

“AIDS is Money”: How Donor Preferences Reconfigure Local Realities[☆]

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Summary. — There is growing concern that the global response to AIDS in sub-Saharan Africa is compromising the region’s human development more broadly. Through a case study of Malawi, I examine the impact of AIDS prioritization by international donors on the country’s NGOs and analyze why AIDS wields such influence on development work. In the last 20 years the Malawian NGO sector has evolved to favor AIDS above all else. AIDS has come to possess prestige and legitimacy that other development sectors are denied. Although guided by good intentions, AIDS efforts may have hindered attempts to address other, non-AIDS, development issues.

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1. INTRODUCTION

AIDS in Africa is a vital issue. The disease’s tremendous regional devastation has captured the world’s attention making sub-Saharan Africa nearly synonymous with the illness. As a result, the global response to AIDS in Africa has been immense: an entire new industry emerged with new organizations, budding experts, and massive financial backing—all devoted to a single disease. Since this emergence, there has been a profound reconfiguration in development efforts targeted to sub-Saharan Africa prioritizing AIDS over other concerns (England, 2007). Yet, because we all take for granted that AIDS in Africa is a catastrophe, we are less cognizant of the potentially detrimental effects that can arise precisely from the extreme emphasis that society has placed on this disease. This paper deviates from the perspective commonly held by those working in development: that AIDS can be addressed effectively in isolation of other issues. Instead, I adopt a wider analytic view and examine the interaction between AIDS and non-AIDS development concerns in sub-Saharan Africa.

Sub-Saharan Africa struggles with a staggering list of non-AIDS development challenges. In the health sector alone the list is substantial: maternal and child health, respiratory and gastrointestinal infections, and zoonotic illnesses such as malaria, just to name a few. All contribute substantially to avoidable morbidity and mortality within the region (Lopez, Mathers, Ezzati, Jamison, & Murray, 2006). Beyond medical issues, education, agriculture, food security, nutrition, sanitation, governance stability, gender equality, and political freedoms remain disturbingly low and are some of the most abysmal in the world (UN, 2006). While AIDS has dominated the global consciousness, the same cannot be said of these other issues. For instance, through Product (RED)[™] when opening a magazine, turning on the television, or going shopping, movie stars, musicians, and supermodels remind us of the importance of AIDS in Africa. Yet, we do not see such intense marketing campaigns and celebrity with respect to these other pressing development concerns (Ellis, 2008; O’Manique and Labonte, 2008; Richey & Ponte, 2006).

The questions that I raise in this paper about society’s handling of AIDS in Africa are similar to those raised in the past, albeit with respect to a different context and professional field. In the 1990s, US public health professionals debated society’s response to AIDS as contrasted with other health issues,

including the inequities generated by special financial allocations to cover the high costs of AIDS pharmaceutical treatment as compared to other health conditions. In these discussions a new term, “AIDS exceptionalism,” was introduced to refer to the difference in attention and resources allocated to AIDS *versus* other health issues and raised questions about the ethical and practical ramifications of such discrepancies (Bayer, 1991; Bessesen & McCollum, 1999; Bolan, 1999; Casarett & Lantos, 1998; Frothingham, 1999). In the case of the global response to AIDS and sub-Saharan Africa’s human development, are concerns of AIDS exceptionalism equally valid today?

2. RESEARCH AIMS

Building on the aforementioned work, I seek to understand the effects of donors emphasizing AIDS on human development efforts more broadly.¹ In contrast to other researchers (Birdsall & Kelly, 2007; Farmer, 2007; Garrett, 2007; Shiffman, 2008), I do not confine my analysis to the health field or a single development sector but rather study several

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issues across the human development spectrum. My first research aim is to examine the impact of AIDS prioritization on human development nongovernmental organizations (NGOs). To address this aim I study donor-funding behavior and analyze unique and original data sources on NGO sector dynamics from the last 20 years. My second research aim is to analyze the factors that account for why AIDS exerts such influence on development thought and practice. These objectives are explored using a single country, Malawi, as a case study.

The first research aim examines the relationship between NGOs and their environment, drawing on the sociological literature on organizational ecology and resource dependence. Across organizational types, from those pursuing humanitarian to for-profit objectives, organizations rely on and are greatly shaped by their resource contexts (Pfeffer, 2003). In general, a plentiful resource base allows organizations depending on that resource to flourish (Hannan & Freeman, 1987; Stinchcombe, 1965). Accordingly, one easily anticipated outcome of the increase in available AIDS resources, due to the actions of international donors, is an increase in the number and longevity of NGOs working in the AIDS sector.

Yet, one cannot easily predict other unforeseen externalities that may result from an increase in AIDS resources and global attention. Given that AIDS is not the only development issue in sub-Saharan Africa, it is vital to understand how AIDS exceptionalism affects these other concerns, and what factors mediate this process. On the one hand, as more resources are directed to AIDS, the resource base for non-AIDS work may diminish, placing them at a distinct disadvantage. On the other hand, the influx of AIDS resources may benefit other development sectors if they forge a connection to AIDS. For instance, NGOs pursuing general health efforts may be able to piggyback on AIDS monies because these two areas of work are alike in that they involve similar actors, infrastructure, and knowledge. At the same time, those sectors that are at a greater distance, conceptually and pragmatically, from AIDS, such as water sanitation and environmental conservation, may be placed at a disadvantage because they cannot make a persuasive link to AIDS and, as such, cannot access AIDS funds. Phrased another way, differences in organizational capabilities may permit the niches of some NGOs and not others to include AIDS finances as part of their resource base (Baum & Singh, 1994; Carroll, 1985; Podolny, Stuart, & Hannan, 1996). Additionally, donor preferences and available resources for AIDS may create incentives for organizations to change objectives (Hulme & Edwards, 1997) such that NGOs abandon non-AIDS activities to pursue AIDS work.

With the second research aim, I attempt to push analytical thinking beyond financial resource considerations and assess how AIDS is conceptualized as an issue. Other than financial incentives, what else influences an organization's pursuit of AIDS work? While financial resources are undoubtedly a crucial part of organizational environments, they are by no means the only important components. Legitimacy claims and value judgments also influence organizational behavior (Meyer & Rowan, 1977; Podolny, 2001; Scott & Meyer, 1991). Accordingly, I draw on institutional theories to examine the normative qualities of AIDS, and the worth it possesses as a problem as compared to other development concerns.

In summary, I focus on the actors, who either supply key resources or exert a regulatory influence on organizations, and the relationships that play out across scalar levels, from international donors to local NGOs. This perspective better reflects the larger web of relations in which NGOs are embedded and

evolve (DiMaggio & Powell, 1983; Scott & Meyer, 1991), and thus captures important effects of the AIDS emphasis that would otherwise go unnoticed. My overall approach is consistent with that of other scholars who have examined NGOs in relation to their material and institutional contexts (Cooley & Ron, 2002).

3. NON-GOVERNMENTAL ORGANIZATIONS

While the term NGO is often used to refer to any private (as opposed to state-based), not-for-profit organization pursuing a diverse range of objectives (Beckfield, 2003; Boli & Thomas, 1999), I use the term NGO and study these organizations in the particular context of international development. In this professional field, the vast majority of NGOs work on human development and social welfare activities (Korten, 1990). NGO can refer to small, local, single-issue focused organizations as well as large, multi-national, multi-issue organizations (such as Save the Children or Oxfam). In Malawi, the 2000 NGO Act specifically defines NGOs as organizations pursuing "developmental and charitable purposes including but not limited to, educational, health, welfare, advocacy, cultural, civic, social, recreational, scientific, environmental, or other similar objects for the benefit of the general public" (Malawi NGO Bill, 2000). This definition mirrors those found in the academic literature (Korten, 1990; Sandberg, 1994).

NGOs are heavily reliant on international sources of support from multi-lateral, bi-lateral, and foundation donors, obtaining up to 90% of their funds from these sources (Hulme & Edwards, 1997; UN, 2003). In order to access donor funds NGOs must submit applications for funding lasting anywhere from a few months to a few years (Cooley & Ron, 2002). Consequently, NGOs must devote considerable time to identifying potential sources of funding and to grant writing. Given that NGOs greatly depend on international donors, fluctuations in donor preferences and activity can have a profound influence on the NGO sector and the people that NGOs are expected to serve.

Since the late 1970s, NGOs have become the favored organizational form for implementing development projects and carrying out social welfare efforts. This is especially true in sub-Saharan Africa where donors and development practitioners often consider African governments to be corrupt, inefficient, and unaccountable to their citizens and conceive of NGOs as stable, efficient, honest, participatory, and democratic (Chabal & Daloz, 1999; Eade, 2000; Ferguson, 2006; Ndegwa, 1996; Sandberg, 1994). An analysis of NGOs, thus, offers insight into how development priorities, as conceived by international actors, take shape on the ground.

4. METHODS

(a) Site selection

Malawi is an excellent country for analysis because it has a high HIV prevalence, is one of the poorest countries in the world, and has historically received large amounts of international support (OECD-DAC, 2007; UN, 2006). With the number of NGOs and donors active in the country, Malawi is often called a "donor darling" in development circles (Koch, 2007; Venter, 1995). Malawi's level of underdevelopment is more extreme than the region as a whole: it has a lower human development index,² greater poverty, and greater HIV prevalence than the subcontinent (see Table 1, below). Given these

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