

PL 480 TITLE II
FOOD DISTRIBUTIONS IN TANZANIA
WERE NOT TARGETED AT NUTRITIONALLY
SUBSTANDARD CHILDREN

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PL 480 Title II Food Distributions In Tanzania
Were Not Targeted At Nutritionally Substandard Children

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EXECUTIVE SUMMARY

Introduction and Scope

Our most recent audit of the Catholic Relief Services (CRS) sponsored PL 480 Title II program in Tanzania is the third in a series of audits of this program -- starting with A.R. 3-621-80-24, 9/18/80. At the time of our FY 1980 audit we found numerous program deficiencies attributable to CRS. These deficiencies were virtually identical to previous deficiencies reported in prior AID audits, a GAO audit, and in CRS internal audits -- dating back to 1975. Over \$1 million of Title II commodities which arrived in CYs 1978 and 1979 could not be accounted for as having arrived at intended destinations.

It was our opinion at the time of the FY 1980 audit that unless corrective actions on the constantly recurring deficiencies took place in the near future, it would be necessary to recommend either a substantial reduction in program size, or a change in program sponsor.

The FY 1980 report was brought to the attention of the AID Administrator, who advised the Assistant Administrator in charge of PL 480 programs:

"I do not think this situation can be allowed to continue without damage to the Title II program and, ultimately, to our relations with Tanzania ... it is essential that we have quick action on these problems."

Several times during the 17 month period required to close the recommendations of the FY 1980 audit, RIG/A/Nairobi scheduled follow-up work on the Tanzania Title II program. Each time our follow-up work was deferred because sufficient action had not been taken on the recommendations. Eventually we were able to initiate a follow-up audit in March 1982; however, we could not complete all the audit work originally planned because call forwards were suspended, and distribution centers were being reviewed and reoriented by CRS/Tanzania. In addition we found the inventory system was not providing adequate control but that it was being revised.

Our current review was made to perform the work we were unable to do in mid-1982. The scope of work consisted primarily of a review of the inventory system and management of food distributions to recipients. Our review of food distribution focused on (a) whether the most needy were being fed, (b) whether health and nutrition classes for recipients were adequate, and (c) whether programs were being developed to eliminate the need for feeding in future years.

During the period under review, \$1,278,779 of food, including cost of ocean freight, was brought into the country.

Summary of Findings

Although the inventory system was not fully implemented because the previous CRS Director became sick and had to be replaced, delaying implementation, the system as designed and being implemented appears adequate. It should provide control over the food from time of entry in Tanzania until distribution at the centers. This system is patterned after a system designed by two CRS/New York audit staff members for possible use worldwide. We believe this system, if expanded and refined in certain areas, would be an effective way to implement and control food distribution in Africa and possibly worldwide. We strongly support development and distribution of the CRS manual titled "How To Do Title II". The draft manual includes exhibits of the various records that should be kept, and narrative on how the record should be used. It also provides information on developing program levels, call forwards, claims, allocation of food, etc. (pages 16 and 17).

Our review of the programs at the distribution centers revealed some areas that can be improved. These areas were discussed with the CRS Director who was aware of the need for improvement, but because of his having to concentrate on the basic food control system he had not had time as yet to concentrate fully on the other areas. The areas which needed improvement were:

- Criteria needs to be developed to better target distribution of food to substandard weight children. Entry into the program should be restricted to those that most need the food. A system is needed to rotate recipients out of the program when acceptable levels of weight for age have been reached -- replacing them with children with substandard body weight (pages 6 to 9).
- Nutrition and health education lessons need to be more formalized and improved at the centers (pages 9 and 10).
- Programs designed to help eliminate the need for feeding should be developed as an integral part of the feeding program. USAID/Tanzania financial assistance in developing programs could be considered (pages 10 to 12).
- Feeding at day care centers lacked the nutritional monitoring and educational benefits of the MCH program. It was not known whether the children in these centers needed the food. The centers should be brought under similar nutrition and education standards as MCH, or at least this portion of the program should

be directed at those day care centers which have a high percentage of nutritionally substandard children. If they can not be, consideration should be given to dropping day care centers in favor of increasing the MCH program (pages 12 and 13).

The feeding programs being provided through company facilities should be closely reviewed. Our review indicated these centers provided benefits only to company employees and their families. The day care centers and MCH clinics were company operated and were a form of employee benefit. The companies paid the recipients fees. These are questionable centers to support with food because they are restricted to company employees and families who have jobs (pages 14 and 15).

We have recommended in each of these areas that USAID/Tanzania monitor and follow up on the actions being taken by CRS to improve the centers programs. In addition, we have recommended that FVA/FFP work with CRS/Headquarters to develop specific feeding criteria to improve the targeting of food to nutritionally substandard children, including criteria for continued participation in the program; and to develop programs for more formalized training of mothers in the areas of nutrition, health and family planning. Programs to eliminate the need for food assistance should be developed.

At the conclusion of our review, an exit conference was held with officials of USAID/Tanzania and CRS/Tanzania. In addition, a copy of our draft audit report was transmitted to USAID/Tanzania (who, we understand, shared it with CRS/Tanzania) and the Regional Food for Peace Office (RFFPO). Comments received at the time of our exit conference and in response to our draft report were duly considered, and where considered pertinent were included in this final report.

Two sections of our draft report (Criteria In Feeding Needs To Be Developed If Title II Is To Become More Than A Handout and Food Control System Is Improving) were transmitted via cable to FVA/FFP. Although more than two months passed between the transmission of our cable and issuance of this report, FVA/FFP did not provide comments on those sections of our draft report.

BACKGROUND AND SCOPE

Tanzania is a large country (one third larger than Texas) with a population of approximately 18 million people. Approximately 90 percent of the people are engaged in small subsistence farming. Tanzania is one of the 25 poorest nations in the world, and approximately 25 percent of its children under 5 years of age are malnourished.

The United States attempts to assist these malnourished children by donating food under the Public Law 480 Title II Program. The primary objective of this program is to improve the nutrition of children under age five. The program in Tanzania has been administered by Catholic Relief Services (CRS) since April 1962.

Our most recent audit of the CRS sponsored PL 480 Title II program in Tanzania is the third in a series of audits of this program -- dating back to FY 1980. At the time of our FY 1980 audit (A.R. 3-621-80-24, 9/18/80), we found numerous program deficiencies attributable to CRS. These deficiencies were virtually identical to previous deficiencies reported in prior AID audits, a GAO audit, and in CRS internal audits -- dating back to 1975. Over \$1 million of Title II commodities which arrived in CYs 1978 and 1979 could not be accounted for as having arrived at intended destinations. A pertinent summary of the situation existing at the time of our last audit could also be found in a CRS internal audit report issued in 1978, which stated that CRS/Tanzania never had adequate controls over the movement of PL 480 commodities from the ports to final recipient centers.

It was our opinion at the time of the FY 1980 audit that unless corrective actions on the constantly recurring deficiencies took place in the near future, it would be necessary to recommend either a substantial reduction in program size, or a change in program sponsor.

The FY 1980 report was brought to the attention of the AID Administrator, who advised the Assistant Administrator in charge of PL 480 programs:

"I do not think this situation can be allowed to continue without damage to the Title II program and, ultimately, to our relations with Tanzania ... it is essential that we have quick action on these problems."

Although AID management in Washington and USAID/Tanzania were very interested in obtaining prompt corrective action on the noted deficiencies, CRS/New York was very slow to initiate action. It was not until March 1982 (17 months after issuance of the report), that sufficient documentation was submitted to close all the recommendations of A.R. 3-621-80-24.

Several times during this 17 month period, RIG/A/Nairobi scheduled follow-up work on the Tanzania Title II program. Each time our follow-up work was deferred because sufficient action had not been taken on the recommendations. Eventually it appeared from documentation submitted to the IG, that CRS/Tanzania had corrected the deficiencies and implemented the recommendations. Thus, a follow-up audit was initiated in March 1982; however, as is noted in our report on that audit (A.R. 3-621-82-15, 5/26/82), we could not complete all the audit work originally planned because call forwards were suspended, and distribution centers were being reviewed and reoriented by CRS/Tanzania. In addition we found the inventory system was not providing adequate control but that it was being revised.

Our current review was therefore made to perform the work we were unable to do in mid-1982. The scope of work consisted primarily of a review of the inventory system and management of food distributions to recipients. Our review of food distribution focused on (a) whether the most needy were being fed, (b) whether health and nutrition classes for recipients were adequate, and (c) whether programs were being developed to eliminate the need for feeding in future years.

FINDINGS, CONCLUSIONS AND RECOMMENDATIONS

Criteria In Feeding Needs To Be Developed If Title II Is To Become More Than A Handout

The Title II food distribution program has potential for helping the most needy in the at risk (0-5) age group and for improving the well being of recipient families. For this to become a reality the program must be better managed by establishing more finite criteria for accepting recipients into the program, for retaining recipients in the program, and by developing associated projects to increase income and/or local food supplies. CRS (although making progress in certain areas) still has not implemented a feeding program that reaches the maximum number of substandard weight children, nor have effective nutrition education programs or programs to eliminate the need for food been developed. The CRS philosophy is to feed everyone at risk within a community without regard to need. CRS feeding in some centers has been going on for ten years or more with no prospect of elimination. This type of perpetual feeding has little potential or benefit; rather, it tends to make communities dependent on donated food.

Steps are being taken in East Africa to get a constant supply of food to the recipients. This is a first step to any feeding program if it is to be an effective tool for improving health and nutrition of substandard weight children. Steps have been taken at some centers to make recipients do certain things like participate in

health and nutrition programs. Some centers require substandard weight children to show progress. If not the mothers are required to bring the child in weekly. These steps, however, have not been consistently incorporated into a feeding policy.

The Title II program lacks policy guidance to make it more than a give away program with no required results. Effective management is required so that the maximum number of substandard weight children are fed. Policies are needed in the following areas:

- Targeting of food to children with substandard body weight and poor health status.
- Developing criteria for a recipient to continue in the program.
- Teaching a series of topics related to nutrition, health and family planning.
- Establishing community projects to grow food or increase income.

Targeting of food to children with substandard body weight and poor health status: The current "at risk group" feeding criteria encompasses virtually the whole population in a country. It ignores feeding the most needy and undernourished as required by law. This criteria permits the feeding of children from any family with a child aged 0 to 5 because they are in the "at risk" group. A policy needs to be established to specifically target substandard weight children within the "at risk group".

Criteria for selection of recipients in the Tanzania Manual of Operations is as follows: (This is typical CRS policy for Africa.)

"Any needy mother with pre-school children under the age of 5 years from the selected area is eligible to be registered in the program. Any child, under the age of 5 years, is eligible to be registered in the program. All children should be encouraged to stay in the program until the age of five. Each enrolled mother is allowed to register two of her children under the age of five.

The selection of the recipients should be based on family income and poor nutritional and health status. Weak and under nourished children should be given preference. However, children, who are not under-nourished or weak at the time of the selection, should not be excluded if they are members of an 'at risk' group.

Those children 'at risk' are those with either low family income, social problems, or those who are residents of drought stricken or food shortage areas."

This criteria typically results in feeding any children aged 0-5 in an area regardless of their weight for age -- up to the authorized recipient level. In most areas of Tanzania the number of potential recipients normally exceeds the authorized level.

In a recent cable titled "Guidance For Title II PVO Programs", targeting is encouraged because it has proved to be cost effective in countries where it has been done. The cable encourages giving serious consideration in design of programs to geographic targeting and indicates further that screening based on economic needs will refine the selection of participants. However the cable seems to indicate that most countries do not have adequate growth surveillance/monitoring and evaluation data to target.

All CRS sponsored programs we have reviewed in Africa use growth surveillance charts. Although these charts may not be the ultimate standard for measuring nutritional growth and experts do not agree on their use, they are all that is currently available (and all that will be available in the foreseeable future) in Africa. These charts do provide information on the weight to age of the child and do provide some basis for targeting. However, these charts are not being effectively used in the African programs we have reviewed. We suspect the information available from these charts is down played because our analysis shows that many of the recipients being fed show little, if any, progress. We attribute lack of progress to lack of program criteria and poor implementation rather than completely unreliable data.

Although we do not pretend to be experts on nutrition, we see a program that has great potential but that has accomplished little in over 20 years of implementation. With the extremely high cost of delivering this U.S. taxpayer provided resource (food and shipping), management and implementation of the program must be improved.

The recent cable guidance provided by AA/FVA is a good first step; however, more than guidance is needed to provide maximum benefit to substandard weight children. Programs designed to target food to substandard weight children and monitor their progress should be a minimum implementation requirement in all Title II feeding programs.

Developing criteria for a recipient to continue in the program: The feeding program envisions the food as supplementary to the child's regular food intake. Although CRS monitors the child's weight to age progress, no periodic re-evaluation is made of each recipient. The failure of any child to gain weight is an indication that the food being provided to the child is a substitute rather than a supplement as envisioned by the program, or the child may have a medical problem which should be treated. A policy needs to be established to evaluate progress of recipients and to establish criteria for dealing with lack of progress. Some centers remove recipients from the program if they do not show progress. Some

require the mother to come weekly instead of monthly when no progress is shown. Criteria for participating and continuing to participate should be established, and mothers should be made aware of the nature of the program and her responsibility. Without criteria, a child accepted in the program can remain in the program until age five regardless of progress or weight gained. With no criteria there is no incentive to see that the child progresses. The potential disincentives that a dole has on the family is evident by the need to continue to feed for years in the same communities to the same families.

Teaching a series of topics related to nutrition health and family planning: Recipient mothers of preschool children are to receive instruction in techniques of proper nutrition and health. We also believe this would be an effective time to teach family planning. However, a uniform set of topics are not being presented, and both the quality and quantity of the instructions can vary widely between centers. At day care centers in Tanzania, no instructions were given to parents. A more formalized approach to instruction is needed such as a teacher's manual so the centers can provide better classes on health, nutrition and family planning.

Establishing community projects to grow food or increase income: Feeding programs are needed when there are insufficient varieties and/or quantities of food available in a community or insufficient funds to buy food. PL 480 Title II food distribution provides an opportunity to try to alleviate these conditions by training mothers when they come for food. Food varieties which will grow under existing environmental conditions to help decrease dietary deficiencies can be identified and the people educated on how to grow these foods. Improved growing techniques to increase yields can be demonstrated to the food recipients. Where there is lack of ability to grow adequate food, then other activities to earn money to buy food should be provided. Unless the underlying conditions that cause food shortages are attacked, the need for food will only become greater as population increases. When mothers bring their children in for food is an opportune time to organize them and train them on how to provide for themselves by increasing supplies of food, or by developing projects to increase their income so they can buy the food they need. Without an associated development program, food distribution becomes a subsidy that the community or area can become dependent on. The long term effect may be a disincentive to residents of the community to provide for themselves.

Conclusion and Recommendation

The MCH and other child feeding programs can be better implemented by developing improved program guidelines and criteria. The food distribution programs need to be geared to improved child nutrition of substandard weight children by providing food, monitoring weight progress, stipulating additional steps for lack of progress,

providing more formal education on health and family planning, and developing activities to increase the supply of local foods or income.

Title II program implementation needs program goals and criteria if it is to become more than a continual handout at U.S. taxpayer expense.

In the following sections of the report we discuss the individual areas where the Tanzania program can be improved. The program improvements needed in Tanzania are also needed in all of the programs we have reviewed in Africa. Therefore, we believe that FVA/FFP, in conjunction with CRS, should develop criteria for (a) an integrated feeding program that emphasizes improved child nutrition; (b) formalized nutrition, health and family planning instruction programs; and (c) programs aimed at increasing food production or income in those areas where more than temporary emergency feeding is required.

The AA/FVA cable (STATE 134910) titled "Guidance For Title II PVO Programs" is a good beginning; but until more definitive criteria for program implementation is developed and mutually agreed to by AID and CRS, there can not be any significant or uniform improvements. Without agreed to program criteria each program will continue to go its own way because of lack of FFP personnel to adequately monitor program activities.

Recommendation No. 1

FVA/FFP, in coordination with CRS, (a) develop specific feeding criteria (targeting substandard weight children) and criteria for continued participation in the program (weight for age improvement), (b) develop more formalized nutrition, health and family planning instruction programs for participants, and (c) develop programs designed to eliminate the need for food assistance in the areas where feeding takes place.

CRS/Tanzania Can Improve Its Targeting Of Food To The Most Needy

The current criteria used by CRS/Tanzania for targeting food to children with substandard body weight was not consistent. Pre-school distribution centers said they followed the general criteria of feeding children who were either underweight or showed signs of malnutrition. Some centers stated they used additional criteria such as feeding children who were orphans, twins, or suffering from chronic or serious diseases, and children whose parents lacked money to buy food.

We visited seven distribution centers and reviewed a sample of master weight charts. For another three centers, we analyzed submitted reports. Of the children's weights checked, 14.7 to 72.6 percent exceeded the 80 percent weight to age criteria (see Table I). (Substandard body weight for age levels are those that are less than 80 percent on the master weight charts designed by CRS; in this report nutritionally substandard children is the term used for eligible recipient children who are under 80 percent on the master weight charts.)

TABLE I

Number of Nutritionally Substandard Children
Versus Number of Nutritionally Standard
Children By Location

<u>Location</u>	<u>Total Number Of Children Reviewed</u>	<u>Nutritional Substandard Children</u>		<u>Nutritionally Standard Children</u>	
		<u>Actual</u>	<u>Percent</u>	<u>Actual</u>	<u>Percent</u>
<u>Iringa Region</u>					
Nyabula	175	77	44.0	98	56.0
Tasamaganga	390	281	72.1	109	27.9
Wassa	332	125	37.7	207	62.3
Mdabulo	88	62	70.5	26	29.5
Kibao	421	359	85.3	62	14.7
Lugado	869	448	51.6	421	48.4
<u>Dar es Salaam Region</u>					
Msimbazi	1714	828	48.3	886	51.7
<u>Morogoro Region</u>					
Kilombero Sugar Co.	2388	655	27.4	1733	72.6
Mtibwa Sugar Co.	943	719	76.2	224	23.8
<u>Tanga Region</u>					
Bulwa Tea Co.	<u>500</u>	<u>162</u>	<u>32.4</u>	<u>338</u>	<u>67.6</u>
Total	7820	3716	47.5	4104	52.5

We do not believe that the percentages observed are the result of centers using additional criteria. Of the places with the three highest percentages of children over the 80 percent weight to age criteria, Wassa (the only one of the three we visited) did not use any of the additional criteria for accepting children into the feeding program. Further, of the places with the four lowest percentages of children over the 80 percent weight to age criteria, we visited three and found that each of these centers were using some of the additional criteria.

We also noted that children were being accepted into the program with body weights of 90 percent or above weight to age. Although CRS/Tanzania may be using some criteria, it is informal and not uniformly followed.

Further, the seven centers visited planned to feed each child until the age of five. Three of the seven centers indicated they would discontinue feeding if the child failed to gain weight, showed signs of neglect, or the mother did not consistently visit the center as agreed. Since more than half the children in the current feeding program were not nutritionally substandard, we believe there is a need to periodically reassess whether a particular child should continue to be in the program. Each center has a waiting list of nutritionally substandard children that can and should replace children who have reached acceptable body weight.

Criteria for participating in the program needs to be established for Tanzania. At the time a mother enters a child in the program, she should be told that the purpose of the feeding program is a supplement to help her bring the child up to an acceptable weight level. If the child does not show progress the mother should have to come weekly, or even more frequently, until progress is made. Lack of progress (in the absence of a medical problem) should be grounds for removal because apparently either the food is not getting to the child, or is a substitute rather than a supplement.

Conclusion, Recommendation, USAID/Tanzania Response, and RIG/A Comments.

From 14.7 to 72.6 percent (52.5% overall) of the children checked at ten CRS/Tanzania distribution centers exceeded the 80 percent level on the weight charts. Criteria for determining who should be fed was not being applied effectively. In addition, the program should be refined to periodically re-evaluate children being fed to determine if they are progressing and need to be continued in the program based on acceptable weight to age chart standards. In this way, a substantially higher percentage of nutritionally substandard children could be fed without increasing the quantity of food programmed.

Recommendation No. 2

USAID/Tanzania work with CRS/Tanzania to (a) establish procedures to ensure that food is distributed primarily to the nutritionally substandard children in existing feeding centers, (b) periodically re-evaluate children already in the program to see if they are making progress as expected, (c) require additional action if progress isn't being made, (d) (where

acceptable progress has been made) make the food available to another nutritionally substandard child, and (e) eliminate distribution centers with low percentages of nutritionally substandard children, and replace those centers with centers with high percentages of nutritionally substandard children.

In response to our draft report, USAID/Tanzania stated:

"Regarding draft recommendations Nos. 1 and 2 the Mission would prefer that AID/W addresses comment on these policy issues which we believe are beyond the technical expertise or (sic) the Mission to resolve."

Since USAID/Tanzania has responded to our report, State Cable 134910 "Guidance for Title II PVO programs" has been provided. We believe that CRS/Tanzania has the basic tools available to better target food and monitor progress as encouraged in the cable. More can and needs to be done. Although not the ultimate standard for measuring nutrition, the weight to age charts provide a good starting basis to target food toward the most nutritionally malnourished children in Tanzania.

We do not agree with USAID/Tanzania's comment that Recommendation No. 2 would normally be "beyond the technical expertise or (sic) the Mission to resolve." In-country initiatives to ensure that U.S. taxpayer donated food provides maximum benefits by being directed to nutritionally substandard children is what the Mission should be striving for. Such initiatives are what "managing a country program" is all about. When/if USAID/Tanzania determines they need additional technical expertise to implement the PL 480 Title II program, they have the options of calling upon the Regional Food For Peace Office (RFPO) or contracting for such expertise.

Nutrition And Health Education Lessons Need Improvement

The mother of every child receiving food was required to participate in classes on nutrition and family planning. These classes were given to the mother on the one day a month she came to the center to receive the food allocation. Instructions were being given at all seven centers visited; however, five of these centers informed us that the classes were not based on any formal training program and lasted about 15 minutes. We question whether 15 minute informal periods of instruction each month in nutrition and family planning are adequate.

The CRS/Kenya program has a lesson manual that is used by distribution center personnel to teach lessons on health, nutrition and family planning. This manual might be adapted to Tanzania and other country programs.

Conclusion, USAID/Tanzania Response, RIG/A Comments, and Recommendation

Although all the centers were requiring mothers to participate in classes on nutrition and family planning, little can be accomplished by only three hours of informal instruction per year.

In response to our draft report, USAID/Tanzania stated:

"We find merit in the suggestion to improve the quality of nutrition and health education. However, the Mission alone does not have the technical expertise to do this as noted above. We are investigating the possibility of using International Communication Services (INCS) centrally funded TA in this effort coordinated with the TanGov's Food and Nutrition Center (TFNC). In addition CRS/T is continuing its efforts to hire Tanzania nutrition coordinators to upgrade the quality of nutrition education being offered at the MCH centers. Results of this comprehensive attempt to improve CRS/T nutrition education will require long-term concentration on this problem and will also be subject to availability of TDY advisors."

USAID/Tanzania's proposed method for resolving this problem is a sound and appropriate first step. We are retaining our recommendation until the proposed plan of action is finalized.

Recommendation No. 3

USAID/Tanzania work with CRS/Tanzania to improve the quality of the nutrition and health education lessons by structuring a series of formal lessons and increasing the coverage of key topics.

Programs Are Needed To Help Eliminate Dependency On U.S. Provided Food

Five distribution centers had been providing food to local recipients for lengthy periods of time -- from 8 to 12 years. The other two centers visited had been distributing food four and one year, respectively.

Three of the seven centers visited expected that food would be needed for at least the next 10 years. The other four centers visited were not sure how long donated food would be required. Personnel at two of these four centers stated the problem was not a shortage of local food, but rather what food to use and when to use it. These centers felt that until this was learned, donated food would be needed.

At one location we were told by the priest who was responsible for the center, that residents of this area could grow all the food they wanted, but had chosen to not produce all they needed. This center had started its own project to demonstrate to the local people how vegetables other than maize could be grown, and how chickens could be raised as a source of eggs and meat.

Conclusion, USAID/Tanzania Response, RIG/A Comments, and Recommendation

Most of the centers had been distributing food for many years. However, none were certain when the need for the food would cease. We believe that development programs should be designed (as an integral part of the feeding program) to lessen the dependency on U.S. provided food.

In response to our draft report, USAID/Tanzania stated:

"CRS/Tanzania has developed a new opera-community (sic) development component (see FY 84 ABS--Tanzania). MCH/Community Development Centers, while performing the same functions as 'traditional' MCH centers, will be set up in such a way that the main emphasis will be on developmental activities in/around those villages. This is consistent with USAID's strategy to use food aid as development resource where appropriate and practical. This plan of operations, including the 'Village Development Project' reflects CRS' commitment to those same goals.

This Village Development Program, which CRS/Tanzania has been working on for some time, is currently in the 'fund solicitation' phase. As an addition to the Title II resources, and recipient contributions, a certain amount of start-up money will be required. CRS has not approached the U.S.G. for funding for this project, but is currently soliciting funds per standard CRS operating procedures. CRS/Tanzania estimates that the first pilot projects will be implemented within six months.

Transformation of MCH centers to MCH/Community Development Centers will be a gradual process. Over a period of time CRS plans to engage 30,000 recipients in this activity. The main focus of the village development centers will be placed on village infrastructure (e.g., storage facilities) in a first phase, and on development activities mainly in the agriculture sector, which activities will be proposed by the villagers, with technical assistance as needed provided by CRS and GOT in a second phase.

The Mission is currently planning to include funds for this activity in an FY 83 PL 480 Title I Agreement. Such planning involves necessary coordination with the TanGov to link TanGov, USAID, and CRS efforts."

RIG/A concurs that the proposed methodology to lessen the need for PL 480 feeding programs is an appropriate first step. We have retained our recommendation until we receive assurance that this program has been funded and will go forward.

Recommendation No. 4

USAID/Tanzania work with CRS/Tanzania in designing programs to lessen the need for the PL 480 feeding program.

Day Care Center Feeding Was Not Targeted At The Most Needy

Day care centers did not have nutritional standards or controls similar to those required for the MCH program.

We visited four day care centers and found that parents were charged a nominal fee, for example TSH 10 (U.S.\$1.09) per child per month, to send a child to the day care center. Five days a week every child in attendance was fed. Since children were not weighed, it was not known whether the children in these centers were nutritionally substandard and needed the food. Furthermore, there were no educational programs on nutrition and family planning for the parents, nor were there posters indicating that the food was donated by the United States. Both Caritas and Tanzania Railway Corporation (TRC) representatives told us that all day care centers operate this way. As for publicity, the representatives stated the parents were reminded at monthly meetings that the food came from the American people. Since the feeding program is intended to help nutritionally substandard children, we believe that the day care centers should be brought under similar nutrition and education standards as preschool centers.

Conclusion, USAID/Tanzania Response, RIG/A Comments and Recommendation

Feeding at day care centers lacked the nutritional monitoring and educational benefits of the preschool program. At the time of our review, it was not known whether the children in these centers needed the food because the children were not weighed. If these centers cannot be brought under some basic nutritional and educational standards, consideration should be given to dropping them in favor of increasing the preschool program. Since it would not be practical to feed only some children at a specific center, if the day care center program is retained only centers with high percentages of nutritionally substandard children should be accepted into the program.

In response to our draft report, USAID/Tanzania stated:

"Title II feeding programs implemented by voluntary agencies such as CRS typically are composed of several 'categories' of feeding operations, MCH, FFW, pre-school feeding, and institutional feeding, conforming to AID Handbook 9 Program guidelines. Day care centers, like MCH centers, aim at contributing to an enhancement of the nutritional status of pre-school age children, but the two activities are characterized by entirely different, and operationally distinct, methodologies for achieving this goal. Day care centers are not MCH centers and typically there is no nutrition education component associated with them. The children are the only 'participants' in the activities. It is inappropriate to (1) attempt to provide nutrition/health education to pre-school age children, or (2) require parents to participate in such activities.

Finally, a center can realistically selectively target those children who 'should' be fed, and exclude those who 'should not' without seriously damaging the functioning of the center.

For the above reasons USAID and CRS do not feel that it is appropriate to apply the nutrition and education standards of the MCH program to the day care centers. USAID requests that Recommendation 5 be deleted."

RIG/A recognizes the impracticality of attempting to feed certain children at a specific day care center while not feeding other children at the same center. However, the children could be periodically weighted to determine the percentage of nutritionally substandard children in the center as a basis for providing food to the center and to determine whether the children are benefiting from the food. The parents could also be provided periodic nutrition, health and family planning classes as an integral part of being provided free food for their child.

Recommendation No. 5

USAID/Tanzania work with CRS/Tanzania to (a) implement nutrition and education programs at day care centers where Title II commodities are provided, and (b) target day care center feeding to those centers which have a high percentage of nutritionally substandard children, or (c) delete day care centers from the program if nutrition and education programs can not be incorporated.

Feeding Programs At Company Locations Need To Be Reviewed

Two sugar companies and one tea company provide medical care and health services to their workers. As part of this benefit package, Title II food was being distributed to dependents of the workers. Our review indicated that these centers restricted their distributions to dependents of company workers, and the companies paid the recipient fees. Further, our analysis of reports submitted revealed that the majority of the children being fed under two of these programs were not nutritionally substandard. At these two centers the percentages of children above the 80 percent weight to age criteria were 72.6 and 67.6 (see Table I, page 7). These are questionable centers to support, since food distributions was restricted to dependents of company employees and the majority of the children were not nutritionally substandard.

Conclusion, USAID/Tanzania Response, RIG/A Comments and Recommendation

PL 480 Title II food was being used as part of the health benefit packages to employees of sugar and tea companies. Further, at two of the centers the majority of children being fed were not nutritionally substandard. These feeding programs should be closely reviewed.

In response to our draft report, USAID/Tanzania stated:

"CRS cooperates with various TanGov 'companies' (parastatals) such as the Tanzanian Railway Corporation (TRC), Brooke Bond Tea, and several sugar companies for the distribution of Title II food in the MCH, day care, and institutional feeding components of the program. CRS reports that it is not true that these centers restrict their distribution to company employees, but rather these centers serve whole communities, including outlying areas.

In light of the RIG/A findings which appear to contradict the situation as reported by CRS, a more in-depth review of this matter is required in order to resolve apparent factual disputes."

In view of CRS/Tanzania report to USAID/Tanzania which conflicts with our audit findings, we have revised the recommendation of our draft report (which called for deletion of company feeding programs) to be more in line with the recommendation suggested by USAID/Tanzania.

Recommendation No. 6

USAID/Tanzania, in coordination with the RFFPO and CRS/Tanzania, review feeding programs being provided through parastatal facilities to determine if they should be continued.

CRS/Tanzania Did Not Provide Data On Quantity Of Food Given To Recipients

The quarterly Recipient Status Report (RSR) did not contain actual quantity of food distributed to recipients. Instead, CRS/Tanzania reported food distributions based on authorized levels. The new CRS Director stated that actual levels were reported to CRS/New York via a narrative summary of activities. The CRS Director also informed us that CRS/Tanzania had stopped submitting the RSR because of perceived inaccuracies. CRS/Tanzania told us they planned to resume submission of these reports after the accuracy of data was improved.

Actual level of recipients and quantities of food distributed can be provided for the preschool program because these centers report this information. This information will also be available for the day care centers run by the Tanzania Railway Corporation after they begin using the correct forms. When the data is available at all centers, CRS/Tanzania should use this data to prepare the RSR.

Conclusion, USAID/Tanzania Response, and RIG/A Comments

Reporting on quantities of food distributed had been stopped by CRS/Tanzania because the reports were inaccurate and presented a distorted picture of the status of food given to recipients. The CRS director was establishing a system to accumulate and report actual levels of recipients and food distributed.

In response to our draft report, USAID/Tanzania stated:

"The draft audit notes that CRS/T has stopped submitting the quarterly recipient status reports (RSRS), and that submission was halted in order to improve the accuracy of the system data necessary for the formulation of the reports. Since the time of the audit, events have overtaken this recommendation. In the month of November 1982 the new CRS/T director submitted to USAID/T Commodity Status Reports (CSR) and Recipient Status Reports (RSR) for the 2nd, 3rd and 4th quarters of FY 82. These were transmitted to AID/W-FVA/FFP on November 24, 1982. Copies of these reports are being pouched to RIG/A. USAID/T is confident that now that procedures have been established these reports will be submitted in accord with established deadlines and request the final audit document reflect this fact by not issuing draft Recommendation No. 7."

Based on the assurances provided by USAID/Tanzania as shown above, we have deleted the recommendation which appeared in our draft report for USAID/Tanzania to follow up to ensure that CRS/Tanzania develops a system to accumulate, and report actual amounts of food distributed and actual numbers of recipients fed.

Food Control System Is Improving

The new CRS/Tanzania director had initiated an inventory control system that should adequately account for the food from time of arrival in port until distribution at the centers.

The system being implemented was patterned after a system designed by the current director and another CRS internal auditor when the director was on the CRS internal audit staff. This system is described in a draft document called "How To Do Title II." This document, if expanded and refined, could provide the basis for developing a standardized system for controlling commodities in Africa and possibly elsewhere worldwide.

The system includes a master shipping ledger, stock control ledger, internal loss ledger, internal claim ledger and exhibits of the various forms, including the ledgers. The regional CRS director located in Nairobi, indicated that the draft manual is a beginning, but that it isn't precise enough in certain areas such as establishing responsibility for loss, rebagging and reconditioning damaged commodities. We agree that the draft manual needs to be more precise in some areas, but it is a good beginning and the basis for developing an operating manual that could prove useful in establishing an effective inventory control system in each country.

In a prior audit report, No. 3-621-82-15, titled "USAID/Tanzania Needs to Closely Monitor the Program and Inventory Control Changes Being Made by CRS/Tanzania", we recommended that FVA/FFP work with CRS/New York to design and implement a uniform management/inventory control system that could be used in the CRS worldwide food distribution programs. The recommendation remains open because responses by FVA/FFP to our recommendation have been generally negative. We were told that it was not feasible to develop a uniform management/inventory control system because of widely varying conditions in each country. We maintain that conditions may vary, but that there are basic records needed to effectively manage and control the food.

Conclusion

Although said to be infeasible, we find that steps are being taken by CRS to develop an operating manual. The CRS directors we have talked to believe an operating manual is needed on how to manage and control food--a standardization of operating procedures, records and controls.

Since the prior audit recommendation remains open, we are not making a recommendation in this report, but will continue to follow up on the basis of our prior recommendation from A.R. No. 3-621-82-15.

List of Audit Recommendations

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<u>Recommendation No. 1</u>	6
FVA/FFP, in coordination with CRS, (a) develop specific feeding criteria (targeting substandard weight children) and criteria for continued participation in the program (weight for age improvement), (b) develop more formalized nutrition, health and family planning instruction programs for participants, and (c) develop programs designed to eliminate the need for food assistance in the areas where feeding takes place.	
<u>Recommendation No. 2</u>	8
USAID/Tanzania work with CRS/Tanzania to (a) establish procedures to ensure that food is distributed primarily to the nutritionally substandard children in existing feeding centers, (b) periodically re-evaluate children already in the program to see if they are making progress as expected, (c) require additional action if progress isn't being made, (d) (where acceptable progress has been made) make the food available to another nutritionally substandard child, and (e) eliminate distribution centers with low percentages of nutritionally substandard children, and replace those centers with centers with high percentages of nutritionally substandard children.	
<u>Recommendation No. 3</u>	10
USAID/Tanzania work with CRS/Tanzania to improve the quality of the nutrition and health education lessons by structuring a series of formal lessons and increasing the coverage of key topics.	
<u>Recommendation No. 4</u>	12
USAID/Tanzania work with CRS/Tanzania in designing programs to lessen the need for the PI, 480 feeding program.	

Recommendation No. 5

13

USAID/Tanzania work with CRS/Tanzania to (a) implement nutrition and education programs at day care centers where Title II commodities are provided, and (b) target day care center feeding to those centers which have a high percentage of nutritionally substandard children, or (c) delete day care centers from the program if nutrition and education programs can not be incorporated.

Recommendation No. 6

15

USAID/Tanzania, in coordination with the RFFPO and CRS/Tanzania, review feeding programs being provided through parastatal facilities to determine if they should be continued.

APPENDIX B

List of Report Recipients

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