Globalization, Philanthropy, and Civil Society

PROJECTING INSTITUTIONAL LOGICS ABROAD

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Logics of Accountability at the African AIDS-NGO Interface

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The AIDS catastrophe has justified huge projections of Northern philanthropy, power, and resources into the Global South. I focus here on both the influence and the limits of that power, by looking at the influx of AIDS organizations in sub-Saharan Africa. I examine how differing institutional logics interact. Using evidence from a larger study of responses to AIDS in sub-Saharan Africa, I ask how NGO interventions in Africa are inserted into existing patterns of social and institutional life.

The dominant form of political accountability in Africa is not universalistic bureaucratic rule, but personalistic patron-client ties (Chabal and Daloz 1999). We can understand the institutional consequences of NGO interventions first by understanding their effects upon—and their frequent incorporation within—these patron-client relationships. More broadly, we can think about the institutional effects of international interventions into African societies by asking when those interventions make such traditional forms of power more responsive and accountable, versus more exclusionary, divisive, and irresponsible. I also suggest ways of thinking about how NGO interventions might increase or decrease social trust, social capital, and the capacity of local social institutions.

AIDS in Sub-Saharan Africa

The AIDS crisis in Africa is an ideal laboratory for analyzing the insertion of institutional logics from abroad. First, the financial and organizational resources committed to preventing and treating HIV/AIDS in Africa have been growing dramatically since the mid-1990s (UNFPA n.d.). AIDS was already a high-profile disease with a voluble and politically effective constituency (Epstein 1996) when, after the mid-1990s, the enormity of the global pandemic produced a torrent of organizational activity and an ever-widening flow of resources, much of it channeled through (or originating in) the NGO

sector.[1] According to the United Nations Resource Flows Project, which tracks funding for population activities, since 1995 AIDS funding increased from 9 percent to 43 percent of population funding with more than 400 percent increases in resources for sub-Saharan Africa, and with an estimated 57 percent of population assistance flowing through NGOs (Resource Flows Project 2004).

Second, most African states are so poor that they may have little bargaining leverage when it comes to negotiations with international donors (Shiffman 2008). Some scholars have argued that African states may trade on the misery of their own people, with suffering their best "export" (Bayart 1993). But Africa's poverty and its weakness in governance mean that outside donors are often providing a substantial share of a country's AIDS health budget, and as much as 90 percent of its budget for AIDS activities (see, e.g., Allen and Heald 2004).

That many African states are deviant with respect to world models of the nation state provides another reason to look at how they respond to philanthropic interventions. Just as commercial interactions with Western firms are transforming China's institutional culture (Guthrie 1999), in Africa the bevy of international NGOs, often performing governmental or quasi-governmental functions, are the main transmission belts for globally validated institutional models. African states—corrupt rather than transparent; riven by internal conflict rather than stable and unified; exercising only partial sovereignty over the territory they supposedly govern (Herbst 2000)—are the "bad boys" of the global institutional system. They are then ideal candidates for the instant makeover the international system aspires to provide.

There are additional reasons why AIDS and the organizations that have rushed in to deal with it provide such an interesting site for analysis of contending cultural logics. The biomedical peculiarity of AIDS itself creates unusual interdependencies between global and local actors (see Heimer 2007). AIDS presents itself as a distinctive illness only when defined and named by international medical authorities. Its biological distinctiveness—the long time between infection and visible illness, the fact that someone who looks and feels healthy can infect others, and AIDS's manifestation as an array of other illnesses rather than a single, distinctive syndrome—make the entire illness itself, from definition to prevention to treatment, especially dependent on the intersection of local and international actors. On the other hand, because in Africa HIV is transmitted primarily through sexual contact, dealing with HIV and AIDS has not been purely, or even primarily, a medical matter. The well-worn techniques of international public health—vaccinations, clinics, visiting nurses, even sanitation and such amenities as wells, latrines, and nutrition—are

largely irrelevant. Like family planning but more so, AIDS prevention seems to require changes in some of the deepest, most intimate, and least understood aspects of human behavior.[2]

Finally, the AIDS crisis is distinctive precisely because it is a "crisis." (Malawians again and again refer to AIDS as *mdili*, a word used for the devastation of the biblical plagues.) Even with the advent of antiretroviral drugs, it is fair to say that there is no effective, agreed-upon technology against AIDS. Yet there is a remarkable global consensus that AIDS is a devastating crisis to which the world must respond. Reports detailing the millions infected (whether the more than 33 million estimate of today or the 42 million of several years ago [UNAIDS/WHO 2002, 2004, 2007]), the millions newly infected each year, the millions of deaths, the orphans, devastated households, blasted economies—all create an insistent chorus.[3]

An urgent crisis without a clear technical fix has generated a remarkable proliferation of organizational effort. While UNAIDS and the Global Fund (GFATM) have begun to try to coordinate some of the major international efforts, imposing a few standard formulae (such as "multisectoral response" [see Putzel 2004]), the AIDS universe contains an astounding variety of international organizational actors, from the World Bank, UN agencies, and major bilateral donors such as USAID, NORAD (Norwegian), CIDA (Canadian), and the EU HIV/AIDS Programme to independent foundations such as the Gates Foundation, the Kaiser Family Foundation, and the Rockefeller Foundation; universities (Harvard, Johns Hopkins, Tulane, University of Washington, Baylor, and many others); and the enormous array of organizations that get contracts from the big funders to carry out actual AIDS projects on the ground—organizations such as Population Services International (PSI), Family Health International (FHI), John Snow Inc., Humana People to People, or Abt Associates.

In addition to these more or less mainstream players, there is an array of other organizations, from large, established philanthropic and development organizations such as World Vision, CARE, the Peace Corps, and Save the Children, to missionaries and activists from a variety of religious denominations (both those, like the Catholic Church and the Seventh-day Adventists, who have long had a presence running hospitals and clinics in Africa and those Pentecostal and Evangelical missionaries who are often drawn to AIDS work by an individual calling). And then, if one is "on the ground" even briefly in one of the AIDS-affected countries, one will quickly come across spontaneous individual enterprises such as the Canadian undergraduates whose professor wanted them to have an experience working with AIDS orphans in Botswana; the Baptist church members from Arkansas who arrived in Malawi and set

about finding villages for which they could dig boreholes (wells deep enough to have clean water); and the many other "mom-and-pop" charitable groups that are seeking a way to link up with local people to whom they can offer funding, projects, or volunteer labor. Nonetheless, despite a dizzying array of new actors (the Clinton Foundation), new initiatives (PMTCT+) and even new approaches ("routinizing" HIV testing), on the ground many of these international organizations end up doing, or trying to do, many of the same things.

Isomorphism the Easy Way: Buzz Words and Slogans

In a classic article, Paul DiMaggio and Walter Powell (1983) analyze the forces that produce "isomorphism" among organizations, making a set of organizations more and more alike. John Meyer and his students have shown across a wide variety of organizational types—corporations, American municipal governments (Tolbert and Zucker 1983), and nation states (Meyer 1983, 1987)—how shared images about what constitutes and/or legitimates a particular kind of organization drive organizations to adopt similar structures and purposes. Organizations may conform to dominant models because their personnel are selected from a common pool trained in similar ways, because their environment "selects for" organizations of a single type, or because, in a process DiMaggio and Powell call "mimetic isomorphism," organizations see themselves as members of a common type and adjust their structures, personnel, and policies accordingly. The question these institutionalists rarely raise is: how do institutions actually function when world-legitimated forms are imposed on top of (and often in conflict with) indigenous models.

At least in theory, all the resources necessary to impose Western practices and forms on the institutional order of the Global South are in place. International donors have the expertise; they often work through country staff educated in and oriented to Western nations. They provide the financial resources (see Luke and Watkins 2002), and both donors and recipients take for granted the right of donors to monitor how their resources are spent. And, finally, international staff and their views of legitimate practices often have considerable cachet.

Despite these advantages, I argue, the "success" of the Global North's attempts to impose its forms and principles has been remarkably limited. The one area in which global models have penetrated, however, is at the level of rhetoric and ideology. Some of this influence is direct: local people discover that they increase their chances of jobs or funding if they say the right things. But a great deal more of it comes from the earnest belief that, at least in some respects, the Western view is the prestigious, legitimate, "correct" view, which

any right-thinking person would share. In Malawi, a young employee of the motel where I stayed told me that local "customs"—such as the taboo on sexual intercourse during the latter months of pregnancy and for several months after giving birth—are an important cause of AIDS. Many people told us either that they had been "sensitized" (or that others needed to be sensitized) on issues such as gender or stigma. When, during a 2004 survey project in rural Malawi,[4] the Malawian supervisors had the job of selecting forty interviewers from the 150 or so who had applied, their chosen method was to give each applicant a questionnaire designed to ferret out how many of the "misconceptions" about AIDS that health surveys track the local applicants still held (reducing these misconceptions is among the UN's Millennium Development Goals). They regarded being able to name five NGOs working on AIDS in Malawi as another important marker (though the AIDS NGOs might be alarmed to know that many of the local English-speaking high school graduates who applied for interviewer positions could name none of the international organizations, such as Save the Children, World Vision, or CARE, doing AIDS work in Malawi).

Vinh-Kim Nguyen's (2005a) research on a community of men in Côte d'Ivoire shows how Western understandings of self, disease, identity, and the body are enacted as Ivorian men who are part of an underground group of men who have sex with men recast themselves as "gay" men with the rights of "therapeutic citizenship." As Nguyen summarizes his argument:

Spurred by funding from development organizations and other international donors with AIDS prevention on their agenda, local community groups began to proliferate from 1994. Drawing on health education approaches honed in AIDS prevention campaigns in the West, these community groups were vehicles for disseminating AIDS prevention messages that encoded normative, biologized notions of sexuality.... [T]he social technologies imported by international NGOs to prevent HIV/AIDS furnished an opportunity for Abidjan's homosocial communities to re-define themselves in light of the "new facts of life."

Transnational and transcultural negotiations were used to adapt social practices imported by AIDS NGOs to local circumstances, helping to reshape the cultural geography of same-sex relations. These practices advocated sexual openness such as frank depictions of sexual activity in order to foster the adoption of safer sexual practices such as condom use during penetration. They also sought to "give a face" to the epidemic by using confessional technologies (techniques used in workshops such as role playing, using open-ended questions, and so on) to encourage

Africans diagnosed with HIV to "come out" about their illness and testify. Together, these practices worked to link dissident performances of gender to notions of sexual orientation. (246–47)

In a study of the responses of developing-country elites to the 1994 "Cairo" reorientation of population policies, Luke and Watkins (2002, 727) found that "[e]nthusiasm was most evident in rhetoric," but they also "found limits to the control exerted by global agencies." National elites used their control over policy implementation to "pick and choose among the items on the Cairo agenda," supporting "family planning and maternal health programs, programs that had long been promoted by the international community and had become domesticated, familiar items in the health services landscape" (728), but ignoring such priorities as domestic violence or treatment of STIs. Luke and Watkins also note the importance to local actors of "realist" concerns, the awareness of both NGOs and government officials that donors provide the money and expect some control. Those working for NGOs were more uniformly enthusiastic about the Cairo agenda, perhaps because NGOs (and the relatively higher salaries foreign-funded NGOs offer) are directly dependent on donor funds, and even on enthusiasm for donors' priorities.

Despite the enormous leverage that donors can exercise over those they fund, it is surprising how often—on the ground—local people resist or subvert donor intentions. Indeed, the AIDS fight has already expended enormous resources with, to date, relatively little effect.

Difficult Isomorphism: Affecting Actual Governance

Despite donors' prestige and financial heft, they have more difficulty penetrating and altering local patterns of governance than one might expect. Many kinds of institutional imageries, ideologies, and buzz words are embraced with great enthusiasm by those whom NGOs and other international organizations seek to transform. But what donor organizations offer is received (or seized) within a different social organization, where intended and actual effects differ. In order to understand the penetration of new models of governance, it is important to know how governance actually operates on the ground— what power, influence, and administrative authority actually consist of. Only attention to the actual characteristics of African systems of governance can help us understand why some NGO interventions take root and thrive, while others fail to take hold, or, even if they become embedded, fester rather than flourish.

Let me briefly say what I mean by "governance." I am less interested in the

formal structures of government, such as national AIDS commissions or the "multisectoral" approaches to AIDS favored by UNAIDS and other donors (I agree with John Meyer and Brian Rowan's [1977] observation that such structures operate largely as "myth and ceremony"), than in how power and influence operate on the ground. The best formulation of this understanding of governance is Joel Migdal's "state in society" approach (see Migdal 1988, 2001). Migdal emphasizes that both states and other social actors such as clans, tribes, militias, and ethnic groups "seek predominance through binding rules" and that "[t]he major struggles in many societies, especially those with fairly new states, are struggles over who has the right and ability to make the countless rules that guide people's social behavior" (Migdal 2001, 65, 64). If one thinks about what AIDS NGOs seek to accomplish on the ground, they are certainly in the business of trying to remake "rules that guide people's social behavior."

Migdal warns that state-building faces often insuperable obstacles in the form of existing leaders and the forms of cooperation and dependence they enforce. His caution applies equally, or even more so, to international donor organizations, and it is worth quoting at length for its fundamental sociological realism:

The literature on the Third World has paid scant attention to existing rule-making organizations outside the domain of the state and in conflict with the aims of state leaders. Yet, strategies offered to people through these structures may be quite complex and binding. During the last century, there has been a tremendous upsurge in the strength of many such organizations. In a large number of cases, colonial divide-and-rule policies injected vast new resources—most notably, wealth and force—into the hands of local and regional leaders, enabling them to strengthen the strategies of survival they could offer clients and followers. In turn, their ability to make and enforce binding rules of behavior also increased. Even where there was no direct colonialism, the expanding world economy funneled resources into societies quite selectively, allowing for the strengthening of . . . leaders or strongmen [who] fashioned viable strategies of survival for numerous peasants and workers. (Migdal 2001, 67)

Onto What Root Are Donor Practices Grafted? Patron-Client Ties and Personal Dependence

In their classic collection, African Political Systems, Meyer Fortes and E. E. Evans-Pritchard (1940) and their contributors describe a variety of African political systems, from formal kingdoms to loose kin groupings. Most of

these African systems nonetheless had features in common, particularly the principle that material resources derive from and are converted into interdependencies among people. Traditional African economies meant that "wealth in people"—children, wives, clients, and other dependents—was also the key to increasing material wealth (see Miers and Kopytoff, 1977; Guyer, 1993). In bride-wealth systems, young men who needed cattle in order to marry had to borrow from their elders, so that older men converted their wealth into obligations from younger men (Collier, 1988). In chiefdoms, resources flowed upward to chiefs, whose sacred power made people and land fertile and whose material resources were redistributed in performance of ritual obligations (Collier, 2004). Clan and lineage groups indebted younger or more distant members of the lineage to clan elders or chiefs, who were responsible for the well-being of their followers. In the contemporary derivatives of these systems, in Daniel Jordan Smith's (2003) language, what matters is "having people"—the connections that give access to opportunities and resources (see also Smith 2006). The fundamental meaning of wealth in turn is that it can help meet one's obligations to the people who make up one's family, clan, tribe, or ethnic group. For Nigeria, Smith (2003, 707) notes that the political economy is "structured by patron-clientism. . . . Igbos, and Nigerians more generally use kinship and other social relationships of reciprocity to mobilize affective ties for instrumental political and economic purposes. Such relationships combine moral obligation and emotional attachment. They also serve to perpetuate an ethic of appropriate redistribution that fuels corruption."

Writing broadly about African politics, Chabal and Daloz (1999, 28) also point to the pervasiveness of "vertical" ties of personal interdependence:

Most political actors are simultaneously dominant and dominated, one of the links in one of the many chains of dependence. Although there are strong inequalities within clientelistic relations, it is well to remember that patrons suffer considerable constraints. The maintenance of their status is entirely dependent on their ability to meet the expectations of their clients—clients who are, as it were, the material embodiment of their standing—and who in turn must placate their own clients.

This description of African political systems as organized around vertical ties of personal dependence, whether described as pervasive corruption (Bayart 1993; Smith 2006) or as responsive hierarchical rule (see Karlström 1996), gives us a basis from which to understand how external logics insert themselves into African contexts.

The NGO as Patron

The most obvious point is that in societies where everyone is searching for patrons and the resources patrons can provide, international NGOs and their local representatives are cast in the role of potential patrons. This means not only that locals are eager for whatever resources the foreign NGO may provide, though that is certainly the case. Even more, the foreign NGO creates resources and contacts that allow local actors to cast themselves as patrons in turn.

What are the cultural forms and social practices through which international donors and local participants actually meet? One of the most common, most recognizable, and easiest to describe is the "workshop" or "training" in which an international organization carries out its program by training or educating local staff. Daniel Smith's (2003) study of a Nigerian family-planning program is provocatively titled, "Patronage, Per Diems and 'The Workshop Mentality.'" What Smith names, anyone working in international philanthropy, and especially in the AIDS world, has noticed as well—the extraordinary interest in "training," workshops, the "training of trainers," and so forth (across the continent, Iwanda [2004, 37] refers in similar terms to "the Malawi 'seminar culture'"). And it does not take long to understand why. For local participants, training and workshops create opportunities for extra income—travel expenses and per diems—to supplement salaries far below the international standard (the very standard to which participants are exposed by interacting with international staff).

I interviewed a young American who had worked on a CDC project in Namibia, conducting "training of trainers" for Voluntary Counseling and Testing (VCT). The Americans had set up one-week training sessions lasting from Monday through Friday, but they rapidly discovered that local trainees were showing up a day late and leaving a day early. The Americans finally discovered that Namibian civil service rules wouldn't pay per diems for travel that occurred on weekends. In Malawi we were surprised at how many nurses, recently graduated from nursing school, turned down their first job assignments. Then one explained that if you weren't in the city, there were no opportunities for "workshops" and "training," and thus no opportunity for the travel expenses and per diems such activities allowed.

A Peace Corps volunteer I interviewed noted with distress that villagers she worked with in Burkina Faso expected to be "motivated" by some material reward when they participated as volunteers in an AIDS education project, a bike-a-thon to promote condoms, or a project in which groups competed to produce the best AIDS drama. She reported that "code words" had developed, so that if one called something a "project" or "training" one had to compensate people. Even middle school students, after creating maps of Burkina and Africa to paint on their school walls, angrily handed back the rulers she had given them. If she wasn't going to pay, she was told, she had to call the activity "community mobilization" or "community beautification," not a "project." "Very frustrating," she said, that "even thirteen-year-olds" had learned such expectations.

Daniel Jordan Smith (2003, 705), however, points to the much more general pattern in which "donor-funded programs involve complex and often unacknowledged accommodations between international sponsors and local implementing partners, with apparent contradictions overcome because each party is able to manipulate and interpret events, information, and the very models of what is happening to suit their own priorities." It is not only that donors and their local partners manage to get along. Rather, the same social practices operate as culturally appropriate, "successful" strategies for each party, even though the parties' understandings of those practices and their aspirations differ.

Workshops, for example, not only give local participants direct benefits—both educational and material. They also, Smith notes, allow participants to build up their own networks of clients and to reward their patrons. When a new approach to family planning was being promulgated, there was great enthusiasm about planning the workshops. "But the liveliest deliberations revolved around the selection of participants, trainers, and distinguished guests who would be invited to the opening and closing ceremonies. Such workshops were, after all, political events. At workshops, project staff could repay the patrons who installed them as officers in the 'dollar project' and build their own networks of clients by doling out the per diems and allowances that are paid to participants" (Smith 2003, 711). At the same time, workshops satisfy donors' desire to indoctrinate local people with the "correct" ideas and practices, and as Smith points out, workshops and training give donors a measurable "product"—people trained, workshops held, and information transmitted.[5]

Volunteers

Workshops and training are not the only cultural practices through which donors and local participants find common ground. Another meeting ground—one found at the village level, where international organizations seek to create programs for the actual people they hope to help—is the "voluntary group."

Particularly in AIDS work, where the question of what exactly constitutes prevention remains obscure, many organizations end up promoting the formation of clubs or other voluntary groups. In Malawi, the various NGOs such as Save the Children or World Vision, as well as a government AIDS project, all involved the creation of "clubs" in the villages. Sometimes these were clubs for youth ("AIDS Toto" ["Stop AIDS"] clubs), sometimes sports clubs that were also supposed to promote AIDS education; other activities involved groups of village youth or students who put on plays or skits to warn about the danger of AIDS. A Malawian government initiative, meant to reach rural villagers who might be illiterate and unlikely to encounter printed AIDS messages, involved creating a set of village AIDS clubs in which villagers, brought together to listen to a once-a-week radio broadcast about village life, would talk about their problems and possible solutions and then perhaps have the opportunity to broadcast their activities so that other villagers could learn from them. (In a very poor country like Malawi, radio is the means of mass communication with the greatest reach. Early on AIDS was sometimes called "the radio disease" since it appeared to exist only insofar as it had been described on the radio [see Lwanda 2004]).

Volunteering also characterizes two other common organizational strategies at the interface between donor organizations and local practices. The first is a "volunteer" management committee, often elected by other villagers. Frequently a donor, such as the Peace Corps or World Vision, requires some level of local commitment or local buy-in before the donor contributes to a project. Then a "volunteer" committee is set up, perhaps with an elected president, vice president, secretary, treasurer, and so forth, to manage the activity. This is the way health clinics were run both in Burkina Faso and in Kenya, according to interviews with Peace Corps volunteers who had worked in each place. This is also the structure World Vision uses in its development projects. An elected committee of local volunteers runs its Area Development Programmes (ADPs) in Tanzania and elsewhere. These committees of volunteers are often elected, although as one Peace Corps volunteer pointed out, those elected are often the same local influentials—a chief's brother or son, those from the wealthier end of the village—who usually run things.

In addition to volunteer groups or clubs and volunteer management committees, the actual work of donor-sponsored projects is often done by volunteers. When one interviews donors, they frequently describe, for example, having discovered or been put in touch with a village woman who had been using her own resources to feed and care for a number of orphans (some perhaps her own grandchildren) in her community. The Global AIDS Interfaith Alliance (GAIA), a small San Francisco–based AIDS organization, has such a story on

its web page: Its founder, Rev. William Rankin, met a group of twenty-seven AIDS orphans, being cared for "in a tiny village at the end of a dirt road in southern Malawi. A wonderful woman, her elderly mother, and a few teenagers care for these kids. No funds come from outside. Every second day the children receive a cup of Nsima, a maize product that is a staple of Malawi. Otherwise they get only sugared tea or sugared water. . . . When I was there I saw no child in motion, nor did any of them speak" (Global AIDS Interfaith Alliance [GAIA] 2002). One hears very similar stories from orphan care projects in Zambia, Uganda, and elsewhere.

Volunteer workers are important not only in donor-financed initiatives, but in local African responses to AIDS as well. The remarkably successful Zambian organization, Society for Women and AIDS in Zambia (SWAAZ), claims about 10,000 members in chapters around the country. These volunteers undertake the task of educating their fellows about HIV and AIDS. A Zambian AIDS hospice, whose director I interviewed, was originally organized through a local Catholic parish to care for ill parishioners, and now serves as a clinic, hospice, and orphan-care center for ten villages and compounds. It has a small paid staff including a director, a few nurses and care-givers, and a part-time physician, but its activities depend largely on volunteers—those in the villages who keep watch over AIDS patients at home, alerting the clinic when they have fallen ill and need care, and widows of those who have died in the hospice who stay on caring for other patients.

Amy Kaler and Susan Watkins (2001) offer an analysis of the underlying logic of such "volunteer" activities. They found that the volunteer Community Based Distributors (CBD) in a German-funded Kenyan family planning project often used criteria other than those officially mandated to decide which women should be offered family planning services. Kaler and Watkins show that the volunteer family-planning workers had their own agendas. They treated the local women as their "clients" and sought to offer services only in situations where they could accumulate local prestige by seeing to support community values, not in situations where they could be blamed for subverting such values. Kaler and Watkins note that the women used their volunteer positions to create what amounted to patron-client ties with the women they assisted: "CBD work is a means for women to earn respect and obligation from other people, where earning money is difficult. The GTZ/MOH CBD program may enable these women to attain a measure of power and respect by giving them new ways to take advantage of one of the few avenues open to women. International and national agendas and resources are thus being drawn into a local, historically rooted dynamic" (261).

Opportunism

Kaler and Watkins (2001) point out that the Kenyan family-planning workers did not, at least so far as the interviewers could ascertain, receive direct material benefits from their family-planning clients (as in many such projects, they may receive small stipends for transportation or other expenses). Nonetheless, they speculate, "CBD agents may be storing up the goodwill of clients against some future time of need. Given that many people in South Nyanza regard the future as unpredictable, seeing the value of respect generated through CBD work as a kind of insurance is logical" (266).

The point is a much more general one. In many areas of Africa people are very poor and much of life is unpredictable (Johnson-Hanks 2005). In such circumstances, people are frequently on the lookout for possible opportunities—to earn income or other material benefits, but also simply to build up goodwill, to open avenues of possible exchange, or to seek patrons or the potential future benefits that may come from having clients.

In general, clients need not directly produce material benefits for their patrons. Indeed, in the kind of insecure world many Africans inhabit, especially for those who do not have jobs in the formal economy, a kind of generalized "opportunism," a willingness to do favors for others with only the loosest expectation that those favors will be returned in the future, is both rational and culturally appropriate (Johnson-Hanks 2005, 2006). From soliciting a foreigner as a "pen pal," to taking generalized pleasure in sociability, to willingly doing a favor for a stranger, one notices in Africa the peculiarity of our own, Western calculations about time, personal relationships, and hoarding of people in poor circumstances to any opportunity to expand the web of connections that might bring something unexpected their way.

The presence of outsiders (especially those whose standards about money are inevitably so out of sync with local realities) creates a potential bonanza unconstrained by local resources or obligations. This is the problem of "extraversion" (Bayart 2000; Callaghy et al. 2001) writ small as well as large. Contact with outsiders creates the possibility of resources that can lubricate local patron-client ties. Here NGOs act in contradictory ways, both encouraging universalism and becoming particularistic patrons. Let me describe two different sorts of examples, both from Kenya. I interviewed a young woman who worked as the local director for a small "mom-and-pop" NGO that sends international volunteers to Africa. She always checked what she was doing with the local district commissioner, who wanted, for example, to suggest families that her volunteers might live with during their stays. The amount the organization paid these families for the volunteers' upkeep was hardly enough to cover expenses, but she acknowledged that she had herself become so committed to the family she lived with that she decided to pay school fees for life for the youngest child, a girl, who otherwise would not have been sent to school. Another student volunteer on her project was able to arrange a full scholarship at an American university for the son of the family with whom he lived. This is, if you will, double-layered patron-clientelism—the district commissioner is a patron, sending opportunities the way of his clients, and the families themselves, no doubt genuinely attached to the volunteers they house, also recruit them as potential patrons.

The other case, perhaps more typical, is that of a Peace Corps worker, Neil Gagen,[6] who spent months of frustration hoping that someone in the Kenyan health center where he worked (in a semi-rural town) would begin to take initiative, following up on ideas they generated in meetings about what projects might benefit the local community. He was willing to help—even to help local health officials with fundraising—but only if they actually had commitment to the project sufficient to follow through. Each time, after enthusiastically developing ideas in meetings, they essentially waited for him to make the ideas happen. But then, miraculously, a local man, Moses Kimosop, walked into Neil's office and announced that he had AIDS—the first person to acknowledge this illness in a region with very high prevalence. Moses had come close to death, and now he felt that God had called him to use his remaining time to educate others. Armed with this local collaborator, the Peace Corps volunteer was suddenly energized. After Moses "went public," another HIV+ couple was introduced by a district HIV/AIDS control official. With the Peace Corps volunteer's help, Moses and his wife along with the other couple founded Tolosio, the first local group for HIV+ people, gradually attracting members until their organization had some seventy members. The Peace Corps volunteer arranged for Moses to speak at local schools, and the two men formed a fast friendship. When Moses fell desperately ill, Neil was able to get him antiretroviral drugs from a nearby hospital, initially paying for the drugs out of his own stipend:

I first met Moses soon after his physical strength returned. Thin, frail and with little energy Moses began the awareness activities that would leave him exhausted afterwards. It was soon decided that Moses should be taken to a newly formed AIDS clinic at the Provincial Hospital about 2 hours outside the district. . . . With help Moses was able to afford the ARVs ($80 in Oct 2002). . . . According to one of the American doctors at the clinic, Moses would have died in January. Instead he has been able to dedicate himself to truly improving his community. The Tolosio group would not

exist if it were not for the ARVs. Moses was the leader and the cornerstone from the beginning and continues to be today as he solely manages all the day to day operations 5 days a week. At the same time without his leadership amongst the other PLWHA [people living with HIV/AIDS] it is fairly certain that nobody else would have gone public at this time. (Gagen 2004, 6)

And of course it is the Peace Corps volunteer who helped the local group apply for AIDS funding from the new National AIDS Control Council and who has also raised funds through his friends back in the states to support antiretroviral drugs for Tolosio's members.[7]

In my interviews, in case after case, the critical breakthrough for an NGO is finding the right intermediary, someone who is familiar with the local region and can navigate local barriers for the NGO, but also someone the NGO workers can trust—someone who seems genuinely dedicated to the welfare of the local community, who is honest, and who can serve as an extension of the norms of participation and local involvement that the NGO shares. Sometimes the local intermediary is an international who has been in the region for many years: an Italian priest who had been in Guinea Bissau for thirty years facilitated a UN official's contact with a charismatic local woman who became the key activist committed to guinea worm eradication; a Polish nun attached to the local Catholic church founded the Zambian AIDS hospice. But more often the key to success is simply stumbling on a local partner who provides the access and local contacts the NGO is seeking. Sometimes a school principal or the minister of a local church makes his organization an ally of the international NGO; and sometimes, as in Moses Kimosop's case, it is simply a key individual. It is inevitable in such circumstances that the NGO (or the individual NGO worker) becomes a kind of patron to the local collaborator, who may in turn have clients of his or her own.

Another example of such a strategy is GAIA's relationship with Jones Leviwa. GAIA was created to take advantage of an African interfaith network (and the fundraising prowess of its founder, Rev. William Rankin) to try to intervene in Africa's AIDS epidemic. At first GAIA worked in Tanzania and Kenya supporting various worthy projects—an orphanage, a self-help group, and the like. But then they renewed their relationship with Jones Leviwa, a religious leader who had worked in Malawi. Through him, GAIA developed a new "model," a "women's empowerment project funded by the Bill and Melinda Gates Foundation. Working in 25 villages in Malawi's famine-stricken south, the 125 community caregivers provide HIV prevention education, care for orphans, and care for people who are ill" as well as encouraging VCT and

trying to overcome stigma.[8] After developing their successful connection to Mr. Leviwa, GAIA decided to focus all its energies on Malawi. There Mr. Leviwa decides what villages to enroll in the program, sets up the local programs (in which, after public meetings to explain the program, women are elected by their fellow villagers) and monitors their success. Donors and officials of GAIA visit these villages and various other projects their organization supports, writing to their supporters to report heart-rending suffering and heart-warming progress. The orphans who were so malnourished they didn't move during an earlier visit by Dr. Rankin were now playing happily:

Two years ago, when Bill Rankin visited Tiyamike School he had come away greatly disturbed by the 27 three- and four-year old orphans. Their nutritional status rendered them virtually inert and mute. ... But in May 2004 GAIA trustees Nancy Murray, Dr. Don Thomas, and International Programs Director Ellen Schell visited the little village in which the nursery school is operated, near Zomba, Malawi. They recorded a remarkable change that had taken place, owing to the generosity of many of you.

This year 75 orphans receive two meals each day: a breakfast of porridge, and a lunch of corn meal, vegetables, and sometimes dried fish. There is a new outdoor house in which the children gather and play. Though the number of orphans continues to grow, the kids are full of life, bouncing around the yard and eager to have their pictures taken. (GAIA 2004)

Dialectics of Patronage: What Clients Do for Patrons

In this concluding section I bring together three lines of argument: Steve Cornell and Joseph Kalt's (2000) work on "cultural match," the role of patron-client ties in organizing the interactions between NGOs and their clients in Africa, and the problem of how Western donors seek accountability as they pour resources into the struggle against African AIDS.

I start with accountability. The World Bank and other donors have devoted resources and expertise to the effort to create Western-style bureaucratic accountability for donor-funded projects in sub-Saharan Africa. Malawi, the first African country to receive a GFATM grant to deliver antiretroviral drugs, the country that Stephen Lewis has described in glowing terms as a desperately poor country determined despite overwhelming odds to get ARVs to its people, and the only country permitted to pool donor funds rather than having them earmarked for specific programs, has a monitoring and evaluation plan created in a year of exhausting labor by a World Bank consultant working with

Malawi's National AIDS Commission. The consultant's job was to corral Malawian officials and stakeholders and to invent or adapt bureaucratic mechanisms to monitor the results of AIDS expenditures (Malawi National AIDS Commission, 2004). It will come as no surprise that finalizing the monitoring and evaluation system required many workshops and considerable "training" and "training of trainers" to perform the monitoring activities the plan requires.

The monitoring and evaluation plan calls for substantial grants to five "umbrella organizations" that are responsible for gathering and coordinating the information required for monitoring (the initial round of grants are announced in National AIDS Commission 2004): Action Aid Malawi, Canadian Physicians for Aid and Relief (CPAR), World Vision International, Plan International, and Save the Children (USA). Each of the umbrella organizations is responsible for coordinating data gathering and monitoring sub-grants to local NGOs and community organizations, with Malawi's twenty-eight administrative districts divided among them.[9]

Examining how these umbrella organizations actually work reintroduces the issue of patron-client ties. World Vision and Save the Children operate "child-sponsorship" programs in which donors give money to support a child and then, at least in theory, receive reports or letters from the child they have sponsored. Over time, however, these organizations have become more general development organizations. As we learned in a visit to one of their local offices, they support many families in a village, in part to prevent envy of particular children and families who are supported. And the chief has some influence over which families get support. Several organizations also support more general development projects, such as wells, health centers, and other improvements. Thus the organizations responsible for Malawi's formal monitoring and evaluation activities are themselves part of another very different and considerably less bureaucratic system. They are acting as patrons, both directly by providing financial support to families and villages and indirectly by allowing chiefs and other local influentials to direct their efforts to particular villages.

If patron-client ties organize the relationship between Malawi's bureaucratic monitors and local community members (additional patron-client ties—or at least additional opportunities for the benefits of myriad workshops and training sessions—are built into the monitoring and evaluation process itself), then we can ask what it is that clients do for their patrons. This is a question rarely asked about patron-client systems. Of course, where there are benefits to holding office and clients possess votes, as in the operation of big-city political machines, clients provide votes for their patrons. In the literature

on African societies, there is an assumption that simply showing that one is a big man, that one is wealthy enough to attract numerous clients, is a source of prestige and influence. And of course where underlings have control over resources—as in invitations to workshops that can be directed back to patrons, or general favors, flattery, or information—patrons may benefit in important but hard-to-specify ways from having clients. But if clients are poor families in a village, people living with AIDS, caregivers, orphans, or other recipients of donor aid, one has to ask what these people might do for their patrons. The answer, of course, is that they can show up and be counted.

The value of NGO clients is both formal and informal. In Malawi the larger, more experienced NGOs such as Save the Children and World Vision keep formal records documenting their activities. Local staff fill out forms reporting the number of young people who participate in youth group meetings, the numbers who come to hear an AIDS theater presentation, the number who attend an AIDS club, and so forth. While the administrators of such programs acknowledge that they can't really verify the accuracy of such reports, forms are filled with very specific numbers—seventeen at this meeting, three children enrolled in vocational education, one who is in high school—and aggregated into monthly, quarterly, and annual reports. Their experience with such detailed record keeping makes the five umbrella organizations in Malawi good candidates to coordinate national record keeping and to train other NGOs to do the same thing. Malawi's NAC Activity Report System (NAC ARS) rests on such activity report forms.[10]

For most NGOs however, counting people on forms is not the major way they benefit from their clients. Rather, clients appear when donors, officials, or NGO administrators visit. It is the actual flesh and blood appearance of villagers—orphans playing, women meeting to discuss AIDS, teenagers performing, and so forth that directly demonstrates the organizations' effectiveness.

If one tracks AIDS organizations' self-presentation, one finds report after report in which NGOs and their donors recount visits with local people. Such visits are especially important for organizations, such as Save the Children and World Vision, that depend on child sponsorship by individual donors. At the local office of one such organization in rural Malawi, pictures of individual donors were displayed on the wall, and we heard reports about the visits of these donors. Indeed, one of the ways the local administrator assures himself that out in the field there really is a women's group, or a children's AIDS theater project, or an AIDS club is that the members of such groups assemble to meet groups of donors on tour. Hundreds, indeed thousands, of similar reports are found on the Internet. An excerpt from the second day's journal kept during a week-long visit to Malawi by a Save the Children delegation (board members,

a development professional, staff, and several donors) in February 2002 gives a flavor of these visits:

[After lunch] we drove further into the hills, to visit Ngowo VAC [Village AIDS Committee], at Chiumbangame Village.... The villagers were not only patiently waiting for us, but broke out into traditional song as we arrived. This was a COPE [program] village, and it showed.

Chiumbangame Village has a population of 3200, with 50% under 15 years old, and 137 orphans. Like many others, the estimate was that there were 7 to 10 times more orphans than 10 years ago, and life expectancy was dropping for all.

Whilst the death rate was depressing, and the orphan count high, the Village was taking its future into its own hands. There was lots of laughter as short speeches on progress were given by the VAC Chairman and Secretary—although with an even bigger smile we all realized that it was one of the mothers that is the critical player in driving the VAC forward. Whenever a question needed answering, she was the one to cover the issues in the most detail—even as she breast fed her baby. Later, she proudly introduced us to a terminal Aids patient who, through good home care, was at least enjoying a non-stigmatised life in her Community.

After photographing some of the children, provoking "Mob Scenes. Funny scenes. Poignant scenes. Life," the trip's diarist concludes:

There is an active Youth Group, who sang us their songs about HIV, safe sex and helping others. We all wondered whether the kids at home could (or would) do that.[11]

Accountability, Patronage, and Cultural Match

Like many other scholars who have studied international development programs and the role of NGOs, I am skeptical that most development projects can live up to their lofty goals, or that many locals involved in the programs actually want them to. But perhaps the issue of accountability cannot really be solved, as the World Bank and the Global Fund are attempting to do, by developing the sort of tight, bureaucratic paper trail of accountability we see in the Malawi NAC monitoring and evaluation report. To understand what the alternative might be, I turn briefly to Steve Cornell and Joseph Kalt's (2000) concept of "cultural match." In a study of more than two hundred American Indian tribes, Cornell and Kalt found that a tribe's economic development

was predicted by the quality of its governance and not by any other measures of natural resources, local labor market conditions, human capital, or other factors. They then asked what causes good governance, concluding that the degree to which a tribe is governed by a structure similar to the form of government it had before conquest—the degree of "cultural match" between its current government and its historical pattern—is the best predictor of current success in governance.

Of course, in Africa there was, historically, no single form of "government." Africa had an extraordinary diversity of political units, varying in size, complexity, and form of governance, from Bantu bureaucracy to kingdoms and empires like those of Benin or Ashanti to chiefdoms and acephalous bands. Furthermore, whatever the "traditional" configurations of governance, they were often destroyed or defeated, and when left intact were altered by incorporation or cooptation within systems of "indirect rule" (see the classic analysis in Mamdani 1996). Nonetheless, as I have argued above, what seem to survive are structures and cultural patterns resembling chiefdoms, in which power and resources flow to a chief, who redistributes resources "downward" to his people. Mamdani offers a powerful analysis of the way traditional chiefdoms were altered by colonial rule. Rather than the traditional pattern, in which chiefs were responsive because the people could always "run away" from a bad chief (Mamdani 1996; Herbst 2000; Collier 2004), colonial powers and postcolonial states imposed territorially defined rule, often backed with military force, and turned the chief into a tax collector, so that resources flowed upward to chiefs but failed to flow down again. The responsive chief whose sacred power and redistributive ritual actions guaranteed fecundity of people and animals was replaced by the corrupt chief who monopolized resources without redistributing them.

Despite this bleak picture, there is considerable evidence that ideals of "good" chieftaincy remain vital African cultural patterns. Mikael Karlström's (1996, 1999) work on cultural understandings of Ugandan politics suggests that the ideals of civil interaction within the clan, and of chiefs who are "democratic" because they "listen to" or "consult with" their people, remain persuasive. The pervasiveness of patron-client ties suggests a resilient set of cultural practices in which people seek security by embedding themselves within "vertical" relationships, in which support flows upward to patrons and resources flow downward to clients. As Chabal and Daloz (1999) repeatedly note, "bad" patrons are not those who are corrupt, but those who fail to redistribute their gains to their kin and clients. Therefore, they argue for a "properly grounded 'moral economy of corruption,'" in which the standard of accountability is not whether universalistic, neutral norms are applied, but whether leaders in fact "redistribute along lines that are judged to be socially desirable" (99–101).

Here again, Malawi is instructive. Dr. Hastings Kamuzu Banda, the dictatorial president who governed Malawi from before independence in 1966 to 1994, is now viewed with some nostalgia: he built roads; he had wells dug; and most important, he stored vast reserves of grain in silos outside the capital city, so that when famine came he could redistribute grain to the people. (Banda also portrayed himself as the "uncle" or mother's brother responsible for the children in a family.) The silos are still there, towering over the capital, but now they are empty—one is told because the new political leaders, no doubt under pressures for structural adjustment, sold off the grain to European traders. When famines came in 2001 and 2002, there was no grain to redistribute to keep the people alive. Both Banda and the new leaders are taken to be corrupt, but Banda did what good patrons do: he redistributed resources to his people, especially those in need. This image of Kamuzu Banda as the uncle who provided for his people in times of want is another piece of evidence testifying to the resilience of patron-client ties as a central way of understanding political relationships.

Recognizing patron-client ties as a pervasive cultural code suggests an alternative way to think about the export of cultural logics by NGOs and other philanthropic or nonprofit organizations. Perhaps what really matters is not whether NGOs enter, despite themselves, into patron-client relationships in which they are cast as patrons. Instead the question is whether NGOs institute social practices that make patrons more responsive to their clients. Those who administer NGOs should be asking whether the concrete social practices they put into effect give clients leverage to keep their patrons aware of their responsibilities to consult, to consider their clients' well being, and to redistribute resources, or whether local NGO staffs consider themselves the end of the patron-client chain, monopolizing access to those external agencies that provide the resources.[12]

George Collier (1994), in an analysis of the political and economic background of the Zapatista rebellion in Chiapas, Mexico, develops a contrast between what he calls "cooptative or remunerative" political strategies and "exclusionary" ones. He argues that as the flow of patronage resources through Mexico's political system decreased during the 1980s, the old system, in which local leaders put together large followings of potential voters to win public works projects or other benefits for their communities, was undermined by emerging class divisions and by a sharp constriction in the flow of government resources. Small cliques competed to monopolize what there was and exclude others. In an earlier period,

Mexico's ruling party secured widespread support through redistributive state programs which successively bought the loyalty of one, then another

sector of society. Mid-century indigenous leaders consolidated followings by brokering such programs as land reform, road building, and schooling. But competition for the largesse of oil-fed development in the 1970s sharpened factional splits in communities like Zinacantán. Ambitious state projects drew rank and file into semiproletarian wage work, as elites competed to profit from trucking and commerce, and Zinacanteco stratification shifted and sharpened. Earlier politics of rank, in which generous leaders heralded the right to speak for followers on whose support they depended, gave way to relations of class in which elites' power no longer depends on followings. Leaders now sometimes disdain to drink with would-be followers. (1–2)

Collier's distinction between exclusionary and cooptative politics is useful for thinking about the relationship of NGOs to their constituencies in sub-Saharan Africa. We might pose the contrast as one between "exclusionary" politics, in which local elites try to capture the flow of resources from international NGOs by shutting others out, and a more redistributive patron-client system, in which patrons depend upon, and thus are responsive to, their clients.[13]

More generally, we might think about the relationship between NGOs and patterns of local governance by asking when NGO activities will increase or decrease the local accountability of both governmental and non-governmental activities (see Tsai 2007). We should ask how NGO interventions increase or decrease social trust, social capital, and the local rootedness of political institutions. Putting the matter this way focuses attention on the many ways in which international funders, however virtuous and well thought out their programs, inevitably turn the sights of local actors "upward" toward funders and their priorities, rather than "across" toward potential collaborators and allies on the one hand, and "downward" toward potential clients on the other.

Working inductively from interviewing and observing NGOs of various sizes working in a variety of ways on the ground, I have found that the usual rhetoric about including all "stakeholders" (see Campbell 2003) or adopting a "multisectoral" approach probably doesn't do much good. But practices that adapt culturally meaningful, local institutional forms to new purposes can have great value. A second discovery is the critical role played by certain "brokers" who mediate between local communities and international donor organizations. Sometimes, as in the case of the Peace Corps volunteer in Kenya, a donor organization finds a local ally who is public-spirited, honest, and committed to the goals of the international actor, and who provides a way to link up with the local community. In several other cases, an international—a priest, a missionary, or an NGO worker—with years of local experience, good local contacts,

and the trust and respect of the local community can make all the difference in embedding an international program in the local institutional landscape. In such situations, even when foreign funding is involved, what Cornell and Kalt call cultural match can operate to "indigenize" the international organization and to help new institutional possibilities emerge.

One of the most important parts of such cultural match is the ability of international organizations to manage patron-client ties. The aspiration should be to stimulate and reinforce responsive patrons who seek to redistribute resources downward to their clients. Odd as it may seem, something as simple as having the donors show up to observe the clients may stimulate the sort of patron-client ties that can make programs responsive to the communities they serve.

Despite the many failures of African politics and the disruptions, distortions, and perversions of traditions of African chiefdom, these cultural patterns still have real vitality. Indeed they have remained resilient in the face of greater onslaughts than the current wave of NGO missionaries and transparency reformers from the World Bank (Collier 2004). In part this is because no new institutional order—such as a market economy with a reliable labor market—has emerged to provide alternative rules that could organize daily life (Migdal 2001). Insecurity encourages constant "opportunism"—the fluid quest for possible connections that could lead to economic opportunity, exchange and mutual help, or ties to a responsive patron (Johnson-Hanks 2006).

NGOs and other international donors enter this cultural terrain with their own agendas. But whatever their intentions, they are likely to be cast in the role of patrons, with willing clients. This is as true of missionaries or other religious organizations (Englund 2003) as of international NGOs. Waging direct assaults on local patterns of organization is not likely to prove successful. But attempting to build on and extend local patterns in more robust and productive forms can generate new institutional capacity, as when the Zambian hospice becomes a focal point for communal mobilization to watch out for those living with AIDS, to care for orphans, and to provide medical care. This is what Cornell and Kalt mean by "cultural match"—the preservation of notions of accountability, forms of micro-political practice, that can be reanimated to make a political system work.

Acknowledgments

Notes

1. There is a large literature on the ambiguity of the NGO concept and the conflicting evaluations of the role and effectiveness of NGOs. For examples, see Fisher (1997); Khagram et al. (2002); Keck and Sikkink (1998); Kassimir (2001); Sharma (2006).

2. Family planning (now framed as "child spacing" or "reproductive health") also attempts to alter fundamental aspects of sexual relations, interactions between women and men, and family life. But AIDS prevention and treatment have the added complexity of dealing with stigmatizing disease and death, addressing sexual practices seen by both local and international actors as "promiscuous" or immoral. For a picture of the political and social tensions that surrounded early family planning efforts in Zimbabwe see Kaler (2003).

3. The downward revision in numbers of infections is due to newer methods of estimating HIV prevalence based on surveys rather than testing pregnant women at antenatal clinics, not to a decline in the actual number infected (see UNAIDS/WHO 2007).

4. The core of the Malawi Diffusion and Ideational Change Project (MDICP) is a demographic survey of social networks, attitudes, and behaviors relevant to HIV/AIDS. The MDICP has conducted five surveys in rural Malawi, in 1998, 2001, 2004, 2006, and 2008. The initial sample consisted of approximately 1,500 ever-married women and their husbands; in 2004, a sample of approximately 1,500 adolescents (ages 15–24) was added. Semi-structured interviews with randomly selected sub-samples of the initial sample were also conducted. More detail is available at www.malawi.pop.upenn.edu.

5. Smith (2003, 712) also notes that "[f]or international donors, workshops and other training activities fit the dominant Western model of social change. This Western model assumes a Eurocentric perspective in which 'traditional' (Nigerian/African) cultural beliefs are viewed as inhibiting the kinds of practices that development agencies aim to encourage. It also privileges a construction of the individual as an autonomous rational decisionmaker. The working premise is: 'provide the target population with "the right information" and people will make "the right decisions"' (i.e., adopt contraception to lower fertility)."

6. All interviews were carried out with guarantees of anonymity and confidentiality; the informed-consent form offered interviewees the option of using their real names. This volunteer, Neil Gagen, wanted his name used. Moses Kimosop's name appears in the literature of Tolosio and in Mr. Gagen's written description of his experience, which he has circulated in an effort to raise funds to support antiretroviral therapy for members of the Tolosio group.

7. Vinh-Kim Nguyen (2005b) describes another case in which those who "came out" and participated actively in a self-help group attained privileged access to scarce antiretroviral drugs.

8. Available at: http://www.thegaia.org/news/archives/june2004.htm (accessed November 22, 2004).

9. The five umbrella organizations are assigned to divide up Malawi's 28 districts as follows. These organizations have received grants through Malawi's National AIDS Commission to carry out the training, the workshops with stakeholders, and the actual data collection their monitoring role requires (Malawi National AIDS Commission 2004, 45).

Action Aid: Chitipa, Chiradzulu, Zomba, Thyolo, Mulanje, Phalombe, Mwanza;
World Vision: Ntcheu, Ntchisi, Machinga, Dowa, Mchinji, Dedza, Nsanje, Chikwawa;
CPAR: Nkhata Bay, Rumphi, Likoma, Karonga;
PLAN: Kasungu, Mazimba;
Save the Children: Neno, Mangochi, Nkhotakhota, Balaka, Salima, Lilongwe, Blantyre.

10. Malawi's monitoring and evaluation system is enormously complex. There are many problems of coordination, both internally—for example, reading between the lines, one surmises that the Ministry of Health, with its own hospitals, clinics, and professional staff, is reluctant to become part of the NAC reporting system—and externally, where, for example, someone has to make sure that among Malawi's AIDS indicators the UNAIDS's Millennium Goals are included. Health indicators (such as sero-prevalence for pregnant women), information from surveys such as the DHS, and figures such as the number of people on antiretroviral drugs also have to be included. The planned role of the activity report forms is described as follows:

NAC ARS database: All NAC Activity Report Forms received from implementers of HIV interventions on a monthly basis are recorded electronically by capturing data onto the NAC ARS database. A draft database was developed in July 2003 for capturing all piloting information, and it was agreed during this first stage of development that the FMA would develop a comprehensive and fully functional database once it has taken over the administration of the NAC ARS. By the start of the mission, the FMA has not yet developed this database. It should be noted that events during the mission itself and some of the recommendations in this report negates the need for this to be developed by the FMA—please refer to section 5.5 for more details. (Malawi National AIDS Commission 2004, 15)

11. Available at: http://www.yatesweb.com/Africa/Malawi%203.htm (accessed January 31, 2005).

12. In a fascinating article, Harri Englund (2003) develops a remarkably similar analysis of the theological and practical conflicts that arise within Pentecostal churches in Malawi about whether the religious leaders will share or seek to monopolize the spiritual and material benefits that come from alliances with churches from abroad.

13. See Leonardi (2004) for others who are thinking about accountability in these terms.

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PART 4.
Transnational Logics