

ABSTRACT

The commitment to the premise "food as a right" is the result of a political decision. This attitude was present in Chile from 1970-1973 and in Tanzania after independence. Real commitment explains why these governments often overlooked western criteria of decision making when social advantages were seen in investing in human capital as a strategy for development. Economic development is understood by committed governments as being different from economic growth, and an increase in the GNP (with its unequal distribution) is not necessarily their ultimate goal. The attitudes of both governments are explored here, comparatively in terms of policy options and program implementation. The analysis focuses on the relevant policies implemented and problems encountered in both countries, in order to suggest the extent to which the theoretical tentative solutions, described in the literature, as desirable, may have been achieved.

THE CHALLENGE OF FEEDING THE PEOPLE:  
CHILE UNDER ALLENDE AND TANZANIA UNDER NYERERE

Claudio Schuftan  
Dept. of Nutrition  
Tulane University  
School of Public Health  
1430 Tulane Avenue  
New Orleans, LA 70112  
U.S.A.

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I. THE CONCEPTUALIZATION OF MALNUTRITION  
AS A PROBLEM AND ITS EFFECTS ON NUTRITION

POLICY FORMULATION: A REVIEW OF THE LITERATURE

Traditional analyses of the causes of malnutrition have a fundamental bias which focuses on the characteristics of the malnourished rather than on the effects of the larger social order on health and nutritional status. Most analyses view malnutrition as a technical, biomedical problem and, consequently, nutrition standards lose significance as criteria against which the performance of other sectors of a country's economy and/or the outcome of its economic development policies can be measured.

Nutrition interventions that have most frequently been implemented tend to be narrow in scope and aimed at changing or "treating" these characteristics of the malnourished. Typically these interventions have included programs in the areas of: nutrition education, new foods and food fortification, child feeding, health and sanitation, subsidization of agriculture and food production, and improvement of marketing channels.

These interventions have several important common features: They require no significant change in the distribution of income or wealth in a country, no change in the consumption habits of the well nourished portion of the population, and no shift in economic development strategies or priorities. They are also directly related to the way in which decision makers conceptualize the malnutrition problem. Accordingly, these interventions

are the ones that can be added to any given array of government services without any reorientation of existing social and/or economic policies. Further, since the major nutritional problem in the world tends to be a caloric deficit or hunger problem, our technological ability to correct a single nutrient deficiency or to offer instruction in food preparation hardly addresses the root causes of the problem.

This traditional approach to the nutrition problem focusing on the individual and his immediate (often medical) problem, without giving much consideration to the search of the underlying causes of the problem most often overlooks causes found in such apparently unrelated issues as the end of colonialism, the emergence of political and economic dependency, rapid urbanization and population growth. (1) These events played vital roles in the historical development of malnutrition in third world countries. For example, during the 50's and 60's, when the focus of economic development was almost solely on economic growth (2), government investments were aimed at industrialization rather than at the "human capital producing sectors" and any investments in the agricultural sector were usually devoted to cash crop production, with resources channeled to large landowners. Consequently, the poor suffered decreased availability of food, nutrition problems worsened and nutrition interventions were required. These interventions were usually single-faceted attempts which dealt with only one aspect of the malnutrition problem at a time. While interventions such as school feeding programs were aimed at "treating" malnutrition

on an ex-post basis, they did not really address its causes.

In contrast to this approach to the nutrition problem, others suggest that malnutrition is to be thought of as a biological translation of socioeconomic, cultural and historical phenomena, being a social disease "par excellence" whose elimination requires a change in a country's entire social, economic and political organization and choice of development strategy. (3)

Those who accept this more wholistic approach contend that there are many factors that contribute to malnutrition. First, they point out that the nutrition problem is related to national macro economic policies which emphasize growth in aggregate GNP even with concomitant maldistribution of income. Agricultural policies in many LDCs have, for example, resulted in skewed income, as well as, in decreased aggregate food production. (4) Second, given that both political power and economic wealth are highly concentrated in many countries, those with wealth and power exert their influences on the political leadership to promote traditional interventions aimed at partially alleviating some of the manifest social problems such as malnutrition. By doing so their basic interests are not threatened or challenged and, on the other hand, the leadership cannot be accused of unresponsiveness or neglect. Further, given the above described scenario, few chances and incentives exist for conscious political leaders to address the nutrition problem in any other but the traditional way. (5)

Finally, some authors argue that a social revolution is the only mechanism that can bring about the profound structural, attitudinal and behavioral changes necessary for dealing with the underlying causes of malnutrition. (6) Planners with a "progressive" perspective, first point out that better nutrition as a goal must become an integral part of national development goals and policy. In such a context nutrition can no longer be defined as only an agricultural or a human resource development problem (e.g., education or health). (7) However, experience shows that even when nutrition problems are appropriately prioritized in a country's national set of objectives, the formulation of nutrition policy must emphasize both demand and supply problems. Traditionally, planners focused on supply side issues without adequate attention to the heart of the problem, mainly, the need for the poor to achieve a minimum income or purchasing power that would allow them to acquire the amounts of food necessary for the maintenance of minimum nutritional standards for their family members. (8) If a more adequate purchasing power could be achieved, most of the deleterious effects of malnutrition could be prevented, rendering many of the public health nutrition programs that at present seek to ameliorate malnutrition, unnecessary. (9) Further, by drawing their attention to the effect of income levels on nutritional status, policy makers will be focusing on the larger underlying income distribution and employment generation issues in their search for solutions to the nutrition problem. (10)

In summary, it seems that successful implementation of nutrition intervention policies will continue to rest on both an appropriate philosophical stand towards the causes of malnutrition, which is to be translated into a progressive political orientation, as well as, a development strategy designed in part to accelerate employment among the poor. Also the development of a "reasonably dynamic agricultural sector" seems of highest priority for such an approach. Finally, a modicum of food aid for several years will probably have to be invested to assist the implementation of both long run supply and demand side policies in third world countries.

Nutrition projects in and of themselves are neither capable of affecting rates of development nor can they alone significantly reduce malnutrition in low income countries. Such contentions by nutrition advocates can result in a net social disservice by overstating what nutrition programs can truly accomplish. (11)

## II. THE CHALLENGE OF FEEDING THE PEOPLE:

### HOW IT HAS BEEN ADDRESSED

#### A Comprehensive Package Approach

The role of multidisciplinary interventions in nutrition is best understood by analyzing the sequence through which food is produced, distributed and consumed in a country or region. Figure 1 depicts the Food Chain or Nutrition System and shows how foods "flow" from where they are produced to where they finally contribute to the nutritional status of an individual. A number of variables that affect the different stages of this chain are shown under each link, thus facilitating the identification of bottlenecks in the smooth "flow" of foods to the consumer. In essence, Figure 1 presents a summary of the multiple ways in which social, political, economic, medical and biological forces work together to affect nutritional status. Hence, the need of multidisciplinary interventions to overcome various potential bottlenecks in the food chain becomes apparent.

If a government is truly committed to the improvement of the general welfare of its people, it will adopt a set of interventions which together will facilitate the flow of foods from left to right in the chain, making adequate amounts of foods available for consumption by all those who need them. However, given that the flow of food and its ultimate utilization can be blocked by a number of factors, as highlighted in Figure 1, the planner should use the food chain diagram to foresee the constraints that can be expected when intervening in the area of nutrition. When an intervention is indicated, it must be defined comprehensively

and integrated to an overall policy, thus lessening the chance for secondary bottlenecks to emerge as limiting factors after a primary constraint has been removed. (12)

Further, Figure 1 is also useful in showing why single nutrition interventions have only a limited potential of affecting the nutritional status of vulnerable groups. For example, given the complexities of the system, increasing food availability may be futile if a significant proportion of the population has impaired food utilization capabilities due to diarrhea, parasitism and/or chronic diseases. It is generally estimated that up to one-third of the already scarce amounts of calories consumed by preschool children in the urban slums during the summer months are lost due to seasonal diarrheas. Parasites, often endemic to the poor, and tuberculosis, not infrequent in the pediatric age in poor countries, also account for significant nutrient losses and higher overall nutritive demands on these children. The nutritional priority in such cases would be the treatment of those conditions rather than an effort to first increase food availability.

Similarly, a low effective demand for food can forestall net increases in food consumption even if supply is increased. If the poor have no effective purchasing power, are unemployed or underemployed and are already spending a maximum proportion of their limited income in the purchasing of food, none of the additionally available food will reach their families' tables.

Finally, one can also visualize better how agrarian reform, if not accompanied by a set of infrastructural, technical and

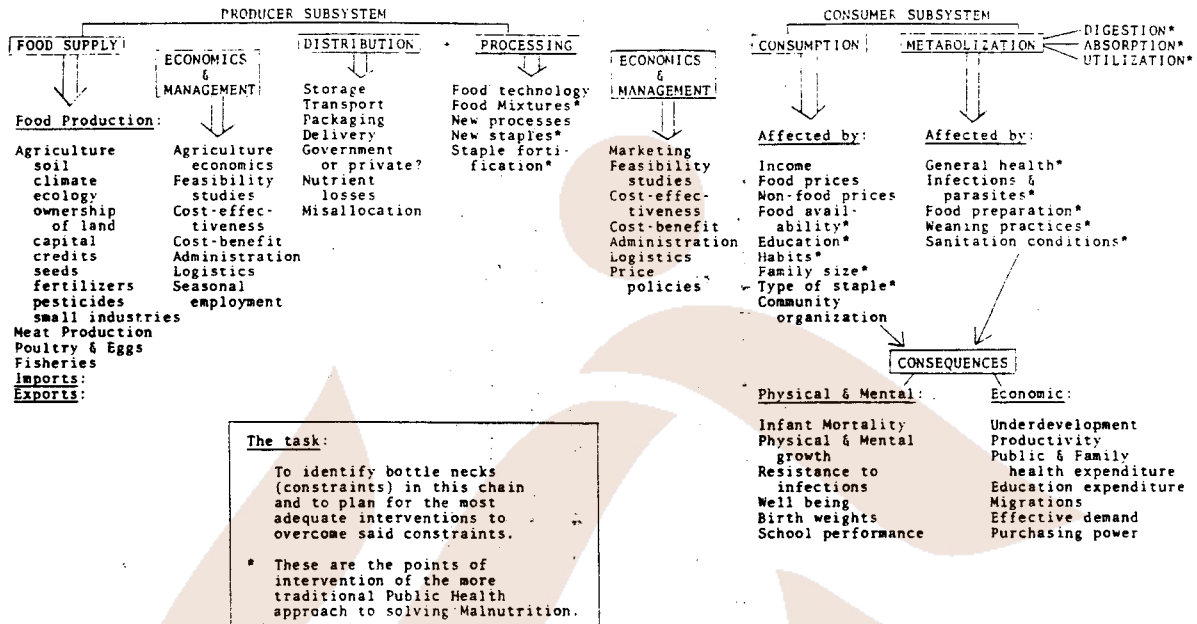
financial supports, as well as by new patterns of peasant organization, may not lead to improvements in nutritional status. Agrarian reform can and should have a positive impact on the nutritional status of the population. This implication is based on a number of premises, among which we could mention the following:

- It is expected that more land can be brought under efficient cultivation, in the long run.
- The small, labor-intensive units created should be more productive than the previous, bigger, capital-intensive units.
- The cooperative principle behind agrarian reform should lead to savings in inputs and marketing costs.
- A partial shift from cash-crops to food-crops is expected to happen, since each reformed unit should be as self-sufficient in food as possible and since the process of agrarian reform will put the decisions about production goals more in the hands of the peasants, the actual hungry sector of the population in most of the cases.
- The process should create new rural employment sources, directly (in agriculture) and indirectly (related services and other production units in an overall rural development effort).
- Subsistence agriculture, marginal to the country's economy, should tend to disappear.
- Introduction of long and short-term agricultural planning becomes possible, doing away with the old, often irrational, patterns of agricultural exploitation.
- Savings in hard currency can be expected in the not too long run, due to a decreasing need for food imports.
- A bigger proportion of the agricultural revenues than before is expected to be reinvested back into agricultural development.

All of the above premises, plus others that may have been omitted, are supposed to converge to probably two central objectives. The first objective would be to increase the overall national food availability at more affordable prices, and the second would be to reallocate the revenues of such an increased food production in such a way that a bigger proportion than before returns to the producers, therefore, actively incorporating the



FIG #1: FOOD CHAIN (NUTRITION SYSTEM) (1)



(1) Sources: Schuftan, C.; Ozerol, N. and Carter, J. "Nutrition Planning Manual," MCH/FP Center, Meharry Medical College, Nashville, Tennessee, (Mimeo), March 1977. "Planning National Nutrition Programs: a suggested approach," Volume 1 - Summary of the Methodology, Office of Nutrition, Bureau for Technical Assistance, Agency for International Development, January 1973.

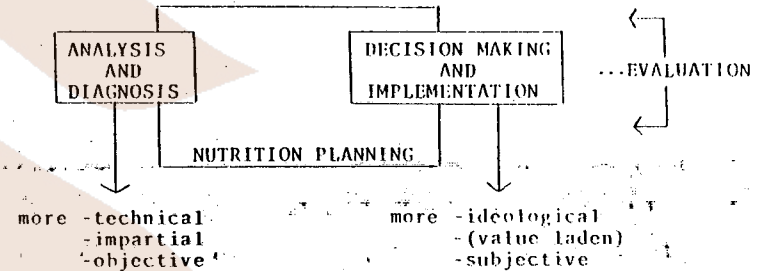
peasants to the nation's economy. Both these objectives clearly explain why the initial statement was made, that an agrarian reform should be an important part of a comprehensive package to fight hunger and malnutrition in most underdeveloped countries.

### Nutrition Planning and its Implications

Nutrition planning has been identified by a number of international agencies as a rational and viable multisectoral approach to solving the problem of malnutrition. It should be understood, however, that nutrition planning is only a tool. Like any other planning tool its usefulness directly mirrors the priorities and objectives of the governing decision makers and/or planners. Consequently, nutrition planning can be used to rationalize technical decisions regarding traditional, nutrition interventions. To the contrary, nutrition planning can also be used to demonstrate how long run solutions to the malnutrition problem must also encompass change in the larger social structure. (13)

In order to show how such different interventions can emanate from the same planning process it is instructive to disaggregate and analyze the nutrition planning process. Nutrition planning may be seen as the fusion of at least four activities besides evaluation--analysis, diagnosis, decision making and implementation. The first two activities are traditionally more technical and objective, while the third and fourth activities involve ideological considerations, with technical competence playing only a secondary role at this stage. These four components of the nutrition planning process are schematically presented in Figure 2 and show the integration of the technical and ideological aspects.

FIG #2: The Integration of Nutrition Planning Activities:



Nutrition planning is, therefore, a technique with inherent political implications, especially when one must choose from alternative program implementation strategies. (14)

Given that there are both technical and ideological steps involved in nutrition planning, different nutrition planners may recommend different actions based on almost identical analyses and diagnoses of the problems. Therefore, it is not expected that a country can learn "what to do" and "how to do it" from nutrition planning per se. Definition of priorities, enunciation of clear overall social objectives and some level of commitment must come first. Only then may nutrition planning be of help as a tool.

Finally, it is important that nutrition planners realize that, if a country is committed to solving its nutrition problem, it can probably do so with or without nutrition planning. There is no doubt that once specific bottlenecks are identified, a number of interventions in the field of nutrition will need to be technical.

However, until larger social and economic constraints are removed, technical and biomedical approaches to the problem will not produce a long run solution to a country's malnutrition problem.

Ideological commitment to equitable income and asset distribution and education may well compensate for a lack of sophisticated "nutrition planning", though the latter usually receives accolades for being systematic and technically sound, and consequently may be used to attract external financial support. The experiences of China and Cuba are probably the best to keep in mind in this respect. (15) Their success in fighting malnutrition contrasts sharply with the results observed in most third world countries who have unsuccessfully tried to face similar problems, despite the often massive financial aid received for the planning of nutrition related interventions. (16)

The comparative case study that follows examines two countries that demonstrated commitment to comprehensive non-traditional nutrition programs. The comparison highlights both the political and technical constraints faced by both Chile and Tanzania in implementing their overall development strategies. Tanzania is used as an example of a country where the constraints have tended to be more technical than political, whereas Chile, during the three years of the Allende government (1970-73) is used as an example of a country where the major constraints were clearly more political than technical.

### III. NUTRITION INTERVENTION IN CHILE AND TANZANIA:

#### TWO PERSPECTIVES OF A SHARED COMMITMENT.

The comprehensive set of programs considered and implemented in Chile and Tanzania to deal with nutrition problems can be analyzed using the Nutrition System diagram (Figure 1).

Both governments attempted to address the socioeconomic, cultural and technical determinants of malnutrition, by intervening with a set of policies and programs designed to quite radically change the many sectors of the economy.

#### The Case Study (18):

The notable common features of commitment seen in both Tanzania and Chile's efforts in nutrition intervention are: that both countries developed an interwoven set of interventions to reshape the patterns of distribution of wealth, in conjunction with a number of more specific measures to improve the nutritional status of the population.

A dominant philosophy in both countries was that specific nutrition interventions, as well as health interventions, should serve as complements to other larger socioeconomic interventions. For example, increasing health services availability to mothers and children and by providing nutritional services, Chile and Tanzania were simultaneously focusing on both consumption and utilization variables in the consumer subsystem shown in Figure 1. Similarly, both countries engaged in major agrarian reforms in an effort to (1) improve urban-rural income distribution, (2) increase the supply of food, and (3) improve food distribution channels.



It is useful to delineate the overall set of interventions that Chile and Tanzania attempted to implement into four primary policy areas. Some of the specific programs that were launched in each of these policy areas are listed and described in Table 1.

The four primary policy areas are:

1. Income related policies (direct and indirect income redistribution strategies and purchasing power improvement strategies)
2. Agrarian reform and accelerated rural development;
3. Employment generation; and
4. Government democratization and decentralization (increased popular participation in decision making, regulatory activities and the overall political process). (19)

These four primary policy areas attempt to achieve nutritional goals by increasing food supply and food demand as a means of increasing the availability of food to the underfed sectors of the population. The income-related policies tended to increase the purchasing power of the lower income groups, allowing them to compete more fairly in the market for the acquisition of food; this also was intended to create a pull on the food demand side that would later provide an incentive for agricultural production. Agrarian reform, of course, primarily focused on efforts to increase agricultural output (supply side) by giving the people control over their food-producing resources and by helping them technically to achieve the production goals set. Rural development, linked to urban and rural employment generation policies, were two of the additional means attempted to create new income opportunities for

the people. An increase in the purchasing power for the poor was attempted, knowing that food has a high elasticity of demand at those income levels. Government democratization and decentralization policies had an impact on both food supply and demand, as well as on the prevention of food losses, food hoarding and malnutrition. Through participation of the people in the running of their agriculture, health, education and the economic and political processes of the country, a number of instances were created where people could exert social and political pressures to get corrective nutrition interventions under way. The attempt at decentralization in the decision-making process was also a means, both in Chile and in Tanzania, to allow for more participation. In the rural areas, this also meant more peasants' inputs in food production planning and an attempt to <sup>promote</sup> some sort of self-government in the Asentamientos and Ujamaa Villages. Food distribution in working class areas of the cities, under conditions of food scarcity, as occurred in Chile, was another area where consumers' participation played a vital role (see JAPs in Table 1).

It is a socially oriented political ideology which enabled Tanzania and Chile under Allende to define the multifaceted problem of malnutrition broadly, in a way that a comprehensive set of specific policies were proposed. The willingness and determination to implement them throughout the country lead to a degree of intensity in which the government's commitment was not only believed by the population, but also made a measurable difference in the lives of the poor. (20)

Differences do exist between both countries and it is important to discuss them. Perhaps most ostensible is the fact

that each country's experience occurred and was faced with different time horizons in which to show results. The Chilean experience was telescoped into a short three year period, whereas the Tanzanian experience is almost eleven years old and continuing. Further, each country started out facing different initial conditions prior to their socialist experiences. It is mainly these different conditions that explain the often different results observed, given similar interventions. The following are important differences between the two countries which directly influenced the outcome of implemented policies:

- Tanzania is predominantly a rural society, whereas Chile is a more urban, industrial society (import substitution industry). Therefore, Tanzania heavily emphasized the gathering of their rural population into new villages, emphasized increasing rural income and made an all out effort to provide basic services as health and education to the new rural communities; such a strategy directly and indirectly exerted an effect on the feeding of the rural majority. Chile, on the other hand, established an across the board differential wage increase that mainly favored the low salaried groups in the cities, increased the minimum peasant wages and fixed and subsidized prices of basic staples as a means expected to improve the feeding of the most needy.
- Chile had a long tradition of "conventional democracy" and trade-unionism which led to legislation with considerable social guarantees; Tanzania only recently had gained independence, thus discarding a submissive colonial political

structure. In this context, Chile was able to more readily increase welfare and social security benefits and to more drastically deepen already existing programs, like the Milk Distribution Program and the School Feeding Program, than was Tanzania which often had to begin interventions from scratch. The mental preparedness and overall combativity of the organized Chilean working class helped in backing the Popular Government in these actions which, again, had the potential for affecting nutritional status positively.

- The political cohesiveness of the countries upon the inception of their revolutionary programs was quite different. Nyerere emerged as the unchallenged leader of a country unified by the hopes of independence and he remains so today. Allende, however, was elected in 1970 with only 36% of the total vote and the Unidad Popular never had more than a 51% electoral backing at any time. The latter, explains the different types of resistance encountered (political and economic) in the implementation of each country's strategies to combat malnutrition. This point is explored in more detail later in this paper.
- Chile was by far the "more developed" country in 1970. Its bureaucratic infrastructure already covered most of the national territory and its per capita income was perhaps six times as great as Tanzania's. However, though more wealthy than Tanzania, Chile's employment-increasing options were perhaps as circumscribed, since capital requirements for creating new jobs in urban areas were very binding. Malnutrition was probably less rampant in Chile at the beginning

of the Allende Government than it is in Tanzania even at present. To begin with, a higher average purchasing power of the Chilean workers and the absence of acute disruptions in the food production cycles (i.e. drought) probably account for this fact. The task of combatting malnutrition, nevertheless, was not less of a priority for the Chilean authorities in 1970. The Milk Distribution Program, a cornerstone of Chile's attempt to overcome malnutrition, could only have been conceived and implemented given the already existing widespread network of urban and rural schools and National Health Service clinics. The logistical problems of food distribution were also much easier to overcome in Chile than in Tanzania. All this was bound to have an influence on the nutritional impact of implemented policies, at least in the short run. In other words, the bureaucratic infrastructure, in both cases, were (or are) a must for fuller program implementation and therefore, influenced policy choices and priorities in the battle against malnutrition.

Land ownership patterns were radically different in the two countries. High concentration of land ownership was prevalent in Chile until the late sixties. Tanzania did not have the same difficulties in breaking up such a structure after its initial phase of decolonization. Further, until the combination of the drought during the early seventies and short run production problems related to the completion of the villagization program, Tanzania was able to be largely self-sufficient in food. Chile had long been a net importer of food. An importer, because agriculture in the last decade

had been growing at a slower pace than the population was growing, this fact being clearly linked to an inefficient and inappropriate exploitation of agriculture by big landowners (latifundistas) who preferred low yields and high prices over higher yields and lower prices, at equivalent profit margins. Agrarian reform, in Chile, was the only logical solution to this inherited bottleneck to better and cheaper nutrition. Breaking up the existing structure was a task already initiated before the Unidad Popular years, under the government of President Frei. Allende only drastically accelerated the land redistribution, not without facing numerous problems. Overall production and productivity did not go up so promptly as expected, explaining some of the nutritional hardships suffered in the country by the poor towards 1973, especially the black market (see Section V). Tanzania inherited a completely different rural situation after independence: namely, a scattered rural population, often nomadic, with tribal land ownership and a very inefficient small-scale, subsistence agriculture. In summary, a situation impossible for the government to cover, if, as also in the case of Chile, an increased agricultural production of staples was to be an important component of a national strategy to combat malnutrition. Villagization was the logical solution and response to the Tanzanian bottleneck of food production. Here, again, it is clear how these differences affected pertinent policy making when both countries were striving for the same goals (nutritional in our case).

-Finally, international financial support, although not a pre-existing factor, played a key role in the success of the policies intended for implementation in both countries. Tanzania, in the face of increasing balance of payments deficits due to deterioration of the value of their exports and the high price of oil, was always able to attract international support for its development plans, particularly from the World Bank and the Scandinavian countries. Chile, like Tanzania, was dependent on export receipts and was vulnerable to foreign currency availability; regular foreign trading, as well as international credits were essential for its economy to function. In contrast to Nyerere's Tanzania, Allende's Chile was boycotted by international financial aid institutions and the Unidad Popular was consequently faced with insurmountable financial barriers. (21) Many contend that it was this financial strangulation that thwarted Chile's overall development efforts and prevented its human resource development programs from finally succeeding. This difference in the ability of attracting short-term external financial support, linked to the need of food imports stated before, needs no further detailed explanation on how it was bound to affect the feeding of the people, especially in the case of Chile towards 1973.

Many differences between the Tanzanian and Chilean experiences stemmed from the different cultural, historical, and economic backgrounds of the two countries. These differences are important to keep in mind when judging the achievement of intermediate goals and objectives, because results and advances have to be measured against

the specific and different variables at the time of departure in each case. Objective achievements can unjustly be considered moderate, in some cases, when judged by outsiders that ignore the preexisting conditions. In practical terms, Chilean and Tanzanian planners probably often had to set modest goals in different areas by realistically assessing the limitations they expected to face.

The level of economic development was different in both countries at the time they initiated their socialist development. However, there is probably less to be learned from the differences in the two countries than from the similar ways in which they faced common problems -- poverty, underdevelopment, dependency, income maldistribution and malnutrition -- and the way in which they implemented similar strategies, thus indicating the universality of the issues at stake. The different constraints faced by each, however, lead to different outcomes, both in terms of nutritional impact and the period over which these improvements could be maintained. (17) Nonetheless, the steps which Tanzania and Chile took to overcome basic economic inequalities are notable and represent two attempts in which nutrition intervention played a major role in overall economic development. Their examples contribute to our understanding of how nutrition interventions as part of a larger development thrust can succeed in improving general standards of living.



TABLE #1: OVERALL SET OF INTERVENTIONS IMPLEMENTED BY TANZANIA AND CHILE:  
TANZANIAN APPROACH CHILEAN APPROACH

POLICY AREAS	TANZANIAN APPROACH	CHILEAN APPROACH
1) INCOME RELATED:		
A) DIRECT REDISTRIBUTION	<ol style="list-style-type: none"> <li>1) Move towards increasing rural income to equate it with urban income;</li> <li>2) Villagization process (Ujamaa) financed with government credits;</li> <li>3) Increased welfare benefits, especially to rural population in terms of provision of basic services.</li> </ol>	<ol style="list-style-type: none"> <li>1) Wage policy-differential salary readjustments favoring the low income sectors;</li> <li>2) Extensive agrarian reform-government credits to new asentamientos;</li> <li>3) Increase in welfare benefits (e.g. family aid payments) and coverage and expansion of social security to rural population and urban slum dwellers.</li> </ol>
B) INDIRECT REDISTRIBUTION	<ol style="list-style-type: none"> <li>1) Nationalization and expropriation process;</li> <li>2) Increased government subsidization for improved food distribution, e.g. school feeding program and other distribution programs by parastatal organizations;</li> <li>3) Increased health budget and health services availability with emphasis on preventive medicine; maternal and child health, nutrition surveillance and nutrition education made #1 priorities in terms of funding;</li> <li>4) Reduced imports and higher prices for luxury goods.</li> </ol>	<ol style="list-style-type: none"> <li>1) Nationalization and expropriation processes;</li> <li>2) Increased government subsidization for improved food distribution, e.g. school feeding program, free milk distribution program for low income groups and other distribution networks;</li> <li>3) Increased health budget and health services availability with emphasis on preventive medicine; MCH, nutrition surveillance and nutrition education were made priorities.</li> <li>4) Reduced imports and higher prices for luxury goods.</li> </ol>
C) EFFORTS TO IMPROVE THE PURCHASING POWER OF THE POOR	<ol style="list-style-type: none"> <li>1) Price controls- increased minimum wages for rural workers and producer price supports of agricultural commodities;</li> <li>2) Move towards freezing urban income;</li> <li>3) Incorporation of women into labor force;</li> <li>4) Other: Efforts to increase agricultural productivity, e.g. the life or death agricultural campaign.</li> </ol>	<ol style="list-style-type: none"> <li>1) Price controls- Producer prices were kept low by creating a state monopoly to buy agricultural commodities; food staple prices were subsidized;</li> <li>2) New, higher minimum wage for agricultural workers was set;</li> <li>3) Incorporation of women into labor force;</li> <li>4) Other: Preferential exchange rate for the dollar for food import was set; -Boards of supply and price controls (JAP) were created.</li> </ol>
2) AGRARIAN REFORM AND ACCELERATED RURAL DEVELOPMENT	<ol style="list-style-type: none"> <li>1) Development of the Ujamaa villages with land ownership on a community basis;</li> <li>2) Subsidized agricultural inputs. Credits;</li> <li>3) Comprehensive rural development program implemented around the Ujamaa village providing infrastructural services (health, education, housing, etc.) year round employment and production incentives;</li> <li>4) Other: Efforts to increase agricultural efficiency and decrease food losses, e.g. food storage and processing; -Phosphate redirected to the growing of food crops.</li> </ol>	<ol style="list-style-type: none"> <li>1) Acceleration of land redistribution under the agrarian reform law; development of the asentamientos (agricultural) cooperatives;</li> <li>2) Subsidized agricultural inputs. Credits;</li> <li>3) Comprehensive rural development program implemented around the new reformed sector providing minimum peasant wages, unionization, agricultural extension and technical assistance and year round employment.</li> </ol>
3) EMPLOYMENT GENERATION	<ol style="list-style-type: none"> <li>1) Self reliance campaign created new employment sources, especially in the rural areas and in the import substitution industry;</li> <li>2) New employment in public works;</li> <li>3) Full employment set as a long term goal; Small industries encouraged (SIDO); Training and credits made available for this new sector which absorbs both urban and rural women labor.</li> </ol>	<ol style="list-style-type: none"> <li>1) Initial income redistribution policies created new demands on primary goods; therefore, the private industry generated new employment sources, especially urban in 1971-72.</li> <li>2) New employment sources in the nationalized and the expropriated sector of the economy and in public works;</li> <li>3) Full employment set as a long term goal; Urban and rural mothercraft centers encouraged to get involved in productive activities; credits made available for them; this activity absorbed mostly women labor.</li> </ol>
4) DEMOCRATIZATION AND DECENTRALIZATION INCREASED PARTICIPATION OF THE PEOPLE IN DECISION MAKING AND REGULATORY ACTIVITIES	<ol style="list-style-type: none"> <li>1) Health: New emphasis on rural health (dispensaries) and community participation; hospital budgets cut (total fund reallocation in the sector);</li> <li>2) Education: Intensive adult literacy campaign (urban and rural); universal primary education; development of day care centers;</li> <li>3) Increased participation in the political party activities (TANU);</li> <li>4) Ujamaa villages self-government;</li> <li>5) Inclusion of women in decision making process;</li> <li>6) Other: 22 semi-autonomous regions created; regional planning practiced.</li> </ol>	<ol style="list-style-type: none"> <li>1) Health: New emphasis on rural health; decentralization and democratization of the National Health Service;</li> <li>2) Education: Intensive adult education campaign (urban and rural); universal primary education; network of day care centers;</li> <li>3) Increased participation in the activities of the parties of the Unidad Popular coalition;</li> <li>4) Asentamientos self-government;</li> <li>5) Inclusion of women in decision making process;</li> <li>6) Other: Significant advances in unionization of rural workers; -Installation of JAPs (see above) and urban neighborhood councils.</li> </ol>

\* If interested, see the more detailed analysis of the two countries' policies in Section V. (18)  
This table represents a compendium based on the following materials found in the bibliography:  
Data on Chile: (25) (26) (27) (28) (29) (30) (31) (32)  
Data on Tanzania: (33) (34) (35) (36) (37) (38) (39) (40) (41) (42) (43)

### Similarities and Differences in the Policy Packages Developed and Implemented in Tanzania and Chile

Table 1 presents a comparative analysis of the policy packages that had an impact on alleviating malnutrition in Tanzania and Chile. There are many similarities and differences in each of the four policy areas which merit further discussion. For example, Table 1 clearly shows that Tanzania's income distribution policy was designed to primarily benefit the rural population that was resettled in villages or small towns through the villagization program. Chile, on the other hand, based its income policy on the fact that it already had a large urban industrialized and highly unionized labor force with a history of social struggle for welfare legislation in the past. The answer to this was a series of wage policy programs. Important differences are also noted in purchasing power policies. Tanzania's policy was to increase demand for food by increasing minimum wages in rural areas, despite the fact that very few money wage earners existed. Simultaneously, Tanzania held down urban wage increases, thereby narrowing urban-rural real wage differentials. Chile enacted price controls by establishing a central purchasing agency (marketing board) of food crops and by subsidizing retail prices of staple foods.

In the case of agrarian reform and rural development, there is an important policy difference based on the past history of the two countries. Chile's principal effort was vigorous implementation of the existing land reform law and the accelerated development of agricultural cooperatives. Tanzania's emphasis was placed on the



the establishment of Ujamaa villages, with land being placed in the hands of the village. Tanzania also sought to better conserve its existing potential output by improving food storage and processing at the local levels. Finally, Tanzania used marketing boards to change the relative price of food versus cash crops, thus providing incentives to grow more food.

Tanzania's employment policies again stressed rural employment programs to increase income amongst the poorest segments of its population where malnutrition is endemic. Chile, conversely, emphasized the absorption of urban unemployment mainly through industrial, public works and housing construction projects. The accelerated nationalization of the monopolistic and the "basic goods production" industry, as well as of the big mining companies, plus the full utilization of the installed capacity of the rest of industry, created a situation that initially generated significant employment. Both countries were also simultaneously working on small scale industrial projects, but the short-run actual payoff from such similarly conceived endeavors is unclear.

Finally, both countries were actively involved in developing "grass root" participation in the decision making process, either through the respective popular political parties or through the local village organization in Tanzania, or the cooperatives, neighborhood councils and/or unions in Chile. Both countries reorganized their rural health programs, and encouraged adult education and the creation of child day care centers.

#### Problems Encountered in the Implementation of These Policies

In order to implement the policies outlined above, both the Chilean and the Tanzanian government had to overcome much resistance, not only from the members of the local upper and middle classes, but also from some low income beneficiaries. Good examples of the former are the landowner opposition to agrarian reform in Chile and the general resistance to the nationalization and expropriation processes in both countries. An example of resistance by potential low income beneficiaries is best demonstrated by the reluctance of some Tanzanian peasants to the villagization process.

Attempts to overcome these resistances had a number of common denominators in both countries. Popular participation and decentralization played a vital role to this end and was officially encouraged in both countries. Political parties, unions and women's and neighborhood organizations were encouraged to participate in the public policy making process. The latter process was more difficult in Chile, however, since the Unidad Popular was a coalition of Marxist and non-Marxist parties and, as a consequence, its members often differed in their ideological positions.

When both governments became involved in major policy reorientation and implementation, there were similar internal conflicts in the public sector. In Tanzania, many civil servants come from the more "well to do" and professional elites. In some instances they had been associated with the British, were threatened by the socialization process and were often in positions that allowed them to thwart implementation efforts. However, since most policies

in Tanzania are initially set by the party--formerly TANU (Tanganyikan African National Union) and at present (1977) the Revolutionary Party--conflicts occurred mainly in the final implementation stages. Similar problems occurred in Chile, but the situation was even more complicated since policy decisions had to be approved by the Unidad Popular (UP) Secretariat which, as mentioned earlier, was a complex coalition. Besides the internal dissonance within the UP, there were at least three opposition parties outside the UP that opposed its legislative initiatives in Congress. Chile's attempt at socialism was indeed a peculiar one, "immersed" in a traditional and cumbersome democratic framework with all the tensions that this fact created. By 1973 the political polarization of the different sectors of the population had divided Chile into two irreconcilable factions. The military coup came at the height of this national schism.

As for the technical constraints that partially slowed down the achievement of Tanzania's food and nutrition policies and goals, a number of factors have to be mentioned. Most have to do with the problems of the slow post-colonial build-up of Tanzania's infrastructure and particularly the limitations dictated by the very slow provision and availability of expert and trained manpower to run the government's central and newly decentralized bureaucracy. This new technocracy only progressively took over a number of vital national activities, importantly through the creation of numerous parastatal institutions. To this, one has to add the heavy dependence of Tanzania's development budget on foreign aid, linked to the tremendous challenges brought about by the drought in the early seventies and the huge logistic and technical problems secondary to the resettle-

ment in Ujamaa Villages of a large proportion of the rural population; the aim of a more just regional redistribution of food complicated even more the latter situation.

Note, that the above technical constraints are basically problems Chile did not have to face, or at least not so severely.

IV. TANZANIA AND CHILE:  
A REVIEW IN PERSPECTIVE

The Arusha Declaration Ten Years After:

In a historical speech in 1977 (22), President Nyerere summarized the failures and successes of the Tanzanian experience and included the following:

- Foreign aid accounts for approximately 60% of the total development budget;
- Tanzania is neither socialist nor self-reliant;
- There are still inequalities between citizens; democracy is still imperfect; a life of poverty is still the experience of the majority of the population;
- Tanzania has made good progress toward providing the people with basic health education and transportation facilities;
- The rural population has been resettled into 7,648 villages;
- The country has gained control of the economy through state banks and parastatal companies;
- Industrial production has trebled and government spending on agricultural development has increased tenfold;
- Income disparities in the public sector have fallen from a 20:1 ratio to a 9:1 ratio;
- There is greater direct participation in local government through administrative decentralization; and

-Government has become the fastest growing sector of the economy.

For many Tanzanians, the major objective for the next ten years is to build on the policies enacted since the Arusha Declaration (1967). They seek to develop an independent, self-sustaining economy through which nutrition problems and other social ills can be overcome.

Interpreting the Chilean Experience:

One cannot evaluate the economic experience of the Unidad Popular government only according to the standard of living achieved by the workers as of September 1973, because the UP government was devoted to extramarginal economic change (nationalization of copper mining, agrarian reform, expropriation of banks and monopolistic industries) and involved in organizing new forms of popular participation. However, enough policy measures pertaining to the welfare of the individual Chileans had been implemented such that the estimated incidence of malnutrition had dropped throughout the country by 17% from December 1970 to October 1973. (23) However, it was the impossibility of politically guaranteeing the irreversibility of the structural changes that led to the failure of the Chilean experience. The Chilean experience supports the view that, in a situation of political and economic crisis, it is the political aspects which are determinant in the short run, even if the crisis is conditioned by the economic context. President Allende was politically asphyxiated in an economic situation that

called for a new political opening and direction. (24)

In conclusion, there are probably more questions about the issues raised in this paper than there are unequivocal answers to any of them. Such questions, for instance, include:

- -Is a socialist political orientation necessary to successfully combat malnutrition?
- Is the commitment to a "comprehensive package-approach to combat poverty and malnutrition" unique to such an orientation?
- Is it only a difference of commitment, or is it different policy making altogether in revolutionary regimes that distinguishes their approach?
- -How do the Chilean and Tanzanian experiences compare to experiences in other third and second world countries today?
- Did Chile and Tanzania have experiences worthwhile following in other poor countries?

Although there are no value-free answers to these and other questions, they comprise issues which the planner and, hopefully, the decision maker must consider when conducting long or middle-range planning.

Nevertheless, we do learn a few things from the problems and achievements experienced by the two countries here compared. Among other things, we learn that in the battle against hunger and malnutrition:

- Both countries were able to show that they had and that they could mobilize the resources necessary to combat hunger and malnutrition.

- Both countries addressed the deep, primary causes of hunger and malnutrition and an effort was made to have the people gain more control over their basic national resources.
- Hunger was not attacked technically, but by transforming some of the existing social and economic relationships, through popular participation in the building of a more democratic economic system. The overall aim, in both cases, was to do away with political and economic inequalities and this was achieved through a series of income redistribution measures.
- Agriculture became, especially in the case of Tanzania, first a food-production priority and only then a priority as a source of foreign exchange earnings. An important step in that direction was, in both countries, the democratization of the control over food-producing resources.

The measurement of the deeper impact on the nutritional status of the above measures is a task for the near future, at least in the Tanzanian case. In the case of Allende's Chile we will have to content ourselves with the limited data on decreased incidence of malnutrition cited by Hakim and Solimano as mentioned before in this paper. The cases of China and Cuba should nevertheless, be born in mind again when evaluating the effect of similar measures on the overall nutritional status of the population.

References and Footnotes

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- (1). Some concepts analyzed in these first paragraphs are taken from Hakim P. and Solimano G. Nutrition and national development: Establishing the connection. INP., MIT discussion paper #5, Cambridge, Mass., July 1975.
- (2). There is a difference between economic growth and economic development. A country may have economic growth, as measured by an annual percentage change in percapita income, but not have development in terms of altering the lives or living standards of a majority of the population. See for example, Clower R. et al. Growth without development: an economic survey of Liberia. Northwestern University Press, Evanston, Ill., 1976.
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Schuftan C. Nutrition planning--what relevance to hunger? Food Policy 3,59,1978.  
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- (4). See for example, Hakim P. and Solimano G. Nutrition and national development... op.cit., 1975, and Clinton R. The specter of starvation. War on Hunger, X,10, October 1976.
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See also  
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- (10). Mellor J. Nutrition and economic growth. op.cit., 1971.
- (11). Levinson J. A new philosophical base... op.cit., 1975.
- (12). See Joy L. Food and nutrition planning. op.cit., 1973, for one statement as to how such an endeavor can be launched.
- (13). A useful empirical test of the above statement is found in the area of health planning. See Caldwell H. and Dunlop D.



An empirical analysis of health planning in Latin America and Africa, to be found in this issue of Social Science and Medicine.

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- Navarro V. Health, health services and health planning in Cuba. Dept. of International Health, The Johns Hopkins University School of Hygiene and Public Health, 1974, (mimeo).
- (16). Moore Lappé F. and Collins J. Food first: Beyond the myth of scarcity. Houghton Mifflin Co., Boston, Mass., 1977.
- (17). The differences in initial conditions are described throughout the case study of Tanzania and Chile.
- (18). A detailed comparative review of the Chilean and Tanzanian approaches can be found in a separate addendum to this paper (Section V). This addendum was not sent to press together with the rest of this paper. It includes a full description of the interventions and specific programmatic efforts in both countries and is available on request from the author: C. Schuftan, Dept. of Nutrition, Tulane School of Public Health, 1430 Tulane Ave., New Orleans, LA 70112 U.S.A. (It should be pointed out that the Comparative Review is only original in the way it was organized and subtitled. A sizeable amount of the information presented is taken verbatim from the sources listed in references (25) through (43) ).

- (19). This participation should be understood as, as one Unidad Popular government official put it so well: "The workers do not want to be treated as masses and be taken by surprise by a 'nice' gift or favor; they prefer to suffer setbacks, but consciously participate in the defense of their interests." Revista Mensaje, Santiago, Chile, August 18, 1976.
- (20). For documentation of this claim, see section V as referred to in footnote (18).
- (21). For a full description of the boycott, see section V of this paper, as referred to in footnote (18) and Chile-America Documentation and Research Center, 16,41, Rome, March 1976.
- (22). Ottaway D. Tanzania's goal of socialism is not even in sight. The Washington Post, April 20, 1977.
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- (41). Nyerere J. The Arusha Declaration: Ten years after. Dar Es Salaam, February 14, 1977.
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