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**THE SANITY FACTOR: EXPATRIATE
BEHAVIOUR ON AFRICAN RELIEF
PROGRAMMES**

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'THE SANITY FACTOR': EXPATRIATE BEHAVIOUR ON AFRICAN RELIEF PROGRAMMES

by Alex de Waal

Most of the people who start to work for relief agencies in Africa have not had previous experience of knowingly contributing to the suffering and death of a large number of people. Relief agencies do not tend to attract people who have this sort of experience, and they do not include it in their job descriptions when recruiting. Yet the disturbing activity of voluntarily being unpleasant to strangers is one of the most frequent activities that working in a relief programme involves. This is a striking claim, but in this paper I am going to argue that it has a significant element of truth, and that it results in important psychological damage to relief workers and impairment of relief programmes.

There are many ways in which expatriate relief workers knowingly contribute to other people's sufferings. The worst consequences may stem from actions done or not done in a professional capacity, for instance, failing to notice a local food crisis, or give warning of it. However, from the point of view of the individual relief worker, the most psychologically salient actions of wilful harmdoing are those that involve direct personal contact with other individuals. Instances such as eating lunch while a severely undernourished child looks on, or failing to give a lift to hospital to an ill person, are cases in point.

Let me give an example which illustrates the expatriate's dilemma. In August 1984, while in Southern Sudan, I spent a few days in Goli Transit camp interviewing refugees who were about to return home to Uganda. There was one old woman who was too sick to be interviewed; she was clearly very ill and needed to be taken to hospital. Her daughters came across to my tent and pleaded with me to take her to the hospital at Yei, about three hours' drive

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away. I argued with the Sudanese official in charge of the centre for the returnees that she should be taken in a landrover which was due to leave shortly. I was told that it was not possible just to refer people to hospital like that and I should have to go with her in order to explain to the hospital authorities.

'Besides', he said, 'that old woman is passing away. She would just die on the journey'. I relented. Subsequently I told myself that the Sudanese official was right. The woman died that afternoon, and she would have been battered to death even more quickly on the hard and bumpy road. I felt angry with the Sudanese official for his apparent indifference towards the death of the old woman, as well as sick with myself for not having taken her to Yei hospital. If the old woman had lived I would probably have been angry with her too.

Two things can be drawn from this example. One is that my action (or, rather, lack of it) was creating a threat to my self-esteem. It was a classic situation of what psychologists call 'cognitive dissonance', and can be expressed as a paradox:

High self-esteem conflicts with voluntarily harming someone against whom one has no personal grudge.

Various ways in which this psychological conflict can be resolved are discussed below. The second important element in the example is my difficulty in accepting death, which stood in such contrast to the attitudes of the other people in the transit camp. This inability to cope with death is a theme which runs through all the strategies that expatriates use to resolve the cognitive dissonance paradox.

The paradox can be resolved in two kinds of ways. One is to cease voluntarily harming others (this is not as easy as it sounds). The second is to deny all or part of the right-hand-side of the paradox. This approach of denial will be discussed first.

The first possibility is to deny the voluntariness of one's

action. This renders the paradox harmless: if one is compelled to harm others, then performing these actions is not immoral or inconsistent with a high self-esteem. The relief worker thereby denies his or her moral autonomy. Many relief workers refuse to act in an independent manner, even when able to do so. It is well known, for instance, within UNHCR that the agency is compelled to stand by any decision made in good faith by one of its field personnel. Yet field staff rarely act on their own initiative. Decisions are either delegated to others or sent to superiors for confirmation, resulting in more ill-informed decision-making and long delays. In Southern Sudan, several radio calls to headquarters were needed before a decision could be made on such a trivial matter as which observers rode in which trucks on a repatriation mission. UNHCR staff are also able to avoid action by the excuse that it is not an implementing agency. This tendency is not of course unique to any single agency. There have been instances of agency staff refusing to transport emergency supplies because they were only authorised to take commodities from a certain donor: trucks have been immobile and aeroplanes grounded as a result, while food and medical supplies accumulated, waiting for transport of the correct affiliation. One explanation for this lack of initiative is that agency field staff gain promotion by being conservative and unadventurous. This has an element of truth, but the psychological tensions are also important. An agency worker in Tanzania volunteered that '(the agency) makes the policy, and I don't want to be lumbered with the blame if something goes wrong.'

The denial of voluntariness is also evident in a strategy that can be labelled 'ritual task performance'. This label comes from the work of Menzies (1960), who studied how hospital nurses defended themselves against the chronic anxiety their jobs involved. She described how the stresses of decision-making were avoided by a strict adherence to protocol, whereby each task, however small, became a ritual. Similar processes occur in aid agencies. A good example is the UN project submission format. Every project that

is considered for funding has to be written up in a certain way, with sections for 'progress indicators', 'implementation procedures and responsibilities' etc. Most people who write up projects have become so steeped in the way of thinking this engenders that they fail to see how absurd this format is. The rigid format distorts the objectives of any project which aims to give the power to take initiatives to local staff, or aims to adapt to changing local conditions. People who write up project proposals are forced to distance themselves from local realities and subject themselves to a ritual task performance. They are rightly called 'project submissions': the project submits to the demands of the bureaucracy and the strategy for avoiding stress.

Another aspect of the denial of responsibility concerns how an agency worker relates to his or her expatriate colleagues. When faced with the internal conflicts generated by being affluent in the midst of destitution, most expatriates opt for denying responsibility. A few, however, become 'mavericks' and become highly active, taking initiatives and getting on the others' nerves. These mavericks are not, however, a threat to the conservative majority. What occurs is what Menzies calls a 'collusive social redistribution of responsibility'. The mavericks are in fact often encouraged by the conservative majority because they exemplify the taking-on of responsibility that all feel some inclination to do so. This does not stop the majority from grumbling about them. This means that if a conservative agency worker is faced with a severe dilemma, say delivering money to repair a bridge that is the responsibility of the local government so that relief trucks can get through, and having to do this without authorisation, this task can be delegated to the maverick. Responsibility is redistributed within the agency community. Similarly, someone at the top of the agency may take on the role of being 'broad-shouldered', 'long-suffering', etc., and be ready to make unpalatable decisions. This person is explicitly 'responsible'. However, such are the reversals of the relief world that mavericks are usually dubbed

'irresponsible', often because they cannot account for all the money they have spent.

This process of denial of voluntariness is further developed by a deliberate obscurity in the formal allocation of responsibility. If field staff know precisely which person in the hierarchy is formally responsible for making a decision, this generates the secondary responsibility for the field staff to refer matters quickly and efficiently to that person. This responsibility is nearly as onerous as the primary responsibility for making decisions themselves. Matters therefore get referred to impersonal entities ('Geneva', 'London') or to people who have taken informal roles ('mavericks', 'long-sufferers').

International agencies are notoriously slow to change. It is remarkable that although field staff grumble about this, they do little if anything to change it. To challenge the structure of the agency is to confront oneself with a reality which provokes too much anxiety. This leads to the agency structure being unable to cope adequately when major crises occur. In the early 1980s, notably in Sudan, the great majority of aid agencies tottered on the brink of logistical collapse. This paper was first written in December 1984, as that collapse was imminent. The stresses of certain logistical disaster in the face of a major famine were only just great enough to overcome the stresses of accepting full responsibility for making decisions in a field programme (see below). Since the debacle of 1984-5 matters have improved, but not greatly. It is still the case that, although the continuing threat of another possible logistical collapse generates a set of stresses, these stresses appear to be less real than those that would follow from accepting responsibilities.

The strategies that relief workers follow for denying responsibility are facilitated by their unfamiliarity with the country in which they are working. Their behaviour discourages them from gaining any proper working knowledge of the locality.

Nevertheless, knowledge is slowly acquired. After a few years, most agency workers are able to operate in a reasonably efficient manner, reconciling the demands of the agency bureaucracy, the personal inadequacies of the people who surround them, and some of the demands of the programme. People who reach this stage and believe that they will stay longer in the country are tempted to transfer their allegiance away from the agency and towards the local area. This transfer of loyalties, even if only partial, will bring with it an assumption of responsibilities for operating and changing the programme. The person is moving from a denial phase to an acceptance phase of thinking. If the collective denial of responsibility of the agency community is to continue, this 'veteran' cannot exist, at least not in a powerful position. The virtue of the maverick is that he or she is not too successful and can be considered slightly mad or irresponsible: the veteran cannot be dismissed in this manner. The veteran must be moved. Most international agencies do not like their staff to remain in one country for more than a few years. Veterans who insist on staying are usually marginalised to a remote field posting or to a powerless desk in headquarters. They are given a certain role in the collusive redistribution of responsibility, usually that of the person who makes unpalatable decisions and deals with troublesome local people.

The denial of responsibility is only one part of the process of denial that is followed by expatriate relief workers. The threat to self-esteem was caused by voluntarily harming people. A second denial strategy is therefore to deny that one is harming people.

Western people are prepared to deny that there is death in the vicinity to a remarkable extent. When Elizabeth Kubler-Ross (1969) started her seminar in American hospitals, which involved interviewing terminally ill patients, she was struck by the number of doctors who asserted that there were no dying patients on their wards, when this was evidently false. Twenty years later, the denial of death remains common. People refuse to tell cancer

patients that they are dying (the patient has usually guessed already) and maintain a false cheeriness right up until the patient's death. This contrast with attitudes to death in most African societies. For instance, among the Lubagara of Uganda, mourning often starts before the person dies (Middleton 1982). Africans' refusal to acquiesce in Europeans' denial of death is stressful for the Europeans. Witness my own discomfort at the Sudanese official's matter-of-fact, even off-hand, reference to the old woman 'passing away', put into euphemistic language for my benefit.

In the situation of a relief programme, the central denial is that of inflicting pain. One way of doing this is to deny that refugees or recipients of famine relief feel pain. Expatriates have said 'Africans do not feel pain as we do', 'These people are always surrounded by death and sickness so its nothing new', 'African mothers do not mourn their young childrens' deaths'. Needless to say, these are all just rationalisations. Another way is to deny that one is harming people. Frantz Fanon (1952) argued that the denial of personhood to third world peoples was a necessary psychological step in the process of colonial conquest. Expatriates in Africa may describe local people as sub-human, especially when it comes to their living conditions and behaviour. They are held to be superstitious, to have no notions of property, and irrationally to resist change. Roberts (1974) describes aid workers who unfavourably compared local people with local wildlife. Denying that people feel pain or care about others' deaths is also a way of de-humanising them.

This devaluation of the worth of the recipients of a relief programme has alarming consequences. Not only are people treated as things, but the interests of the aid programme are put above the interests of the people. This is combined with the common fallacy of people who give assistance to the poor, of believing that this assistance is central to poor peoples' lives. In Sudan an agency worker rejoiced when the local cassava crop was destroyed by blight: this would encourage stubborn, self-settled

refugees to come to the planned settlements to look for food. The idea that the refugees might survive as well or better without assistance had simply never occurred to him. Likewise, journalists reporting from famine relief camps typically close their bulletins with the words 'and these are the lucky ones...' implying that the people who have remained behind in the villages are unfortunate because no foreign relief agency is caring for them. In fact it is likely that people survive better away from disease-ridden relief camps, but to admit such a fact would be to imply that famine victims are in fact more skilled at survival than relief agencies. It is a premise of most relief programmes that people are 'victims', 'helpless', and 'dependent'; like children or animals rather than adults. This denial of individual humanity also provides a rationale for not dealing with individual cases. 'In the time I spend on one individual case I could help a thousand starving people get food' said one UNHCR officer, therefore avoiding personal contact with a refugee. On a larger scale, refugee counselling services have been closed on the grounds that it is unnecessary and wasteful to deal with individual cases. It also means that refugees are rarely consulted on the programmes which they are supposed to benefit from, like children or mental defectives. 'They don't care about their future' said one UNHCR official in Tanzania.

With the devaluation of the worth of the recipients of relief comes an over-valuation of the worth of the people who are giving it. Agencies tend to claim the credit for averting disasters when in fact it is the tenacity and skill of local people that was most important (de Waal 1987). Some disabled Sudanese people, against great odds, set up a society for the physically handicapped. After several years they received some support from a foreign NGO and invited the local field director to discuss the project with the society's committee. 'We will have to stop playing Father Christmas to you' she warned them. Agencies have a tendency to become obsessed with the 'dependency syndrome', assuming that previously self-reliant people are reduced to a state of

dependence on the pitiful amounts of aid they are receiving. Debates on food relief are centrally concerned with the damage it can do to local economies. Whether having good or bad effects, all hold that aid is important. In fact there is a good case for arguing, in, for instance, parts of Western Sudan, that food aid did neither harm nor good, but was irrelevant. This suggestion seems to be much less acceptable to agencies and donors than the contention that food aid was harmful.

A third denial is also possible. It is possible to deny that one has no personal grudge against the person who is being harmed, that is, deny the third part of the right-hand-side of the paradox. Glass (1964) reported from a laboratory study that if subjects voluntarily gave electric shocks to a stranger, they subsequently displayed dislike of that stranger. (Glass's experimental subjects also rationalised their behaviour by emphasising their obligation to take part in psychological experiments or by saying that the electric shocks weren't too painful anyway).

The dislike of refugees is manifest in many ways. They are shouted at, abused and refused even the simplest courtesy. Agency workers are quick to assume an authoritarian manner. They tend to become angriest when their self-esteem is most impugned: when the recipients of their relief die. Kubler-Ross (1969:224) described the reactions of doctors to death in a hospital: '(they felt) a sense of anger, as if these patients had committed an angry act against them by dying in their presence.'

One source of this dislike is the belief that the suffering people have no feelings. Other sources of dislike are beliefs that they are deceitful, lying, stupid, hostile, incompetent, lazy, and exploiting the relief programme. A student investigating refugee markets told of her research to a UNHCR official. 'Good', he replied, 'tell me the prices of foods, and I can find out how much my maid has been defrauding me.' Refugees are said to be vandals

for burning off dry grass (especially when near to expatriates' houses), to be stupid for growing cassava and not more nutritious maize, and lazy or ignorant for not digging pit latrines. Other explanations for these phenomena were overlooked. People burn off dry grass to stimulate new growth, which is more nutritious for animals. Cassava is almost drought-proof and labour free. People were not digging latrines because there was a shortage of digging implements. Perhaps the most common accusation is of trickery. When people leave relief camps with sacks of grain, or are seen selling rations in a local market, it is always assumed they have cheated their way into receiving extra rations (or that they are starving their little girls to buy tobacco and beer). The idea that they may save rations so as to be able to eat them later, when planting at home, or sell them in order to buy other necessities, is overlooked.

The argument is not that there are no recipients of aid who are not lazy, stupid or deceitful, but that agency staff are over-hasty in attributing these qualities to them. The result is a mutual distrust which is hardly beneficial to the programme.

A more extreme form of dislike is 'defensive projection'. In this case it consists in attributing an undesirable trait to the person who is suggesting that the very same trait is to be found in you (Bramel 1963). The central psychic conflict for a relief worker is caused by the suggestion that he or she is deliberately harming people against whom he or she has no personal grudge. Defensive protection turns this accusation round: the relief worker believes that the suffering people are deliberately harming him or her, for no reason. In Sudan, when a starving woman whose child had just died came to the UNHCR compound for help, she was met by an angry barrage from the UNHCR official who was just then having lunch. In Tanzania, a doctor shut himself away in a place where the refugees could not reach him 'so they can't pester me when I'm trying to work'. He went on to accuse them of malingering. (This doctor was actually a Tanzanian: local professionals suffer

comparable, though different stresses).

It is a commonplace that expatriates become more racist after a spell in a poor country. Explicit racism is the outcome of these defensive measures.

Another form of defensive projection deserves mention. In refugee programmes, expatriates invariably work alongside professionals from the host country. The relative expertise of the two groups varies, but it is possible to find a young and under-qualified expatriate in a position of seniority over an older and far more experienced host-country professional. In such a situation, the expatriate is likely to make far more mistakes than his subordinate. This gives rise to another situation of cognitive dissonance, which requires rationalisation. A common rationalisation is the projection of all the manifest faults of the aid agency onto the parallel host organisation. Local government and national refugee and relief commissions in Africa are often inefficient, and manned by incompetent, lazy or corrupt people. But they are no more incompetent, lazy or corrupt than international organisations. Well-paid expatriates are however quick to accuse their local counterparts (on salaries often equal to a tenth or less of their own) as 'corrupt'; expatriates who have lengthy holidays each year are ready to accuse local officials, who may receive no holidays, of 'laziness', etc.

The majority of expatriate relief workers follow a mixture of the denial and projection strategies outlined in this paper. They deny responsibility, they deny they are inflicting pain, they develop a dislike for victims, and they project their faults onto others. All result in a personal detachment from the realities of human suffering, and all result in a deep cynicism.

Researchers can also fall into the trap of following these strategies. Those who remain personally remote from their subject matter have no difficulty in behaving in the same way as

conservative agency staff, with the advantage of having more freedom to retreat to distant urban centres and the ability to deny all responsibility. Consultant academics are prone to this. Many researchers have the additional problem that they are perceived of encroaching on other expatriates' 'territory'. Often, as in the case of many short-term consultants, they are. Managerial agency staff may resent or refuse to cooperate with visiting 'experts', whom they accuse of having little knowledge of the locality, and of merely appropriating others' knowledge, unattributed, in their reports. In fact, the managerial staff are often similarly ignorant of the local area. The source of hostility is that they feel their self-esteem to be impugned. Nevertheless, it is true that many consultants' reports consist of plagiarism and received prejudices: they are only briefly in 'the field', they rely heavily on their hosts' hospitality and guidance, and are handsomely rewarded for it. These factors all serve to accentuate the researcher's remoteness from the local people, and result in the same denial strategies being followed. Other researchers have been known to use more unusual denial strategies. One economist in Sudan said 'I'm not really concerned with the refugee situation here, I just want to acquire skills here which I can use later on much more important refugee problems elsewhere in the world.'

Another variety of response to the stresses of a relief or refugee programme occurs when the logistics of the agency do actually break down. This happened in western Sudan in 1984-5. One of the consequences of this was a collusive redistribution of responsibility within the community of relief agencies. Agencies, like the people who work for them, have characters. Some incline to be conservative, others mavericks, others veterans. In 1984-5 the large 'conservative' UN agencies had undertaken to run relief programmes for western Sudan, but their logistics collapsed. Two alternatives existed. One was to hand the programme over to 'veterans'. The veterans in this case were local government and indigenous charities such as the Sudan Council of Churches and the

Sudanese Red Crescent Societies. These were of course ill-equipped to handle a major relief programme, but no more so than any international agencies. They had the requisite local experience and were running small relief programmes already. However, it is usual to find that host-country counterparts are grossly undervalued by expatriates when those expatriates are under stress. This alternative was not considered. Instead, responsibility was delegated to the 'mavericks', European and American NGOs with inexperienced but enthusiastic staff, even less equipped to manage a major relief programme than the 'veterans', and who were prepared to risk institutional humiliation in order to relieve the famine.

The second consequence was that the 'mavericks' ran riot. All agencies, whether UN or NGO, employed unqualified white people and allowed them to spend huge amounts of money with virtually no accountability. Panic was the order of the day. The third consequence was that all this was denied. Later, in 1985-6, when the famine was over, the UN began to become operational in western Sudan and the NGOs began to run more professional operations. During the emergency of 1984-5, English ex-schoolteachers had rushed into markets in western Sudan with suitcases full of banknotes and argued with lorry-owners to transport grain, inventing an accounting system as they went along. A year later, the WFP arrived with its huge fleet of trucks, which were run by a professional consultant manager employed by SCF. The later programme was considered a success, and attention was diverted from the earlier failures. In some respects, such as the SCF information system of 1986, western Sudan even came to be considered a model relief programme. Many of the lessons of the crisis period remained unlearned.

Some people in relief agencies struggle against making systematic and harmful denials. Maverick and veteran agency workers are one category who often 'suffer' from honesty and a capacity to respond to local people who are suffering as though they are human beings.

Other people who often fail in this capacity are researchers, notably anthropologists, who are largely prevented from making systematic denials by the nature of their research. These people have to overcome the dissonance problem not by psychological denial, but by acting so that they are not actually harming people.

This is actually quite difficult. It involves living in a manner that requires less physical and psychological defence. Many expatriates live in European-style opulence, with barred windows to keep out thieves; the director of a refugee agency in East Africa insisted on this for his European staff, calling it 'the Sanity Factor'. However, expatriates with a standard of living comparable to that of their local counterparts will have less to protect with guards and barbed wire, and less to withhold when the hungry look on. Some of the problems can be overcome by acting positively, by supporting local initiatives and articulating local points of view. The maverick aid worker is one who tends to do this, receiving psychological rewards from the successes and trying not to be daunted by the failures. It is a high-risk strategy, because the maverick worker is without all of the denials that serve the conservatives so well when things go wrong. The maverick researcher is in some ways less at risk: there are not the joys that follow the successes, but also neither are there the disappointments that follow the failures. The successes and failures of the maverick are evident quickly, but the researcher has to look further ahead for any hope of changing the situation. There are no short-term psychological rewards, and this is psychologically tough. The other part of the solution is to stay a long time in one area, so as to be able to move past the denial phase into a more realistic acceptance phase. The cognitive dissonance paradox will not go away. But it can be minimised, and the best way of minimising it is through running a relief programme that works and through personal familiarity with the locality, and the culture and language of the people who live there. The most effective assistance programmes are designed and

run by people who are familiar with the area and the culture and language of the local people. The recommendation is therefore simple: expatriate staff should stay much longer in the countries where they work.

Aid agencies are curious organisations. Too often they are unself-critical, and while becoming extremely professional in fundraising, remain highly unprofessional in spending that money. The ethic that good people with good intentions can do no wrong is still prevalent in many. Others appear to believe that by paying 'professional' salaries they will obtain professional standards of work. All, however, employ ordinary, fallible human beings, and all are institutions that must justify their existence and modes of operation. Increasingly they are in the front line of major relief operations, and it is important that they recognise, investigate and overcome their organisational weaknesses. This paper has tried to identify the locus of one such weakness.

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