, Unicef had focused for over a decade on feeding, ostensibly for prevention of undernutrition and malnutrition -- they did set a fresh tone. He continued, "A strong current of opinion, brought about partly by international organizations, and in particular by FAO through its Freedom from Hunger Campaign, has revealed that the solution of the food and nutrition problems is an essential condition for the very future of many countries, and perhaps of all mankind."[84] Thus, Pate had very smoothly returned to the doomsday rhetoric of Orr, who had frequently spoken of the need for all people, especially children, to be well fed. Unlike Orr, and unlike the Pate of a decade earlier, he emphasized Unicef's shift away from feeding programmes and toward long-term nutritional interventions. In particular, he highlighted nutrition education, applied nutrition, local milk production projects, and the application of PAG studies on the use of high-protein mixtures.[85] Soon after, Pate further elaborated abstractly on the direction in which he wished to direct Unicef and remarked that improvement in agricultural production of protective foods in developing countries would have to be a priority, especially in light of population growth. He felt that this measure along with "economic development" coupled to "social progress" would assure true advancement.[86] His comments reflect the difficulty his agency and FAO were having in expressing the need for concerted development that was not simply grounded in stop-gap measures to which nations had grown accustomed. Both FAO and WHO had already been encouraged to adopt and "integrated approach" to maternal childhood nutrition programmes though it was Unicef that began to identify the ingredients for this approach.[87] While all of this

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[83]Maurice Pate, 'General progress report of the Executive Director', 11 April 1961, E/ICEF/409/Add.1, paragraphs 40-41.

[84]Ibid., paragraphs 43-44.

[85]Ibid., paragraphs 40-45.

[86]Maurice Pate, 'Statement by Executive Director to Executive Board', 7 June 1961, E/ICEF/430, p. 4.

[87]*Joint FAO/WHO Expert Committee On Nutrition, Sixth Report*, op. cit., note 42 above, p. 65.

discussion was occurring within the UN agency network, some unpublicized findings were suggesting that development would have to go far beyond simple nutrition education and subtle family planning in order to make progress for children. An article by South African medical officers commented in 1963 that while some forward-looking policy makers were encouraging family planning to avert childhood malnutrition, such tactics were in vain without contemporaneous improvements in parental education levels and standards of living.[88] These intimidating conclusions underline the dilemma that Unicef and other agencies were still trying to elucidate: how do we improve childhood nutrition?

Pate and his advisers were struggling with how to bind nutrition for children to socio-economic development in the context of the "UN Decade of Development". How would better nutrition provide for industrial advancement and increased wealth? Pate was not sure, he could only assert that "Investment in children is recognized in the abstract as being more valuable than investment in equipment, but it tends to be neglected in practice because the dividends do not show up so clearly in the national accounts."[89] Business-minded Pate had stumbled on to one of the elusive ways in which countries could be convinced to invest in their children: if only it could be shown that improved nutrition **would** result in greater economic success, then the UN agencies would be able to "sell" nutrition more easily. As the nature of Unicef programming was rapidly changing, Unicef had to find a way to encourage its newer nutrition programmes, such as ANPs, in developing countries. The food supplementation and school feeding programmes that Unicef had tirelessly pursued for over a decade were in great part subsumed by the newly founded World Food Programme (WFP) in 1961 as well as by other aid agencies.[90] The UN and FAO jointly sponsored the WFP which sought to promote social and economic development through utilization of surplus food and also to treat malnutrition.[91] In its first year of operation, WFP's sixteen million dollars in cash contributions were roughly equivalent

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[88]Isobel Robertson, Margretha Kemp, 'Child health and family size: a survey relating to the Cape coloured population of Cape Town in the year 1961-1962, *South African Medical Journal*, 31 August 1963, pp. 888-93.

[89]Pate, op. cit., note 86 above, p. 4.

[90]See: *Food Aid and Education*, Rome, FAO, World Food Program Studies no. 6, 1965.

[91]Ralph W. Phillips, *FAO: its origins, formation and evolution 1945-1981*, Rome, FAO, 1981, pp. 72-73. See also: 'Review of the Organization's Programme in Nutrition, 1948-1964: Report by the Director-General', Geneva, WHO, provisional agenda item 2.9 for thirty-fifth session of the Executive Board, EB35/9, 27 November 1964, p. 50. The revision of this document was published as: 'Nutrition: a review of the WHO programme-1', *WHO Chronicle*, *WHO Chronicle*, 1965, 26(4), pp. 160-79; and 'Nutrition: a review of the WHO programme-2', *WHO Chronicle*, 1965, 26(5), pp. 195-207.

to half of Unicef's entire budget.[92] The programme had three main categories of allocation -- emergencies, feeding programmes, and projects -- of which the latter was the priority.[93] Although the WFP was extraordinarily popular with the U.S. government and FAO, its work frequently had troubling effects. In an appraisal for FAO of multi-lateral food aid programmes, one consultant commented that "the use of food aid to provide part of the finance for development plans has so far been the source of the most flagrant examples of harmful effects on development."[94]

As Unicef relieved itself of food-aid responsibilities, the perceived need in the agency to improve the quality and diversity of its projects grew. In June 1961 the Unicef Executive Board adopted recommendations stemming from the "Survey on the Needs of Children". The preliminary data of the survey had drawn "a vast and terrible picture" of childhood health status in developing countries.[95] Their survey led to a radical shift away from the individual project approach, often vertical in nature, that had characterized previous nutrition and health policies, and toward a multi-sectoral horizontal strategy emodied in the "country approach".[96] For years desk officers in many countries had been criticizing Unicef's implementation of projects from headquarters. They had consistently found that headquarters did not have the insight into the country situation necessary to identify and support the most effective measures. Moreover, each project had to receive FAO or WHO technical approval, slowing its field implementation often by several months. By decentralizing decision-making, Unicef provided local staff with the autonomy to decide, in partnership with national governments, which projects would be of the most help to children.[97] The Board agreed to consider funding projects in **any** field that would demonstrably help children.[98] This was a major departure from past policy and hypothetically allowed

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[92]A. H. Boerma, *Report on the World Food Program by the Executive Director*, Rome, FAO, 1965, paragraphs 15-16.

[93]Ibid., paragraphs 208-220.

[94]Jan Dessau, *The Role of Multilateral Food Aid Programs*, Rome, FAO, World Food Program Studies no. 5, 1965, p. 21.

[95]Pate, op. cit., note 86 above, p. 4.

[96]John Charnow, personal correspondence, 19 January 1996.

[97]'Milestones in Unicef's History 1946-1985', op. cit., note 9 above, p. 3. Heyward believed that the "impulse" for working with countries in this manner had come from Dr. Sicault, a regional director and the Deputy Director of Planning at Unicef during the early-1960s. E. J. R. Heyward, interview conducted by Margaret Catley-Carlson, 14 July 1983, Unicef Archives, interview file, p. 9.

[98]E. J. R. Heyward, 'Notes on history of Unicef "policy"', New York, 17 March 1965, Unicef Archives, CF/HST/1985/034/Anac 03/11, pp. 16, 17. Note that Heyward placed the term policy in quotations in the previous title. Although a historical analysis clearly indicates that there was policy, Heyward still questions whether such a thing existed.

each Unicef country programme to be tailored to the individual needs of children in the country. The first major change to emerge from the Board's decision was a plethora of primary education programmes in Africa which had previously been outside Unicef's scope of work.[99] Nevertheless, certain developmental priorities were still necessarily central to the approach taken by desk officers in all developing countries. Specifically, ANPs, treatment for moderate and severe malnutrition, supplementary feeding, and prevention and treatment of infection remained part and parcel of each country protocol.[100] Just how programmes were implemented was increasingly left to the field staff's discretion. Although the country approach held much promise for more effective country programming in the future, by 1965 its results were mixed. Heyward found that some country officers were able to utilize the country approach very effectively while others did not find the concept sufficiently well-defined and lamented the increased emphasis on planning and decrease in tangible supply aid.[101]

PAG Power

By the beginning of the 1960s, the PAG had become more influential than ever, and Aykroyd commented that while the PAG's branch, The Committee on Protein Malnutrition, was not a UN body, "it has been so closely associated with the UN agencies and the UN program that it has often been hard to tell the difference."[102] Since the PAG's popularity in large part stemmed from its focus on protein, protein was to remain at the centre of its policy recommendations and research. In 1960 the PAG stated that it was interested in protein and other aspects of malnutrition but it was always clear that caloric intake was never to play a significant role, a notion that irked many nutritionists.[103] This stand appeared to contradict recent clues to the actual prevalence of protein malnutrition in developing countries. A WHO supported study of protein malnutrition prevalence in the early-1960s in Southern India found that while incidence of kwashiorkor was found in one percent of children, marasmus

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[99]E. J. R. Heyward, interview, 5 May 1995.

[100]See: 'Health components in nutrition programmes', June 1965, E/ICEF/528, paragraph 154.

[101]Heyward, op. cit., note 98 above, p. 17.

[102]W. R. Aykroyd, 'The FAO Committee on Protein Requirements', in *Progress in Meeting Protein Needs of Infants and Preschool Children, Proceedings of an International Conference held in Washington, D.C., 21-24 August 1960*, Washington, D.C., National Academy of Sciences and National Research Council, Publication 843, 1961, 545-48, on p. 545.

[103]William J. Darby, 'History of PAG', in A. Sachs and P. Cormier (eds), *The PAG Compendium: The Collected Papers Issued by the Protein-Calorie Advisory Group of the United Nations System, 1956-1973*, New York, Worldmark Press, Ltd., 1975, p. xxv.

was found in twice as many.[104] The Sixth Joint FAO/WHO Expert Committee on Nutrition expressed tepid concern that perhaps the protein focus was excessive: "Kwashiorkor has tended to engage the exclusive attention of many workers. The attention of these investigators and of those responsible for preventive and corrective programmes should be directed, without decreasing the interest in kwashiorkor, to all aspects of the problem of protein-calorie-deficiency disease."[105] Through the decade, PAG staff focused their efforts on very specific protein problems, such as the threat of aflatoxin poisoning in ground peanut protein mixtures. This type of intensely scientific work -- most of which related to protein-rich weaning foods -- characterized PAG activities.[106]

Although the PAG worked tirelessly on weaning foods, its recommendations were rarely adopted by Unicef and other agencies. From an early point in the development of protein-rich weaning foods, Incaparina, the cotton flour high-protein weaning food developed by INCAP, had emerged the most successful contender, and its availability in markets in Central America improved during the early-1960s. Although Incaparina had a solid scientific base and support from UN agencies, its inventors themselves wondered whether it would have a significant impact on the incidence of protein-malnutrition in young children.[107] While INCAP had determined that it effectively nourished children, the task of inspiring mothers to purchase it and use it consistently -- the mixture's application -- was the central difficulty, just as the application of western technologies to nutritional programmes had been the troubling point for projects during the previous decade. Even Scrimshaw, who previously had harped on kwashiorkor, began subtly shifting emphasis in his prolific publications toward marasmic-kwashiorkor and the prominent role of infection in the deaths of malnourished and hungry children. Béhar, Scrimshaw, and INCAP staff during the

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[104] *Joint FAO/WHO Expert Committee On Nutrition, Sixth Report*, op. cit., note 42 above, p. 13.

[105] Ibid., p. 24. Although these expert reports were important, their presentation was frequently inadequate. After examining a draft of this report, Dr. Jean Mayer, a committee participant, commented to R. C. Burgess at WHO: "having been one of the original drafters of this somewhat cumbersome document, I hope that I can be permitted to say that the style still shows the literary characteristics one achieves in a hotel room at midnight." Jean Mayer, letter to R. C. Burgess, 17 October 1961, FAO Archives, Nutrition Division registry files, box 12, NU 1/2, NU 1/4.

[106] See: P. Gyorgy, 'Suitability of Available Protein-Rich Foods for Infants and Pre-School Children', 1962, pp. E499-502 and 'Introduction of Protein-Rich Foods', 1961, pp. E435-36, in A. Sachs and P. Cormier (eds), *The PAG Compendium: The Collected Papers Issued by the Protein-Calorie Advisory Group of the United Nations System, 1956-1973*, New York, Worldmark Press, Ltd., E, 1975. The Compendium itself contains all of the PAG's publications and well reflects its central themes.

[107] For the classic paper on Incaparina's clinical success, see: Nevin S. Scrimshaw, Moisés Béhar et al., 'All-vegetable protein mixtures for human feeding: V. clinical trials with INCAP mixtures 8 and 9 and with corn and beans', *American Journal of Clinical Nutrition*, 1961, 9(2), pp. 196-205.

course of a mortality study in four rural Guatemalan villages found that kwashiorkor was responsible for two-fifths of the childhood deaths between the ages of one and four while diarrhoea and infection accounted for the remainder.[108] Such findings reinforced the call by Platt and others for horizontal nutritional policies that targeted several aspects of childhood health -- from clean water and sanitation to protein weaning foods. Behind the scenes, the PAG was having a notable impact on the calculus of nutritional thought among policy makers. When one thought of nutrition problems, protein-malnutrition was most often identified as the problem. Unicef maintained very close ties to the PAG secretariat, especially since Unicef field staff had been aiding a number of weaning food programmes around the world, some in co-operation with WFP.[109]

The Sixth Joint FAO/WHO Expert Committee had designated kwashiorkor and marasmus and intermediate stages of disease as "protein-**calorie** deficiency diseases" (emphasis mine).[110] The shift back toward marasmus was echoed by FAO in 1964 when they transferred their emphasis from high-protein weaning foods to supplementary food "with an appropriate protein-calorie ratio".[111] On an ideological level, the battleground had two encampments: protein and calories. According to Sebrell, the problem of past aid had been its necessary caloric emphasis: "Man has always tended to base his food production on his need for calories and his desire for money...It is essential that caloric needs receive first consideration because the gnawing hunger and emaciation produced by insufficient calories quickly leads to desperation and early death."[112] Further, Sebrell stressed that the increase in production of staple foods would not stave off starvation unless they integrated crops of higher protein value.[113] He stated: "Today in the nutrition research laboratories of the world many scientists are seeking ways to extend this ancient practice [of high-

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[108]For the most concise description of protein malnutrition as it was seen in the early-1960s see: Nevin S. Scrimshaw and Moisés Béhar, 'Protein malnutrition in young children', *Science*, 1961, 133(3470), 2039-2047, on p. 2039.

[109]'Projects for the preparation and promotion of foods for weaning and pre-school feeding', in A. Sachs and P. Cormier (eds), *The PAG Compendium: The Collected Papers Issued by the Protein-Calorie Advisory Group of the United Nations System, 1956-1973*, New York, Worldmark Press, Ltd., E, 1975, pp. E 679-85.

[110]*Joint FAO/WHO Expert Committee On Nutrition, Sixth Report*, op. cit., note 42 above, p. 23.

[111]'Review of the Organization's programme in nutrition, 1948-1964: report by the Director-General', op. cit., note 91 above, p. 25. The new term "protein-calorie deficiency disease" was the latest terminology adopted by WHO.

[112]Sebrell, op. cit., note 11 above, p. 393.

[113]Ibid., p. 394.