World Food Summit

The World Food Summit, organized by the FAO and attended by some 150 governments, was held in Rome in November 1996. The ICRC took part in the proceedings as an observer and its Vice-President addressed the conference. A paper outlining the ICRC’s approach and experience regarding the issue of food security in armed conflicts was distributed to the participants. The text of that document is reproduced below.

Food security in armed conflicts
The ICRC’s approach and experience

1. The ICRC’s mandate, role and operations in armed conflict situations

1.1 The ICRC’s mandate and role

The community of States has entrusted the International Committee of the Red Cross (ICRC) with a twofold mandate: to provide protection and assistance for the victims of armed conflict and internal disturbances, and to promote and ensure respect for international humanitarian law. By virtue of that mandate, the ICRC acts as the guardian of humanitarian law. Its work is based on the Geneva Conventions of 1949 and their Additional Protocols of 1977, and on the Statutes of the International Red Cross and Red Crescent Movement.

1.2 ICRC operations in armed conflict situations

ICRC operations include advocacy at all levels of respect for humanitarian law, visits to detainees, health and medical assistance (including the supply of water), food aid, the provision of shelter and clothing, and
the restoration of family ties (including tracing missing persons and arranging for family reunification).

The purpose of ICRC relief activities is to meet the essential requirements of populations affected by conflict. To cover priority needs the ICRC has developed a comprehensive approach, rather than focusing its assistance on specific sectors. This strategy can be described as a "pyramid", nutrition and environmental health being the baseline of relief operations. Then come public health programmes. Curative care tops the pyramid and thus completes the assistance strategy.

Nutrition assistance includes basic food aid and nutritional rehabilitation programmes. These are conducted simultaneously with other relief activities, such as agricultural and veterinary programmes, which are aimed at restoring the greatest possible degree of self-sufficiency among the people whom the ICRC seeks to help. Environmental health encompasses water supply, waste disposal, housing, fuel, and hygiene. Activities in the field of public health are based on community participation; they include immunization and oral rehydration programmes and in some contexts also the fostering of traditional medicine. Curative care comprises medical treatment as a whole.

While food security mainly has to do with the two baseline components of the ICRC's assistance strategy, namely food and nutrition in its broad sense (including programmes aimed at restoring access to food) and environmental health, public health and curative care are essential activities which will ensure that food security actually translates into "nutrition security", i.e., physiological well-being.

2. The ICRC's food security concept in armed conflict situations

2.1 Corollaries of the food security concept

The usual definition of "food security", namely "permanent access for all to food nutritionally adapted in quantity and quality, and culturally acceptable, for a healthy and active life",¹ also applies in conflict situations. It has four immediate corollaries:


1. The availability of food is a necessary, but not sufficient, condition to prevent hunger and guarantee access to food. Means of access can be income, employment, or the ability to obtain food through production, exchange or social support programmes.

2. Food security at the national or regional level does not necessarily mean food security at the local or individual level.

3. "Permanent access to food" requires peace and stability. International or internal conflicts and natural disasters may severely disrupt food production, commercialization and stock management.

4. Adequate food in both quantity and quality is not enough to ensure a healthy and active life. Access to basic services such as health care or water supply are also of crucial importance.

Access to food is the cornerstone of food security. It must be recognized as a fundamental right, not only in peacetime but also in situations of conflict. International humanitarian law specifically prohibits the use of starvation as a weapon and contains provisions regarding the right of civilians to receive essential relief supplies in time of war.

2.2 The food security concept in armed conflict situations

Many conflicts are very closely linked with food insecurity. For the ICRC, food security has to be considered primarily at the individual and household levels, since conflicts affect individuals and households before adversely impacting the whole country.

In conflict situations, food insecurity is often due not so much to an exhaustion of resources as to the sudden loss of means of production, employment and salaries, and to the destruction of trade networks. On the African continent and in parts of Asia in particular, food insecurity may, however, predate the onset of conflict, because of poor access to means of production, low income, high demographic pressure on limited natural resources, poor health, low nutritional status and educational level, etc. Inadequate access to food is thus either precipitated or aggravated by conflict.

3. Food security and ICRC humanitarian assistance

3.1 The ICRC's policy in relation to food security

With regard to food security, the ICRC believes that the aims of humanitarian operations should be as follows, depending on the stage at which action is taken and the gravity of the emergency due to the conflict:
to prevent overt food insecurity (ideally);

- to restore at least minimum food security (usually);

- to minimize the risk of food insecurity in the future (as soon as possible).

It should be emphasized that any assistance aimed at restoring or strengthening food security at individual and household levels in a conflict situation is bound to meet with only temporary success as long as peace is not restored, for the following reasons:

- people are unable to maintain their self-sufficiency in terms of food because human and financial resources are being diverted away from agricultural production;

- harvests are destroyed and fields cannot be cultivated owing to landmines;

- food is diverted for consumption by military personnel.

The prevention of conflicts, respect for international humanitarian law during actual conflicts, and the termination of hostilities are thus key factors for sustained food security.

In conflict situations, the ICRC's comprehensive response to needs is based on a threefold strategy:

1. to prevent destitution (by first identifying any changes in normal access to food, e.g., modification of food consumption, consumption of seed, selling of assets and of means of production);

2. to support the restoration of normal access to food, especially by providing the necessary means of production;

3. to restore at least a minimum level of access to basic health services, water and environmental health facilities (so that food security actually translates into "nutrition security" and physiological well-being).

3.2 The ICRC's operational approach and experience

3.2.1 Promoting respect for international humanitarian law

Although in many cases food insecurity is already a problem before the outbreak of conflict, failure to respect international humanitarian law generally precipitates and exacerbates the food crisis. In every conflict situation, the ICRC urges all parties at all levels to ensure respect for humanitarian law; this is done by:
• spreading knowledge of the humanitarian rules among the armed forces and the civil authorities;
• making direct representations to the authorities to ensure respect for the civilian population (e.g., in situations where access to farming land is denied or when soldiers regularly loot granaries and farmers' food stocks);
• raising awareness of humanitarian law among the civilian population itself (bottom-up dissemination).

3.2.2 Preventing destitution

When there is a potential or actual food shortage or people cannot afford to buy food, individuals and households start to modify their lifestyle, channelling their limited resources into obtaining food and other essential items (medicines, clothes and shelter). By providing support for these coping mechanisms, the ICRC seeks to alleviate human suffering and prevent a drastic fall in the general standard of living. This approach is based on the active participation of the population in defining what type of relief operation is needed. However, during prolonged periods of acute food insecurity, people may be forced to adopt strategies that will threaten their livelihoods in the long term. Assistance programmes therefore focus on coping mechanisms that are not detrimental to future food security and on preventing processes that may lead to destitution.

Although the basic patterns of coping behaviour may be similar in different contexts (lower food consumption, modification of eating patterns, modification of cropping patterns, selling of livestock, modification of expense patterns, migration of family members, selling and leasing of assets, indebtedness, etc.), the precise way in which coping mechanisms are implemented and their interaction vary depending on the context and the conflict.

In accordance with its relief policy, the ICRC takes into account the multiple and interrelated facets of these coping mechanisms. The most important parameters in this respect are agriculture, economic conditions, nutrition in its broad sense (i.e., including food acquisition and consumption patterns, and the assessment of nutritional status) and health, including water supply and environmental health. Focusing on agricultural production, or on food intake, or on nutritional status (e.g., the prevalence of under-nutrition) alone will give only a partial view of the food security problem and thus make it very hard to decide on the type of assistance best suited to the situation.
The ICRC's assessment methods may be subject to constraints of time and physical safety, but the organization always endeavours to maintain its comprehensive approach. Once the ICRC has identified the specific coping mechanisms and their limits (adverse effects on future food security), it decides on the humanitarian action to be taken. Each context is different, but among the range of ICRC activities designed to help maintain or restore food security are the following:  

- **Distribution of food and non-food relief**, to cover identified needs, to improve the biological utilization of food (e.g., by distributing blankets in cold climates), and to provide items for barter so that people will not be forced to sell vital means of survival and production — *Rwanda (1995): food distributions for 360,000 people per month (displaced persons and residents of areas where large numbers of returnees had arrived), and non-food distributions for residents whose assets had been looted.*  

- **Public kitchens**, to provide daily meals for people in urban areas who are unable to obtain and prepare proper meals for themselves — *Abkhazia: a kitchens programme has been running since 1994, owing to the protracted crisis there. In 1996, about 20 such kitchens were supplying meals covering all daily food energy requirements to some 7,000 elderly and other needy individuals selected by the community. Fresh food is supplied to canteens by local producers (kolkhozes and sovkhozes) whose activities are supported by the ICRC.*  

- **Setting up of emergency water and environmental health facilities**, to provide an immediate supply of water and latrines for displaced persons in order to help safeguard their health — *Burundi (1995): mobile treatment units were brought in to provide drinking water for displaced persons in a temporary camp.*  

### 3.2.3 Restoring access to food, basic health services, water and environmental health facilities

Simultaneously with efforts aimed at the prevention of destitution and the provision of support for non-deleterious coping mechanisms, the ICRC conducts, where and whenever possible, activities designed to pave the way towards rehabilitation in the post-conflict phase. Such activities are implemented with a view to helping people regain sustainable

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2 Only a selection of recent ICRC assistance programmes are mentioned (in italics).
self-sufficiency in producing and acquiring food, and thus ensure its optimal biological utilization.

Examples of these activities are:


- **General food distributions as a back-up until the next harvest**: this is done until there is sufficient agricultural return for farmers to keep the seed for the planting season — Rwanda (1995): food aid (along with seed and tool distributions) for some 70,000 resident and returnee families to facilitate the resumption of agricultural production.

- **Small-scale credit programmes**: to promote the recapitalization of farming systems — Azerbaijan (1996): small-scale credit project to enable farmers to buy agricultural supplies (mainly spare parts for agricultural machines and fertilizers). To be reimbursed using part of the next harvest.

- **Food- and cash-for-work programmes**: to increase people’s purchasing power, while rehabilitating vital structures (sanitation facilities, roads, irrigation facilities, etc.) — Rwanda (1995): food and cash for work to rehabilitate sanitation systems (about 100 workers per project) — Afghanistan, Mali, Somalia: rehabilitation of irrigation systems, programmes for the manufacturing of farming tools and fishing nets. In Afghanistan, the community had to rehabilitate one third of its irrigation canals using its own labour and cash resources before the ICRC provided support, so as to ensure community participation and commitment.

- **Programmes aimed at revitalizing the local economy**: through an ad hoc supply of food to local markets at a time of speculative hoarding, through contracts to buy food and other items on local/regional markets from local producers, through the supply of raw materials to handicraft makers and local factories, through subsidies, and so forth — Central Bosnia (1995): provision of essential materials for local factories (glue for a shoe factory, sugar for a jam factory, vaccines and veterinary medicines for dairy farms supplying a milk factory).
• Rehabilitation of health structures: reconstruction, provision of drugs — Burundi (1995): distribution of medical supplies to 95 health centres and 17 hospitals.

• Rehabilitation of water and environmental health facilities: reconstruction of latrines and rehabilitation of wells — Chechnya (1995): provision of safe drinking water by setting up a distribution network, and repairs to the local water distribution system for some 300,000 inhabitants of Grozny.


4. Food security in armed conflict situations and the response of the international community

In view of the aims of humanitarian assistance and the scope of operations designed to help restore or maintain food security for individuals and households affected by armed conflict, as described above and as implemented by the ICRC and other humanitarian agencies, a number of requirements need to be fulfilled, each of which calls for support on the part of the international and donor communities:

• Achieving food security in conflict situations requires a comprehensive response. Operations cannot be limited to emergency food aid. A wide array of activities are involved, ranging from emergency health care and sanitation to economic and social support. In addition to providing food aid for basic survival, the aim is to restore self-sufficiency and to reduce future vulnerability to disaster.

• Optimal responses must take account of the medium and long term, meaning that from the very outset budgets and programmes must be planned with a view to the phase beyond the immediate emergency.

• Prevention of food insecurity resulting from conflict is paramount. It is obviously less costly in financial terms — let alone in human terms — than attempting to restore food security once people have become destitute.

From a practical standpoint, fulfilling those requirements would involve effecting the following major changes:

1. The international community and the media should lay greater emphasis on the prevention of conflicts. Prevention is not newsworthy, whereas overt human tragedy always makes the headlines. Because
FOOD SECURITY IN ARMED CONFLICTS

the media increasingly serve as a trigger for action by the international community, they should cover the threat of a crisis as well as turning the spotlight on the crisis once it has broken out.

2. “Emergency responses” (whether the crisis is linked to conflict or to any other disaster) cannot be equated with “short-term operations”. Budgeting, staffing and programming must be planned from the outset for at least the medium term, and must provide for different activities in support of coping strategies.

3. Ensuring adequate food security at the household level should become the top priority of authorities and policy-makers. One basic supporting argument is the recognition that inadequate access to food (especially access to land for food production) is more often than not a triggering factor in the onset of conflict.

5. Conclusion

Ensuring access to food and food security is a fundamental right and a priority in any emergency situation. While the long-term eradication of food insecurity depends on political resolve, the short-term alleviation of suffering caused by food shortages requires a comprehensive approach aimed at strengthening the strategies adopted by the victims themselves to optimize their access to food and minimize the impact of the problem on their future livelihoods. Since most conflicts are either protracted or recurrent, long-term activities are also needed to restore, as far as possible, access to basic services (health, water and environmental health), and the productive capacity of the populations concerned.

These actions vary in scope and duration but all of them require a change in the traditional vision of humanitarian assistance in emergency and crisis situations. Prevention of deterioration should be the key issue. Once “curative” action becomes necessary, a prospective approach is needed to pave the way towards the restoration of self-sufficiency.