

IDS RESEARCH SUMMARY

Research findings at a glance from the
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AIDS, Citizenship and Global Funding: A Gambian Case Study

This Gambian case study examines the picture of an emergent 'therapeutic citizenship' set in the context of a new globalism in public health. Focusing on the Global Fund's work, the paper asserts that for those living with HIV, making claims based on their HIV status is often problematic and limited.

In this new era of public health globalism, international initiatives and funding mechanisms abound, with a move away from authority based on the pre-eminence of nation states. The size and scope of health programmes, public-private-philanthropic partnerships and a sense of 'moral authority', characterises this globalism particularly in relation to HIV and AIDS.

This case study examines what citizenship means in this context, and the role of support groups acting as active therapeutic citizenship sites. However, what emerges is that group membership does not reflect the image of active treatment rights-claiming, therapeutic citizens but a less-empowered conformity to global discourses.

Initiatives such as the Global Fund (GF) have an epistemic influence framed by particular perspectives on the nature of the problem and the solution. The GF presents itself as 'uniquely' locally responsive and representative of civil society and grassroots groups. This paper explores the extent to which the GF lives up to this claim.

The structures by which funding comes from the GF through a Country Co-ordinating Mechanism (CCM) to the Principal Recipient (PR) are explored, as are tensions inherent in these complex donor and recipient partnerships, both in the broader African context and then specifically in The Gambia.

The Gambia was among the first countries to access HIV/AIDS Rapid Response Project Funding (HARRP) and this allowed treatment programmes to begin. It also enabled access to GF funding in 2004. The paper explores how programmes were implemented and received by people living with HIV and their support groups, up to the end of 2006. It also examines the problems arising when the National AIDS Secretariat (NAS) was put in charge of fund dissemination, and the recent historical situation where people living with HIV have limited powers to influence the 'AIDS industry'.

Support groups in The Gambia are presented as being in contrast to the image of the 'therapeutic citizen' of AIDS globalism, with membership

benefits being focused around economic survival and social support. Being a group member involves subscribing to dominant biomedical perspectives of AIDS, over localised meanings of illness and cures. Support group members have become caught up in the dominant spirals of globalised citizenship, as a necessary route to access material benefits.

Support groups create spaces for active engagement and rights-claiming in the GF context. However, expressions of citizenship are marginalised in relation to notions of what therapeutic citizens ought to be like according to dominant AIDS narratives.

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“ Support group members have become caught up in the dominant spirals of globalised citizenship, as a necessary route to access material benefits ”

Key research findings:

- Global initiatives to channel funds contribute to neoliberal and business-oriented models of this genre of development aid.
- There is a struggle between globalism in HIV funding pitched to include and meet civil society claims and elements of the state seeking to control the process.
- The GF provides money to HIV programmes with no in-country presence, but instead works through a broader network of partners, recipients and sub-recipients.
- The GF treatment programme constructs notions and possibilities for citizenship, defined in terms of HIV-positive identity and rights-claims in relation to biomedical treatment.
- People living with AIDS are often prepared to assimilate the procedures, practices and discourses of public health globalism, in order to access material and social benefits.
- There are many other meanings and expressions of rights and citizenship, more significant to people in their daily lives, than the image of the therapeutic citizen allows for. (150 words)

This paper traces local-global forms of citizen engagement with public health globalism, looking at authority structures such as the Global Fund and its implementing agencies. Global health programmes are reinterpreted at the local level in ways that can disrupt their original aims, and programme beneficiaries and in-country staff often struggle to make

sense of imposed values. Membership of family, neighbourhood or community networks and the attendant benefits they bring, reinforce more meaningful notions of citizenship than people's adoption of biomedically-shaped HIV-positive identities. However, support group membership involves conformity to dominant AIDS narratives in order to access material and social benefits.

Key policy lessons / implications of research:

- Initiatives such as the Global Fund unleash a new political economy of resource allocation, and a new knowledge politics, with implications for local-global citizen engagement.
- This paper examines to what extent the globally structured 'AIDS industry' undermines national and local health systems and their broader priorities.
- Intermediary organisations play a key role in shaping resource access, and mobilising other civil society organisations.
- Global health programmes, NGOs and social movements need to work in ways that embrace local epistemological and political realities.
- Alternative forms of AIDS-related citizenship need to be recognised in future research and advocacy.

Credits

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