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AN EVALUATION OF THE GHANA FL 480 TITLE II PROGRAM

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EXECUTIVE SUMMARY

This report presents the findings of an evaluation of the PL 480 Title II program in Ghana. Ghana's Title II program has been administered by Catholic Relief Services (CRS), with its Food and Nutrition Program (FNP), for twenty years; and by the Adventist Development and Relief Agency (ADRA) since it began an emergency feeding program during the food shortages of 1983-85. This evaluation follows a recent evaluation of the CRS Title II program, completed in May, 1989. ADRA's Title II program has never been evaluated. USAID/Ghana contracted with Planning Assistance, a Washington-based Private Voluntary Organization (PVO) to conduct this evaluation.

The Title II program in Ghana operates in an environment of significant need. During the seventies and well into the eighties, Ghana's economy experienced a steady decline, accelerated at times with bursts of severe economic strain of nearly catastrophic consequences, such as the 1983-85 drought and bushfires, and the repatriation of over one million Ghanaians from neighboring countries. By 1983, food availability was only 70% of what it had been in 1975. In 1983, the government embarked on its ambitious Economic Recovery Plan (ERP), which is beginning to show signs of slowing the decline and perhaps of stopping it. A complementary initiative to the ERP is the Programme of Actions to Mitigate the Social Costs of Adjustment (PAMSCAD). PAMSCAD includes a series of interventions designed to lessen the short term negative effects of the ERP on the poorest segments of society, and to provide short term help to government workers who are retrenched.

Paralleling the economic decline, agricultural sector performance has been declining since the early seventies, showing a growing food deficit that last year amounted to about 371,000 MT in cereals. With demand for food increasing at an annual rate estimated at 3%, the food gap can be expected to worsen in the future.

Infant mortality is currently estimated at about 90 deaths per 1,000 live births. Maternal mortality is estimated at 5 per 1000 pregnancies in urban areas, and 15 per 1000 pregnancies in rural areas. Child mortality is estimated at 25-30 per 1,000, and moderate to severe child malnutrition is estimated at 50-55%. Malnutrition is thought to underlie 60% of all child deaths.

The policy positions of the Government of Ghana (GOG), USAID/Ghana and the two PVOs administering the Title II program broadly support the use of food aid in development activities, especially those related to the ERP and PAMSCAD, agricultural production, Maternal and Child Health (MCH) programs, and family planning. The policy statements that reflect these positions, however, are neither very specific nor are they very widely known and understood within the GOG.

While donor collaboration and GOG-donor coordination worked well during the food-shortage crisis of 1983-84, at present donor "collaboration" is little more than a rare meeting for the purpose of information exchange.

There are several promising examples of GOG-PVO collaboration, including the GOG's financial support of CRS's FNP, and CRS' counterpart relationship with departments of the Ministry of Health and the Ministry of Education. While collaboration/coordination at the Ministry level is noticeably lacking in ADRA's program (particularly in relation to ADRA's MCH activities), its District and community level ties are strong. Forestry and agriculture agents often work with ADRA project communities. Education Services agents provide plans and advice on school construction, and local Mobilization committees help to insure that projects are consistent with the GOG's development policies. ADRA has also developed ties with non-governmental women's and youth groups in its community-based programs. There is very little collaboration between CRS and ADRA, and, up to the time of this evaluation, little attempt on the part of USAID/Ghana to encourage coordination and collaboration between the agencies responsible for the distribution of Title II commodities.

Food aid to Ghana in 1988 in cereals (including processed, fortified, and blended cereals) was approximately 99,000 MT. Donors included the World Food Programme (WFP), the European Economic Community (EEC), Canada, Japan, and the United States. The same donors project a total of approximately 80,000 MT of cereal food aid for 1989. Title II food aid accounts for better than 20% of the total cereal food aid for both 1988 and 1989.

Title II commodities are intended to benefit approximately 200,000 people in Ghana during FY 90. Both ADRA and CRS have put great effort into developing systems of logistics management and commodity control that help to ensure that commodities reach those for whom they are intended. Appropriate training/instruction is provided by the agencies to warehouse managers, supervisors, and other personnel involved in monitoring the distribution chain. Both organizations are concerned with making their reporting systems and documents as efficient and useful as possible. While CRS only maintains one central warehouse, its established system of transport, experienced personnel, and distribution points of schools and clinics throughout the most at-risk regions of Ghana provide the organization with the ability to respond quickly to situations necessitating the emergency distribution of food and/or medical supplies. Regional warehouses, an established transport system, experienced field personnel, and growing acceptance in the at-risk communities of northern Ghana, contribute to ADRA's preparedness for emergency operations.

The CRS Title II program for FY 90 will use about 8,500 MT of commodities, including Soy Fortified Sorghum Grits (SFSG), Wheat Soya Blend (WSB) and edible oil (Vegoil). The current CRS projects supported by food aid include its FNP, operated through counterpart agencies in government MCH clinics, and a small number of FFW projects, operated on a pilot basis with community level Mobilization Committees ("Mobisquads") as counterparts.

The CRS program was not examined in this evaluation in the same detail as the ADRA program because the CRS program was evaluated so recently, and because the program is in transition. This transition began in 1987 when CRS decided to shift its FNP program to the northern part of the country, phasing out all but a few of its FNP activities in south. While a "phaseover" of FNP activities to counterpart agencies had been planned for the north, CRS is currently re-evaluating the activities themselves. Possible directions for CRS' FNP include: "lean season distributions" in the north to replace the current MCH and School Feeding programs, increasing support for women's income generation activities, and greater involvement with PAMSCAD and other initiatives to support the ERP. CRS is also examining the feasibility of monetizing Title II commodities in order to buy locally produced commodities to be used in its food supported activities. The actual plan for the redirection of CRS/Ghana's FNP is to be worked out with the CRS Lome Cluster, which has regional supervisory responsibility that includes Ghana, before the end of the year. Assuming approval by the Cluster, the plan will be sent to CRS headquarters in Baltimore for approval.

Although ADRA is currently examining the possibility of expanding its activities through increased collaboration with PAMSCAD, the agency's Title II program was reduced for FY 90. 4,300 MT of Title II commodities including rice, Soy Fortified Bulgar (SFB), WSB, and Vegoil are planned for distribution in 1990. Three quarters of the Title II food distributed by ADRA will be used in Food for Work (FFW) projects. Except for a very small amount that will be used for general relief, the rest of the ADRA commodities will be distributed through its MCH clinics.

ADRA operates 36 MCH clinics, staffed by "Nutrition Agents" who are hired from the community and trained by ADRA. Children are selected for enrollment based on their weight in relation to their age (weight-for-age). Priority is given to children who are less than 70% of standard weight-for-age. These children are enrolled in an "Intern" group, receiving twice the rations and attending the clinic twice as often as the other enrolled children, or "Extern" group, who are not as malnourished. The services provided at the clinics are regular weighing and consultations with mothers to help them interpret the weights, nutrition and health education, and lessons in various primary health care and personal hygiene matters.

The nutrition education that is provided is impressive. Mothers could provide thorough descriptions of most of the "lessons" that had been presented by the nutrition agents. They also indicated that they used these new practices in their homes. They described various nutrition lessons, discussions on personal hygiene, recipes for weaning food using both local produce and food aid commodities, and environmental sanitation issues related to health problems.

Growth monitoring data were collected at each of 12 ADRA MCH clinics showing weight-for-age statistics on each child enrolled in the clinics over

the last year. The data recorded at each of the clinics were transcribed, and then aggregated to show the proportion of children whose weight-for-age showed gains, the proportion of those who showed losses, and the proportion of those who remained the same over the period between September 1988 and August 1989. This analysis showed a weight gain for 75% of the children attending these clinics over the year. The proportion showing gains varied among the clinics from 41% to 94%.

This informal data collection, and the subjective judgements formed during this evaluation suggest that the ADRA MCH program has had a positive impact on the nutritional status of the children who are enrolled. Three factors lead to this conclusion. First, the mothers who are enrolled in the program appear to be learning important, and perhaps life-saving lessons in primary health care. Second, the MCH program seems to be providing services to the communities that are valued and accepted. And third, many of the children who are enrolled in the program have shown positive weight gain over the period of their enrollment. The first two of these factors are certainly the result of the MCH program. And if only a portion of the weight gains observed in the clinics are attributable to the program, including the food ration, then the program is meeting its objectives and continuing support for it is more than justifiable.

The FFW projects that ADRA supports with Title II food have evolved since 1986 into projects that are in many ways different than most FFW projects undertaken in Ghana and elsewhere. While ADRA typically becomes involved in a project at the request of the community, sometimes the involvement is "brokered" by either an extension agent working with the community, or by an ADRA staff member who approaches a community with an offer of help when he hears about a project in need of support. Often an ADRA staff person will help a community develop a "pre-project" (usually a community agricultural project) to act as a funding source for the actual project (usually infrastructural or water related). The project is then described in the ADRA proposal format, and is approved for a three to six month period for a certain number of workers who are expected to work four days a week up to sixteen days a month. The food ration is then based on the number of workers who will work on the project for that period (with a maximum of 60 workers per project). In actual practice, however, the community often decides that many more than the approved number of workers will be permitted to work on the project. The ration, based on the approved number of workers, is then frequently cooked on site, where the workers participate in a communal meal during the workday. If there is any food left over, it is apportioned to the workers and taken home as dry rations. Since many ~~more~~ than the approved number of workers are involved in the project, the community usually establishes work crews who work perhaps one or two days a week depending on the workload. This pattern of project work is used on all types of projects, both construction and agricultural.

The benefits of operating FFW projects involving on-site feeding and a large contingent of workers (often virtually the whole community), are substantial. Since the whole community is eligible to work on a project, it is self-targeting. The poorest members of a community, regardless of their numbers, can work on the project and receive a food ration. Those who are less poor, if not bound to work on the community project through tradition,

will be less likely to work on a project supported solely through FFW. Communities visited during the evaluation placed great value on the introduction or re-introduction of community farming as a method of raising funds, and benefits to the community derived from developing schools, clinics, roads and other infrastructural enhancements, are recognized and felt by community members themselves. Local community development committees which supervise ADRA projects gain respect in their communities, and they gain valuable experience in management and accountability.

There are, however, some potential benefits from FFW projects that are lost in ADRA's program. In those projects where the Title II commodities are used for on-site feeding there is little possibility that the ration will provide a nutritional benefit to the workers' families, for example. Even the worker himself or herself hardly receives much nutritional benefit from eating one or two communal meals a week. Any dry ration left over for the workers to take home is minimal. Spread so thinly, and for such a limited period of time, there is little potential for the ration to serve as a true income transfer mechanism, and there will therefore not be significant savings and investment generated through money saved from the household's food budget.

The limited role of the FFW ration in ADRA projects minimizes some of the negative consequences that may result from FFW projects. Since in most projects the ration represents a meal rather than a wage, there does not seem to be a negative effect of spending labor time on a FFW project that causes a farmer to modify his or her own farming practices. Workers on the FFW projects usually work no more than one or two days a week, often from dawn until mid-afternoon. Available evidence suggests that the work done on an FFW project is more likely to cut into "leisure" time than labor time on the worker's own farm. The quantity of Title II commodities going into any one community is limited, and the ration input is usually timed to help communities through the food shortages of the "lean" season. The evaluation team did not find that ADRA's projects had significant disincentive effects on local production or consumption patterns.

Possible disincentive effects were also addressed at the country-wide level. The possible effects of four kinds of disincentives were examined, including: price disincentives, policy disincentives, labor disincentives, and dietary disincentives. A thorough review of the literature and analysis of these issues failed to uncover more than a very minor price effect on only one cereal, maize (food aid in maize representing a 1% increase in its availability country-wide, may cause a 0.9% decrease in the price of local maize), and the potential for a disincentive effect on local oil production. The GOG has already begun to make adjustments to its food aid importation policies taking these possible disincentives into account. Because the total food aid from all sources does not appear to have any significant country-wide disincentive effect in Ghana at this time, it follows that Title II food aid does not have a significant disincentive effect.

CONCLUSIONS AND RECOMMENDATIONS

The overriding conclusion of this evaluation is that the Title II program has a great deal of potential for becoming a fundamentally very sound, innovative and well run program. Both ADRA and CRS are committed to developing and operating food aid programs in which food (whether through monetization or direct distribution) is used as a resource for, and support to, development activities.

Conclusions and recommendations specifically on the CRS program have been made in some detail in the earlier evaluation. Since the CRS program is now in the process of establishing its new direction, another review, short of a full-scale evaluation, might be appropriate sometime in the next year. CRS may decide to continue to develop FFW projects, using as a model their pilot projects.

ADRA is to be commended for its exceptional efforts to involve the community in project planning. The recommendations that are included in this section are therefore intended to provide ADRA with some suggestions that might help to make a good program better.

The recommendations are grouped into the following categories: Management and Administration, Training and Technical Assistance, Information Systems and Reporting, Collaboration and Coordination and Program Design.

Management and Administration

1. ADRA headquarters (Washington) should provide professional opportunities for ADRA/Ghana staff so that staff members are not reassigned to other Seventh Day Adventist organizational units after they have been trained for ADRA staff functions.
2. Nutrition agents do not currently use a standard method of recipient selection. The centers also differ in the length of time that the recipients stay in the program. These problems could be taken care of with additional training.
3. Additional measures should be taken to support the nutrition agents. Perhaps establishing a supervisory network of MCH supervisors could be done, similar to the plan for adding agricultural supervisors for the FFW program.
4. When both the Ministry of Health and the ADRA nutrition agents are weighing children in the same center, it is important to resolve any contradictions in methodology or findings and work toward an eventual reduction to a single organization doing the weighing.
5. ADRA could improve the efficiency of its commodity control and reporting while increasing the system's usefulness as a tool for overall program management through centralization of commodity transport and status records at the central warehouse level.
6. ADRA could improve overall regional warehouse management by providing

every regional supervisor with a warehouse manager, in regions where there are warehouses.

7. ADRA should examine the possibility of deploying their own trucks or supplying private transport at the regional level for nation transport to accessible FFW sites (as is currently the policy for supplying ADRA's MCH centers).

8. More attention should be paid to timely planning and submission of Calls Forward, so that delays are minimized. Both CRS and ADRA have identified this as having been a problem, and have taken steps to correct it.

Training and Technical Assistance

9. In the absence of specialized MCH supervisors, the regional supervisors should be trained in MCH so that they can provide technical assistance in targeting, growth monitoring and recording. As an interim measure, they could be provided with a checklist of items to check at the centers during their supervisory visits.

10. There is some evidence, although impressionistic, to suggest that improved farming practices introduced in communal farms are rapidly adopted on private farms. We would encourage ADRA to make an effort to confirm this impression, and consciously include technical assistance to promote new farming techniques in its agricultural projects.

Information Systems and Reporting

11. ADRA could use short-term technical assistance to establish an ongoing system of data collection, analysis, feedback and input to the planning and daily decision-making process. Such a system should include data on completed projects, which should be visited at regular intervals after the withdrawal of food and ADRA assistance. It is especially important to monitor the output side of projects. The current practice of concentrating on the input side encourages the inefficient use of resources.

12. In the MCH centers there is a need for a consistent registration system, and consistency in recording weights. Headquarters should determine what the minimum data requirements are, and train the nutrition agents accordingly.

13. Some effort should be made to keep records on the gender of participants to monitor whether the proportion changes, varies by region, varies by type of project and so forth.

14. An analysis of possible disincentive effects suggests that Title II food aid could be increased with benefits to the communities without causing a disincentive effect. Care must be taken, however, to periodically assess the total amount of donated food flowing into the country to ensure that a disincentive effect does not develop. It is also important to consider potential disincentive effects in smaller-than-regional areas of the country. While no disincentive effects may be seen at a national or even regional level, large quantities of food brought into a small area may have strong disincentive effects in only

that specific area.

Collaboration and Coordination

15. The MCH program does not offer the services that would normally be a part of an MCH center. ADRA has established a good base to build on, with committed staff and apparently good attendance. ADRA should consider collaborating with the Ministry of Health, MCH Division, to increase the services offered to include immunizations, antenatal and family planning.

16. ADRA could also collaborate with the Ministry of Health, Nutrition Division, to increase the skill level of the nutrition agents. In-house training should be provided in weight recording and records maintenance.

17. There should be more collaboration between ADRA and CRS for the purpose of joint planning, sharing of ideas that seem to work, perhaps even a collective use of warehouse facilities and transportation. Collaboration should also extend to relevant ministries for training and IEC materials, and to other NGOs like Global 2000 to begin to coordinate inputs. A good beginning would be to distribute ADRA's Annual Report to other organizations.

18. Work norms for various types of projects, such as the number of person-days suitable for the construction of a 6 room school building, have been established by ADRA, and reviewed with various ministries. These norms should be reviewed periodically with the ministries and with WFP and CRS to ensure that they are not too stringent or lax.

19. The materials that are utilized in the MCH centers could be improved through collaboration with the Ministry of Health and organizations such as UNICEF.

Project Design

20. Many communities have indicated the need for building materials and agricultural inputs. ADRA might consider providing limited non-food inputs financed by monetization, or play a more active role in identifying ways that communities can obtain these inputs themselves.

21. Project objectives could be clarified if the planning of projects started with problem identification, not with the project idea. An example of the difference came in a community where Guinea Worm was identified as a problem. The community first asked for a clinic, but in negotiated discussion with ADRA they switched to a preventive approach - clean water, rather than a curative one - a clinic.

22. Whether or not communities will eventually experience conflicts over the distribution of benefits deriving from community woodlots may not have been given adequate consideration. Future difficulty might be avoided if the planning for the use of these resources were considered as a part of the project design.

23. ADRA (and CRS) should consider adopting as standard practice the rotating method of working on projects that was observed in many communities. This practice, involving rotating teams of workers, means

that many more workers are involved in projects, and minimizes the potential effect of FFW on workers' other farming activities.

24. Plans should be begun for expanding the food aid supported program in Ghana, using technical resources that might be available from AID/Washington, other donors and PVOs. Expansion may not imply an increase in tonnage, but may be simply diversifying the project portfolio to include small business development and other project innovations, particularly toward efforts in support of the ERP and PAMSCAD.

List of People Interviewed

ADRA Staff

Israel Agboka, Director
Eddie Lartey, National FFW Coordinator
Godfrey Ntim, Agricultural Coordinator

Group Interview with all regional coordinators

In-Depth Interviews with regional coordinators in the Western, Volta, Brong-Ahafo, Northern and Upper East Regions

CRS Staff

Robert Roche, Country Representative
Will Lynch, Assistant Country Representative
Hannah Evans-Lutterodt, FNP National Supervisor
Felicia Owusu-Sensu, Material Resources Manager
Annie Bani, Northern Sector Coordinator, FNP

Ministry of Agriculture

Dr. Attah Konadu, Chief Director
Mr. S. Neequaye, Statistician

Policy Planning, Monitoring and Evaluation staff:
Sekondi-Takoradi
Tamale
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Ministry of Health

Dr. Moses Adibo, Director of Health Services
Mrs. Agble, Nutrition Division

Regional MOH staff:
Sekondi-Takoradi

The World Bank

Dr. Haile Mariam, Agricultural Economist

FAO

E.O. Edosugie, Nutritionist
Mr. Uka, Regional Agricultural Economist

UNDP

M.O. Jacobsen, Deputy Resident Representative

USAID

Edward Birgellis, Program Officer
Emanuel Atieku, Food for Peace Officer

WFP

Mr. N. Negash, Director of Operations

I. INTRODUCTION

A. BACKGROUND

In October, 1989, USAID/Ghana contracted with Planning Assistance, a Washington-based PVO, to conduct an evaluation of the PL480 Title II program in Ghana. To make up the evaluation team, Planning Assistance provided three staff members from Washington, who were met in Accra by two Ghana-based consultants. The Washington team members were Robert Learmonth, Team Leader; Dr. Emily Moore, Food Aid Specialist; and Susan Dehoney, Logistics and Management Specialist. The Ghanaian members of the team were Dr. Charles Jebuni, Economist (University of Ghana, Legon); and Ernestine Gyebi-Ofosu, Nutritionist (University of Science and Technology, Kumasi).

Apart from the Title II commodities which form part of the World Food Program (WFP) donations in Ghana, and which have not been addressed in this evaluation, the Title II program in Ghana is operated by two PVOs, Catholic Relief Services (CRS) and the Adventist Development and Relief Agency (ADRA). Both organizations run Food for Work (FFW) programs and Maternal Child Health (MCH) programs. In addition, CRS operates a pre-school feeding program and a school feeding program, and both ADRA and CRS run small feeding programs ("General Relief") in institutions.

Some Title II commodities are "Monetized" on entry into the country - that is, the commodities are sold Port of Entry (POE) to a flour mill, which generates local currency (Cedis), which can then be used for development activities. These transactions can be made by either CRS or ADRA. Arrangements for selling the commodities, which currently involves only wheat, are made before the food actually arrives in country.

The scope of this evaluation is broad, requiring an examination of the major uses of Title II food in Ghana, both in support of specific project activities in FFW projects and MCH programs as well as general program support. To the extent that major policy issues such as the incentive/disincentive effect of the Title II commodities on local agricultural production are addressed in connection with this study, it has also been necessary to consider other donated food from World Food Programme (WFP), Canada and the European Economic Community (EEC). Addressing the question of whether Title II food causes a disincentive effect on local production first requires an analysis of the effect of all donated food on production. The assumption can then be made that Title II food contributes its part to the total effect if one is found.

The central focus of this evaluation, then, is to examine the major components of the Title II program in Ghana, addressing the fundamental policy issues of whether the Title II program should be continued, and if so how it might be improved to provide a more effective development resource for the country.

In conducting this evaluation, heavy use has been made of the findings of the recent evaluation of the CRS Title II program, which was completed in May of this year. The ADRA Title II program, however, has never been evaluated, and therefore has assumed a dominant position in this analysis. Procedurally, the evaluation has required confirming and updating the CRS evaluation,

examining the ADRA program, and then analyzing the Title II program as a whole.

The methodology employed in evaluating the Title II program has consisted of interviewing officials involved in the program from the Government of Ghana (GOG), USAID, and various staff members of CRS and ADRA. Extensive use has also been made of various records and documents acquired from these informants. Such secondary data has been particularly important in assessing the impact of food aid on the economy and on agricultural production. Field visits were made to interview recipients and to check records and warehousing/distribution of the food. Field visits were conducted in project sites in each of the four ecological zones in Ghana: Coastal, Forest, Savannah and Sahelian. Areas identified for site visits were deliberately selected to provide as wide a distribution of types of projects as possible, with some in difficult to reach areas. Areas were also selected so that each would include at least one MCH center. In all seventeen active FFW sites were visited, along with four completed FFW project sites. Twelve ADRA MCH centers were visited.

Many of the interviews with program recipients were conducted at the site of the FFW project, or at the MCH clinic. Occasionally, interviews were conducted in villages near the site. Recipients were asked about their participation in the project, and whether the receipt of food had significant effects on their family's food consumption pattern, their work habits and savings and investment.

B. ORGANIZATION OF THIS REPORT

In the sections of the report that follow, the context for the Title II program will be summarized in Chapter II, beginning with a description of the policies relating to food aid of the Government of Ghana, USAID, CRS and ADRA. The conditions in Ghana that have created the need for the food aid program are then briefly discussed, with an amplification of that discussion included in Appendix A. Chapter II ends with a description of the Title II program. In Chapter III, program inputs will be described. The benefits and impacts of the Title II program will be discussed in Chapter IV. Management issues related to the Title II program will be presented in Chapter V. Chapter VI will present the conclusions and recommendations of the evaluation. The last chapter will discuss the future of Title II in Ghana.

II. PROGRAM CONTEXT

This chapter describes the context within which the Title II program operates in Ghana. The first subsection, Factors Affecting Food Aid Need, outlines the economic, health and agricultural conditions in Ghana that establish the need for the program. The next subsection describes the policies of the government, USAID and the PVOs that have been developed in response to the need for food aid programs. The third subsection discusses the collaboration and coordination efforts that have been established with regard to the development of the food aid program. The last subsection describes the current Title II program, as it has developed since CRS began its program over twenty years ago.

A. FACTORS AFFECTING FOOD AID NEED

Economic Factors

Following a period of prosperity and growth in the years after independence, Ghana's economy experienced a steady decline in the 1970's which continued through the early 1980s. Agricultural and industrial production declined at a rate of 1.2% a year throughout the seventies. As a result of the severe sub-Saharan drought, the accompanying loss of stocks through bushfires, and the influx of over one million Ghanaian returnees from neighbouring countries, food availability from 1981-1983 was 30% lower than it had been in 1975. By 1983, through a combination of unfortunate decisions regarding the management of the economy, increases in oil prices, deteriorating infrastructure and declining productivity, the economy was essentially in shambles.

Drastic structural changes and political reform were required to slow the decline and regain some of the losses in productivity suffered over the previous decade. The measures taken by the GOG, termed the Economic Recovery Program (ERP), included among other measures, an adjustment of the exchange rate for the Cedi to a more realistic level, restoration of producer price incentives, reduction of the budget deficit, and modest wage increases to begin to adjust wage rates to compensate for the cumulative effects of inflation.

In the process of reversing the economic slide through the ERP, the GOG has acknowledged that the process of reform has had its victims - the poor and vulnerable groups who are not able to contend with short-term negative effects of economic reform, despite its long-term potential. The GOG has consequently established a series of measures to reduce the negative effects of the ERP on these groups. Central among these measures is the Programme of Action to Mitigate the Social Costs of Adjustment (PAMSCAD), which includes a donor supported portfolio of interventions to assist those among the Ghanaian population who are least able to sustain the short-term effects of the ERP.

Health and Nutrition

Poverty, poor sanitation, and ignorance contribute to the major health problems in Ghana. Malaria is the country's leading cause of death, and one third of all registered deaths are related directly to infectious and parasitic diseases.

Infant mortality, reported at 122 per 1000 live births in 1971, is still high, with an estimated 90 deaths per 1000 live births in 1988. Maternal mortality is estimated at about 5 per 1000 pregnancies in urbanized areas, and 15 per 1000 in rural areas. Child mortality is estimated at 25-30 per 1000, and moderate to severe child malnutrition is estimated at 50-55%

Breast feeding is almost universally practised in Ghana and is continued on average for 19 months. Several studies have shown that while weight gain is usually adequate in children aged 0-6 months, it slows to considerably below normal levels during the second half of the first year. Around 18 months weight gain is small and there may even be weight loss. According to CRS data, weaning-age children have the least acceptable weight for their age.

In Ghana, malnutrition is estimated to underlie 60 percent of childhood deaths. The nutritional vulnerability of this age group, as well as that of pregnant and lactating women, is aggravated by seasonal variations in food supply, often resulting in protein energy malnutrition and/or anaemia. Some traditional practices and socio-cultural factors may also impact negatively on the nutritional status of these groups in that they limit the opportunities for an adequate and diversified diet.

While many of the constraints to nutritional health in Ghana may be addressed through education (teaching people how to make the best use of the food that is available to them), prolonged periods of food shortages, declining agricultural productivity, and the repercussions of a troubled economy, sharply reduce the possibility of year-round access to a sufficient and balanced diet.

Agricultural Production

Production/consumption data available for analysis reveal that while in the early 1970s production and consumption of cereals were relatively balanced, since 1975 Ghana seems to have fallen into a growing food deficit situation (Table I). With demand for food expected to grow at an average per annum rate of 3% until 1995, the Ministry of Agriculture's predictions are gloomy. If data are accurate, Ghana is facing a food gap that can be expected to worsen in the future.

The food gap has been covered in past years by large food imports, comprised of both commercial imports and donated food. In most years, it appears that imports from these sources have covered the deficit, and in some years (1981, '84, and '86) might have exceeded it (Table 2). However, Ghana's ability to continue financing increasing amounts of cereal and other food imports will depend on the growth of foreign exchange earnings compared to the growth of the food import bill. The total amount of food imports, in comparison to food exports, is increasing. Food imports are occupying an increasing share of foreign exchange earnings generated by

Table I: Cereal Production-Demand in Ghana ('000 metric tons)

Year	Pop. (mln.)	Demand					Production					Production for Consum- ption <u>2/</u>	Surplus (+) Deficit (-)
		Wheat	Maize	Rice <u>1/</u>	Sorghum/ Millet	Total	Wheat	Maize	Rice <u>1/</u>	Sorghum/ Millet	Total		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12) <u>3/</u>	(13) <u>4/</u>
1970	8.56	51.4	291.0	68.5	136.9	547.8	0	482.0	49.0	327.0	858.0	605.5	57.7
1971	8.79	52.7	298.9	70.3	140.6	562.6	0	465.0	55.0	303.0	823.0	581.6	19.0
1972	9.02	54.1	306.7	72.3	144.3	577.3	0	402.0	70.0	259.0	724.0	518.7	-58.6
1973	9.26	55.6	314.8	74.2	148.2	592.6	0	427.0	62.0	276.0	764.0	541.7	-50.9
1974	9.51	57.1	323.3	76/1	152.2	608.6	0	486.0	73.0	331.0	890.0	630.3	21.7
1975	9.63	57.8	327.4	77.0	154.1	616.3	0	343.4	69.8	257.0	670.2	476.1	-140.2
1976	9.75	58.5	331.5	78.0	156.0	624.0	0	286.0	69.6	333.4	689.0	489.3	-134.7
1977	9.85	59.1	334.9	78.8	157.6	630.4	0	312.2	62.9	272.6	647.7	459.7	-170.7
1978	9.99	59.9	339.7	79.9	159.8	639.3	0	269.3	60.8	258.2	588.3	417.9	-221.4
1979	10.12	60.7	344.1	81.0	161.9	647.7	0	308.6	63.0	307.2	678.8	481.5	-166.2
1980	10.24	61.4	348.2	81.9	163.8	655.3	0	354.0	64.1	292.6	710.7	503.9	-151.4
1981	10.37	62.2	352.6	83.0	165.9	663.7	0	334.2	43.6	301.2	679.0	479.7	-184.0
1982	10.50	63.0	357.0	84.0	168.0	672.0	0	264.3	37.1	246.3	547.7	387.1	-284.9
1983	11.99	71.9	407.7	95.9	191.8	767.3	0	140.8	26.9	220.2	387.9	274.2	-493.1
1984	12.29	73.9	417.9	98.3	196.6	786.5	0	574.4	76.0	315.0	965.4	683.4	-103.1
1985	12.60	75.6	428.4	100.8	201.6	806.4	0	395.0	80.0	305.0	780.0	554.0	-252.4
1986	12.92	77.5	439.3	103.4	206.7	826.9	0	576.0	62.7	298.0	936.7	662.0	-164.9
1987	13.24	79.4	450.2	105.9	211.8	847.3	0	452.0	62.5	298.0	812.5	575.0	-272.3
1988	13.3	160.0	521.0	169	227	1077.0	0	600.0	95.0	300.0	995.0	706.0	-371.0
Per Capita Demand (kg 1987)		6	34	8	16	64							

1/
2/

Paddy rice

Physical production is reduced by 30% for maize, sorghum and millet and 20% for rice to allow seed, feed, wastage, etc.

Proportions supplies by MOA.

(12) = $0.7 \times [(8) + (10)] + 0.8 \times (9)$

(13) = (12)-(6)

(14) = (13)x100/(6)

Source: IFAD, Report No. 0105, July, 1988 annex I, Table II
1988 data from PPME, Ministry of Agriculture, 1989.

3/
4/
5/

Table 2 Imports of Cereals (X '000 metric tonnes)

Year	Domestic Surplus + Deficit - (1)	Wheat (2)	Maize (3)	Rice (4)	Total (5)	Cereal Imports under Food Aid ^{4/} (6)
1975	-140.2	163.7	0.8	0.7	165.7	n.a
1976	-134.7	99.0	10.6	4.1	106.4	n.a
1977	-170.7	97.6	0.0	9.0	112.6	n.a
1978	-221.4	169.6	0.0	45.4	245.6	n.a
1979	-166.2	92.3	0.1	2.6	96.7	n.a
1980	-151.4	31.7	12.6	65.9	154.1	n.a
1981	-184.0	70.0	63.9	16.0	160.0	80.3
1982	-284.9	44.8	10.0	30.5	105.6	63.8
1983	-493.1	50.1	61.8	32.1	175.4	108.3
1984	-103.1	25.0	49.3	50.4	158.3	102.3
1985	-252.4	71.5	0.0	20.6	105.8	97.7
1986	-164.9	51.3	0.0	9.5	87.3	106.3
1987	-272.3	80.0	120.0	40.0	266.7	n.a
1988	-371.0	139.4	0.0	48.0	187.4	85.5

1/ The rice quantities are divided by 0.6 to convert them to apply equivalent in order to make the total comparable with column (1).

2 Provisional, including Government estimates. Actual figures will probably be lower.

3 Imports only up to June.

4/ Rice has been converted to paddy equivalent. Figures reported for a year, e.g. 1981 refer to the 1981/1982 (July-June) year. Figures before 1981 not available.

Source: IFAD, op cit
1988 data for imports and food aid taken from Donors Meeting, July 1989.

merchandise exports. Revenue from merchandise exports is the main source of foreign exchange earnings in Ghana, apart from loans and grants. The import bill has to be paid from merchandise export earnings. In 1975, 1.5% of merchandise export earnings were spent on imports. By 1986, the proportion had grown to 17% (IFAD, 1988 Annex I, Table 14). With the downturn in the world price of cocoa, the inelastic supply response of cocoa, and with the apparent slowing of domestic food production, Ghana will increasingly need food aid well into the 1990s.

B. POLICY

The policy context within which the Title II program operates is defined by a combination of GOG policy with respect to the use of food aid, USAID policy as articulated in the country strategy, and the policies and program directions of the PVOs which operate the Title II program. In the best of circumstances, the policy interests of the three are harmonious. With the exception of a few rough spots, there has generally been a reasonable degree of alignment of policies among the GOG, USAID and the PVO. This may be because the GOG has never had a formal policy on food and nutrition that includes food aid, and the USAID policy has been sufficiently general that the PVOs have had latitude to develop their own programs unrestrained by narrow policy strictures. This loose policy framework can be the cause of problems at the project development stage, because individuals can interpret policy to fit their own particular view of how food aid should be used. Food for Work projects designed to encourage savings and investment, for example, can be quite different than projects designed to improve infrastructure, or to encourage the growth of democratic institutions. In the MCH program, differences in policy goals can also be seen between those who view the food ration as a simple nutrition transfer program and those who see it as an inducement to attend the clinic for the health benefits offered by immunization and health education services.

Given the looseness of the policy framework, points of policy conflict tend to occur at the program level, typically when either ADRA or CRS does something with which the GOG or USAID disagrees. An example of such disagreement occurred when CRS shifted its Food and Nutrition Program (FNP) from the southern regions to the north. The GOG reacted by creating its own version of the FNP through PAMSCAD. While no explicit policy statement was involved, the inference seems clear that the GOG policy is to provide supplementary feeding of mothers and children in its clinics.

Government of Ghana Policy

The GOG has never promulgated a formal policy statement for food and nutrition that might include a policy on food aid, although there have been several attempts. There is a Food and Nutrition Coordinating Committee (FNCC), comprised of representatives of different ministries and NGOs, which put together a draft policy statement in 1984. The intention of the FNCC was to continue the development of the draft statement, ultimately working the document through the bureaucracy toward a national forum. However, the FNCC is itself an informal organization lacking authority within government. It has therefore not been able to marshal the necessary constituency within the GOG to move the policy statement past the draft stage. Most recently, the FNCC has

created the "Ghana National Food and Nutrition Policy and Plan of Action 1989-1991" - draft. This document was developed with the support of a joint FAO/WHO mission to Ghana and workshop in October, 1988. A report on the draft statement was issued by FAO in early 1989 supporting the initiative and urging its adoption by government.

The draft policy statement includes a section on the use of food aid. The objectives related to the use of food aid in that section are:

1. To provide support for economic development programmes
2. To provide feeding to nutritionally particular vulnerable groups [sic]
3. To mitigate the social consequences of economic adjustment programmes.

The "Policies/strategies" for carrying out these objectives include:

1. Food-for-work for economic development activities
2. Supplementary feeding through MCH services.

In general, however, the draft policy document does not appear to have been widely disseminated. Interviews with policy-level officials within the Ministries of Health (with the exception of the Nutrition Unit), Agriculture and Finance and Economic Planning suggest that the people who would be expected to know of policy discussions involving food aid were apparently unaware of the document. Those same officials did seem to agree on the need to use food aid as a temporary resource, and on the need for targeting of food aid to vulnerable groups, particularly during periods of food shortage ("Hungry Season"). Several informants also mentioned the need for food aid during emergencies, such as the recent floods in the north and the mid-eighties drought. None of the informants interviewed indicated concern about the effect of food aid on local agricultural production, although one respondent worries about introducing exotic foods into the Ghanaian diet which might eventually add to the balance of payments problem because it will have to be imported.

The most basic policy statement, apparently well understood and accepted among those in government and those in the street, relates to food self-sufficiency. Signboards around Accra carry the slogan, "Grow what you eat, and eat what you grow."

USAID Policy

The USAID mission does not yet have a Country Development Strategy Statement (CDSS), although one is currently being prepared. Policy relating to the use of Title II assistance is therefore broadly stated in more informal documents, including a concept paper which broadly outlines AID strategy for Ghana. In the language of the strategy concept paper, the development goals of USAID/Ghana as they currently stand read as follows:

The principal purpose of USAID/Ghana's assistance program is to support Ghana's Economic Recovery Program (ERP), which is now in its second phase. The ERP is intended to develop a productive growing economy while ensuring that the benefits of this economic growth accrue to all Ghanaians. USAID's development goals for Ghana, five in number, reflect the major themes of ERP II and are designed to

further the basic aims of A.I.D. The first three goals focus on developing a more productive, growing economy while the last two are designed to distribute the benefits of economic growth as widely as possible. We want to assist Ghana Government efforts to:

1. Restructure the government sector;
2. Create a liberalized and self reliant agricultural sector;
3. Improve the health status of the Ghanaian population;
4. Generate employment opportunities through growth of private enterprise; and
5. Counterbalance the negative effects of structural adjustment.

USAID/Ghana's development strategy involves policy reform, commodity assistance, development projects, and training, all of which focus on these five development goals. An important consideration in the development of this strategy is the limited dollar and staff resources available to USAID/Ghana for the foreseeable future and our growing reliance on PL 480 counterpart funds as a development resource. At the policy level, USAID has identified a set of reform measures specific to each goal which we believe will contribute to their achievement.

The USAID policy is also comprised of the views articulated by the mission staff under whose responsibility Title II assisted projects fall. According to mission staff, USAID policy relating to Title II has four major components:

1. Increase per capita income;
2. Support family planning initiatives;
3. Provide support to the agricultural sector; and
4. Support the Government of Ghana's Economic Recovery Program (ERP), particularly by helping the disadvantaged cope with ERP through PAMSCRD and other initiatives.

Historically, USAID policy has strongly supported the self-sufficiency direction of the Government, through an increase in food crop production and distribution, and through slowing the rate of population growth. Title II food is used in support of MCH service provision, which the mission hopes will promote family planning. The mission also supports FFW projects in agriculture and agroforestry. The income generating potential for these projects is consistent with the mission's interest in developing small scale income generating projects to foster private enterprise development.

PVO Policy (CRS)

Catholic Relief Services program activity has in past years included three development areas, each having goals that reflect the organization's policies in Ghana. These areas have been: Health and Nutrition, Institutional Support and Capacity-Building, and Humanitarian Support and General Relief Emergency Response. The goals associated with each of these areas are:

Health and Nutrition - To promote the health of beneficiaries through food supplementation, health/nutrition education and development activities.

Institutional Support and Capacity Building - Strengthen institutional capacity of local development organizations and/or cooperatives in order to improve the the standard of living of designated target groups.

Humanitarian Support and General Relief Emergency Response - Provide short-term material assistance to the stated target group.

At the present time, however, the CRS program is in transition. The organization is approaching the end of its Multi-Year Operational Plan (MYOP) period, a new Country Representative has arrived in Accra, and CRS continues to discuss its phaseout of the PL480 program, beginning with the FNP. CRS has now completed its phaseout of the FNP in the five regions in the south, continuing it only in the five regions in the north. This not only reflects CRS' policy decision to minimize its involvement in the food aid arena, but also reflects the organization's shift in priority to the north, where the need for its programs is more apparent. Accompanying the shift in emphasis is an intensification of activity in the north, supported by the opening of a sub-office in Tamale last year.

CRS activity in the future is likely to include a retargeting of food aid assisted projects and an increasing emphasis on income generating projects. In the meantime, the CRS program will include some food supported projects using locally purchased commodities, limited institutional feeding in orphanages and other groupd home, and distribution of food rations during the hungry season. CRS/Ghana intends to establish some elements of its new program during 1991, but the actual schedule will also depend on the length of time required for review and approval of CRS/Ghana's proposed plan by the Lome Cluster and CRS headquarters in Baltimore.

PVO Policy (ADRA)

ADRA operates under a "Regional Operations Strategy" document that states the operating principles of the organization. In addition, the projects using Title II resources are run under several unwritten, implicit guidelines or policies that seem to underlie the project design and operation. One such policy is the six month limit on the length of any project. Another seems to suggest that the community involvement in project design and operation is begun early, often before ADRA is involved. ADRA then is reactive, responding to the request for help from the community. Even when ADRA is proactive, in effect searching for a community to establish a project in, strong community links seem to be established early. ADRA's written policy statement is as follows:

Adventist Development and Relief Agency/Africa Indian Ocean (ADRA/AIO), is a humanitarian agency established by the Seventh-day Adventist church for the specific purposes of:

- o community-based development in which the poor and disadvantaged are assisted in improving their quality of life and achieving self-reliance;
- o appropriate and timely response to human suffering in times of crisis when there is acute distress and life is threatened;

- o assisting in the development of health, educational, and vocational institutions which deliver essential services in areas where they are inadequate or nonexistent.

ADRA/Ghana's operational goals, also included in the Regional Operations Strategy, include an explicit emphasis on agriculture and agroforestry, child nutrition and public health, and water.

The current program that ADRA is developing is somewhat at variance with the agreement with the GOG under which ADRA operates. The agreement that is currently in effect indicates a program emphasis of emergency relief, since that was the basis for ADRA's initial work in Ghana during the drought. This issue was raised by ADRA during its internal review, which recommended that a new agreement, with an emphasis on more development-related projects, be negotiated and signed with the GOG. Informants in government, however, did not seem to be aware of this issue.

C. COLLABORATION AND COORDINATION

Collaborative relationships should occur in a number of directions in Ghana in the operation of the food aid program. Certainly there should be collaboration between the two PVOs operating the food aid program and USAID. There should also be collaboration and coordination between the PVOs and the Government of Ghana. In addition, the PVOs themselves should collaborate and coordinate their activities with each other and with other PVOs which operate complementary programs. It is also important to recognize the need for USAID to develop and maintain a relationship with the GOG, and with other donors active in developing food aid assisted programs in Ghana.

CRS and ADRA have frequent contact with the USAID. Much of the contact, however, is to satisfy the need for reporting and other operational matters. The collaboration and coordination that could be strengthened is in the area of planning and program design. The PVOs have their own institutional prerogatives, which USAID should recognize. However, USAID is preeminent in developing the food aid portfolio in Ghana, and should never be in a position where the PVOs operating food aid assisted projects develop projects without seeking the direct involvement of USAID. This situation has occurred in the past with the CRS decision to refocus its MCH FNP activity, which seemed to catch USAID by surprise. In its current planning prior to developing its next MYOP, however, CRS has taken steps to keep USAID involved and informed as their program evolves.

There is little evidence of direct collaboration and coordination between CRS and ADRA, beyond one organization borrowing commodities from another when a scheduled shipment is delayed. Yet both CRS and ADRA have a great deal of combined experience in developing projects that could be of mutual benefit if it were shared. CRS has been managing food aid for over twenty years, and has established effective procedures for doing it. CRS also has many years of experience setting up and operating growth monitoring systems. ADRA could benefit from their experience. ADRA has taken a different approach to FFW, operating short-term projects which often involve the whole community. This approach offers some very important lessons that might be of use to CRS if they want to establish FFW projects during the hungry season.

Collaboration and coordination by CRS and ADRA with other NGOs and with the ministries does seem to occur, at least at the operational level. CRS collaboration is mostly through its counterpart agencies. The structure of the CRS Food and Nutrition Program (FNP), requires collaboration with the government clinics through which the FNP operates. ADRA collaborates frequently with Amasachina, a Ghanaian NGO. Amasachina provides the "community animation" which helps to develop the enthusiasm and community support that is apparent in many ADRA projects. ADRA also frequently collaborates with the Forestry Department, using forestry extension workers to provide technical input to ADRA's many forestry and agroforestry projects. This collaboration is formalized in the Collaborative Community Forestry Initiative (CCFI) that ADRA is involved in with, in addition to Forestry, the Peace Corps and Amasachina.

Both CRS and ADRA seem to recognize that an increased level of collaboration and coordination with other NGOs and with government ministries and departments would be of benefit to the program. Such relationships might be used for the purpose of technical assistance and support, as with the ADRA-Amasachina-Forestry relationship and the CRS-counterpart agency relationship; or it may be for the purpose of accessing complementary inputs and funding. Some of this may occur under the PAMSCAD initiative, which emphasizes collaborative efforts to focus program activities on those who are least able to cope with the ERP. However, PAMSCAD has been very slow to start, resulting in delays that have effectively stalled some project activity. A more productive interaction might include direct discussions with NGOs and government agencies to "shop around" for inputs for various projects. This could be done at the headquarters level, and might eventually promote more serious efforts at collaboration including joint planning and even sharing of resources or facilities.

During the 1983-84 drought, there was a donor coordinating group which regularly met and considered issues pertaining to food aid. That group is still in existence, and meets periodically. However, since the famine years, meetings have been infrequent, and are generally confined to information sharing rather than genuine collaboration and coordination.

D. FOOD AID TO GHANA AND THE TITLE II PROGRAM

The U.S. PL 480 program was begun in Ghana in 1958. In recent years, the United States (under Title I/II) and WFP have been the major donors of food aid to the country (see Tables 3 and 4).

WFP's long term FFW projects support the rehabilitation of Ghana's transport and export sectors, the rehabilitation of private and national oil palm/cocoa plantations and rubber estates, and the strengthening of Ghana's Department of Forestry. In 1988, WFP approved a large FFW proposal for implementation in conjunction with PAMSCAD.

Under Title I, Ghana has imported such food commodities as wheat, rice, maize, and vegetable oil. However, current projections indicate Ghana's increasing ability to meet its maize consumption requirements, and there are indications that increased domestic production of palm oil may soon make the continued importation of vegetable oil under Title I

inappropriate. The U.S.A.I.D. mission is hopeful that Title I loan agreements with the GOG will be replaced by Section 206/Food for Progress in FY 91.

Throughout the seventies and up to the food shortages of 1983-84, the Title II program in Ghana was implemented through CRS and its Food and Nutrition Program. During the 1983-84 crisis, CRS's regular program swelled from 8,000 MT to 15,387 MT, and the organization received 25,478 MT of Title II food with a grant of almost \$1,000,000 for an emergency food and medical program. ADRA (then "SAWS", the Seventh Day Adventist World Service) received 6,000 MT of Title II commodities (plus 4,000 MT from the Netherlands, Sweden and Finland) and a grant of \$555,000 for an emergency feeding program. In addition, 5,646 MT of Title II commodities were donated directly to the GOG for distribution. To some extent, the successful expansion of CRS and ADRA during the food-shortage emergency contributed to what the organizations themselves term "inflated" levels of food aid afterwards. The reduction in size of both CRS' and ADRA's Title II programs since 1987-88 reflect the organizations' concern for the efficient management and appropriate targeting of their Title II commodities. These commodities, along with Title II wheat monetized for the generation of local currency funding for CRS and ADRA, currently account for better than one fifth of the cereal food aid received by Ghana (see table 3).

Table 3

Food Aid Deliveries to Ghana

January-Dec. 1988 (actual)
January-Dec. 1989 (projected)

<u>Commodity Donor</u>	<u>Quantity (MT)</u>		<u>Quantity (MT)</u>		
	<u>1988</u>	<u>% of total</u>	<u>1989</u>	<u>% of total</u>	
<u>Whole cereals</u>					
Rice	Japan	5,923	15.5	2,791	6.7
	USA (Title I)	12,400	32.7	8,000	19.4
	USA (Title II)	1,541	4.0	313	.8
	EEC	4,167	10.9	560	1.3
	WFP	14,038	36.9	29,633	71.8
	Total	38,069	100 %	41,297	100 %
Wheat	Canada	24,150	82.7	16,000	64.8
	USA (Title II)	5,038	17.3	8,670	35.2
	Total	29,188	100 %	24,670	100 %
Maize	USA (Title I)	17,300	100.0	-----	0.0
	WFP	-----	0.0	4,000	100.0
	Total	17,300	100 %	4,000	100 %
<u>Summary. Whole Cereals</u>					
	Canada	24,150	28.5	16,000	22.9
	EEC	4,167	5.0	560	.8
	Japan	5,923	7.0	2,791	4.0
	USA	36,279	42.9	16,983	24.3
	WFP	14,038	16.6	33,633	48.0
	Total	84,557	100 %	69,967	100 %
<u>Processed/ Blended Cereals (see Table 4)</u>					
	EEC	-----	0.0	924	9.4
	USA (Title II)	14,770	100.0	8,897	90.4
	WFP	-----	0.0	20	.2
	Total	14,770	100 %	9,841	100 %
<u>Total Cereal Food Aid</u>					
	Canada	24,150	24.3	16,000	20.0
	EEC	4,167	4.2	1,484	2.0
	Japan	5,923	6.0	2,791	3.5
	USA	50,979	51.4	25,880	32.4
	WFP	14,038	14.1	33,653	42.1
	Total	99,257	100 %	79,808	100 %
<u>Qty. Imported under Title II</u>					
		21,279	21.4	17,880	22.4

Table 4

Food Aid Deliveries to Ghana (cont.)

Commodity	Donor	Quantity (MT)		Quantity (MT)	
		1988	% of total	1989	% of total
VegOil	USA (Title I)	----	0.0	5,000	48.0
	USA (Title II)	2,679	45.2	1,356	13.0
	WFP	3,250	54.8	2,021	19.4
	Canada	----	0.0	1,992	19.1
	EEC	----	0.0	45	.5
Total		5,929	100 %	10,414	100 %

Other Commodities Imported as Food Aid during 1988 and 1989 are:

Commodity	Donor	Quantity (Mt)	
		1988	1989
(Processed Cereals)			
Soy-Fortified Bulgar Wheat	USA	2,360	2,429
Soy-Fortified Sorghum Grits	USA	7,812	3,976
Wheat-Soya Milk	USA	3,565	73
Wheat-Soya Blend	USA	1,033	2,419
Wheatflour	WFP	----	924
	EEC	----	20
Dried Skim Milk	WFP	622	356
	EEC	----	1,515
Butter Oil	EEC	----	315
Canned/Dried Fish	Canada	800	----
	FRG	310	215
	WFP	2,205	2,779
Sugar	WFP	1,020	1,160
Pulses/Beans	WFP	----	304
	EEC	----	144

(From the 28 July, 1989 Food Aid Donors meeting)

III. INPUTS

This section presents a brief description of the agencies implementing Title II programs in Ghana and a discussion of the food aid, material, human, and financial resources currently invested in these programs. An effort has been made to identify those areas where existing inputs have been particularly successful, as well as those in which the addition or modification of inputs would be of significant benefit to program implementation.

A. THE AGENCIES AND TITLE II

CRS

CRS has been working in Ghana since 1958. Its Maternal and Child Health (MCH), Other Child Feeding, (OCF) and Pre-School Child Feeding programs were developed in the mid-1970's. By 1986, the agency's MCH and FFW activities involved over 250,000 recipients. In 1987, CRS decided to cut back its Title II program, and to retarget MCH activities to 5 regions considered to be most "at-risk" in terms of maternal and child malnutrition.

While CRS supported a small number of pilot FFW projects in 1989 (4,000 beneficiaries receiving a total of 288 MT SFSG and 24 MT vegoil), no FFW program is planned for FY 90.

At present, CRS is in a process of transition. Possible directions for its Title II program include "lean-season distributions" in the northern sector (which would replace current MCH and School Feeding activities), an increased support of women's income generating activities, and greater involvement in PAMSCAD and other initiatives to support the GOG's Economic Reform Program. CRS is examining the feasibility of monetizing Title II commodities in order to buy locally produced commodities for use in its food supported activities.

ADRA

ADRA (previously "SAWS", the Seventh-day Adventist World Service) became involved in the Title II program during the food shortage of 1983-84. In 1985, aided largely by the infrastructure it had created during its Emergency Program, ADRA began to move more towards development oriented activities. By 1986 ADRA had FFW sites and MCH centers beginning in each of Ghana's 10 regions.

The FFW projects that ADRA supports with PL 480 food have evolved since 1986 into projects that are in many ways are different than most FFW projects undertaken in Ghana and elsewhere. While ADRA typically becomes involved in a project at the request of the community, sometimes the involvement is "brokered" by either an extension agent working with

the community, or by an ADRA staff member who approaches a community with an offer of help when he hears about a project in need of support. Often an ADRA staff person will help a community develop a "pre-project" (usually a community agricultural project) to act as a funding source for the actual project (usually infrastructure or water related). The project is then described in the ADRA proposal format, and is approved for a three to six month period for a certain number of workers who are expected to work four days a week up to sixteen days a month. The food ration is then based on the number of workers who will work on the project for that period (with a maximum of 60 workers per project). In actual practice, however, the community often decides that many more than the approved number of workers will be permitted to work on the project. The ration, based on the approved number of workers, is then frequently cooked on site, where the workers participate in a communal meal during the workday. If there is any food left over, it is apportioned to the workers and taken home as dry rations. Since many more than the approved number of workers are involved in the project, the community usually establishes work crews who work perhaps one or two days a week depending on the workload. This pattern was observed in all but the Western Region, where a more conventional system of ration distribution was accepted.

ADRA's FY 90 Title II program is considerably reduced from that of last year, with almost 20,000 fewer intended recipients. Table 5 presents the current FY 90 Title II programs of both CRS and ADRA as they stood at the time of this evaluation.

Table 5 **CRS's FY 90 Title II Program**

Activity	# Beneficiaries	Commodity (MT)			Total (MT)
		SFG	WSB	Vegoil	
MCH/Mother	55,985	1,343.6	1,343.6	671.8	3,359.0
MCH/Child	63,010	1,512.2	1,512.2	756.1	3,780.5
Preschool Child/Feed.	8,140	183.2	183.2	18.3	384.7
Other Child Feeding	1,567	56.4	56.4	7.5	120.3
School Feeding	29,987	674.7		64.5	742.2
General Relief	1,072	38.6	38.6	5.2	82.4
Total	159,761	3,808.7	3,134.0	1,526.4	8,469.1

Table 6

ADRA's FY 90 Title II Program

Activity	# Beneficiaries	Commodity (MT)				Total (MT)
		Rice	SFB	Vegoil	WSB	
MCH/Mothers	2,700	107.89	162.0	18.63		288.52
MCH/CHILD	3,600		45.36	17.28	90.72	153.36
MCH/CHILD	1,800		45.36	8.64	90.72	144.72
Gen.Rel.1	1,700	67.93	102.00	14.14		184.07
Gen.Rel.2	400		5.04	1.92	10.02	16.98
FFW/Workers	6,400	255.74	384.00	53.22		692.96
FFW/Depend.	25,600	1,022.98	1,536.00	212.89		2,771.87
Total	42,200	1,454.54	2279.76	326.72	191.56	4,252.48

In addition to the Title II commodities imported for distribution in FFW, Child Feeding, and MCH programs, both CRS and ADRA use Title II wheat for monetization. In FY 90, CRS plans to monetize 2,815 MT of wheat and ADRA will monetize 2,470 MT. These quantities should sell for approximately \$579,890 and \$508,820 respectively. The funds (received in Cedis) support the organizations' Title II program and commodity management costs.

B. FOOD RATIONS

As the role of rations in CRS's Food and Nutrition Program was thoroughly discussed in the May evaluation of their program, the emphasis of this sub-section is on the use of food aid rations in ADRA's MCH and FFW projects. However, it is well worth noting that the two organizations have built their ration packages on different commodities. A typical ration for a child enrolled in CRS's MCH program is composed of 2 kg Soy-Fortified Sorghum Grits (SFSG), 2 kg Wheat-Soya Blend (WSB) and 1 kg veg-oil. ADRA also uses WSB for its MCH activities, but the complementing grain is Soy-Fortified Bulgar wheat (SFB). CRS's FFW rations have been based on SFSG, while ADRA's are based on SFB and rice. The resulting diversification of commodities imported under Title II lessens the possibility of any one commodity being imported in a quantity sufficient to alter local tastes or production.

The monthly ration compositions for ADRA's MCH program include:

	<u>Intern</u>	<u>Extern*</u>
SFB	2.1 kg	1.05 kg
WSB	4.2 kg	2.1 kg
Vegoil	0.4 kg	0.4 kg

*Where "Intern" signifies a severely malnourished child, receiving half of this ration bi-weekly.

(While ADRA's current Operational Plan indicates that pregnant and lactating mothers would also receive rations, this was not confirmed at the centers visited by the evaluation team.)

The choice of WSB as part of the MCH ration was based on its similarity in consistency to locally produced "Tom Brown", a weaning food made from ground maize, millet, and/or cassava. Soy-fortified bulgar was considered on the basis of its adequate protein content, and vegetable oil was selected for its high caloric value. Approximately 94% of the mothers interviewed found the rations suitable, with 3% disagreeing and the other 3% not committing themselves. Those disagreeing claimed that their children could not digest the WSB/SFB.

ADRA is currently considering decreasing the ration for children with borderline malnutrition (Extern) and increasing that of children with second and third degree malnutrition (Intern).

ADRA's monthly FFW ration is composed of:

SFB	5.00 kg
Rice	3.33 kg
Vegoil	.69 kg (1 gallon)

Rice has been included in the ration package because, while it is consumed locally, it is not produced in sufficient quantity in Ghana to meet consumption requirements. The quantity imported for use in Title II activities is unlikely to have an adverse effect on local prices or production. While FFW workers appreciate the rice they receive, the evaluation found that, if given a choice, recipients would buy their own, locally produced variety.

Before discussing the adequacy of the FFW ration with regard to expected project outcomes, it is necessary to understand the ration's role in the overall project. In other words, why use FFW at all?

Food aid critics often describe the use of food aid in public works projects as providing participants with an inappropriate incentive (or "bribe") to become involved in a project not necessarily in their own interests. It is also claimed that FFW rations can be used as a substitute for community mobilization and/or participatory problem identification in that a need for food may cause people to undertake works that they do not yet fully understand are in their own interest. Neither of these criticisms may be applied to the ADRA FFW program.

The evaluation team commends ADRA for the thoughtful approach to the use of food aid in its FFW projects. Regional Coordinators and headquarters staff demonstrate an understanding of the possible pitfalls of food aid, as well its potential as a resource for development. This understanding, gained through the organization's internal examination of successful, "troubled", and "failed" projects, and through the experience of trying to assist too many projects at one time, serves ADRA well in its current program.

There is a conscious attempt made not to introduce food aid as a "bribe" or a substitute for appropriate community animation. Rather, projects are selected where the input of food serves as a kind of "missing ingredient", or enabling factor, providing a community the resources needed to begin a planned project (or pre-project), or to intensify work on an ongoing project, without creating long-run dependency.

This involves: short-term (six months or less) use of food; limited numbers of projects that can be food-supported in a single community; food allocated only when the community has demonstrated both its capacity to provide the materials and its willingness to start work before food arrives; the Regional Coordinator's judgement concerning whether the community genuinely understands the need for the project, their collective investment (both psychological as well as material) in its outcome, and the prospects for their being able to carry on and sustain the project (maintain the trees, the building, or continue the farm etc.) after food aid is withdrawn.

In short, the food input in ADRA's FFW program:

--Enables the timely start of a project (e.g., before the rains set in).

--Speeds up project completion. This is accomplished by enabling workers to continue on-site for longer hours (in the case of on-site feeding), by decreasing absenteeism, and by attracting larger numbers of workers at a time than most communal works projects.

--Provides a psychological benefit when a project's end-result is distant, or where there is a weak or declining commitment to communal labor.

C. MATERIAL AND COMPLEMENTARY INPUTS

CRS

The complete phaseout of its MCH activities in 5 of 10 regions, combined with the termination of a regular FFW program, has enabled CRS to concentrate both human and material resources on program activities in the Upper West, Upper East, Northern, Western, and Ashanti regions.

In addition to this "retargeting" of resources, certain recent inputs should serve to improve program implementation. These inputs include:

- the establishment of second office in Tamale, intended to ensure adequate supervision of project and FNP activities in the northern regions and facilitate the monitoring/reporting process,

- the CRS/Baltimore-funded purchase of 6 four wheel drive vehicles for regional supervisors,

- the (just-approved) monetization-funded purchase of 2 pickups, intended to facilitate Tema warehouse management and FNP supervision.

Although CRS's 1988-1990 Operational Plan places a strong emphasis on introducing training materials, handbooks, audiovisual materials, and other other clinic-level inputs, these inputs were identified as lacking in the May 1989 CRS Evaluation. At the time of this evaluation new materials had not yet been introduced. It is hoped that these inputs will accompany the counterpart strengthening activities planned by CRS in FY 1990.

ADRA

At the time of this evaluation, ADRA was sponsoring 352 FFW projects and 36 MCH centers distributed throughout the 10 regions. Perhaps the best way to qualify the observation that ADRA inputs are stretched very thin in the field is to say that ADRA's field staff does very much with very little.

Discussions with ADRA's headquarters staff, as well as the examination of ADRA's Internal Review documents, indicate that the more serious constraints to effective project implementation caused by the current lack of program and project inputs have been identified by ADRA. Funding for the provision of some of these inputs is proposed in the Strengthening Grant component of ADRA's revised FY 90 budget. Where appropriate this has been signalled out in the discussion follows.

Site visits produced the following concerns:

--A shortage of project vehicles, combined with the constant maintenance and repair needs of the older motorbikes, seriously curtails the mobility of regional supervisors. In the Northern region this has resulted in a concentration of projects in the east, while in the Western region, one day of motorbike repairs can make meeting the goal of monthly supervisory visits to project sites impossible.

ADRA was expecting to purchase vehicles under an arrangement with PAMSCAD as part of the planned expansion of project activities in the three northern regions. This purchase has been delayed however, and as yet, no alternative plans for vehicle purchase have been made.

--"Offices" in at least 2 of the regions visited amounted to a chair and table in a warehouse. Given the amount of paper work as well as field work for which regional supervisors are responsible, ADRA should consider the possibility of allocating funds for the improvement of office facilities.

--While the quantity of material inputs a community is willing to contribute to a development effort plays an important role in ADRA's project identification, and is a true indication of community commitment, site visits revealed that there is often a gap between "willing" and "can". For example, the ability of a community to supply cement for the construction of a school will depend on the supply of cement available to their district at government subsidized prices. If the community cannot obtain part of their district's allocation, their project cannot continue (commercially sold cement being beyond the means of most rural communities). Long delays in construction projects due to lack of materials, a lack of appropriate tools at some of the agricultural project sites, and a women's group's difficulty in obtaining piping for their stove project are but a few examples indicating that ADRA should either elevate its level of project inputs, or play a more active role in facilitating their acquisition by project communities.

It should be noted that ADRA has begun to address this concern with the purchase and distribution of tools to some project sites this year, and funds have been budgeted in FY 90 for this purpose.

--In the 6 regions with ADRA warehousing, FFW communities are responsible for the entire cost of the transport of rations to their villages. While this is discussed at greater length in the logistics section of this evaluation, it is mentioned here because its role as an "input" on the part of the community, rather than ADRA, is significant. The cost to a community for the transport of one month's rations may exceed 20,000 Cedis. For a six month project, this means that over 120,000 must be collected. Given the normal by-day wage rate of 300 Cedis, this sum represents 400 days of field labor. This far from insignificant input is not being made to buy cement, roofing materials, tools, or additional food; it is made to pay for the transport of FFW rations. The appropriateness of this input should perhaps be re-examined.

--ADRA has provided its nutrition agents with educational posters depicting the basic principles of Public Health Care. As the purchase of additional materials is budgeted under the Strengthening Grant component of ADRA's FY 90 budget, it is suggested that consultation with the MOH and Unicef will provide useful guidance in updating and expanding those materials currently in use.

--Basic drugs provided by Unicef have previously been available at all ADRA MCH centers. For reasons that are not clear, Unicef has discontinued this input. While some of the ADRA MCH centers did have a supply of chloroquine and ORT packets, this was not generally the case. With MOH concurrence, ADRA should try to insure the continuous supply of basic drugs at all of its centers.

--At present, ADRA nutrition agents use a variety of beer bottles, soda bottles, margarine tins, etc. to measure individual rations. Ration size tends to vary from ration to ration, as well as center to center. ADRA should consider the purchase of uniform measuring utensils for all of its MCH centers, and provide its nutrition agents with adequate instruction in their correct use. Other inputs suggested for the centers include Salter scales for the weighing of infants and adult scales for mothers.

D. HUMAN RESOURCES AND TECHNICAL ASSISTANCE

While the focus of this discussion is on ADRA, it is important to note that the evaluation team was impressed with the high calibre and dedication of the personnel it has met throughout both CRS and ADRA during the evaluation process.

ADRA's current staffing pattern is in flux, and it was the evaluation team's understanding that there would be a considerable redeployment of staff after the organization's review of this evaluation. The Organization Chart in Appendix E represents the probable new arrangement that will go into effect in January 1990.

Over the past 3 years, ADRA has learned that the staffing requirements of an emergency relief program and those of a long-term development oriented FFW program are very different. The reductions in program size between FY 88-89 and again between FY 89-90, were caused at least partially by ADRA's realizing that more is not necessarily better in a FFW program, especially if there is not enough staff in the field for the program's correct supervision.

While steps have been taken to more realistically estimate the number of FFW projects that one person can effectively supervise, field visits and interviews with Regional Coordinators indicate that supervisory time

is stretched very thin between projects, with some Coordinators supervising as many as 30 projects per month. In two of the regions visited, the Regional Coordinators time would be better used if they did not have to double as warehouse managers.

ADRA's MCH program, with 2 supervisors responsible for the effective monitoring of 36 centers throughout 10 regions, is understaffed. Field visits indicated that some of ADRA's nutrition agents had not been visited by an MCH supervisor in over 4 months. Given the inexperience of most of these agents, as well as the "pilot" nature of ADRA's MCH program, every effort should be made to provide more supervisory support. It is suggested that, until additional staff is added to the MCH program, ADRA examine the possibility of adjusting the work load of Regional Supervisors and providing them with basic training necessary for the regular monitoring of the MCH centers in their regions.

Technical assistance is provided in the field either by ADRA supervisors, or by the representatives of relevant ministries. Forestry and agriculture extension agents are often working with a community before a project request is made to ADRA. The Ministry of Education provides plans and technical advice to those communities involved in school building projects. The exception to the availability of TA seems to be in the health sector, where the consequences of understaffing and underfunding are perhaps most strongly felt. ADRA will eventually have to obtain more technical assistance from the MOH however, if they intend to expand their MCH centers services to provide true MCH care.

E. FINANCIAL INPUTS

For FY 90, local currency generated through the monetization of Title II wheat represents over 50% of the funding for both CRS's and ADRA's Title II programs. Additional local currency is generated through container sales, representing less than 2% of the organizations' total funds. CRS also receives local currency funding from the GOG, which reimburses approximately half of CRS's commodity transport and handling costs. GOG "in-kind" contributions to both organizations include the duty-free entry of commodities and supplies.

Dollar inputs for both organizations include headquarters support and Strengthening Grant funds.

ADRA is currently reviewing its FY 90 budget, and both organizations are awaiting final approval for their Strengthening Grant funds. However, the following table presents a rough breakdown of CRS and ADRA FY 90 Title II Program funds as they stood at the time of this evaluation.

Table 7

FINANCIAL INPUTS: CRS and ADRA, FY 90

	Title II Monetization	Strength. Grant	ADRA/CRS Int'l.	Container Sales	Other	Total Cash Inputs
<u>CRS</u>	\$579,890 (2,815 MT wheat) @ \$206.00/ton)	50,000 (est.)	200,000 (est.)	20,000 (est.)	300,000 (GOG, est.)	1,149,891
<u>ADRA</u>	\$256,888*	120,040	53,480	12,679	-----	443,087

Source: Internal Planning Documents

* ADRA's monetization plan for FY 90 calls for the sale of 2,470 MT wheat. Current prices indicate that this sale will provide ADRA with \$508,820 rather than the \$256,888 currently budgeted for in FY 90. The actual total of funds available to ADRA (given the approval of a revised FY 90 budget) will be close to \$700,000.

IV. PROGRAM BENEFITS AND IMPACT

This section presents a discussion of the benefits and impact of the Title II program, for both MCH and FFW. Pertaining to the MCH program, the discussion will include consideration of the targeting of the rations to the intended recipients, and an assessment of the nutritional impact of the program on those recipients. For the FFW program, with its usual multiplicity of objectives, the discussion will include targeting to the intended population, but will also include a brief discussion of the infrastructural output of FFW; the employment, savings and investment created by FFW; its impact on agricultural productivity; income transfer effects of FFW; the impact of FFW on developing democratic institutions; and finally, a discussion of the disincentive effects of FFW.

The discussion of the MCH program and the FFW program shows that both programs are successful. Each has positive impacts that can be attributed to the operation of the programs; and each functions in an area of need. At the same time, an analysis of the disincentive effects of food aid failed to show any significant disincentive effects relating to the importation of donated food, from whatever source. Since the Title II food was about 21% of total food aid brought into Ghana (51% if both Title I and Title II are considered), the disincentive effect of Title II food aid is also assumed to be minimal.

A. MATERNAL AND CHILD HEALTH (MCH)

The Title II supported MCH program is operated by ADRA through MCH clinics set up by ADRA and staffed by nutrition agents hired and supervised by them. The ADRA clinics do not offer other primary health care services except for some health and nutrition education, instruction in home gardening, home accident prevention, environmental sanitation and personal hygiene.

CRS operates its MCH program out of clinics that are staffed by the MCH Unit of the Ministry of Health and supervised by the ministry. Since the clinics are equipped and staff with health professionals, other services are also provided. Both ADRA and CRS distribute food rations to mothers attending the clinics.

Targeting to At-Risk Groups

Both the CRS and the ADRA MCH programs are self-targeting; the clinics are located in areas where there is need, and the mothers who are eligible and who want to participate can do so, if there is room for them in the program. The CRS program has phased out of the five regions in the south, redirecting their efforts in the north, where the nutritional status of children under the age of five is lower. CRS is constrained from any finer attempts at targeting because its program is run through already established clinics. ADRA develops its clinics in locations where there are no adjacent health facilities, and where the need is greatest, as determined by a somewhat subjective assessment by the ADRA staff. Visits to twelve of the thirty six ADRA clinics as a part of this evaluation support the ADRA assessment. The villages where the clinics are placed appeared to be very poor, with quite a few children showing clinical signs of Kwashiorkor.

CRS and ADRA both make efforts to further target their programs toward

mothers who bring children into the clinic who are severely malnourished. In the ADRA clinics, this is done by establishing two groups, one for children who are more severely malnourished and one for children who are improving. The "Intern" group of children who are below a certain weight-for-age cutoff, which varies somewhat from clinic to clinic, are put on a more frequent visit schedule and receive a larger ration than do the children in the "Extern" group of children who are not quite as malnourished.

Nutritional Impact of the MCH Program

In the absence of baseline data and other appropriate research inputs, it is difficult to assess the nutritional impact of an MCH program such as the one operated by ADRA through its clinics. There are, however, indicators that can be used to build a case for an assessment as to whether the program seems to be having a beneficial effect on the nutritional status of the children who attend the clinic. The indicators that were used during the evaluation to assess the impact of the MCH program include: an assessment of the nutrition education that is effectively being taught through the clinics, determined by asking the mothers to describe what they were learning at the clinic; subjective judgments about the effectiveness of the program gained from interviews conducted with the nutrition agents; and through records in each clinic indicating the progress, or lack of progress, made by each child over the last year.

The nutrition education that is being conducted in the clinics is impressive. The mothers who were interviewed could provide thorough descriptions of most of the things that they had learned. They described various nutrition lessons, discussions on personal hygiene, child care, recipes for weaning food using both locally produced and food aid and environmental sanitation related to health problems.

The nutrition agents working in the ADRA MCH clinics all felt strongly that their clinics were located in areas where the need is great, and that the program is having a positive effect on the growth of the children who are enrolled. They pointed out that many of the mothers travel a considerable distance to attend the clinic. In clinics where there is a garden, mothers provide the labor to maintain it. Some clinics also have income generating activities or other development projects attached to them, such as the women's project in Gbeogo where the women make fuel efficient stoves. Attendance at these clinics and related activities is high. The nutrition agents also referred to their monitoring records to show positive gains from their work, often to show a reduction in the number of Kwashiorkor cases seen at the clinic.

The growth monitoring data recorded at each of the clinics were transcribed, and then aggregated to show the proportion of children whose weight-for-age showed gains, those who showed losses, and those who remained the same over the period between September 1988 and August 1989. These data, presented in Tables 8 and 9, show a weight gain for 75% of the children enrolled in the program over the year. The proportion gaining weight varied from 41% to 94%. Detailed tables for each of the clinics visited, together with two figures plotting the summarized data, are included in Appendix B.

What are the implications of this collection of informal data and

Table 8

PERCENTAGE OF CHILDREN WEIGHED WHO GAINED WEIGHT.
SEPTEMBER 1988 - AUGUST 1989

	<u>NO. WEIGHED</u>	<u>NO. GAINED WEIGHT</u>	<u>PERCENTAGE WHO GAINED WEIGHT</u>
VR/ Liatl-Tove	2040	1564	76.7
Odomi	1155	994	86.1
W/R Fassen	1425	1209	84.8
B/A Teumiso	1951	1576	80.8
Avigye	1927	1501	77.9
N/R Gbinsi	675	405	60.0
U/ER Kpulinyin	2070	1785	86.1
Gbeogo	800	754	94.3
Namoalugu	1914	1170	61.1
Nyariga	1530	633	41.4
Kparigu	1040	875	84.1

The proportion of the children weighed who gained weight ranged from 41.1 percent for Nyariga (Upper East) to 94.3 percent for Gbeogo (Upper East)

72% of the locations have seventy percent or more of their children having gained weight.

There is no clear pattern in the proportions who gained weight to suggest regional variations.

Table 9

PERCENTAGE OF WEIGHED CHILDREN WHO GAINED WEIGHT

Location	1988				1989								Total %
	Sep	Oct.	Nov.	Dec.	Jan.	Feb	Mar.	Apr.	May	June	July	Aug.	
Volta Region													
Liatì-Tove	17.9	90.6	76.7	69.0	52.8	91.5	57.5	52.5	85.0	90.5	75.0	63.9	76.7
Odomi	29.3	50.0	-	-	-	58.5	96.8	94.0	74.0	90.0	88.0	99.2	86.1
Western Region													
Fassen	100.0	89.4	73.4	76.8	92.1	91.0	79.8	85.0	52.9	52.9	76.9	81.6	84.8
Brong-Ahafo													
Teumiso	78.1	90.1	83.0	85.0	98.6	86.1	71.7	75.3	75.3	71.7	63.3	85.5	80.8
Avigye	69.1	88.0	82.0	65.2	70.7	85.9	80.5	82.7	81.4	75.5	75.0	77.2	77.9
Northern Region													
Gbinsi	-	-	18.3	93.3	-	-	-	-	-	-	-	-	60.0
Upper East Region													
Kpulinyin	-	97.4	93.0	97.0	93.4	97.5	72.2	51.7	89.4	94.4	94.4	0.7	86.1
Gbeogo	-	-	-	-	-	-	96.5	96.0	95.0	-	-	89.5	94.3
Namoalugu	85.0	42.5	62.5	90.0	86.6	81.7	46.0	42.5	29.0	31.8	-	-	61.1
Nyariga	35.0	38.5	35.0	84.5	49.2	35.0	35.0	35.0	-	-	-	-	41.4
Kparigu	-	95.0	98.1	99.4	99.0	99.0	93.0	-	-	-	92.5	86.7	84.1

Range of available data is from two months of the twelve months period studied, for Gbinsi (Northern Region) to all months for the villages Teumiso and Avigye (Brong-Ahafo), Liatì-Tove (Volta Region) and Fassen in the Western Region. In Kpulinyin there were no data for the month of September, 1988.

subjective judgment? First, the mothers who are enrolled in the program appear to be learning important, and perhaps life-saving, lessons in primary health care. Second, the MCH program seems to be providing services to the communities that are valued and accepted. Some components of the program are excellent. And third, the children who are enrolled in the program have shown positive weight gain over the period of their enrollment. The first two of these conclusions are certainly the result of the MCH program. And if only a portion of the weight gains observed in the clinics are attributable to the program, including the food ration, then the program is meeting its objectives and continuing support for it is more than justifiable.

B. FOOD FOR WORK (FFW)

CRS's FFW activity in 1989 was limited to 22 pilot projects located in the five regions where the organization's regular MCH and School Feeding activities have been "phased out." Most of these projects were implemented through local mobilization committees ("Mobisquads"), which were responsible for the management and control of the projects and ration distribution. These projects were supported through FFW for six months (January-June). At the time of this evaluation, CRS was performing its first internal evaluation of these projects. As CRS restructures its program in Ghana, it is likely that additional FFW activity, using both Title II commodities and food purchased locally with monetization funds will be included.

ADRA is operating 352 projects supported by Title II commodities. These projects are located in all ten regions, and mostly involve on site feeding rather than a take home ration. A summary of these projects is included in Appendix C.

Targeting to At-Risk Groups

The ADRA FFW projects usually involve community-level projects, either in agriculture or infrastructure development, that involve the whole community. The food aid ration is then cooked on site, with all of the workers participating in a mid-day meal. Since these projects are open to anyone in the community, they are self-targeting. People who are relatively prosperous do not work on the project, working instead on their own farms. Those who need the food, as well as those who are motivated by community spirit, work on the FFW project.

In projects where the food is used as a take home ration in a more conventional way, such as those visited in the Western Region, the projects are intended to target the under and unemployed (a difficult concept in a rural community where FFW projects operate in Ghana - this issue will be discussed in "Employment, Savings and Investment" later in this chapter). In these projects, a signup is common, with workers in effect applying for the positions on the work crew. A variety of methods are used to select down to the approved number of workers. All of the methods described during the site visits involved some form of random selection. Here too, the projects are self selecting, but only to a point. Worker selection may include patronage, or in other ways may distort the principle of targeting. While mention was made of abuse in the selection process, no widespread examples of it were found.

Infrastructure Developed

Of the 352 ADRA FFW projects supported by Title II food, 124 are construction projects of some type (projects are listed in Appendix C). Of those, construction of school buildings predominate, with 69 under construction as of last month. School construction fits well with the government's policy to create Junior Secondary Schools (JSS) throughout the country. Other community facilities such as KVIP toilets, health centers and feeder roads have been built with FFW food aid. Many of the 228 ADRA agricultural projects are "pre-projects," meaning that the funds acquired from selling the crops are used to finance the development of a construction project. A number of schools and clinics visited during this evaluation were financed in this way.

Employment, Savings and Investment

The policy pronouncements of the various government and non-governmental organizations involved in food aid include references to creating income for the under and unemployed. While these concepts are generally useful to indicate that FFW projects should be directed at those genuinely in need, there are a number of reasons why these concepts are strained in the context of ADRA's projects. First, more than half of the projects are agricultural projects in rural areas. Virtually all of the workers in these projects also farm their own land, selling a portion of their crop and using the rest for their own consumption. In such communities, the pattern of work is dictated by the needs of the crops under cultivation. Since all are farmers who generally plant the same crops, all are equally underemployed during periods of reduced labor requirement. Moreover, most of the FFW projects in these areas are agricultural projects, which are similarly affected. Even in parts of the country where the average farms are small, as in the Volta Region, most farms tend to be of similar size, suggesting that the acreage limitation affects most farmers in the area. Second, communities do not seem to regard communal work, as FFW projects are, as employment. Communal work is a common and traditional way of developing the community. Everyone in the community is expected to work on the project, and because of the shared work and shared food ration, the benefit is also shared. For these reasons, under and unemployment in these rural communities can be more accurately used to describe periods during the agricultural cycle when work requirements are low. During such periods, virtually everyone in the community is under or unemployed.

Interviews conducted with workers indicated that there is a consumption-substitution relationship in receiving a food ration that results in short term savings to individual recipients. Since the projects usually involve on site feeding to a large workforce, the savings are modest. These savings are accrued from workers saving some of their own produce, which they would otherwise have consumed during the same period of time, or from saving money that would have been spent on food if they had not been receiving the FFW food. Most of the savings reported by workers is spent on consumption, rather than investment. The most common use of savings was for the purchase of clothing and payment of school or hospital fees. When money is saved, however acquired, respondents report using it to buy building materials and for other purchases related to long term goals. A few participants reported using their savings to hire labor for their own farms or to invest in other income generating activities, usually trading. Workers also reported using the savings to contribute money to the community, some of which is used by the community to pay transportation costs for bringing the commodities to the community.

Contrary to expectations, the increase in real income provided through the receipt of food in the FFW projects does not seem to have generated additional demand for locally marketed produce. Most of the workers buy little food, if any. Except for the hungry season when basic grains are bought, food purchases are limited to very small amounts of salt, fish, meat and other soup ingredients.

Another source of employment that can be developed through FFW projects is the long term employment that is generated during the operational phase, also called the maintenance phase. Most of the FFW projects are still in a development period, which places limits on assessing the impact of these projects on employment after they have become operational. However, several of the school buildings visited will require additional teachers, the Post Office being completed will employ additional workers, and the agricultural projects that are not pre-projects will presumably continue to provide work. As these projects develop, they may reach a stage when actual employment for wages is generated. For example, the brick and tile factory in Golokwati (described in Appendix D, along with some other interesting projects) will provide twenty five permanent jobs when it is fully operational.

Agricultural Productivity in FFW Projects

A useful way to look at the benefit of the food used in agricultural projects is to compare the outputs from these farms (the value of the harvest) to the value of the food rations, plus the cost of the other inputs. Unfortunately, ADRA reports do not include statistics on yield, which could make this a routine measure of effectiveness. Supervisors were asked to estimate the value of the last harvest for agricultural projects which were visited during the field work for this evaluation. And occasionally letters of appreciation sent by a community to ADRA indicated the yield for a project. Although these estimates were unsystematically derived, they indicate low productivity in comparison to the value of the food aid. The value of the food aid was established for the purpose of this comparison by checking the prices of donated commodities in the markets. Samples of PL 480 rice, wheat and oil were found in the larger markets, although the source of these items could not be determined. The prices were: 10,000 Cedis for a 50 kg bag of rice, 6,000 Cedis for a 50 kg bag of wheat and 1,200 Cedis for a gallon of oil. At these prices, the value of the output of the FFW agricultural projects in relation to the value of the food aid used is about 80 to 100. Food aid should therefore be considered as the initial investment. When food aid is withdrawn, the expectation should be that productivity will increase because the food aid will have provided a temporary incentive to get the project started. In an operational phase, the value of the increased productivity will also not be diminished by the value of the food aid as an input, making the ratio between output and input more favorable.

Income Transfer Effects of FFW Projects

Both the MCH and FFW rations can generate income transfer to recipients through substitution or additionality in consumption. However, the rations also have opportunity costs associated with them because of labor substitution and the contributions that the recipients must make to the projects. Considerably more household level research would be required to estimate these opportunity costs. For the projects visited, workers do not seem to view their

work on the project, and their receipt of a food ration, as an income transfer. They appear to view the food as a resource transfer that enables them to achieve certain development objectives shared by the community. And given the observation that an entire community might participate in a ration intended for thirty to sixty people, any income transfer to individuals would be minimal.

Impact of FFW on Democratic Institutions

An important effect of the ADRA FFW program is its positive effect on local structures. Committees are often formed by communities to manage the work and the distribution of the food. In many communities, committees or associations already exist, and the FFW project is managed by a local supervisor who is selected from the organization. In all projects observed, an organized local structure provides management and direction for the project. Its prestige and influence is enhanced by its being viewed by the community as being responsible for bringing a new resource into the community. The most direct resource that is brought in is the food aid. However, another resource that is brought in is technical assistance from other organizations or ministries. The committee can therefore be seen as the instrument for acquiring both material and technical inputs to accomplish community objectives.

C. DISINCENTIVE EFFECTS

One of the most fundamental objections to food aid is the possibility that it could cause a disincentive effect on local agricultural production and thereby worsen the food problems of the recipient country. The discussion in this subsection addresses four ways, identified by Fitzpatrick and Storey (1988), that this price disincentive can occur. These include: price disincentives, policy disincentives, labor disincentives and dietary disincentives (import dependency).

Price Disincentives

Price disincentives can occur when a commodity is brought into the country in such large quantities that it begins to dominate local markets. People receive the commodity through FFW or MCH programs and refrain from buying similar domestically produced commodities, thereby forcing down the price. Lower prices for local produce can lead to lower production, as farmers realize that they are not getting as much as they used to at the market for their produce. The domestically produced foods that are similar to the Title II commodities include maize, rice, sorghum and millet for the cereals; and palm oil, sheanut oil and peanut oil for the vegoil. Projections of the production of these domestic substitutes for the Title II commodities have varied somewhat in different studies which have been conducted to determine where Ghana has comparative advantages in the agricultural sector. Where a comparative advantage is thought to exist, the domestic production of that crop is seen as having significant revenue potential, including both domestic and export sales. Potential price disincentives are of greatest concern with regard to these commodities, because as prices fall for a particular crop, farmers tend to switch to other crops or even to other sources of income.

Ghana traditionally has had a comparative advantage in tree crops, including palm oil and sheanut. Both commodities are widely produced, and used as household cooking oil and in industrial applications (soap, cosmetics,

etc.). In cereals, the picture is less clear. Recent estimates of Domestic Resource Cost (DRC) coefficients suggest that Ghana also has a comparative advantage, using traditional farming methods, in all cereals except rice (no wheat is produced in the country). Most earlier analyses, including a 1985 World Bank study, indicate that Ghana has no comparative advantage in rice. And, a recent study by Sallinger (1986) disagrees, arguing that Ghana has a comparative advantage in rice. A comparison of the estimates of Sallinger and the World Bank is provided in Table 10. Table 11 shows cereal food aid as a proportion of domestic cereal marketed production.

In its review of the evidence, IFAD concluded in 1988 that "...according to the best evidence available, all cereal products under traditional technology have a comparative advantage in Ghana and could therefore be supported."

Because the implications of price disincentives are potentially damaging to the developing agricultural sector, it is prudent to consider the disincentive effects of food aid on all domestically produced substitutes, especially in view of the mixed evidence on domestic production potential.

Preliminary results of the Ghana Food Aid Study, funded under the AID Agricultural Productivity Promotion Program show that food aid has indeed depressed the prices of some domestic substitutes. In the case of maize, for example, the study results indicate that a 1% increase in the amount of maize brought into the country in food aid will cause a 0.9% decrease in local maize prices. The price effects on rice and other substitutes are much lower. The apparent effect of these lower prices on total production is marginal because of "...the low own price supply elasticities".

The effect of Title II food aid alone is minimal with respect to this broader price disincentive stemming from other sources of food aid. In 1988, Title II cereal imports were only 2.6% of marketed local cereal production, and only 0.36% of local maize and rice that is marketed in volume. Moreover, all Title II food aid, except for wheat in 1988, went to people at FFW projects or MCH centers, whose purchase of food is minimal.

The mode of using Title II food in ADRA FFW projects also minimizes any possible price disincentive effects. In most of these projects, the food aid is used for on site preparation of a communal meal, sometimes supplemented with a small take home ration. While this is contrary to project specifications, it is a useful adaptation to local conditions and culture which greatly reduces disincentive effects. Title II FFW support is also temporary, no longer than six months, further minimizing the disincentive risk.

At the community level, where a non-cash economy predominates, workers were asked whether their work on FFW projects affected their customary farming practices. This was done to determine whether any significant disincentive effects could be found in a very small market area. Acreage under cultivation does not seem to have been affected by participation in FFW, as reported by the workers interviewed. A comparison of acreage over the last two years also showed no apparent differences among those interviewed. In most locations, FFW projects are regarded as communal work, with sections of a village working on a rotational basis. Such arrangements minimize the farm time spent on FFW projects. FFW projects are more likely to affect farming practices when there are regular workers working four days a week. But even in the Western Region

where this is common, acreage does not seem to have been affected, even though there may be a substitution effect in such situations.

Table 10 Comparative Advantage in Staple Foods¹

<u>Crop/Technology</u>	<u>Sallinger (1986) (2)</u>	<u>World Bank (1985)(3)</u>
<u>Maize</u>		
Improved - draft	.18	1.27
Improved - mechanized	.18	1.39
Advanced - draft	.15	1.21
Advanced - mechanized	.15	1.32
<u>Rice</u>		
Traditional	.37	2.73
Improved	.32	4.05
Advanced	.11	8.75
Mechanized	.86	-0.72
Irrigated large-scale	.52	-0.72
Irrigated small-scale	.17	4.94
<u>Sorghum/Millet</u>		
Traditional	.31	1.08
Semi-improved	.15	.79
<u>Groundnuts</u>		
Traditional	.69	1.45
Improved - draft	.54	1.00
Improved - mechanized	.50	1.09

- 1/ Figures indicate the Domestic Resource Cost (DRC) coefficients. A value less than one indicates comparative advantage, a negative value indicates negative value added at world prices.
- 2/ Source: Sallinger (1986) using farmgate prices but uses wholesale prices for groundnuts.
- 3/ Source: World Bank, Ghana: Agricultural Sector Review, Report No. 5366-GH, 1985.

Table 11 Cereal Food Aid as Proportion of Domestic Cereal Marketed Production 1981-86

	Cereal Production ('000 mt)			Marketed Cereal Production ^{2/} ('000 mt)		Cereal Food Aid as % of Marketed Products	
	Maize & Rice	Sorghum/ Millet	All Cereals	Maize & Rice	All Cereals	Maize & Rice	All Cereals
1981	337.8	301.2	679.0	226.7	407.4	30.2	16.8
1982	301.4	246.3	547.7	180.8	328.6	27.8	15.3
1983	167.7	220.2	387.9	100.6	232.7	93.7	40.5
1984	650.4	315.0	965.4	390.2	579.2	23.0	16.4
1985	475.0	305.0	780.0	285.0	468.0	26.9	16.4
1986	638.7	298.0	936.7	383.2	562.0	21.4	14.6
1987	514.5	298.0	812.5	308.7	487.5	—	—
1988	695	300	995	417	597	13.28	11.61

1/ Paddy rice
2/ Assumed at 60% production

Source IFAD, 1988, op cit

Policy Disincentives

Ghana government agricultural policy does not seem to be affected negatively by the availability of food aid, particularly Title II. Officials at the Ministry of Agriculture and the Ministry of Finance and Economic Planning tend to view food aid in terms of price stabilization during the hungry season and bridging the gap between domestic production and consumption. It apparently does not induce complacency with regard to policies aimed at increasing food production.

One of the basic objectives of the ERP is to remove policy-induced distortions in the economy in order to generate incentives for the productive sectors of the economy, including food production. The government is currently launching a medium-term agricultural program, a basic objective of which is to promote food security at all levels, from household up to national levels (Daapah, 1989). This is in response to an apparent worsening of the terms of trade against food producers. For example, the producer prices of food relative to cocoa and non-food products have declined consistently since 1984. Table 12 shows this trend, using 1977 prices as the base.

Table 12. Relative Prices of Food: 1977-87

	1977	1980	1981	1982	1983	1984	1985	1986	1987
<u>Terms of Trade</u>									
Food/Non-food consumer items	100	96	91	112	138	86	60	57	55
Relative prices of Food/Cocoa produc- tion	100	131	92	125	184	136	64	51	42

Source: Loxley, 1988.

Labor and Dietary Disincentives

There are a number of substitution/additionality relationships mentioned throughout this report, describing in various terms the effect of food aid on other characteristics of the recipients and the economy. The first such relationship is the labor-production substitution relationship. FFW project work may replace labor time that farmers could spend on their farms, time that they could spend on other income generating activities, or leisure time. Most of the workers who were interviewed did not think that participating in a FFW project affected their farming or other activities significantly. As mentioned elsewhere, the common practice of rotating workers on FFW projects lessens the chance that there is a substitution effect of these FFW projects. But in more traditional FFW projects with a set number of workers working four days a week, a negative labor substitution is likely. This substitution may be in the form

of a transfer of farm work from a man to his wife and children; or in the case of a woman, an increase in her work hours or the possible neglect of other responsibilities. The field visits did indicate some burden shifting among household members to accommodate FFW project work. However, considerably more thorough household level data would be required to address this issue properly.

Another set of substitution relationships may occur on the consumption side. The availability of dry rations or on site feeding may lead to a reduction in the consumption of the worker's own produce, a reduction in the consumption of other local produce, or a reduction in the consumption of imported food items. These relationships may differ depending on whether the area where the project is located experiences food surpluses or deficits. In food surplus areas, all three forms of substitution may be observed. In food deficit areas, the availability of food aid supplements the recipients' own produce consumption and enables farmers to save their own food for future consumption. This substitution also saves participants the extra expenditure on other local food that they may usually buy.

Finally, a food substitution relationship can occur when imported food is substituted for local food because local food preferences have been modified by getting food aid which is not a part of the usual diet. This effect would be present if there were evidence that after food aid is withdrawn, people would begin to buy similar imported food rather than reverting to local produce. This does not seem to have happened in Ghana. Farmers seem to revert back to their usual consumption basket after the FFW projects are completed.

V. MANAGEMENT

The procedures and practices used by CRS and ADRA in the planning and management of their Title II program will be discussed in this chapter. The chapter has been segmented into the components of program management that reflect both PL 480 program guidelines and the principles of sound management. These components are: Planning, Supervision, Training, Monitoring and Evaluation, Title II Management Control, and Major Constraints to Effective Program Management.

A. PLANNING

Appropriateness of Projects to Reach At-Risk Groups

Both ADRA and CRS have established geographic targeting of their FFW projects, increasing their project activity in the north and the Western Region. These areas are demonstrably "poor" in comparison to the regions in the south. CRS, in shifting its program north, has done a comparison and analysis of various poverty indicators from around the country to support its redirection. In addition, other indicators suggest that the north and west are relatively worse off than the south. In the Volta Region, for example, the average farm holding is less than three acres. A comparison of the average yield per acre of the dominant crops in Volta to the average farm wage shows that a farmer producing an average yield on an average sized farm make less than he would if he were employed as a "By Day" worker on somebody else's farm. Another way to look at this comparison is that if a farmer on an average sized farm were to hire a worker to help him on his farm, he would probably have to pay that worker more than the value of his harvest. This also appears to be true of the Northern, Upper East and Upper West Regions, where the dominant crops are millet and sorghum. The Western Region and Brong-Ahafo are appropriate geographic targets because of their lack of infrastructure. Given these indicators, and emphasis on the north and west seem to be justifiable.

Another level of geographic targeting occurs at the sub-regional level. In the MCH program, CRS is locked into working where there are government clinics, although they continue their FNP in those clinics in the north. ADRA tries to establish its MCH centers in areas not currently being served by other clinic facilities. This results in targeting because the mothers who bring their children to the ADRA MCH centers would have to travel long distances to reach any other facility. More precise targeting, as described in Section IV.B. is difficult.

The FFW sites appear to be established in areas where there is genuine need. At the project level, many of the ADRA projects use on-site feeding of the workers. Since these projects often involved the whole community, not just the approved number of workers, the "target" is everyone in the community. Rations are spread among all of the workers on the site.

As to the question of whether there are at-risk groups who are not being served, the answer is undoubtedly yes. Many communities could be served by projects. However, this only becomes an important factor if scant resources are being used in communities that are not poor. There does not seem to be any evidence that that is the case.

Community Participation

The May CRB Evaluation commended that organization for its experimental approach to Community Based Pilot Projects in the FNP, although there was need to strengthen genuine participation in some of the programs. CRB has begun mapping out plans to continue in this vein and to initiate income-generating interventions that would strengthen the governmental institutions (Department of Community Development) and non-governmental agencies (various women's organizations and NGOs) best in a position to encourage participation.

ADRA's FFW projects are exceptionally participatory, with the organization's role being both reactive (to communities' initiatives in seeking assistance) and proactive (initiating contact with the community). In a third scenario, an agency (such as the Forestry Department) already working with a community may refer the community to ADRA.

While we did encounter examples of sub-groups within a community having their interests submerged or bypassed (e.g., men wanted a cotton-farm, so the women were given the task of implementing it), ADRA staff were willing to accept suggestions that they meet separately with marginalized groups so as to ascertain that their needs are taken into account.

The team has found no evidence that ADRA has "forced" ideas for projects on communities, and those supervisors interviewed display a keen awareness of the link between participatory planning at the start of a project, and sustainability at the finish.

ADRA's MCH program is also found to be participatory in that a community's nutrition agent is selected by the community and is a community member. Her daily interaction with the mothers in the program helps to ensure that health discussions and nutritional demonstrations are relevant to the community in which they are presented.

Selection Criteria and Procedures

There are essentially three levels of choices, or procedures for project selection: geographic (regions, districts, and communities on which to focus), type of projects, and beneficiaries (participants/recipients).

ADRA is currently functioning in all 10 regions, but is generally focussing more attention on the needier areas of the Northern sector. There is no other formal geographic "focussing" of project activity.

Project Selection

The steps taken to bring about ADRA's food support to a project is generally initiated with a meeting of the Regional Coordinator with the chief and elders and/or Town Development Committee and /or District Assemblyman. This is followed by a more general meeting of community representatives, in which the community's "felt needs" are discussed. Some communities have already formed plans for addressing these needs; others respond to suggestions by the Regional Coordinators. In some instances the community has identified a problem (e.g., guinea worm) and suggests the solution (a clinic). In dialog with the Regional Coordinator however, it is decided that a more reasonable solution to the same problem might be a source of uncontaminated water (the preventive rather than the curative approach). In this instance the identified problem remains the same but the project intervention is negotiated.

ADRA now encourages communities first to develop "pre-projects" in order to generate revenue for the main project. To generate the funds needed for digging or drilling a well (for our guinea-worm example above), ADRA might suggest that the community start a communal field whose first yield would be sold to pay for materials and/or skilled labor needed for the well project.

The 3-page ADRA Guidelines for Food-For-Work Projects (Appendix E) mention that a project must benefit the general public, not private individuals, that participants must be unemployed/underemployed local workers, and that Community Development projects must improve the self-capacity of individuals. The Guidelines also indicate that participation is to be for an average of 16 days a month, that projects are accepted without prejudice to tribe or regional location, and that projects utilize no more than 60 workers and last no more than 6 months. If projects are requested for implementation on private lands, the extent of public benefit must be known.

In addition to these criteria contained in the Guidelines, the following were also noted in the course of the team's discussions with ADRA staff:

- must be community based
- must have a 5 person committee
- must show that they can come up with materials for construction
- no more than one person per family may be included on the workers list
- must be viable, rejected if too costly (which is determined by asking: if the village had to pay outsiders to build it, what would it cost? If the answer is exorbitant, the proposal is rejected

- they must not work only for the food (determine if they would do the project anyway, without food)
- if a school is planned, a teacher must be promised to serve; if a clinic, health personnel must be available

Recipient/Participant Selection

The children enrolled in ADRA's MCH program are selected on the basis of their weight-for-age. No priority is assigned to age of the child. The nutrition agents weigh the children on program entry at the beginning of a six month enrollment period. The children are separated into two groups, based on their nutritional status, as determined by weight-for-age. The master chart that is used for this purpose is the same as that used by CRS in its MCH program (Capone). The first 50 children with weight-for-age between 60 and 70 percent of standard are registered as the "Intern" group, representing those children who are severely malnourished. The next 100 children enrolled, ranging between 70 to 85 percent of standard are enrolled in the "Extern" group.

The coverage of the at-risk population using this system is difficult to determine. Both the CRS and ADRA MCH clinics have ill-defined catchment areas, so that even if data were available on nutritional status at the village level, it might not be possible to estimate the potential population that could be served.

The Interns receive two rations, while the Externs receive only one ration per month. This system is described in ADRA's Operational Plan.

Selection of workers to participate in the FFW program is considerably less rigorous. Participation is widespread, although the program intends to attempt to develop projects that provide FFW opportunities for women, who are currently under-represented in the program. The field visits undertaken in connection with this evaluation found only fragmentary indications of gender distribution in the FFW projects. In a project in the Western Region, 20 of 60 workers on a road construction project. In a similar project in the Volta Region 50 out of 93 workers are women. In the Northern Region, the Regional Coordinator estimates that about 30% of the workers there are women. Since ADRA is concerned with the greater involvement of women in its FFW program, it is suggested that tracking the number of women involved in current projects could provide useful information about the kinds of projects most likely to attract women workers in a given region.

In addition to the selection process used to begin projects and enroll recipients, there are a number of instances where projects have been terminated or suspended. There are no specific guidelines for this process, but if any of the formal FFW Guidelines used in project selection are found to have been violated after ADRA has approved the project for the use of food aid, the project can be, and sometimes is, terminated.

B. SUPERVISION

The ADRA 1988 Internal Review indicates that there is a need to increase the number of supervisory visits both to the MCH clinics and the FFW sites. The regional coordinators currently attempt to visit each project site and MCH clinic once a month, although these schedules are sometimes upset by mechanical problems with their vehicles. The National FFW Coordinator also attempts to visit the regional coordinators every few months. These visit schedules are in addition to the monthly meeting in Accra of all the regional coordinators.

The ADRA MCH clinics are visited monthly by the regional coordinators, but the National MCH Coordinator seldom has the opportunity to visit them. The National MCH Coordinator is supported by one assistant, also based in Accra.

The regional coordinators schedule visits to all of the projects operating in their regions, whether the projects seem to be running according to plan or not. Although the coordinators report having to spend more time on projects that pose particular problems, none seems to have a strictly problem oriented management style.

CRS faces a special problem resulting from having to work through government counterpart agencies over which the agency has little or no control. The criticism from the CRS evaluation that clinic nurses are occasionally hostile and judgmental is therefore something beyond the direct control of CRS to correct. CRS has established an emphasis on training government supervisors who have line authority over the food assisted activities in the counterpart agencies as a way to attempt to control the problem.

C. TRAINING

Training is often identified as a need by both CRS and ADRA staff. The ADRA Internal Review indicated that, "...a training scheme has already been initiated." ADRA/Ghana has been exploring the possibilities for funding staff training through other local and international organizations. Training in management seems to lead the list of issues identified. Some of the funds that will become available through Strengthening Grants might be appropriately used for this purpose.

Other training is done to train the nutrition agents in the basic skills of weighing, recording weights and how to conduct lessons in nutrition and health. The nutrition agents express interest in skills-upgrading so that they can begin to provide increasingly sophisticated health care. The regional coordinators, who currently provide virtually all of the supervision to the nutrition agents, also indicated their interest in learning more about primary health care techniques to make their supervision more appropriate.

D. MONITORING AND EVALUATION

The monitoring procedures used by ADRA to report back to headquarters provides information that is basic to the operation of the program, but little that can be used for evaluation. For example, data is not reported back to Accra on the output, or yield, of the agricultural projects. Such information would be useful in evaluating the benefits of a project in relation to its inputs. A review of the data that is routinely reported suggests that the reporting from the field has never been carefully analyzed with regard to

providing the data that is needed to manage the program and to evaluate its impact. The data that is reported to Accra should be examined to determine the kinds of information that the agency needs to report to USAID and others, as well as for its own evaluation and management control needs. There is a management structure within the agency that is conducive to the development of an adequate monitoring and evaluation system. A monthly inspection report is prepared, and monthly meetings are held with the regional coordinators. However, the monthly inspection reports are apparently not summarized and analyzed so that feedback can be given to the regional coordinators. And the results of the monthly regional coordinator meetings are not recorded except in the individual notes kept by the attendees. This suggests that an easily accomplished first step toward developing an effective monitoring and evaluation system would be to make better use of these procedures that are already in place.

Finally, the use of information at each level and the range of decisions that the information affects is not explicit. For example, monthly status reports to ADRA's FFW program are used as the basis for monthly meetings between the National FFW Coordinator and the individual regional staff members. But it is not clear how these discussions then feed into headquarters medium and long term planning, involving important events such as the development of policy and program changes and the preparation of the MYOPs and proposals for various other funding and program development opportunities.

E. TITLE II MANAGEMENT CONTROL

Rules and Regulations

Both CRS and ADRA rely heavily on Handbook 9, and Section 11 for the management of their Title II programs. Currently, CRS/Ghana has no other formal set of guidelines or regulations for its Title II activities, but CRS/Baltimore and Cluster recommendations are compiled as a kind of historical reference guide. A logistics manual for the West Africa Cluster is under development.

General guidelines, rules and regulations relating to Title II, and developed by ADRA International on a regional basis, do not conflict with AID policy. ADRA/Ghana's internal "Guidelines for FFW and MCH Centres" were written in 1984/85 and revised in 1986 in consultation with the USAID mission.

AERs and Calls Forward

At the time of the current evaluation, ADRA stocks in some the regions were so low that the distribution of FFW rations had been suspended. Commodities had just arrived at Tema, and ADRA trucks were transporting shipments to MCH centers (the majority having depleted their stocks a month earlier).

ADRA FFW distributions were also suspended country-wide during the second quarter of FY 89. Only 2 calls forward were made for FY 89, representing 75% of their Annual Estimate of Requirements. CRS experienced stock shortages in May and September of FY '89, the latter due to the unavailability of vegoil in gallon containers for shipment, rather than inaccurate planning.

Both CRS and ADRA have established appropriate time tables for the preparation and submission of AERs. CRS has begun preparing its calls forward 6 months in advance, preparing a detailed internal analysis of existing stocks and projected distribution over the following six month period. ADRA's FY 90 AER and calls forward for the first 2 quarters were prepared and submitted in a much more timely fashion than those of FY 89.

It is suggested that while the timely preparation of calls forward greatly decreases the possibility of stock shortages, it cannot protect an organization from unusually long delays in shipment arrival, the arrival of a heavily damaged or short shipments, or in the event of a disaster, the unexpected distribution of commodities. Both CRS and ADRA should consider establishing realistic levels of "security" stocks, to be regarded as "zero-level" during call-forward preparation. As both organizations have systems of stock rotation in place, one method of establishing "security stocks" would be to include all projected "General Relief" commodities in the first call-forward of a fiscal year.

Logistics Management

Both CRS and ADRA have well-developed systems of logistics management and commodity control. Appropriate training/instruction is provided by both organizations to warehouse managers, supervisors, and other personnel involved in the use of documents necessary for monitoring the distribution chain (Bills of Lading, Clearing documents, cargo handling receipts, damage and loss reports, waybills, stock charts, tally cards, attendance records, etc.). While CRS only maintains one central warehouse, its established system of transport, experienced personnel, and distribution points of schools and clinics throughout the most at-risk regions of Ghana provide the organization with the ability to respond quickly to situations necessitating the emergency distribution of food and/or medical supplies. Regional warehouses, an established transport system (including 4 ADRA trucks), experienced field staff, and growing acceptance in the at-risk communities of northern Ghana, contribute to ADRA's preparedness for emergency operations.

Enhancement/Outreach Grant funding has permitted CRS to strengthen the material infrastructure of its distribution activities, and CRS's port-reception and central warehousing practices provided the basis for the development of those of ADRA. CRS's clinic and school field-level storage facilities and safeguards were determined adequate during the recent CRS evaluation.

The field-focus of the logistics component of the current evaluation was on ADRA's distribution system and infrastructure.

Reception of Title II Shipments and Central Warehousing

ADRA maintains a central warehouse complex (3500 MT) in Tema, near Accra. The warehouse units are clean, secure, and well-ventilated. At the time of the evaluation visit the facility was nearly full to capacity, with all stocks properly stacked on pallets well away from the wall. Stock cards identifying stock shipment number, date of arrival, and current inventory were in order.

ADRA's shipping clerk and warehouse manager clearly explained their shipment reception process, including the reports and claims made for short or damaged shipments and port loss.

Port loss is of major concern to CRS as well as ADRA, with both agencies reporting that the greatest losses of their Title II commodities are incurred during off-loading at port, where 75% of the manual labor is provided by the Ghana Ports and Harbours Authority. Even with the presence of CRS and ADRA surveyors, and taking direct delivery of shipments (thereby avoiding Harbour Authority warehousing and the additional stacking and unstacking of commodities), port losses remain significant. While ADRA has not yet analyzed its 1989 commodity losses in terms of the percentage of total loss per step in the commodity distribution chain, CRS reports that port losses represent almost 50% of the total of their Title II commodity loss (which was less than 4% during FY 89).

In-country Shipping and Commodity Tracking

ADRA's Tema warehouse ships commodities to 6 regional warehouses maintained by ADRA in the Ashanti, Brong-Ahafo, Volta, and the Northern sector. ADRA primarily uses its own trucks for inland transport to these warehouses. Numbered waybills including truck and driver identification, date of departure, type and quantity of commodities, and originating shipment reference number accompany each shipment to the regional warehouses. A copy of each outgoing waybill is kept at the central warehouse. Under ADRA's current commodity control system, returning waybills signed by a regional warehouse manager or supervisor, and reporting the loss or damage of commodities in transit, are compiled by the FFW Coordinator.

It is suggested that ADRA could improve the efficiency of its commodity control and reporting while increasing the system's usefulness as a tool for overall program management through the centralization of commodity transport and status records at the central warehouse level. Waybills indicating the receipt of commodities at a regional level should be returned directly to the central warehouse for immediate reconciliation with central warehouse records. Copies of regional commodity status and loss reports could also be reconciled at the central warehouse level, permitting the up-to-date accounting of regional and country-wide stocks and commodity loss throughout the distribution chain. Monthly and quarterly regional and country-wide commodity status reports compiled at the central warehouse level could be reconciled with regional

project recipient reports by the FFW and MCH Coordinators for their quarterly recipient status reports. This final analysis not only lessens the gap between theoretical and actual numbers of recipients, but it increases the "checks and balances" value of commodity reporting, and provides the means for an accurate reporting of project activity per region in terms of #/type of projects, : project recipients : quantity of commodities distributed.

Regional Warehousing

Reception records, waybills, stockcards, stockbooks, etc. were found to be in good order at the warehouses visited (Sunyani, Tsito, Tamale, and Bolgatanga). Greater use could be made of remarks columns in stockbooks and on stock charts, especially in those instances where warehouse shortages or community transport constraints have led to the distribution of short rations. Bi-monthly rations should also be signalled as such, along with entries recording commodity loss. A "Loss" column corresponding to the "In" and "Out" columns in stockbooks would facilitate the reporting of warehouse commodity loss.

All of the warehouses visited were clean and demonstrated warehouse management practices ranging from adequate to excellent. It is suggested that ADRA could further improve overall regional warehouse management by providing every regional supervisor (in those regions with warehouses) with a warehouse manager.

FFW Distribution and End Use Monitoring

Where ADRA maintains regional warehouses, FFW project committee members take reception of commodities at the warehouse. For those project communities in Greater Accra, Eastern, Central, and Western regions, reception of community rations occurs at ADRA's central warehouse at Tema. Ration transport costs for recipients in these regions are offset by 100 Cedis per sac of SFB or rice, and 50 Cedis per carton of vegoil. Recipients at project sites in the Western region reported actual transport costs ranging from 200-350 Cedis per sac and 100-150 Cedis per carton of oil.

In those regions with an ADRA warehouse, recipients are responsible for the entire cost of ration transport to their communities. Transport costs to Tamale in the Northern Region, and to Tsito in Volta, approximated those cited in the southern regions. The total private transport costs for a community's monthly rations were often reported to range from 15,000 to 22,000 Cedis.

Setting aside the question of the developmental value of this kind of recipient "input", this method of commodity distribution creates a gap in the distribution chain which in optimal conditions should be avoided. While only two instances of commodity sale for transport costs were cited during site visits (and those by regional supervisors), monitoring this kind of commodity misuse is extremely difficult. While ADRA field staff make every effort to insure that ration size and composition is clearly understood by all intended recipients, the fact that many of FFW sites

use a method of on-site feeding, or on-site feeding plus a take-home ration, increases the difficulty in knowing exactly how much food arrived in the community and whether a fair distribution of commodities to recipients has been made.

It is suggested that ADRA examine the possibility of deploying their own trucks or supplying private transport at the regional level for ration transport to accessible FFW sites (as is currently the policy for supplying ADRA's MCH centers).

In the absence of the provision of transport to FFW sites, it is suggested that rations be accompanied to FFW sites on a "spot-check" basis, or that rations occasionally be issued with instructions that they should not be distributed before the regional supervisor or warehouse manager's arrival in the community. These methods have been used with some success in Upper East when normal site visits have led the regional supervisor to suspect misuse or incorrect distribution of rations. An ADRA representative should always be present at the first community-level distribution of rations.

As was mentioned above, ADRA does provide the transport of commodities to MCH centers. MCH rations have generally been shipped from the central warehouse in Tema directly to the centers, leaving regional warehouses for FFW commodities only. An examination of waybills, stockcharts and actual stock at centers visited in 5 regions indicated that most of the nutrition agents could use more supervision in the management of MCH commodities. ADRA is at present considering shipping MCH commodities to regional warehouses, and providing local transport from regional warehouses to the centers. The control and monitoring of MCH as well as FFW commodities would in this way be centralized per region, with regional end-use checking activities and commodity status reports extending to cover the MCH centers.

Financial Management

CRS

Recent audits performed by an independent accounting firm have prompted CRS to introduce major reforms in its financial accounting practices. Current emphasis is being placed on increasing the efficiency of their computerized voucher tracking system, with the eventual goal of being able to perform cost-budget comparisons on a regular basis. CRS/Ghana is anticipating a CRS/Baltimore audit in FY 90.

While the monetization budgets presented in CRS's Title II Program Operational Plan are collapsed into four line items (Commodity/Movement and Storage, Salaries/Fringes, Travel, and Education) a more detailed breakdown of costs can be found in their monetization proposals. CRS's monetization proposal for FY 1990 provides an adequate breakdown of its Title II program costs (in Cedis only). Detailed and current cost-data, representing a further breakdown of these costs, were examined and are available at CRS.

CRS depends on the GOG for half of its commodity handling costs. While the timing of GOG reimbursement has usually been predictable, the delay of this input in FY 89 contributed to a serious strain on the Commodity Movement/Storage element of CRS's Title II budget. Should CRS's Logistical Support Agreement with the GOG be renewed in FY 90, CRS should be prepared for repeated delays of reimbursement. It is suggested that as these inputs impact directly on the management of CRS's Title II program, CRS should keep USAID informed in the event of their serious delay.

ADRA

Like CRS, ADRA's finance section is in the process of change. Personnel changes during FY 89 made it difficult to discuss previous budget reporting, or accounting practices. Currently, an emphasis is being placed on improving the computerization of ADRA's accounting system and, as with CRS, it is hoped that regular cost-budget analysis will soon be possible.

ADRA/Ghana is audited regularly by an auditing firm connected to ADRA/International. Audited financial reports are available at the Accra office.

ADRA's Operational Plan, monetization, and grant budgets provide a detailed breakdown of cost elements and line items. However, there is considerable confusion between documents, and much evidence that budgeting has not always corresponded to the proposed scope of operations, given the fiscal realities of Ghana. Travel and per diem costs (end-use travel), underbudgeted in FY 88 and FY 89 to the point of placing serious constraints on field supervisors, were again underbudgeted in FY 90. At present, ADRA is reviewing its current budget to determine if this situation can be remedied through an approved reallocation of funds.

ADRA's Title II budget was also strained in FY 89 by a long delay in the arrival of wheat for FY 89 monetization (this wheat was being monetized at the time of this evaluation, i.e. 1 Qr. FY 90). As explained by the Treasurer, in the absence of monetization funds, which are in local currency (Cedis), expenses charged against FY 89 monetization cost elements were actually paid from U.S. dollar accounts. In order to reimburse these accounts, ADRA will have to convert Cedis back into dollars, or "buy" dollars, -- a process in which Cedis will normally be lost. Discussion with USAID is planned.

The financial "snapshots" above have not been presented for the purpose of recommendation, but of emphasis. In its financial management, as in its program activities, ADRA is in the process of learning. Current personnel have recognized the fact that increased communication and exchange of information among its various departments is necessary to the improved financial management of the organization. Whether it is scheduling the call forward of wheat for monetization, or establishing realistic per diem allowances for field supervisors, input from more than

one program area is necessary. In a recent staff meeting it was proposed that department heads meet on a monthly basis to present a brief accounting of activities, and to discuss program operations and finance. It is hoped that these meetings become a reality, and suggested that ADRA/Ghana's monetization program would benefit from an increase in "information exchange" outside the organization as well. Learning about the experiences of other agencies and/or ADRA country-missions involved in planning the use and management of Title II monetization funds will help ADRA/Ghana in its own planning and budgeting process.

F. MAJOR CONSTRAINTS TO EFFECTIVE PROGRAM MANAGEMENT

In general, the evaluation team has high praise for the way that the ADRA program is operated. While this section includes comments on some areas where their management might be improved, these comments include constraints that are beyond the organization's control, such as bad roads, as well as constraints over which ADRA has some control. The observations made during the evaluation, both in the field and at ADRA headquarters in Accra suggests that these problems are well known by ADRA, and steps have been taken (or planned) for their resolution.

The constraints to effective management affecting the CRS program are related to the changes that the agency is currently making. The agency has for the last two years, been in the process of redirecting its program toward areas of greatest need. While these may be positive changes in the long term, the short term effects have included low staff morale and high staff turnover. A recent evaluation of the CRS program noted these problems, and provided a series of recommendations. It is worth noting that many of the recommendations made to CRS during the evaluation are now being discussed within the agency so that corrections and adjustments can be made. According to the CRS Director, this is a particularly opportune time to consider program adjustments given the agency's current initiative to replan and redirect its program.

The major constraints to effective program management will be discussed in three subsections. These are infrastructure, staffing, and commonality of objectives.

Infrastructure

The major infrastructure constraint affecting the ADRA and CRS program is the condition of the roads, especially in the north. Difficult transportation affects the timely delivery of commodities, thwarts regular supervisory visits and contributes to an already difficult communication link between the field and headquarters staff. ADRA has attempted to place its regional supervisors and warehouse facilities to minimize travel. For example, projects in the northern part of Volta Region get their commodities from Tamale, in the Northern Region, which is somewhat easier than travelling all the way to Tsito, in the southern part of Volta where the warehouse is located. To ease the travel burden on supervisors, ADRA has added the projects in the Northern Region that are closest to the Upper East Region to that supervisor's area. CRS has established an office in Tamale, to be closer to their projects in the

north.

Other infrastructural constraints offer no surprises. ADRA has occasional difficulty renting warehouse space, and office space and equipment for its regional supervisors. Both agencies mention the need for reliable vehicles, and access to good maintenance facilities for them. Even the Peace Corp Volunteers attached to the Collaborative Community Forestry Initiative (CCFI) have unresolved transportation problem, having been equipped with bicycles to work in projects that might be 60 miles from the nearest forestry station. ADRA supervisors usually travel around their regions by motorcycle, although several regions have pickup trucks. Through PAMSCAD, ADRA has been attempting to acquire additional vehicles, so far without success.

Communication is also an ADRA constraint that might be considered infrastructural. Telephones are unreliable or unavailable, and uncertain radio communication exists only between headquarters and the Tema warehouse. The ADRA Regional Coordinators meet in Accra once a month, which provides a useful opportunity to exchange views and discuss problems. But it is not viewed as sufficient for day-to-day reporting and contact. ADRA is aware of this issue, and has plans to supply radios to its coordinators as funds become available. CRS did not mention communication as a noteworthy problem during its evaluation.

Staffing

ADRA appears to be able to attract and hold on to very capable staff, both at headquarters and in the field, in spite of low pay and an often difficult working environment. Regional Coordinators are rotated to different regions and to the home office in Accra. The Regional Coordinators visited during this evaluation have been with ADRA between one and five years. Problems in staffing are apparently identified and dealt with quickly, as with the sacking of coordinators and warehouse staff who had misappropriated some of the food. The ADRA staff, however, is too thinly spread for the work that they have to do. This is particularly apparent in the MCH program, where a supervisor and one assistant have to provide supervision and support from Accra to 36 MCH programs around the country. ADRA is aware of this problem, and has been recruiting additional supervisors for the MCH program for nearly a year.

There is an advantage to rotating staff into different jobs, giving them a perspective on the whole operation of the agency that they would otherwise not get. However, it also has disadvantages. ADRA has had three different treasurers over the last few years, each of whom had to learn the financial system and modify it to his own specifications. And some of the staff members who have been reassigned have been taken out of ADRA altogether and placed in the Seventh Day Adventist Union in Kumasi. This is a particularly damaging practice in critical skill areas, such as finance, and will ultimately affect the ability of ADRA to develop the internal expertise required for its own operation.

CRS also has some very capable staff members, who are also thinly spread. The Upper East Region currently does not have a supervisor, and, according to the CRS Evaluation Report, "The number of supervisors in the five remaining regions following restructuring is insufficient." CRS has had, during its restructuring period, low staff morale, which is quite understandable given the shift in program emphasis to the north and away from FNP. These changes have

required both retrenchment of staff and relocation.

Both agencies acknowledge the need for training of their staff. The CRS report details a series of areas where training might be appropriate, which will not be repeated here. ADRA staff identify the need for training in two major areas: training of coordinators in supervisory techniques and some of the technical aspects of MCH, and training of the nutrition agents in the MCH centers in a variety of PHC service provision techniques and procedures. Both of these training needs are important to the continuing success and growth of the MCH program, since the regional coordinators provide the supervision for them. The supervisors visit the MCH centers regularly, but do not have the background to do more than ask the nutrition agent if she has any problems. The coordinators themselves identify this as a problem, and express interest in learning about MCH to do their jobs better and to acquire new skills. The nutrition agents express enthusiasm for upgrading their skills through additional training. They appear to be well accepted by the mothers who attend the clinics, and it is clear that any additional skills that they can provide will be used by the mothers. This is a base of credibility that is well worth building on to enhance the MCH program.

Commonality of Objectives

In the ADRA program, there is an apparent difference between the FFW and the MCH program staff on the objectives of the program. Nutrition agents in the MCH centers do not seem to know what the objectives of the MCH program are. This may be because the program is less a true MCH program than it is a weighing or nutrition program. It also may reflect a need for training and additional supervision by a staff member who is skilled in MCH. In contrast, the objectives of the FFW program are widely shared, down to the workers in the field. This is probably due to the strong community involvement and more frequent contact with ADRA staff. And since the projects are directed toward a specific outcome, such as the building of a facility, growing crops or building roads, at that level there is little ambiguity about the proposed outcome of the project. As to the purpose of the project - that is, whether the overall objective is simply to build a building or to mobilize the community or to support the vision of a larger policy goal of ADRA or CRS, the commonality of the objectives issue is far less clear. The objectives that seem to guide the work in the field on the projects are not reflected in the documents of CRS or ADRA.

CRS has a much different problem with shared objectives than does ADRA because of the CRS need to work through counterparts. It is much more difficult to establish a shared agenda for service provision when the counterpart staff belong to other organizations. This problem is structural with respect to the CRS program as it is currently constituted. Training sessions with counterpart staff, already a CRS objective, could perhaps include some sensitivity sessions to help impart consistent program goals and objectives.

Other Constraints

Timely distribution of the food commodities is an occasional problem for both CRS and ADRA. Some of this is unavoidable, having more to do with the lengthy supply chain for the commodities than anything else. However, some of

it is apparently due to inadequate lead time in submitting calls forward. More careful planning will minimize this issue.

For ADRA, another issue related to distribution is the gap in accountability, as well as the lack of control, that enters the distribution system when the communities pick up the food themselves. This is a weak link in an otherwise very well designed accountability system.

VI. CONCLUSIONS AND RECOMMENDATIONS

The overriding conclusion of this evaluation is that the Title II program has a great deal of potential for becoming a fundamentally very sound, innovative and well run program. Both ADRA and CRS are committed to developing and operating food aid programs in which food (whether through monetization or direct distribution) is used as a resource for, and support to, development activities.

Conclusions and recommendations specifically on the CRS program have been made in some detail in the earlier evaluation. Since the CRS program is now in the process of establishing its new direction, another review, short of a full-scale evaluation, might be appropriate sometime in the next year. CRS may decide to continue to develop FFW projects, using as a model their pilot projects.

ADRA is to be commended for its exceptional efforts to involve the community in project planning. The recommendations that are included in this section are therefore intended to provide ADRA with some suggestions that might help to make a good program better.

The recommendations are grouped into the following categories: Management and Administration, Training and Technical Assistance, Information Systems and Reporting, Collaboration and Coordination and Program Design.

Management and Administration

1. ADRA headquarters (Washington) should provide professional opportunities for ADRA/Ghana staff so that staff members are not reassigned to other Seventh Day Adventist organizational units after they have been trained for ADRA staff functions.
2. Nutrition agents do not currently use a standard method of recipient selection. The centers also differ in the length of time that the recipients stay in the program. These problems could be taken care of with additional training.
3. Additional measures should be taken to support the nutrition agents. Perhaps establishing a supervisory network of MCH supervisors could be done, similar to the plan for adding agricultural supervisors for the FFW program.
4. When both the Ministry of Health and the ADRA nutrition agents are weighing children in the same center, it is important to resolve any contradictions in methodology or findings and work toward an eventual reduction to a single organization doing the weighing.
5. ADRA could improve the efficiency of its commodity control and reporting while increasing the system's usefulness as a tool for overall program management through centralization of commodity transport and status records at the central warehouse level.
6. ADRA could improve overall regional warehouse management by providing

every regional supervisor with a warehouse manager, in regions where there are warehouses.

7. ADRA should examine the possibility of deploying their own trucks or supplying private transport at the regional level for ration transport to accessible FFW sites (as is currently the policy for supplying ADRA's MCH centers).

8. More attention should be paid to timely planning and submission of Calls Forward, so that delays are minimized. Both CRS and ADRA have identified this as having been a problem, and have taken steps to correct it.

Training and Technical Assistance

9. In the absence of specialized MCH supervisors, the regional supervisors should be trained in MCH so that they can provide technical assistance in targeting, growth monitoring and recording. As an interim measure, they could be provided with a checklist of items to check at the centers during their supervisory visits.

10. There is some evidence, although impressionistic, to suggest that improved farming practices introduced in communal farms are rapidly adopted on private farms. We would encourage ADRA to make an effort to confirm this impression, and consciously include technical assistance to promote new farming techniques in its agricultural projects.

Information Systems and Reporting

11. ADRA could use short-term technical assistance to establish an ongoing system of data collection, analysis, feedback and input to the planning and daily decision-making process. Such a system should include data on completed projects, which should be visited at regular intervals after the withdrawal of food and ADRA assistance. It is especially important to monitor the output side of projects. The current practice of concentrating on the input side encourages the inefficient use of resources.

12. In the MCH centers there is a need for a consistent registration system, and consistency in recording weights. Headquarters should determine what the minimum data requirements are, and train the nutrition agents accordingly.

13. Some effort should be made to keep records on the gender of participants to monitor whether the proportion changes, varies by region, varies by type of project and so forth.

14. An analysis of possible disincentive effects suggests that Title II food aid could be increased with benefits to the communities without causing a disincentive effect. Care must be taken, however, to periodically assess the total amount of donated food flowing into the country to ensure that a disincentive effect does not develop. It is also important to consider potential disincentive effects in smaller-than-regional areas of the country. While no disincentive effects may be seen at a national or even regional level, large quantities of food brought into a small area may have strong disincentive effects in only

that specific area.

Collaboration and Coordination

15. The MCH program does not offer the services that would normally be a part of an MCH center. ADRA has established a good base to build on, with committed staff and apparently good attendance. ADRA should consider collaborating with the Ministry of Health, MCH Division, to increase the services offered to include immunizations, antenatal and family planning.

16. ADRA could also collaborate with the Ministry of Health, Nutrition Division, to increase the skill level of the nutrition agents. In-house training should be provided in weight recording and records maintenance.

17. There should be more collaboration between ADRA and CRS for the purpose of joint planning, sharing of ideas that seem to work, perhaps even a collective use of warehouse facilities and transportation. Collaboration should also extend to relevant ministries for training and IEC materials, and to other NGOs like Global 2000 to begin to coordinate inputs. A good beginning would be to distribute ADRA's Annual Report to other organizations.

18. Work norms for various types of projects, such as the number of person-days suitable for the construction of a 6 room school building, have been established by ADRA, and reviewed with various ministries. These norms should be reviewed periodically with the ministries and with WFP and CRS to ensure that they are not too stringent or lax.

19. The materials that are utilized in the MCH centers could be improved through collaboration with the Ministry of Health and organizations such as UNICEF.

Project Design

20. Many communities have indicated the need for building materials and agricultural inputs. ADRA might consider providing limited non-food inputs financed by monetization, or play a more active role in identifying ways that communities can obtain these inputs themselves.

21. Project objectives could be clarified if the planning of projects started with problem identification, not with the project idea. An example of the difference came in a community where Guinea Worm was identified as a problem. The community first asked for a clinic, but in negotiated discussion with ADRA they switched to a preventive approach - clean water, rather than a curative one - a clinic.

22. Whether or not communities will eventually experience conflicts over the distribution of benefits deriving from community woodlots may not have been given adequate consideration. Future difficulty might be avoided if the planning for the use of these resources were considered as a part of the project design.

23. ADRA (and CRS) should consider adopting as standard practice the rotating method of working on projects that was observed in many communities. This practice, involving rotating teams of workers, means

that many more workers are involved in projects, and minimizes the potential effect of FFW on workers' other farming activities.

24. Plans should be begun for expanding the food aid supported program in Ghana, using technical resources that might be available from AID/Washington, other donors and PVQs. Expansion may not imply an increase in tonnage, but may be simply diversifying the project portfolio to include small business development and other project innovations, particularly toward efforts in support of the ERP and PAMSCAD.

VII. THE FUTURE: NEXT STEPS

The Title II program in Ghana has considerable potential for providing an opportunity to design a portfolio of food assisted programs that significantly increases AID's understanding of how to develop effective projects in rural Africa. These project also have potential for providing the Government of Ghana with support for their Economic Recovery Program, through support for income generating activities and price stabilization for domestic agricultural production.

The CRS Program

CRS has been engaged in a wide-ranging discussion of its program in Ghana, involving staff from the Lome Cluster and the headquarters office in Baltimore. Whatever the final outcome of those discussions with respect to detailed plans, it is likely that a gradual redirection of CRS's involvement in the PL 480 program will be a part of it.

CRS originally discussed completing its redirection over a three to five year period, shifting over as appropriate to locally purchased food and other types of interventions besides MCH. However, a more rapid change has also been discussed. It is likely that the result of this discussion will be a more rapid schedule. One proposed timeframe terminates all MCH and school feeding activities at the close of FY 90. This plan is not yet final, however, and must still be discussed with the Lome Cluster and with Baltimore before a decision is made.

The ADRA Program

ADRA has plans to increase the scope of its assistance program in Ghana, possibly expanding into new program areas as well. While the organization seems well equipped to do so from the perspective of the field staff, any expansion should be accompanied by efforts to strengthen the headquarters staff. Specific areas where headquarters might be strengthened include supervision and support for the MCH program, information system development and maintenance, and development and maintenance of the cost accounting system. These are needs that have been mentioned by ADRA staff, both at headquarters and in the field. Generally, ADRA staff reflects caution regarding such an expansion. Recently, for example, ADRA experienced a delay in the acquisition of monetization funds, resulting in some belt-tightening. They had also planned for some assistance in expanding in the north from PAMSCAD. PAMSCAD, however, has been very slow unfolding, and ADRA's plans of increased program activity in the north have been put off as a result.

At the heart of ADRA's intention to expand seems to be the desire to extend a program that is in many ways first rate. The organization has demonstrated an inclination to consider its planning carefully, and is learning the uncertainties of monetization and other forms of funding. USAID has an opportunity to be involved in ADRA's program by providing them with technical assistance, based on a joint assessment between USAID and ADRA of what the organization needs. An example of technical assistance that would benefit the program would be to link the current efforts to develop cooperatives and agribusiness activities to promising FFW projects. Some of these projects

already have in place some of the rudiments of such efforts. The women's project in Kongo, for example, already has a basic credit union associated with it, that is used to finance personal expenses of the members as well as expenses to support private enterprise, since many of the members are also traders.

The Title II Program

An assessment of the disincentive effects of the Title II program suggests that the tonnages could be increased without significant damage to agricultural production. This is particularly true in short-term FFW projects. Expansion should be carefully done, however, with periodic monitoring of the effects of increased tonnage on prices of domestic produce.

The MCH program meets a need felt by many of the people who run the program, as well as the recipients who participate. During CRS's phaseover or phaseout period, the situation in the MCH clinics should be carefully monitored in collaboration with the Ministry of Health. If it appears that a decline in clinic attendance, or an erosion of nutritional status might be occurring, other service providers might have to be found. Should it become necessary to develop a "new" clinic program, the choice will have to be made as to whether to continue some variation of the CRS FNP that is currently operated through the government clinics, or to establish an MCH program more along the lines used by ADRA. Perhaps a combination of approaches might be tried, with the Ministry of Health operating a clinic based program through its clinics with additional ADRA-style clinics being established in underserved areas. These clinics might be operated by ADRA through an expanded program, or operated by other PVOs.

In both the MCH and the FFW program, it seems to be an opportune time to experiment with some new approaches to developing food aid assisted programs in Ghana. CRS is redirecting its program, and appears to be anxious to develop new projects and new directions. CRS has experience with monetization, and probably intends to finance some of its project activities through monetization. ADRA also has a good basis for developing some innovative projects. If support could be provided to ADRA to enable them to gain expertise in the full use of PL 480 resources (such as using monetization funds to buy equipment and other complementary inputs), and support in technical areas such as developing cooperatives and other small enterprises, the ADRA program could become the base for a broad range of interesting project ideas.

Ultimately, food aid coming into Ghana should be planned as a total resource, irrespective of donor. WFP has indicated interest in some sort of joint planning activity, even though it may be some time in the future before the organization is ready to consider full collaboration. While it is never easy to harmonize the project development cycles of donors, the benefit of joint planning would be that each donor program could establish its own areas of comparative advantage, resulting in a more efficient use of food aid.

Appendix A Factors Affecting the Need for Food Aid

Appendix A Ghana Overview

Economic Factors

Following a period of prosperity and growth in the years after independence, Ghana's economy experienced a steady decline in the 1970s, which continued through the early 1980s. Agricultural and industrial production declined at a rate of 1.2% a year throughout the seventies. Food availability in the period between 1981 and 1983 was 30% lower than it had been in 1975. During the same period, the real minimum wage had fallen to 13% of its 1975 level. Through a combination of unfortunate decisions regarding the management of the economy, increases in oil prices, deteriorating infrastructure and declining productivity, by 1983 the economy was essentially in shambles. Throughout this period, a combination of high inflation and an overvalued nominal exchange rate led to declining exports and periodic foreign exchange crises.

The economic situation in 1983 required drastic measures, involving structural changes and policy reform to slow the decline and regain some of the losses in productivity suffered over the previous decade. The measures taken by the GOG, termed the Economic Recovery Program ERP, included among other measures an adjustment of the exchange rate for the Cedi to a more realistic level, restoration of producer price incentives, reduction of the budget deficit, an increase in prices of publically supplied goods and services and modest wage increases to begin to adjust wage rates to compensate for the cumulative effects of inflation.

Beginning in the mid eighties, some progress could be seen in the economic indicators. Real Gross Domestic Product (GDP) increased by 7% in 1984, and 5.4% in 1985. The inflation rate between 1984 and 1986 averaged 23%, down from three digit levels recorded in the preceding years. The Consumer Price Index rose by 40% in 1984, and again by 10.4% in 1985, which was also a year of heavy currency devaluation. The balance of payments account deficit in 1984 was \$135 million lower than it had been in 1983. Total debt service was about \$301 million in 1985, which was 45% of estimated export levels. Debt service for 1988 is expected to be about \$242 million.

In the process of reversing the economic slide through the ERP, the GOG has acknowledged that the process of reform has its victims - the poor and vulnerable groups who will not be able to contend with the short-term negative effects of economic reform, despite its long-term potential. The GOG has consequently established a series of measures to reduce the negative effects of the ERP on these groups. Central among these measures are the Programme of Action to Mitigate the Social Costs of Adjustment (PAMSCAD), which includes a donor supported portfolio of interventions to assist those among the Ghanaian population who are least able to sustain the short-term effects of the ERP.

Social Factors

Ghanaian society clings to traditional values and customs that are firmly a part of the culture. Some of these factors, such as a high value placed on education, contribute positively to the outlook for the success of many

development efforts. Others, such as the traditional role of women in society, present significant obstacles. As has been observed around the world, traditional values are eroded somewhat in urbanized areas, although even city dwellers maintain strong attachments to their village origins.

Family and Children

A high premium in Ghanaian society is provided by having children, although the number of children that a woman has is determined by the husband. High fertility causes a young population, with 47% of the population under 15 years, and 20% under the age of five. In some areas, the traditional economic and social structures support prolific child bearing. A rural Ashanti father, for example, may have very little to do with his children when they are very young, only beginning to show interest in them after they are about five years old. A northern father, even though he practices patrilineal inheritance, often has very to do with his children. The northern mother is left not only with the household chores and agricultural work, but also has almost total responsibility for raising her children.

Throughout Ghana, men typically decide on major issues such as the number of children a woman has. A husband even rations out grains to his wife, expecting her to find meat and vegetables to prepare the meal, a factor which has significant implications for the design of food assisted projects.

Health Beliefs

There are traditional beliefs that can have detrimental effects on health. For example, there is a belief that if a child is fed fish or meat, he or she will grow up to steal fish and meat. Fish is also believed to cause diarrhea and to make a child's stomach big. Children should also not leave the house, even for medical care, until he or she can walk. Conversely, some traditional practices appear to have positive healing or preventive effects. Orthodox medicine has recently come to recognize that many traditional beliefs and practices involving herbal medicines, psychological care, methods of caring for the sick and certain types of bone setting practices have positive outcomes. Recognition of the positive aspects of collaborating with traditional medical practitioners has already occurred in Ghana with the use of Traditional Birth Attendants. Interest has also been shown in collaborating with traditional healers such as the "Asram" and "Marasmus Healers" in the Western Region, although this has yet to be tried.

Ethnic Rivalries

Ghana is known for having less severe ethnic factionalism than many other African societies. However, there are some rivalries which may be severe enough to block community level efforts to mobilize women's groups or other efforts to organize activities. This appears to be particularly important in the north.

Literacy

The adult literacy rate in Ghana is 64% among men and 43% among women (1985). Enrollment in first cycle schools in 1986 was about 2.1 million, second cycle school enrollment was about 168,200, and 8,344 in third cycle schools.

Health

Major health problems in Ghana are infectious and parasitic diseases caused by poor sanitation, ignorance and poverty. One third of all registered deaths are due directly to infectious and parasitic diseases. Malaria is the leading cause of death. Major diseases according to prevalence and incidence are:

1. Malaria
2. Upper Respiratory Infection
3. Diarrhea
4. Diseases of the Skin
5. Accidents
6. Hypertension
7. Complications of Pregnancy
8. Worm Infestation
9. Anemia
10. Acute Eye Problems

Infant mortality was 122 per 1000 live births in 1971, and is believed to be about 90 per 1000 live births now. Maternal mortality is estimated at about 5 per 1000 pregnancies in the urbanized areas, and about 15 per 1000 in the rural areas. Most women deliver at home with no trained person in attendance. Child mortality is estimated at 25-30 per 1000, and moderate to severe child malnutrition is estimated at 50-55%. The average life expectancy at birth is 54 years.

Nutrition

Data on food consumption in Ghana are very limited, based on several small studies done ten or more years ago. The most recent study, of food consumption at the household level, is now being analyzed and will not be reported for some time. The diet of Ghanaians varies considerably throughout the country, with local diets dominated by locally grown food crops.

In the Northern Savannah Zone, the main crops are maize, sorghum, rice, yams, beans, groundnuts and various vegetables. The diet is therefore cereal-based with green vegetables in season, some oil seeds and some fruit. Although cattle and small animals such as guinea fowl, chicken, and goats are kept, little meat is eaten on a regular basis. The animals are kept for sale or eaten only on special occasions. The diet, however, is generally adequate in protein (Ababio, 1974). With inadequate food production in this zone, food intake is low throughout the year. The hungry season before the harvest is more marked, with caloric intake falling as low as 60-70% below requirement. Gordon (1974) and Davey (1974) reported that in Bolgatanga in the Upper East Region, the diets of children 1-4 years of age were deficient in calories, protein, calcium and riboflavin but adequate in iron, and for children over the age of two, adequate in vitamin A and C.

The diet in the Forest Zone is basically made up of starchy staples such as plantain, cassava, cocoyam and yam eaten with dark green vegetables and palm oil. Meat and snails are a major source of protein. Though more meat and fish are eaten here, the protein intake of children can be 30% below requirement, and 50% below requirement for the very young, leading to a high prevalence of Kwashiorkor in this area (Davey, 1974). In several studies in Baafi Village in the Forest Zone, Orraca-Tetteh and Watson (1976) found the diet to be adequate in iron, but low in calories, protein, calcium and riboflavin.

Maize and cassava are the main staple crops in the coastal zone consumed with vegetables or light soup. Consumption of fish is very high, but seasonality affects intake. The nutrient intake of adult non-pregnant, non-lactating females and adult men tend to better meet their requirements than those of children, pregnant and lactating women.

PERCENTAGE OF NUTRIENT REQUIREMENTS MET BY DIFFERENT AGE GROUPS

	Calories (K cal)	Protein (g)	Iron (mg)	Vitamin (mcg)	Calcium (g)	Riboflavin (mg)
Pre-School	69	87	157	166	82	109
School Age	62	81	169	115	152	66
Pregnant Women	83	90	89	158	82	65
Lactating W	81	71	109	82	60	101
Other Adult W	106	122	89	141	163	65
Adult Males	100	116	295	112	218	50
Mean Values	83.5	94.5	151.3	129	126.5	76

Estimated from nutrient intake data from several studies.
Source UNICEF GHANA 1984 TABLE XI. 32

Dietary intakes of pre-school children, pregnant and lactating women in Ghana are generally low in quality and quantity. Low food intake is primarily due to inadequate food supply and taboos. The evidence is that Ghanaian customs may prevent children, pregnant and lactating women from receiving a share of the family diet appropriate to their physiological needs. Where women are agriculturally active throughout pregnancy, energy expenditure is high but intake may be limited.

Breast feeding is almost universally practised in Ghana and is continued on average for 19 months (Dovey 1961). There is evidence that the duration of breast feeding is getting shorter. In 1970 in the Danfa area and again in the World Fertility Survey (1979-80), the average duration of breast feeding was found to be 15 months. The World Fertility Survey (1979-80) found regional differences in the duration of full breast feeding without supplementation, the shortest average duration being in the Central Region (3.7 months) and the longest in the Northern Region (9.5 months). Weaning starts at different ages in different communities, but traditionally it is late in Ghana. Several studies on weaning practices show that there is generally insufficient supplementation.

In Baafi Orraca-Tetteh and Watson estimated in 1976 that the average per capita intake of 1-5 year olds to be 73% of recommended calories, 75.5% of protein, 27.5% calcium, 31% of iron, 19% of vitamin A, 166% of Thiamine, 49% of riboflavin, 95% of niacin, 25% of Vitamin C. Infants left in the care of others may not be fed frequently enough (North et al. 1975). Of 272 babies in Accra Ablekuma district, Gardiner, (1978) found that 95% were introduced to supplementation foods by six months. Doudu et al. (1984) reported that the main age of supplementation was 4.3 months and the majority of mothers introduced food between 3 months in Addo et al.(1987) study.

NUTRITIONAL STATUS OF INFANTS AND YOUNG CHILDREN

In Ghana malnutrition is estimated to underlie 60 percent of young children's death. Available evidence shows that most of the Ghanaian food and nutritional problems are linked to unrewarding food habits, traditional customs, socio-cultural factors and religious prejudices. In late 1986, in a survey of a national sample of children 0-60 months, 58% of children weighed less than 2 standard deviations below median weight-for-age of NCHS standard (Unicef Unpublished). In the same survey 52% of the children were reported to be chronically undernourished (stunted).

From 1980 through 1983, evidence from 285 weighing centres supported by Catholic Relief Services (CRS) suggested that the nutritional status of pre-school children was worsening. The data showed that the percentage of children attending the growth monitoring sessions who had weight-for-age below 80% of the median of the Harvard standard increased from levels around 34 - 36% in 1980 to as high as 53% in 1983 following a long period of drought. Even though the children brought in for growth monitoring are not necessarily representative of the country and there may be measurement problems, the result suggested a troubling trend in the nutritional status of children.

Protein energy malnutrition in children is aggravated by seasonal variations in food supply. In a longitudinal study in 1962 Davey (1974) found a strong seasonal influence on nutritional status which is best after harvest in September/October, and poorer in the months before the harvest from April to August. (CRS Ghana, cited in Unicef Ghana 1984).

Several studies have shown that weight gain is usually adequate in children aged 0-6 months (Davey, 1962; Ofosu-Amoah and Newmann, 1979; Tripp, 1981) when most children are fed on the breast. In the second half of the first year, weight gain slows considerably to below normal levels. Around 18 months weight gain is very small or there may be a loss. According to the CRS data, weaning-age children have the least acceptable body weight for their age.

**Weight-for-age: Percentage Distribution of Study
Children 0-60 months by ecological zone and Standard Deviation (SD)**

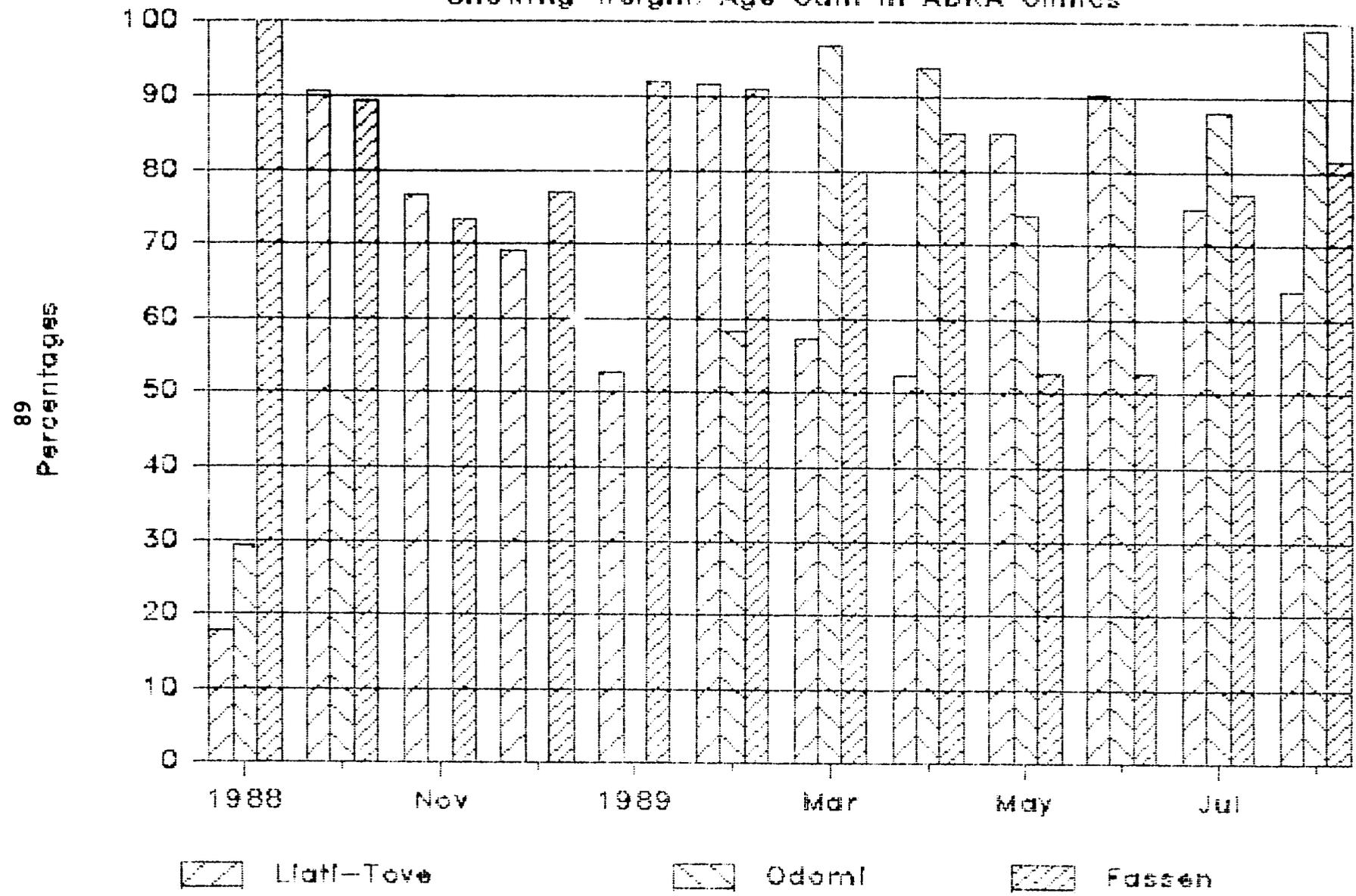
ECOLOGICAL ZONE	Study Population	Percent		
		Weight-for-Age Median 8+ 1SD	-1SD	-2SD+ Below
NORTHERN	4792	15.2	20.5	64.4
FOREST	7536	18.4	24.5	57.1
COASTAL	1915	23.9	27.7	48.4
NATIONAL	14243	18.1	23.6	58.4

- Source : UNICEF Ghana (1986) Unpublished.

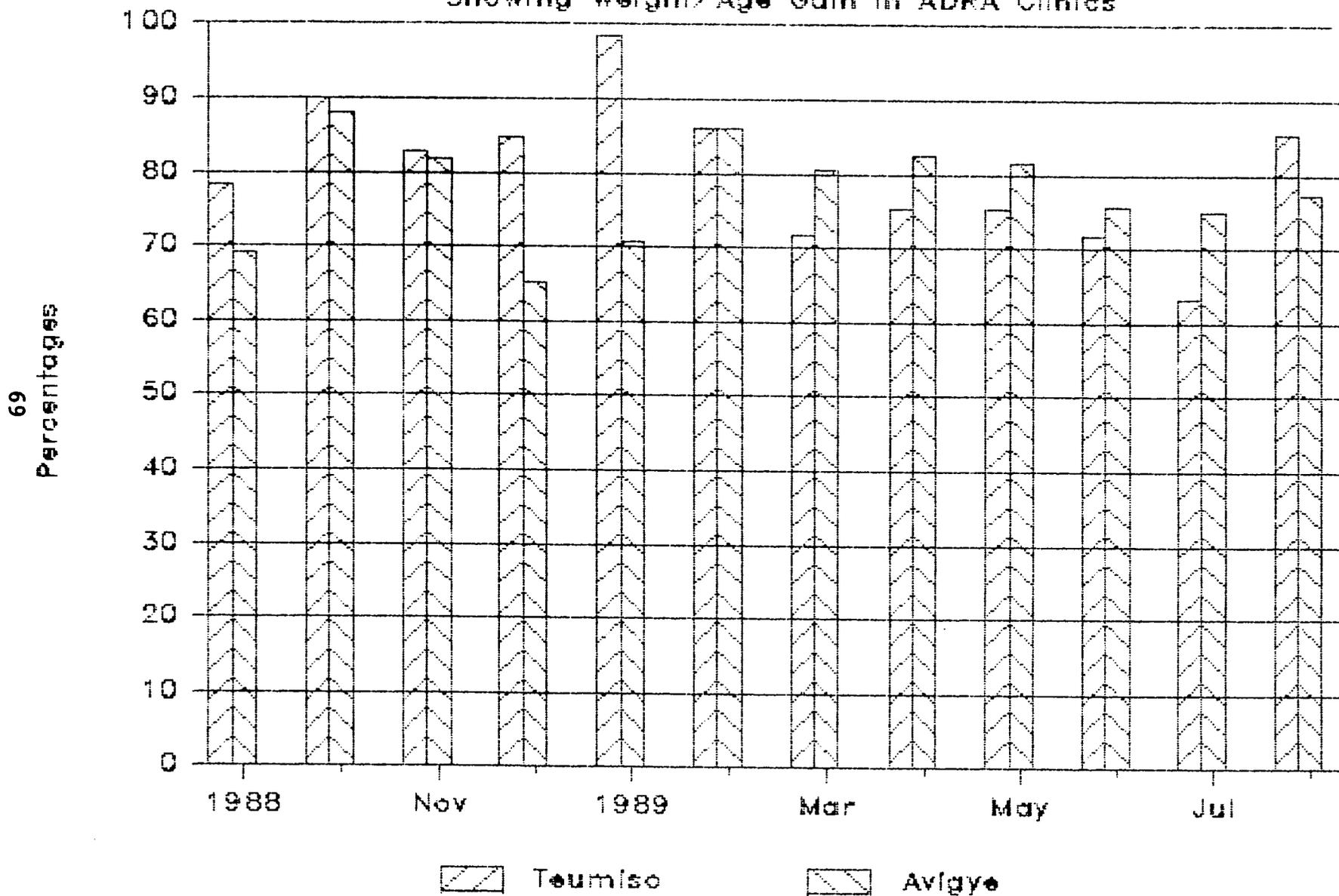
Appendix B Growth Monitoring Data - Selected Clinics

Percent of Children

Showing Weight/Age Gain In ADRA Clinics

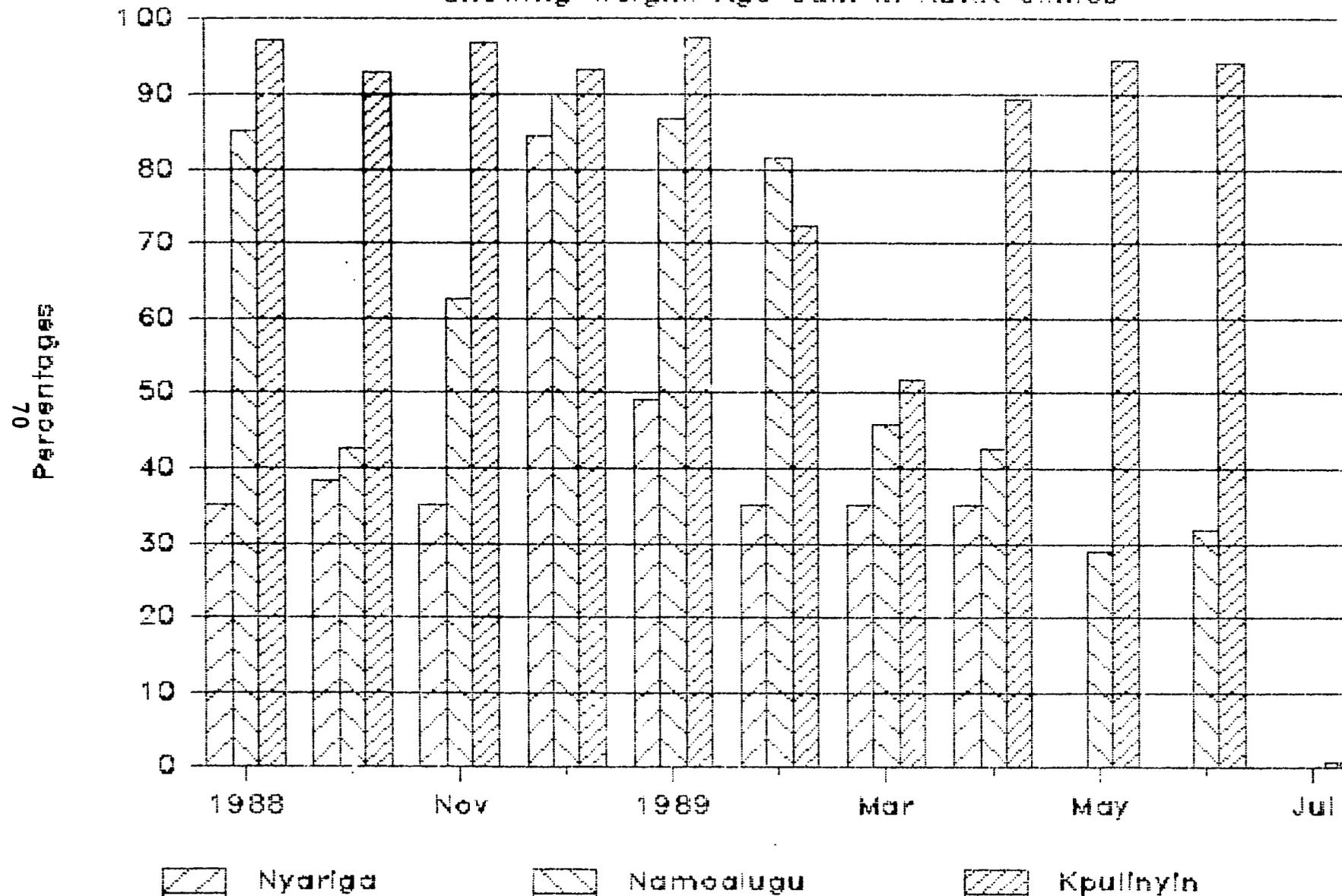


Percent of Children Showing Weight/Age Gain In ADRA Clinics



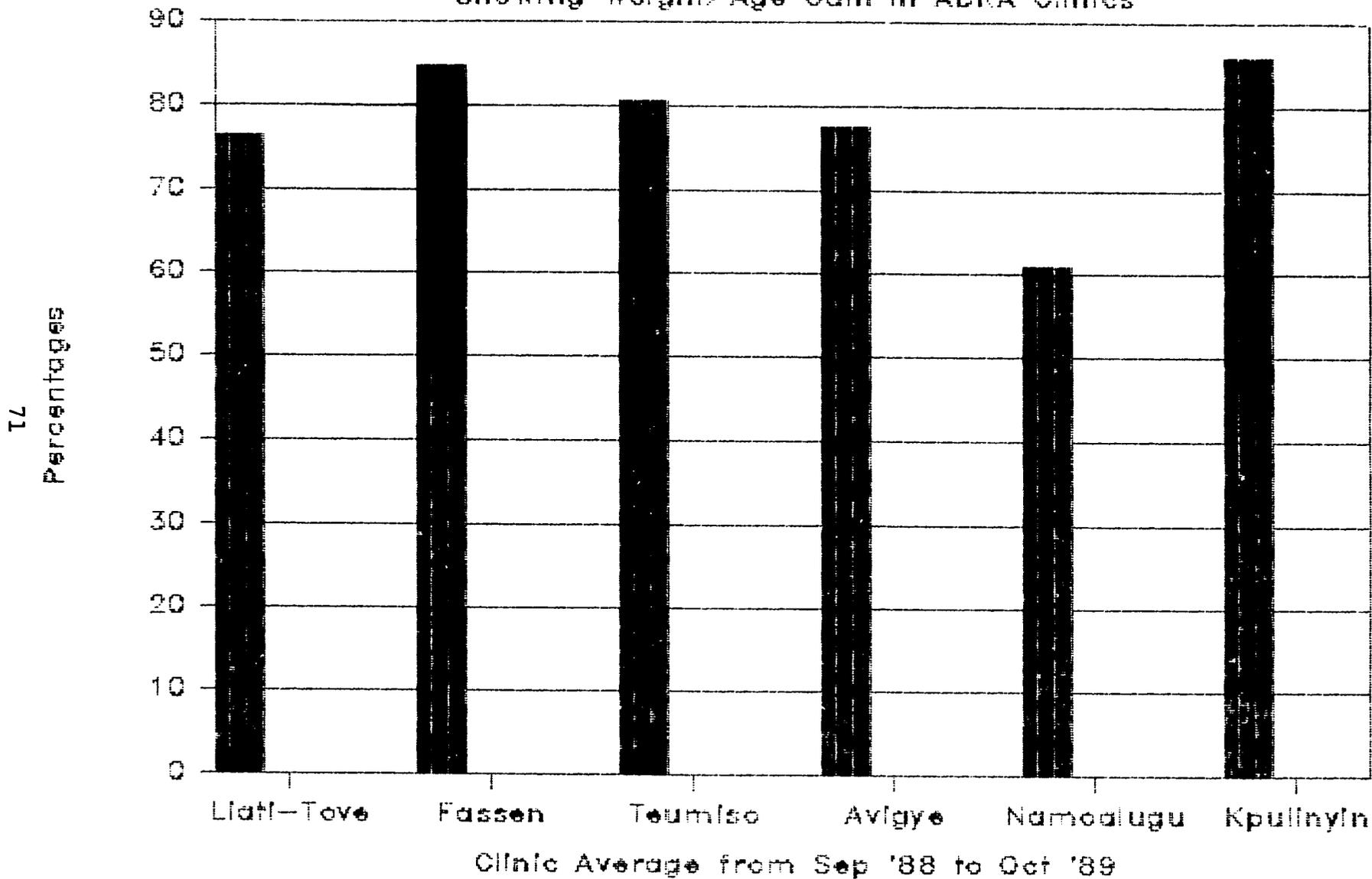
Percent of Children

Showing Weight/Age Gain in ADRA Clinics



Percent of Children

Showing Weight/Age Gain in ADRA Clinics



PERCENTAGE OF CHILDREN GAINING WEIGHT/AGE AS MEASURED IN ADRA CLINICS: GHANA

REGION: CLINIC:	VOLTA REGION		WESTERN REGION	BRONG AHAFO		UPPER EAST REGION					NORTHERN REGION	TOTAL ALL CLINICS
	Liatu-Tove	Odomi	Fassen	Teumiso	Avigye	Nyariga	Namoalugu	Kpulinyia	Gbeogo	Kparigu	Gbinsi	
1988 SEP	17.85	29.31	100	78.14	69.06	35	85	...	...	...	...
OCT	90.62	50	89.39	90.06	88	38.46	42.5	97.36	...	95	...	
Nov NOV	76.66	...	73.35	82.96	81.95	35	62.5	93	...	98.09	18.33	
DEC	69.04	...	76.77	84.95	65.21	84.5	90	97	...	99.4	93.3	
1989 JAN	52.75	...	92.09	98.59	70.66	49.23	86.63	93.35	...	99	...	
FEB	91.5	58.46	91.01	86.07	85.94	35	81.68	97.5	...	99.02	...	
Mar MAR	57.5	96.81	79.77	71.68	80.45	35	46	72.22	96.5	93	...	
APR	52.5	94	85.02	75.31	82.66	35	42.5	51.66	96	...	...
May MAY	85	74	52.87	75.32	81.39	...	29	89.44	95	...	...
JUN	90.5	90	52.87	71.66	75.53	...	31.8	94.49	...	...	...
Jul JUL	75	88	76.92	63.26	75	...	...	94.44	...	...	...
AUG	63.88	99.2	81.57	85.54	77.22	...	...	0.7	89.5	86.66	...	
AVERAGE: *	76.7	86.1	84.8	80.8	77.9	41.4	61.1	86.1	94.3	84.1	60	75.43

* Due to different numbers of children weighed each month, average is not equal to total monthly average.

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VOLTA REGION/ODOMI

	1988				1989								
INTERN/EXTERN	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	TOTAL
NO. OF CHILDREN IN THE PROGRAM	150	150	-	-	-	213	225	220	200	150	160	126	1594
NO. OF CHILDREN WEIGHED	150	150	-	-	-	183	220	200	150	150	126	126	1155
NO. OF CHILDREN WHO GAINED WT.	116	75	-	-	-	107	213	188	111	135	112	125	994
% OF CHILDREN WHO GAINED WT.	29.31	50	-	-	-	58.46	96.81	94.00	74.00	90	88.00	99.20	86.1
NO. OF CHILDREN WHO LOST WT.	34	96	-	-	-	37	79	12	39	15	14	4	258
NO. OF NEW CASES ADMITTED	-	-	-	-	-	10	-	-	-	-	6	1	17
NO. OF CHILDREN DISCHARGED	-	-	-	-	-	-	-	-	-	-	6	-	6
NO. OF KWASHIORKOR/MARASMUS	2	2	-	-	-	-	-	-	-	1	2	-	7

VOLTA REGION/LIATI-TOVE

	1988				1989								
INTERNAL/EXTERNAL	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	TOTAL
NO. OF CHILDREN IN THE PROG.	140	160	150	210	200	200	200	200	200	200	200	180	2040
NO. OF CHILDREN WEIGHED	140	160	150	210	200	200	200	200	200	200	200	180	2040
NO. OF CHILDREN WHO GAINED WT.	25	145	115	145	115	183	115	105	170	181	150	115	1564
% OF CHILDREN WHO GAINED WT.	17.85	90.62	76.66	69.04	52.75	91.5	57.5	52.5	85	90.5	75	63.88	76.7
NO. OF CHILDREN WHO LOST WT.	115	15	-	58	95	17	85	85	30	19	50	65	634
NO. OF NEW CASES ADMITTED	5	15	-	-	20	-	35	42	36	28	-	5	186
NO. OF CHILDREN DISCHARGED	-	18	-	2	20	-	20	42	24	18	-	15	159
NO. OF KWASHIOKOR/MARASMUS	2	3	21	-	-	-	2	2	3	3	2	2	43

WESTERN REGION/FASSEN

INTERN/EXTERN	1988				1989								TOTAL
	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	
NO. OF CHILDREN IN THE PROGRAM	213	218	206	211	240	204	212	207	217	217	213	273	2631
NO. OF CHILDREN WEIGHED	43	66	170	155	176	178	178	167	87	87	91	114	1425
NO. OF CHILDREN WHO GAINED WT.	43	59	125	119	162	162	142	142	46	46	70	93	1209
% OF CHILDREN WHO GAINED WT.	100.0	89.39	73.35	76.77	92.09	91.01	79.77	85.02	52.87	52.87	76.92	81.57	84.8
NO OF CHILDREN WHO LOST WT.	7	7	45	36	14	8	28	29	41	41	21	21	298
NO. OF NEW CASES ADMITTED	2	1	2	4	2	2	1	2	15	2	6	11	48
NO. OF CHILDREN DISCHARGED	-	2	2	13	6	-	3	2	2	5	8	7	50
NO. OF KWASHIORKOR/MARASMUS	10	3	10	6	10	10	12	12	7	7	8	8	103

BRONG AHAFO/AVICYE

INTERN/EXTERN...	1988				1989								TOTAL
	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	
NO. OF CHILDREN IN THE PROG.	185	185	247	133	168	195	198	198	198	203	207	195	2114
NO. OF CHILDREN WEIGHED	181	150	133	115	150	185	174	150	145	188	176	180	1927
NO. OF CHILDREN WHO GAINED WT.	125	132	109	75	106	159	140	124	118	142	132	139	1501
% OF CHILDREN WHO GAINED WT.	69.06	88.0	81.95	65.21	70.66	85.94	80.45	82.66	81.39	75.53	75	77.22	77.9
NO. OF CHILDREN WHO LOST WT.	57	25	24	70	27	26	39	32	27	56	44	41	468
NO. OF NEW CHILDREN ADMITTED	23	-	-	-	12	38	3	-	-	33	18	13	148
NO. OF CHILDREN DISCHARGED	-	-	38	-	-	-	10	24	33	-	35	-	140
NO. OF KWASHIOKOR/MARASMUS	-	-	1	-	2	1	-	-	-	-	-	-	4

BRONG AHAFO/TEUMISO

INTERN/EXTERN	1988				1989								
	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	TOTAL
NO. OF CHILDREN IN THE PROG.	253	253	253	253	192	195	192	192	200	200	147	185	2707
NO. OF CHILDREN WEIGHED	151	161	182	246	142	158	166	158	154	120	147	166	1951
NO. OF CHILDREN WHO GAINED WT.	118	145	151	209	140	136	119	119	116	86	93	142	1576
% OF CHILDREN WHO GAINED WT.	78.14	90.06	82.96	84.95	98.59	86.07	71.68	75.31	75.32	71.66	63.26	85.54	80.8
NO. OF CHILDREN WHO LOST WT.	35	7	31	43	26	57	43	29	28	32	27	23	381
NO. OF NEW CHILDREN ADMITTED	-	-	-	-	23	33	-	29	27	9	78	38	237
NO. OF CHILDREN DISCHARGED	-	-	-	-	-	3	-	-	-	87	58	-	148
NO. OF KWASHIOKOR/MARASMUS	2	2	2	2	-	-	-	1	2	2	1	1	15

UPPER EAST/NYARIGA

INTERN/EXTERN	1988				1989								TOTAL
	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	
NO. OF CHILDREN IN THE PROGRAM	200	130	200	200	200	200	200	200	200				1530
NO. OF CHILDREN WEIGHED	200	130	200	200	200	200	200	200	200				1530
NO. OF CHILDREN WHO GAINED WT.	70	50	70	169	64	70	70	70					633
% OF WEIGHT GAIN	35.0	38.46	35.0	84.50	49.23	35.0	35.0	35.0					41.4
NO. OF CHILDREN WHO LOST WT.	30	80	130	30	130	130	130	130					690
NO. OF NEW CASES ADMITTED	146	-	-	200	-	-	146	-					492
NO. OF CHILDREN DISCHARGED	54	130	200	147	200	200	54	200					1185
NO. OF KWASHIORKOR/MARASMUS	14	14	14	-	14	14	12	14					96

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UPPER EAST REGION/KPULINYIN

INTERN/EXTERN	1988				1989								TOTAL
	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	
NO. OF CHILDREN IN THE PROGRAM	-	200	200	200	200	200	200	200	200	200	180	180	2560
NO. OF CHILDREN WEIGHED	-	190	200	200	200	200	180	180	180	180	180	180	2070
NO. OF CHILDREN WHO GAINED WT.	-	185	186	194	187	195	130	93	161	170	170	14	1785
% OF CHILDREN WHO GAINED WT.	-	97.36	93.00	97.00	93.35	97.5	72.22	51.66	89.44	94.49	94.44	0.7	86.1
NO. OF CHILDREN WHO LOST WT.	-	5	4	6	13	5	50	87	19	10	25	66	290
NO. OF NEW CASES ADMITTED	-	-	10	5	8	-	-	-	-	15	-	-	38
NO. CHILDREN DISCHARGED	-	-	10	5	5	-	-	-	-	15	-	-	35
NO. OF KWASHIORKOR/MARASMUS	-	-	4	5	3	1	2	5	-	5	5	5	41

UPPER EAST/NAMOALUGU

INTERN/EXTERN	1988				1989								
	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	TOTAL
NO. OF CHILDREN IN THE PROGRAM	200	200	200	200	202	203	200	200	200	200			2004
NO. OF CHILDREN WEIGHED	200	200	200	200	202	202	200	200	200	110			1914
NO. OF CHILDREN WHO GAINED WT.	170	85	125	180	175	165	92	85	58	35			1170
% OF CHILDREN WHO GAINED WT.	85.00	42.50	62.50	90.00	86.63	81.68	46.00	42.50	29.0	31.8			61.1
NO. OF CHILDREN WHO LOST WT.	50	115	75	40	47	67	108	85	142	119			848
NO. OF NEW CASES ADMITTED	32	32	36	36	42	150	160	270	170	130			1058
NO. OF CHILDREN DISCHARGED	12	32	36	16	22	120	160	170	170	130			868
NO. OF KWASHIORKOR/MARASMUS	3	4	3	3	3	3	4	-	3	3			29

UPPER EAST/GBEOGO

INTERN/EXTERN	1988				1989								
	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	TOTAL
NO. OF CHILDREN IN THE PROGRAM							200	200	200	No food		200	800
NO. OF CHILDREN WEIGHED							200	200	200	-	-	200	800
NO. OF CHILDREN WHO GAINED WT.							193	192	190	-	-	179	754
% OF CHILDREN WHO GAINED WT.							96.5	96.0	95.00	-	-	89.50	94.3
NO. OF CHILDREN WHO LOST WT.							7	3	10	-	-	21	41
NO. OF NEW CASES ADMITTED							10	-	5	-	-	1	16
NO. OF CHILDREN DISCHARGED							10	4	5	-	-	-	15
NO. OF KWASHIORKOR/MARASMUS							2	4	1	-	-	2	103

UPPER EAST/KPARIGU

INTERN/EXTERN	1988				1989								
	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	TOTAL
NO. OF CHILDREN IN THE PROGRAM	-	200	210	200	200	200	103				210	105	1428
NO. OF CHILDREN WEIGHED	-	100	210	182	200	103	100				40	105	1040
NO. OF CHILDREN WHO GAINED WT.	-	95	206	181	198	102	93				37	91	875
% OF WEIGHT GAIN	-	95.00	98.09	99.40	99.00	99.02	93.00				92.50	86.66	84.1
NO. OF CHILDREN WHO LOST WT.	-	5	4	1	2	1	7				21	14	55
NO. OF NEW CASES ADMITTED	-	12	4	7	5	-	5				-	12	45
NO. OF CHILDREN DISCHARGED	-	12	-	-	5	-	-				-	-	17
NO. OF KWASHIORKOR/MARASMUS	-	1	2	-	-	1	-				1	-	5

NORTHERN REGION/GBMSI

INTERL/EXTERN	1988				1989								TOTAL
	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	
NO. OF CHILDREN IN THE PROGRAM			350	375									725
NO. OF CHILDREN WEIGHED			300	375									675
NO. OF CHILDREN WHO GAINED WT.			55	350									405
% OF CHILDREN WHO GAINED WT.			18.33	93.3									60.0
NO. OF CHILDREN WHO LOST WT.			190	25									215
NO. OF NEW CASES ADMITTED			-	25									25
NO. OF CHILDREN DISCHARGED													
NO. OF KWASHIORKOR/MARASMUS			2	5									7

Appendix C ADRA/Ghana Program - Project Distribution

PROJECT TYPE	ALL REGIONS			GREATER ACCRA			EASTERN			CENTRAL			WESTERN		
	PROJ.	REC.	ACREAGE KM.	PROJ.	REC.	ACREAGE KM.	PROJ.	REC.	ACREAGE KM.	PROJ.	REC.	ACREAGE KM.	PROJ.	REC.	ACREAGE KM.
AGRICULTURE															
COTTON FARMING	4	186	68												
CROP FARMING	105	4814	1809	1	50	35	6	296	57				9	510	233
TREE PLANTING	93	2958	651.2				2	60	23	2	60	17	1	60	10
PALM PLANTATION	21	1044	393				2	90	22				18	930	367
COCONUT PLANTATION	2	96	36										2	96	36
FARMERS CENTRE/SHORTAGE	3	110													
WATER/HEALTH/SANITATION															
HEALTH CENTRE/CLINIC	13	466		1	30								1	30	
KVIP	10	300		4	120		1	30		1	30		1	30	
WELL/WATER SUPPLY	3	111					1	30							
SOCIAL SERVICES															
SCHOOL BUILDING	69	2218								1	30		19	624	
DAY CARE CENTRE	4	111											1	27	
FEEDER ROAD CONST.	12	651	105.2				1	60	12				7	414	60.2
RURAL ELECTRIFICATION	2	66											2	66	
STAFF QRTS/GUEST HSE.	7	225													
POST OFFICE	1	36											1	36	
RURAL BANK	1	30													
ASSEMBLY HALL	1	30													
BIOGAS DIGESTER	1	25													
	352	13477		6	200		13	566		4	120		62	2833	
			2957.2	acres											
			105.2	km											

APPENDIX C cont'd.

PROJECT TYPE	VOLTA			ASHANTI			BRONG AHAFO			NORTHERN			UPPER EAST			UPPER WEST		
	PROJ.	REC.	ACREAGE KM.	PROJ.	REC.	ACREAGE KM.	PROJ.	REC.	ACREAGE KM.	PROJ.	REC.	ACREAGE KM.	PROJ.	REC.	ACREAGE KM.	PROJ.	REC.	ACREAGE KM.
AGRICULTURE																		
COTTON FARMING									3	144	56					1	42	12
CROP FARMING	13	562	205	4	162	61	14	700	297	30	1372	579	5	298	72	23	864	270
TREE PLANTING	7	316	85	12	372	82	1	30	5	64	1841	407.2	4	219	22			
PALM PLANTATION										1	24	4						
COCONUT PLANTATION																		
FARMERS CENTRE/SHORTAGE										1	50					2	60	
WATER/HEALTH/SANITATION																		
HEALTH CENTRE/CLINIC	1	30		1	30		3	90		5	220		1	36				
KVIP																3	90	
WELL/WATER SUPPLY										1	60					1	21	
SOCIAL SERVICES																		
SCHOOL BUILDING	2	54		9	270		11	345		10	291		8	288		9	316	
DAY CARE CENTRE				3	84													
FEDER ROAD CONST.				3	147	23				1	30	10						
RURAL ELECTRIFICATION				1	30		1	30		1	30		2	60		2	75	
STAFF QRTS/GUEST HSE.																1	30	
POST OFFICE																		
RURAL BANK	1	30																
ASSEMBLY HALL										1	25							
BIOGAS DIGESTER																		
	24	992		33	1095		30	1195		118	4087		20	901		42	1498	

Appendix D AQRA/Ghana Selected Case Studies

Case Studies

Gbeogo, Upper East-Demonstration Project for Women (Fuel Efficient Stoves)

Project Outline: The purpose of this project is to construct briquet-fired cookstoves of an efficient design in each of the houses of the 20 women who participate in the project. The stoves are made of clay, have two openings to accommodate pots (one high heat, one medium), and are ventilated to the outside. The firebox is enclosed, promoting greater efficiency. Each woman participating in the project collects her own materials to build her stove, clay and earth (1/4 clay and 3/4 earth).

When the materials have been collected by one of the women, the other women meet at her house and they all construct her stove. They have completed 14 stoves in this way, moving from house to house. After all 20 women have stoves, they will begin making stoves for other women in the village.

The project is done in connection with an MCH Center, also run by ADRA, and a tree planting project. The group is also starting a communal 12 acre rice farm. The women work one day a week on the tree planting project, two days a week on the farm, and on the stoves whenever the clay and earth mixture is ready. They work three days a week in all, in the morning or afternoon, but not both. They also pick sheanuts, and sell them to the Cocoa Board as a cooperative venture.

Complementary Inputs: ADRA furnishes pipe to vent the stoves to the outside. The project also has a coordinator, who is a civil servant in the Department of Cooperatives. He works in the village 2 days a week, helping with the cookstoves and teaching the women about cooperatives and small enterprise development.

Project Selection: ADRA's Agricultural Coordinator visited the village and explained the process for making the stoves to the women who were attending the clinic. There was interest in doing the project among the women. The project coordinator was also interested, apparently in part because he is from the village. He was able to obtain support from the Department of Cooperatives.

Recipient Selection: Selection of recipients was not done in a particularly systematic way. When the project was explained to the women of the village, all were asked to raise their hands if they were interested enough in the project to gather the materials to make their own stove (and also presumably were willing to work in the tree planting project and on the rice farm). More than twenty indicated interest. The project coordinator listed all of the names of interested women, and later selected those twenty who had collected their materials and were enthusiastic about doing the work.

Use of Food Aid: The women who work on the project get a take-home ration. Each woman working on the project gets a third of a bag of rice, half a bag of wheat and a gallon tin of oil. The ration is distributed monthly, and began arriving in July, 1988. Initially, they cooked the food on site, but after one communal meal they decided to take their rations home instead.

Other Comments: One of the women who was interviewed by the evaluation team

estimated that the use of her stove saved her about four hours every time she goes for wood, which she does every three or four days. So the use of her stoves saves her six to eight hours a week. The women also indicated that they would not disband their group after this project (and the food) is completed. They want to expand their cooperative farming activity.

Case Studies

Golokwati, Volta -Tree Planting Project, with Bricks and Tile Factory

Project Outline: This project, operated and staffed by the community, involves three related components: a tree planting project to be used as a source of firewood; a brick factory that currently uses firewood gathered locally, but which will ultimately use wood from the tree farm; and a vegetable garden planted on the site for the workers. The clay to make the bricks was discovered by a villager who used to work for the government and knows about clay deposits. He did a feasibility study on the use of the clay and determined that the bricks produced would be of marketable quality. The community first built the kiln, and began making bricks to sell on order from various local builders. They sent several of the workers for training in brick manufacturing. Their first several large orders for bricks resulted in a very difficult situation. They had contracted on one order to produce 4,000 bricks by a certain time. But the work is done by hand and is very slow, and the kiln has limited capacity. They realized that they would have to work long hours, and ultimately would lose money on the venture. Only community pride enabled them to meet the deadline.

Since those early experiences, they contacted ADRR, which is now supplying them with food for their workers, and is helping them with the tree planting. They are also building another kiln, which will more than double their current 3,000 brick capacity. They also hope that they will be able to buy some machinery that will significantly reduce the most labor intensive part of the work, pounding the clay, which has been the main cause of slow output and high labor costs. When they have the machinery, the project will be cost effective.

Complementary Inputs: Tree seedlings are the only outside cost of the project; the bricks are made from the clay dug on the site, and the kiln is made from the bricks. The machinery will be acquired as they build up a reserve of funds from selling the bricks.

Project Selection: The village developed the project on its own, later seeking help from Social Mobilization, which referred them to ADRR.

Recipient Selection: The project is run like an industry. Workers are asked to apply, and are "hired" based on their skills and willingness to work. Some of the workers have been sent elsewhere to learn the finer skills of brickmaking.

Use of Food Aid: Food aid is used, in effect, to lower the cost of production of the bricks. If the project had to pay cash to the many workers required to pound the clay, the project would be economically infeasible. The supervisor, who is a villager appointed by the chief, indicated that he could not get volunteer labor to do that part of the work, and that the food aid is enough incentive to keep enough workers to get this part of the work done. Food aid is clearly a temporary measure, to be used until the village has the resources to buy the machine that processes the clay.

Other Comments: The chief indicated his strong support for the project, seeing it as a source of employment for the village, and as a way to avoid

losing the young men of the village who currently migrate to the urban centers to find work.

Other organizations have expressed interest in this project. PAMSCAD is interested in establishing it as a kind of model of how local income generating projects might be developed. Social Mobilization is also interested in providing support. The Integrated Community Centers for Employable Skills (ICCES), which is part of the Non-formal Education Department of the Ministry of Education, might also provide support by paying a salary to the supervisor. ICCES would also like to designate Golokwati as a model village.

Case Studies

Kongo, Northern Region - Crop Farming (Christian Mothers' Association)

Project Outline: The project began as a result of the women of the village wanting to expand the communal activities of their Association, which had for some time operated a kind of "savings club" to provide a fund that could be used for no-interest loans to its members for personal expenses, and interest-bearing loans to members for business expenses (since most of the women are traders). There are now more than 100 members. The project that they decided on was a 10-12 acre crop farm, where they plant millet, groundnuts, and sometimes maize on land that they borrowed. They have been operating the farm since May of this year. At the start of the project, they borrowed a tractor and split into two groups to do the work. Since starting, they have had to form another group to accommodate all who wanted to work. They claim to be able to do 30 acres if they had their own tractor. The project has the strong support of the local Catholic priest, who provides meeting space and encouragement to the group.

Each of the women contributes whatever she can to the Association, which has two funds, one for the savings club and one that is used to buy seeds for the farm and pay for the transport costs of getting the food to the site (two women are deputized by the group to do this, at a cost of about 100 Cedis a bag for the lorry hire). The women manage the farm proceeds, which are kept under lock and key by the priest. They also have a bank account, where they keep their own loan funds that are generated through collection and minor interest charges on the loans.

With the proceeds from the farm, the women hope to build a Junior Secondary School, which they chose because it's "nice for all of us to have more educated people like me," according to a school teacher who also works on the project.

The women work three days a week, two in slack periods. They schedule the work every three days, and usually work all day during the days that they work, stopping for a communal meal that is prepared on site.

Complementary Inputs: The women buy what they need to support the project through their own resources. The inputs needed are small, seeds and salt and pepper to cook the communal meal.

Project Selection: The Christian Women's Association has been in existence for a long time, one woman interviewed thinks about seven years. The idea for a crop farm came about during an informal meeting after church one Sunday, when a group of the women were talking with the priest. The farm began through this local initiative, with ADRA coming in with food some three months later.

Recipient Selection: Virtually all of the women in the village are members of the Association, and virtually all work on the farm.

Use of Food Aid: The project has been receiving food since August. They have now had two shipments, each comprised of 20 bags of rice, 30 bags of wheat and 50 gallons of oil. Food is prepared on site to provide a mid-day meal for

the workers. Any left over food is distributed according to how much work each worker does on the farm. They have only distributed a take-home ration once. The workers estimate that the food aid makes it possible to work longer hours, and to attract additional workers to the farm.

Other Comments: The men in the village do not oppose the women. They seem to like what the women are doing, and some even want to join in. When the women are working on the communal farm, the burden for much of the other work that they have to do shifts to their children. Most of the women also have farms of their own. According to the women interviewed, the communal farm work does not interfere with their own farm work.

Several of the women interviewed indicated that the food aid that they get helps them to save a little money. One woman interviewed indicated that she saves the money for possible hospitalization, clothing and to buy millet.

This project is in an area that appears to have a food deficit, particularly during the hungry season from November to June, depending on the rains. When asked if her family sometimes doesn't have enough food during the year, one respondent said that her family just has to suffer when there is no food.

Case Studies

Gushiegu, Northern Region - Women's Cotton Farm Project

Project Outline: The project developed out of a meeting that the local mobilization office had with the village, a meeting arranged by a "Liaison Officer" who lives in the village. The discussion centered on ideas for income generating projects that could be done communally. Apparently, none of the women in the village were involved in these early discussions, during which it was decided that a cotton farm run by the women would be a good project (The obvious conclusion is difficult to avoid - this is a women's project imposed on the women by men). Nonetheless, the women have taken on this work, which now involves about 350 women, who are segmented into three working groups. Each group has a supervisor, who is chosen by the group. In addition to the cotton, the fields are planted with sheanut, which they also tend and harvest for the oil and income.

They have received food from ADRR twice now, which they divide among the women who come to work on the field. Many of the women cook the food at home and bring it to the field with them. Others take the food home, and some cook on site. The women travel to Tamale to pick up the food, rotating the responsibility for this chore among the three groups. The last group who picked up the food paid 18,000 Cedis to hire a truck. The cost of transport was met by collecting 300 Cedis each from among the workers.

In addition to the supervisors, the group has a treasurer to manage the money taken in from the contributions, and to sell the cotton to the Cotton Board. As a group the women will decide on how the proceeds will be spent.

Many of the workers work in the field every day. Currently, the weeding has required extra workers, who have been hired by the women to help. The group hired eight men, at 400 Cedis a day to do some of the work. The workers are paid out of the contributions that the women make.

Complementary Inputs: The women buy what they need from their own resources. There apparently are no other inputs contributed by other organizations.

Project Selection: This is the area where this project fails the development test. Looking at the fields, there is no doubt that the women have taken over this project and made it work for them. However, the project was identified by the men, who take no part in it, except for the men who work on it for a "By Day" wage (which is 100 Cedis above the usual rate in the area).

Recipient Selection: There is no selection - any woman in the village who wants to work on the farm is encouraged to do so.

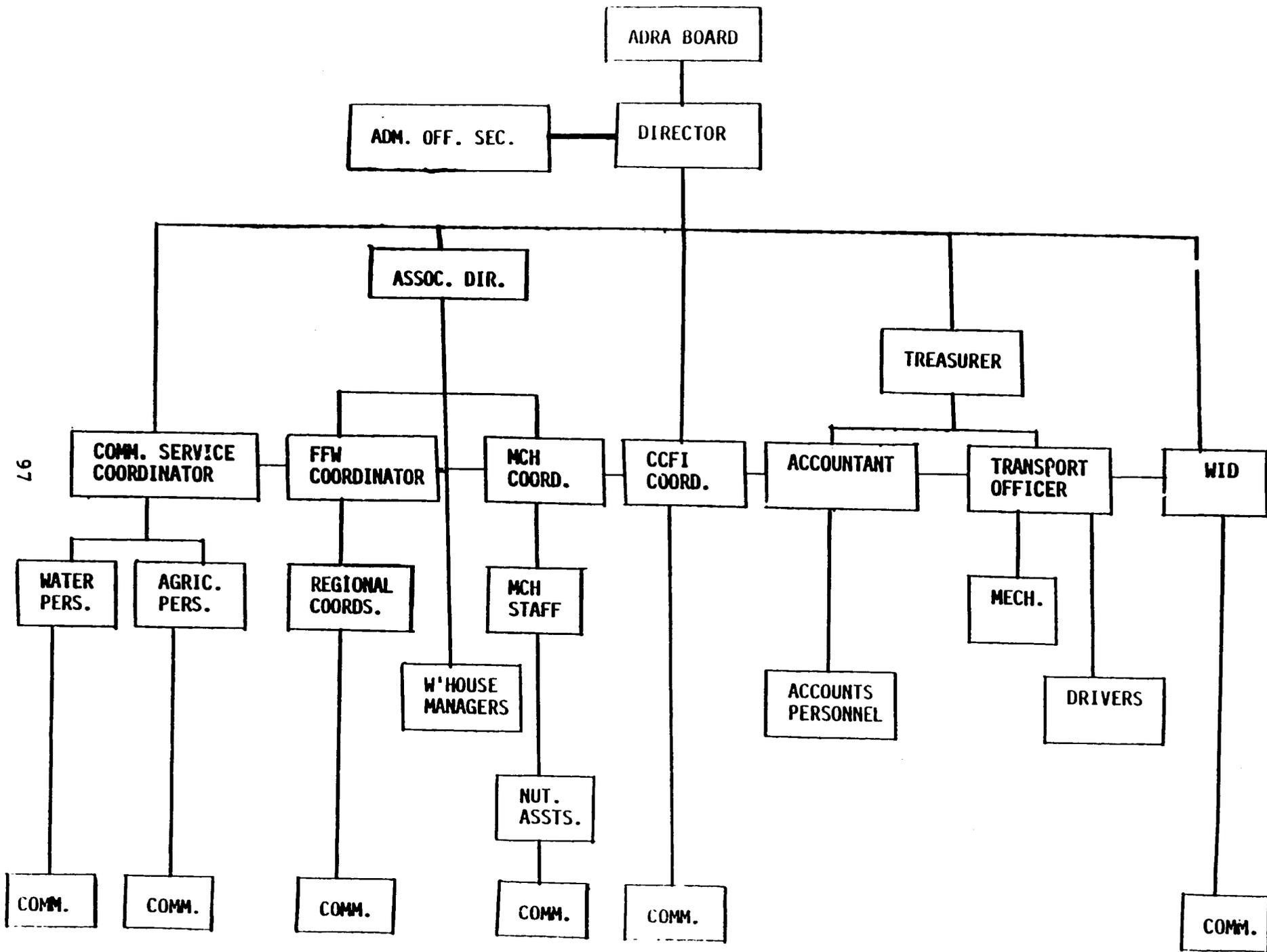
Use of Food Aid: They have had two shipments of food, in the usual quantities (20 bags of rice, 30 of wheat and 60 gallons of oil). The food is measured out using a bowl to the workers by their supervisor, who receives a third of the allocation by the women whose responsibility it was to pick up the food. The women interviewed indicated that the food was important because it enables them to work longer than they used to before they had the food.

Other Comments: This project is in a very dry area of the Northern Region, where cotton seems to grow well. It is also an area known for its local cotton spinning and weaving. One of the women interviewed thought that the cotton grown by the women would be used locally for spinning and weaving. This response was at variance with the others interviewed, and would indicate a departure from government policy, which requires that all cotton produced must be sold to the Cotton Board.

Another women interviewed, a supervisor, indicated that she does plant less on her own farm because of the demands of the cotton farm. In addition, however, she said that as she gets older she plant iess. Her brother takes some of the workload of her farm when she is working in the field.

Appendix E ADRA Organizational Chart and Project Guidelines

ADRA/GHANA'S ORGANIZATIONAL CHART



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ADVENTIST DEVELOPMENT & RELIEF AGENCY
(ADRA/GHANA)

P.O. BOX 1435, ACCRA

GUIDELINES FOR FOOD-FOR-WORK PROJECTS

The Food-for-Work programme aims at promoting improvement in the socio-economic status of communities by providing commodities to support the unemployed and underemployed workers offering voluntary labour on agricultural, health and sanitation, educational and community development projects.

1. TYPES OF FOOD-FOR-WORK PROJECTS

A. Agricultural Projects

1. Projects in this area include Community Co-operative projects with the sole purpose of raising funds for additional community development projects:

- Crop Farming
- Reforestation
- Palm Plantation
- Citrus "
- Coconut "
- Castor Oil "

2. Agricultural Projects that would benefit from this programme are those that benefit the general public rather than private individuals. Participants must be unemployed/underemployed local workers for all Food-for-Work projects.

B. Community Development Projects:

1. Desirable Community Development Projects are those which improve the social life of communities. Such projects include:

- Construction of water production and control projects such as wells, reservoirs and ponds
- New construction of school buildings in villages which do not presently have school facilities
- Community Markets
- Construction of Community centres, post offices and other social facilities.

C. Educational Development Projects

1. Educational development projects which qualify for Food-for-Work commodities are those which improve the self capability of individuals such as:

Vocational training and retraining courses (especially in agriculture and fishing).

2. Commodities are used as an incentive to participate in educational development projects. Persons of low-income status are normally the recipients and they should meet regularly under the guidance of qualified instructors.

D. Health and Sanitation Projects

Such Projects include:

- Instructions in responsible parenthood, nutrition, child care, personal hygiene, home sanitation, control of rodents and insects, control and eradication of diseases
- Construction of community health posts or clinics.

II. GENERAL INFORMATION

A. In all cases, commodities are given as payment/incentive for work performed for each day of participation which is to be an average of 20 days per month. Food given is based on stipulated

- rations per participant per month.
- B. Commodities used in these projects are being made available by the people of the United States of America as a gesture of goodwill.
 - C. Commodities are distributed free of charge and are therefore not to be sold or exchanged. A token fee is charged for food containers such as bags, cartons and gallons and also for transporting the food to the warehouse.
 - D. Acceptance of projects is without prejudice to tribe, religion or regional location of both participants and projects. Projects conforming to ADRA/GHANA requirements would, be accepted as long as commodities are available.
 - E. A maximum of 60 workers is allowed per project and a maximum period of six months is allowed per project.
 - F. Requests for projects based on private lands must state clearly the extend of public benefit.
 - G. These guidelines are subject to change.

II. METHOD OF APPLICATION

- A. An appointed representative of your group or community should collect application forms from the ADRA/GHANA representative at the following addresses:

GREATER/EASTERN REGION

The Regional Co-ordinator
ADRA/GHANA
P.O. BOX 1435
Accra
(Office: Readers Press, near Piccadilly Biscuits,
(Light house) High Street, Accra.)

ASHANTI REGION

The Regional Co-ordinator
ADRA/GHANA
P.O. BOX 480
Kumasi
(Office: SAT, near Kejetia, Standard Bank, Kumasi)

NORTHERN REGION

The Regional Co-ordinator
ADRA/GHANA
P.O. BOX 74
Tamale
(Office: Rice Production Warehouse Industrial Area)

UPPER EAST REGION

The Regional Co-ordinator
ADRA/GHANA
P.O. BOX 79
Bolgatanga
(Office: Rice Production Warehouse Bawku Rd)

UPPER WEST REGION

The Regional Co-ordinator
ADRA/GHANA
c/f S.D.A Church
Wa
(Office: Dist Admin Yard Wa, near the roundabout)

VOLTA REGION

The Regional Co-ordinator
c/f S.E.A Church
Ho
(Office: Tsitso, near Ghana Commercial Bank)

BRONG AHAFO REGION

The Regional Co-ordinator
ADRA/GHANA
P.O. BOX 615
Sunyani