

# WHO IS RESPONSIBLE?

Donor-civil society partnerships and the  
case of HIV/AIDS work

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## Glossary

AGIR	Programa de Acções para uma Governação Inclusiva e Responsável
AIDS	Acquired Immune Deficiency Syndrome
ARV	Antiretroviral
BRICS	Brazil, Russia, India, China and South Africa
CBO	Community-Based Organisation
CCM	Country Coordinating Mechanism
CDC	Centres for Disease Control and Prevention (US)
CEO	Chief Executive Officer
CHF	Cooperative Housing Foundation (US)
CNCS	Conselho Nacional de Combate ao HIV/Sida em Moçambique
CSO	Civil Society Organisation
DFID	Department for International Development (UK)
DSF	Douleurs sans Frontières
EME	Emerging Market Economy
FRELIMO	Mozambique Liberation Front
GF	Global Fund to Fight AIDS, Tuberculosis and Malaria
GNI	Gross National Income
GoR	Government of Rwanda
HIV	Human Immunodeficiency Virus
ICAP	International Center for AIDS Care and Treatment Programs (US)
IMF	International Monetary Fund
INGO	International Non-Governmental Organisation
M&E	Monitoring and Evaluation
MAP	Multi-Country HIV/AIDS Program (World Bank)
MATRAM	Mozambique Treatment Access Movement
MDG	Millennium Development Goals
MONASO	Mozambican Network of AIDS Services Organisations
MSF	Médecins sans Frontières
MSM	Men who have Sex with Men
NAC	National AIDS Council

NASA	National AIDS Spending Assessment (UNAIDS)
NGO	Non-Governmental Organisation
NPM	New Public Management
NSP	National Strategic Plan
ODA	Official Development Assistance
OECD	Organisation for Economic Cooperation and Development
OVC	Orphans and Vulnerable Children
OXFAM	Oxford Committee for Famine Relief (UK)
PEPFAR	The US President's Emergency Plan for AIDS Relief (UK)
PLWHA	People Living with HIV/AIDS
RBM	Results-Based Management
RoM	Republic of Mozambique
RoR	Republic of Rwanda
RoS	Republic of South Africa
SANAC	South African National AIDS Council
Sida	Swedish International Development Cooperation Agency
SOP	Standard Operating Procedure
SPIU	Single Project Implementation Unit
TAC	Treatment Action Campaign (South Africa)
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNFPA	United Nations Population Fund
UNGASS	United Nations General Assembly Special Session on HIV/AIDS
UNICEF	United Nations International Children's Emergency Fund
USAID	United States Agency for International Development
WHO	World Health Organization



# Introduction

This issue of *Policy Dialogue* analyses current strategies in the governance of international development cooperation. Based on case studies from the fight against HIV and AIDS in Mozambique, Rwanda and South Africa, we examine the methods that donors use to govern development partnerships and how these methods affect the distribution of responsibility among partners. We are also interested in how recipient organisations approach these methods: do they comply with certain modalities of governance, or resist them? While our case studies are in the field of HIV/AIDS, *our general concern is the governance of international development cooperation with civil society.*

## Background: Our previous research in the field

Members of the research team behind this report began to analyse HIV/AIDS as a social issue in the context of globalisation ten years ago (Follér and Thörn 2005). An important finding from this work is that adequate responses to HIV/AIDS – both in the Global North and Global South – have involved independent initiatives by civil society actors, including social movements and different types of civil society organisations. We have not been alone in uncovering and highlighting this phenomenon (e.g., Bonnel et al. 2013, Kelly and Birdsall 2010). During the past decade, the international donor community has put significant emphasis on support to civil society organizations (CSOs, a term which includes NGOs, INGOs and CBOs) in addressing the HIV/AIDS issue in the Global South. However, in a research anthology entitled *The Politics of AIDS: Globalization, the State and Civil Society* (Follér and Thörn 2008), we identified problems with this support. These related to the fact that while the donor community strongly emphasises partnership in development cooperation, aid still comes with conditions that produce intended or unintended consequences that may be counterproductive in fighting HIV/AIDS. In a pilot study on international aid to civil society in South Africa, Thörn (2011) argued that today such conditions more often concern the *formal aspects* than *the content* of the AIDS-related work that donors support. The most important conclusions from this pilot study were:<sup>1</sup>

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1 These conclusions derive from discourse analysis of documents produced by several significant donors: state agencies (USAID/PEPFAR, Sida); foundations (Global Fund, Bill and Melinda Gates Foundation); international NGOs (Médecins Sans

- *Strong emphasis on the importance of civil society in the donor community.* For example, the Global Fund to Fight AIDS, Tuberculosis and Malaria (GF), a major donor agency, argues that CSOs can play an important role where states are insensitive to the needs of populations and/or lack capacity to act and reach out. According to GF, CSOs provide “insight into the need and experiences of communities,” are “effective” in working with “hard-to-reach communities” and, more importantly, are *efficient* as implementers of GF grants, performing “equally [...] well, if not better, than all other types of implementing agencies” (Thörn 2011:441, Global Fund 2006:24).
- *Tendency towards marketisation of international development cooperation.* This is reflected in a key GF policy document stating that the GF “is not an implementing entity; it is a financial instrument [...] with funds allocated on strict performance criteria” and that it represents a “unique business model” (Global Fund 2006:33, Thörn 2011:441).
- *Quantitative and scientific approach to assessment, evaluation and other knowledge production,* emphasising so-called “evidence-based methods.” This practice puts pressure on donors as well as CSOs to conform to certain dominant standards of evaluation (Thörn 2011:446).
- *Taken together, the above techniques of aid implementation and control in international development cooperation with civil society represent a “package of responsabilization”* (Thörn 2011:443). “Responsibilisation” refers to the transfer of various responsibilities for aid implementation from donors to CSOs. Importantly, it was argued that this package involves a contradiction as it treats organisations and communities as autonomous actors while at the same time attempting to lead and control them. Responsibilisation can therefore be understood as the regulation of self-regulation (Miller and Rose 2008).

To determine how these tendencies unfold in the actual practice of international development cooperation with civil society, we instituted a new research project that investigated development aid cooperation between international donors and CSOs on HIV/AIDS in three sub-Saharan countries, Mozambique, Rwanda and South Africa. In this report, we publish our findings from these

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Frontières, World Vision); and South African CSOs (TAC, AIDS Foundation, Sonke Gender Justice Network). In addition, 11 interviews with key informants (including donor representatives working in South Africa, South African CSO representatives and South African researchers) were undertaken. The analytical framework was developed through critical discussion of theories of contemporary global governance, mainly drawing on governmentality studies.

extensive empirical studies. They confirm the above conclusions *and significantly expand our understanding of international development cooperation with civil society, and further refine previous analysis through new conceptualisations.*

## International development cooperation and strategies for global governance

As already noted, the governance strategies we identify and analyse in this report are not unique to the field of HIV/AIDS, and neither are they unique to international development cooperation. Over the past decade, a body of work has appeared that theorises and analyses contemporary global governance as part and parcel of the latest phase of globalisation. Firstly, as defined by two leading scholars of international politics, “governance” is different from “government” as traditionally defined in political science and international relations:

It differs dramatically from the concept of world government in that it does not presuppose the idea of a central global public authority, which legislates for the common affairs of humanity. On the contrary, it is defined by diverse sources of rule-making, political authority and power. (Held and McGrew 2002:9)

While nation states may indeed be strategic sites in global governance networks, they do not constitute the centre of political processes or the main source of decision- and strategy-making. Governance processes can include a number of political layers (supra-state, nation state, region, municipality) as well as various actors, including businesses and CSOs.

When we analyse the politics of governance, therefore, the term “strategy” *does not refer to a line of action that originates in a political centre or a specific actor (such as a state or political organisation), or is part of a “master plan.”* Instead, we mean by strategies certain logics of action that have emerged from *a complex process of interaction between different makers of governance politics.* However, as abstract as they may be, strategies can be used by political actors to guide and legitimise their actions and can thus have intended as well as unintended consequences. As part of the global health policy field, AIDS governance (Harman 2012, Hein, Bartsch and Kohlmorgen 2007) is a case in point: it is an extremely complex phenomenon with no obvious centre of authority.

Global health is now the domain of finance ministries, international financial institutions, regional organizations, militaries, new funding initiatives based on evolved private-public partnerships, private philanthropy, celebrity endorsement, and business coalitions. (Harman 2012:2)

Harman argues that global health governance is thus a “confusing phenomenon.” We, however, argue this is true only at first sight. Beyond such initial confusion, global governance is far from incomprehensible. The great complexity in terms of number of actors, policy levels and areas involved goes hand in hand today with strategies to harmonise policy interventions and standardise their design, communication and evaluation. This is, for example, clearly visible in the field we study, where the “Paris Declaration on Aid Effectiveness,” published in 2005 and calling for the “harmonisation” of international development interventions, has been a key document over the past decade.

To make sense of such governance processes, our work draws on a body of research mainly originating in British sociology and political science concerning new forms of governance, such as New Public Management (NPM) and the emergence of an “Audit Society.” More specifically, we mainly draw on the theoretical framework of governmentality studies, which we have found particularly relevant to our case, as the framework has been developed to analyse and understand “government at a distance” (Miller and Rose 2008:34).<sup>2</sup> This approach highlights that governing at a distance is effected through responsibilisation as a kind of “outsourcing” of responsibilities through forms of regulated self-regulation (Miller and Rose 2008). In *The Audit Society: Rituals of Verification*, Michael Power (1997:68) argues that such regulatory practices represent a “reinvention of governance around audit processes” (Power 1997:68) in the context of NPM. He further emphasises that this type of regulation does not represent an external form of direct control. Rather, it is performed as a demand on organisations to “acquire responsibility [for] internal control systems” (Power 1997:xviii). The practice also implies that organisations should be reformed, if necessary, to make them “auditable subjects.”

Miller and Rose (2008:11) have argued that audit mechanisms have introduced “calculative practices,” such as financial calculation, cost-reduction and budgetary obligations, to new areas. Consequently, new markets for business consultants and accountants have been created and the definition of “accountability” and “legitimacy” in the context of contemporary politics has been

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2 Most important, we are talking about “strategies” rather than “rationalities” and “methods” rather than “technologies.” While our analysis in this report draws on governmentality theories, especially the concepts of “responsibilisation” and “regulation of self-regulation” (Miller and Rose 2008), we have chosen not to use certain theoretical concepts central to this literature. What we here term *strategies* and *methods* would perhaps in more strict governmentality language be termed *rationalities* and *techniques*. For more theoretically grounded analyses of our empirical material, see Thörn (2011), (2013), Follér (2013) and Follér and Thörn (2013).

transformed. Emphasis on introducing standards in this process is effected through the wide use of Result Based Management (RBM). RBM's key role in international development cooperation on HIV/AIDS, which will be further discussed below, has been highlighted and criticised by Andrew Natsios (2010) (see also Vähämäki et al. 2011, Binnendijk 2000). Measurability has been further stressed in contemporary governance through the wide use of "evidence-based methods." These have their origins in medical science, but have spread to a number of policy areas, including international aid. In the process, according to Winch et al. (2002:158), emphasis has been placed on making various practices evaluable through their "definition, measurement and enumeration."

Power (2003) has also argued that the boundaries between auditing, consulting, assessment and evaluation are not always clear. This means all can be used to serve the same function, namely to *legitimate* organisational behaviour, while at the same time appearing to support rational decision-making. In line with Power (2003), our own findings and with other research (Rojas 2004, Rasmussen 2013), it may be argued that responsabilisation in the context of international development cooperation has the integrated function of creating "control at a distance" and of making donor policies appear legitimate and accountable. To make aid to foreign countries legitimate, donor agencies must be able to "prove" the money is used for the intended purpose. It can thus be argued that current methods of aid implementation and control, largely based on business models for selection, self-evaluation and audit, should be understood in relation to the donors' need to appear *legitimate* both to domestic publics (tax payers) and to publics in receiving countries.

## Aim and questions

Drawing on the concepts and research presented above, the aim of this *Policy Dialogue* is to study the politics of responsabilisation in international development cooperation. Our empirical material comprises case studies of development partnerships with CSOs involved in HIV/AIDS work in Mozambique, Rwanda and South Africa. We argue that the politics of responsabilisation involves four key *governance strategies*: marketisation, managerialisation, scientisation and standardisation. These strategies are defined as follows:

1. *Marketisation* is a governance strategy to nurture competition between, and foster a culture of entrepreneurship among, CSOs. This strategy is based on the assumption that competitive markets offer the best and most efficient

means of allocating resources (Djelic 2006).

2. *Managerialisation* is a governance strategy that separates organisational control from both ownership and operational work by creating professional management positions that specialise in accepting goals from above (the owners) and setting goals for below (the staff), thus establishing a control hierarchy (see Berle and Means 1932, Orford 2010:245ff.)
3. *Scientisation* is a governance strategy to cultivate evidence-based work among CSOs, involving measurement and scientifically inspired analysis. This strategy is based on the assumption that accuracy and efficiency in everyday work requires that it be conducted in accordance with scientific principles, theories and methods (Drori and Meyer 2006).
4. *Standardisation* is a governance strategy to construct “uniformities across time and space, through the generation of agreed-upon rules” in order to make things work together over a distance (Timmermans and Epstein 2010:71). It entails a degree of formalisation in order to render categories more compatible.

As mentioned, a “governance strategy” in this context does not refer to neatly designed devices, constructed in donor headquarters, to be unambiguously implemented “on the ground” in recipient countries. On the contrary, “strategy” in this context represents certain logics of action that have emerged in the context of international development cooperation and are reflected in a number of methods. We show how these strategies reinforce each other and gear CSOs to think and conduct themselves in particular ways. For example, the logics of market competition spur the logic of scientisation in terms of standardised and calculated “evidence-based” methods, which in turn spur the logic of managerialisation in terms of recruitment of people with particular skills.

Our main aim is to study the politics of responsabilisation by analysing governance strategies in international development cooperation with civil society. This is carried out through close examination of the methods donors employ and the responses to these methods by their partners (CSOs). We focus entirely on recipient organisations in civil society because of the strong emphasis donors have put on such actors both rhetorically and in terms of funding (Bonnell et al. 2013). Three sets of empirical questions are addressed below:

1. What methods are used to distribute responsibility and how can they be understood in terms of overarching governance strategies?

2. What are the effects of these strategies and methods in terms of CSO responses?
3. What significant differences exist among the three countries in terms of the structural conditions that may impact international development cooperation with civil society on HIV/AIDS?

## The policy field: Global AIDS aid governance

Our empirical case studies are limited to HIV/AIDS work, for which there has been an unprecedented increase in the funding available to civil society in the past 10 years. This makes for an ideal case study of how donor requirements affect recipient organisations. Among the key policy actors in global AIDS governance are UN organisations such as UNGASS, UNAIDS and WHO, together with the GF and the World Bank's Multi-Country HIV/AIDS Program (MAP). Aid with respect to AIDS is part of the overall development cooperation established under the Millennium Development Goals (MDG) and 2005 Paris Declaration. In the 2000s, two donor organisations have stood out as dominant:<sup>3</sup>

1) *Global Fund to Fight AIDS, Tuberculosis and Malaria* (GF), set up to increase global funding for interventions against these three diseases.<sup>4</sup> It has formal status as a foundation under Swiss law, and is defined as a public-private partnership. Between its inception in 2001 and 2009, it committed US\$ 15.6 billion to AIDS activities in 140 countries (Global Fund 2009). Despite fears the economic crisis of 2008 would weaken GF (which is dependent on both public and private contributions), it has continued to distribute significant funding. In 2012, it approved 161 grants totalling US\$ 3.3 billion through its grants renewal process (Global Fund 2012).

2) PEPFAR, the US President's Emergency Plan for AIDS Relief, launched in 2003 as a five year initiative to combat HIV/AIDS with a total of US\$ 15 billion. After 2008, it was continued, and according to its 2012 annual report, it provided "care and support for nearly 13 million people, including more than 4.1 million orphans and vulnerable children" (PEPFAR 2012:1).

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3 Among other dominant donors are the European Union, British DFID and major private foundations such as the Bill and Melinda Gates Foundation, the Clinton Foundation and the Elton John Foundation.

4 GF was set up pursuant to a decision at the G8 meeting in Genoa in 2001 and in response to calls made at two African conferences in 2000 and an appeal by UN General Secretary Kofi Annan (de Waal 2006).

After initial tension and policy differences between these two donors, the latest annual reports of both state that they now work closely with each other and that their policy approaches are becoming increasingly similar. This convergence is further evidenced by the GF board's selection in 2012 of Mark Dybul, former head of PEPFAR, as new GF executive director (Global Fund 2012).

Together, USAID (61 per cent) and GF (19 per cent) account for 80 per cent of international aid for HIV/AIDS activities in sub-Saharan Africa. The region receives 57 per cent of global AIDS spending, the greatest share of any region (Kates et al. 2013: 2). This reflects the prevalence and impact of the disease in, and poverty of, the region: of the 34 million people living with HIV globally, two-thirds live in sub-Saharan Africa (UNAIDS 2012), a region where more than 48 per cent of the population lives on less than \$ 1.25 per day (World Bank 2013b).

Regarding the content of HIV/AIDS-related activities that are funded, there have over the years been conflicts about "best practices" related to condom use, scaling-up of antiretrovirals (ARVs) and pharmaceutical patents (Follér and Thörn 2008). There is today, however, a certain consensus regarding preferred policies to combat the epidemic. They mainly deal with reinforcing prevention, treatment and impact mitigation, actions that are targeted at so-called "vulnerable groups" (e.g., women, children, sex workers, or men having sex with men). There are also campaigns addressing stigmatisation and marginalisation and "treatment for all" and questions related to rights.

## Our research

Our study is based on fieldwork by the authors into HIV/AIDS assistance in Mozambique, Rwanda and South Africa; donor documents relating to international development cooperation on HIV/AIDS; as well as interviews with donor agency officials. The fieldwork included 91 interviews with CSO representatives, donor officials, government representatives and experts (academic researchers and international consultants). It also involved participant observation in meetings and site visits by donor representatives as well the organisation by our team of three one-day workshops (one for each of the three countries) involving around 15 representatives from CSOs receiving international aid for HIV/AIDS work.

Our data collection aimed at understanding the logics, interactions and challenges of governance in relation to the everyday practices of the organisations receiving (or wanting) funds from international donors. The *analysis of*

*donor documents*, focused on the articulation and justification of governance strategies. In the *fieldwork*, we concentrated on how such governance strategies played out in (methods) of international development cooperation, in particular the negotiation of responsibilities between donors and recipients. This included *interviews with donor representatives and government officials*, in which we asked how donor strategies, as formulated in documents, related to actual practices in the field. Most of these interviews were undertaken in the recipient countries.<sup>5</sup> For the *expert interviews*, we sought out individuals with an overview of the field in each country, and who could also provide feedback on our preliminary analyses. The overall purpose of the *CSO interviews* and the three workshops (in which all four researchers in the team participated) was to record CSO representatives' experiences of interaction with donors in the context of partnerships in AIDS aid governance. During the workshops, we started with two major questions: what worked well in the interaction with donors, and what did not. The workshops included sessions in which all participated and smaller focus groups facilitated by a researcher, who would also pose follow-up questions. While the workshop thus started out with very open questions, our own input as the workshop progressed included getting feedback on some of our preliminary conclusions.<sup>6</sup>

Text analysis focused primarily on GF, PEPFAR, Sida, MSF, World Vision and the Bill and Melinda Gates Foundation. Donors that were interviewed included state organisations (USAID/PEPFAR/CDC, Sida, Royal Netherlands embassy in South Africa, Swedish embassy in Mozambique); international organisations (WHO, UNAIDS, UNFPA, UNICEF); donor networks and programmes (Pre-Partner Forum and AGIR in Mozambique); international NGOs (Oxfam, MSF, World Vision, Diakonia, Deutsche Gesellschaft für Internationale Zusammenarbeit [GIZ], Pathfinders, World Relief, International Center for AIDS Care and Treatment Programs (ICAP), Swedish Cooperative Centre, Family Health International (FHI), Population Services International (PSI), CHF International, and Douleurs Sans Frontières (DSF).

The *Mozambican study* concentrated on the AGIR programme of the Swedish embassy and is based on 13 weeks of fieldwork (mainly in Maputo). Thirty-five interviews were undertaken, including with representatives of 16 Mo-

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5 We also undertook a few interviews with donor representatives at headquarters. They mainly confirmed our assumption that in order to have accounts of how donor strategies play out in the field, we would need to talk to donor representatives working in the case countries.

6 For a discussion of the research methodology used in the project, see Thörn (2013, forthcoming).

zambian CSOs and the government (the National AIDS Council, CNCS). Nine representatives from Mozambican CSOs, one INGO representative and two researchers participated in our workshop in Maputo.

The *Rwandan study* examined the funding schemes associated with GF and PEPFAR. Based on 12 weeks of fieldwork, it entailed 32 interviews, including with 13 Rwandan CSOs and five government representatives working in the ministry of health and the Rwanda Biomedical Centre-Institute of HIV/AIDS, Disease Prevention and Control (RBC-IHDPC). Sixteen representatives of Rwandan CSOs and two researchers participated in our workshop in Kigali.

The *South African study* focused on a key intermediary CSO in the field of HIV/AIDS, and is based on 10 weeks of fieldwork, including participant observation in meetings. Twenty-six interviews were undertaken, including 19 with CSOs and experts (working with NSP, NASA, SANAC). Nineteen representatives from South African CSOs participated in our workshop.<sup>7</sup>

## Main argument and structure of report

The basic argument of this *Policy Dialogue* is that international development cooperation with civil society on HIV/AIDS can be understood as a *politics of responsabilisation*. We show that the latter produces ambiguities and tensions regarding “who is responsible for what.” The politics of responsabilisation systematically shifts responsibility for activities regarding HIV/AIDS from international donors to recipient organisations while, at the same time, not granting these organisations full autonomy. On one hand, the burden of responsibility for outcomes is shifted from donor agencies to recipient organisations and even beneficiaries of development funds. On the other, these same actors are simultaneously “deresponsibilised” for the methods and procedures they employ, because these are defined according to global policy goals and governance standards.

We show how the four governance strategies of marketisation, managerialisation, scientisation and standardisation are performed and sustained through various methods, that is, tendering, training, supervision, monitoring & eva-

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7 In the South African workshop four of the CSO representatives did not participate in the first half, since they were representing an intermediary organisation functioning as a donor to the 15 CBOs that had representatives at the workshop. In the second half of the workshop, the representatives of the intermediary responded to questions and criticisms from the CBO representatives and also referred to their experiences of being both recipient and donor.

luation (M&E), reporting systems and auditing. The analysis includes accounts of how these methods affect the everyday business of CSOs and how they contribute to the implementation of the above strategies. The analysis is not confined to examples of compliance and successful implementation, but also provides detailed information on how CSOs attempt to negotiate and resist the strategies and methods that make up the overall politics of responsabilisation.

Our argument unfolds as follows. Chapter 1, Responsibility according to donors, provides background on how the notion of responsibility has evolved in the governance of international development cooperation. Chapter 2, International development in national context, focuses on the structural context for international development cooperation with civil society on HIV/AIDS in our three countries, particularly the countries' relations with the international donor community, their approach to HIV/AIDS politics and the relationship between state and civil society. In Chapter 3, Responsibility in practice, the results of our empirical studies of interaction between international donors and CSOs are presented. Through empirically grounded examination of the methods employed in international development cooperation, we show how the politics of responsabilisation is executed through the four main governance strategies. The final section links the results to our general concern about the governance of international development cooperation with civil society set out in this introduction.

## Importance of our findings

Over the past decade, CSOs have been increasingly recognised as important partners in development, alongside traditional actors such as international donor agencies and recipient governments in the Global South. An obvious indicator of this is the fact that the amount of aid money channelled to and through CSOs engaged in HIV/AIDS work has increased exponentially since the turn of the millennium. According to a World Bank study, donor funding rose from US\$ 1.6 billion in 2002 to US\$ 8.7 billion between 2002 and 2008, a commitment that has since remained at that level (Bonnell et al. 2013:5). According to the report, this aid has come with a “dramatic strategic shift,” based on the following assumptions:

1. A belief that small NGOs and CBOs might be able to “engineer” changes in knowledge and behavior at the local level, as the factors that influence the norms and practice of sexual behavior are more likely to be better understood by CBOs than by public sector entities.

2. A desire to provide services to hard-to-reach population groups, although it was recognized that many NGOs and CBOs were insufficiently prepared to work with drug users, MSMs, and sex workers.
3. A hope that CSOs might be able to implement innovative approaches that would have larger positive impacts. (Bonnell et al. 2013:6–7)

Yet, as our research suggests, this recognition of CSOs as development peers is more complex than official partnership rhetoric suggests. We demonstrate that the so-called donor-civil society partnership includes a complex politics of responsabilisation. Contrary to the rhetoric of “strengthening” pluralistic and vibrant civil societies in close touch with local communities in developing countries, these methods contribute rather to creating a *particular form of civil society*, in which local complexities are reduced and CSOs are turned into private businesses on a standardised market. We believe that by illuminating and critically scrutinising how these methods play out, this *Policy Dialogue* has much to offer the development debate. Shedding light on the consequences of donor governance strategies by going beyond the rhetoric of policy declarations is a prerequisite for making those strategies amenable to open and democratic debate. This *Policy Dialogue* can provide valuable input into such debate among development practitioners, politicians, civil society representatives, researchers and the general public.

We further believe our study contributes to an *understanding of international development cooperation with civil society in three ways*. First, rather than evaluating the effectiveness of aid funding, we look at the logics according to which these funds are managed and how these logics influence the work of the organisations that implement the programmes. We argue that regardless of whether programme goals are achieved or not, the specific logics of governance introduced or reinforced by donor agencies in recipient countries contribute to a politics of responsabilisation, with sometimes paradoxical consequences.

Second, our analysis of these trends does not remain at an abstract level of ideas or ideologies, but illustrates the strategies we identify through concrete examples of the day-to-day practices of civil society organisations in three sub-Saharan countries. We identify methods of governance, and describe how they affect the daily practices of implementing organisations.

Third, while others have pointed out that the responsabilisation of individuals and communities is a core element of advanced liberal government (Lemke 2001, Kinsman 1996 in the context of HIV/AIDS), we take this insight one step further by highlighting the other side of this coin: the politics of (de)responsibilisation. In arguing that a politics of (de)responsibilisation

contradicts the main assumptions and goals of current international development cooperation with civil society, we seek to promote debate about current trends in development cooperation.

# Chapter 1: Responsibility according to donors

Since its advent in the 1950s and 1960s, international development cooperation has been an arena where different, sometimes converging and sometimes competing, political strategies and interests meet. Nevertheless, it is hardly controversial to claim that an important driver in the policy and practice of international development cooperation has been a sense of moral responsibility among affluent states for the misery experienced by people in poverty-stricken countries. In the early decades of development assistance, there was also a strong conviction among donor agencies in affluent countries that the “Third World” could soon “catch up” and that international aid had a pivotal role to play in this process. Thus, “First World” donor agencies believed that in accepting responsibility by transferring capital and knowledge to the poor, the prospects for infusing development into poverty-stricken countries would become much brighter. Historically, though, development proved to be a complex task. The accumulated experience of development failures around the globe has constantly spurred policy-makers and practitioners to reconsider, revise and refine their approaches to development cooperation.

In this regard, donor conceptions of “responsibility” are an interesting case in point. Over the past 15 years, two different trajectories of responsibility can be discerned in international development policy. Notably, both have been framed by policy-makers as progressive reorientations and solutions to previous shortcomings. These two trajectories provide the backdrop for the problems we address in this report.

The first trajectory is *expansion* of responsibility. There was an interesting shift in overall international development discourse around the turn of the millennium. The Millennium Summit of 2000 can be seen as a catalysing event (UN 2000) for this trajectory, and high-level forums in Rome, Paris, Accra and Busan added fuel to the process (OECD 2003, 2005, 2008, 2011). Basic assumptions in this emerging discourse are that the world is shrinking through globalisation, that poverty is of concern to all of us and that coming to terms with it requires establishing a global development partnership. The logics of this new discourse suggested that a broad range of actors and institutions, representing governments, private sector and civil society at global, national and local level, had a common and shared responsibility for development and poverty alleviation worldwide. Hence, rather than being a duty on affluent donor countries, responsibility for development was now considered

ubiquitous, including “developing countries” and the poor themselves. Ultimately, everyone was now considered a responsible stakeholder and everyone had to make a contribution to the cause.

This discursive shift is reflected in new buzzwords such as *alignment, coherence, harmonisation, partnership* and *synergy* (Knutsson and Lindberg 2012). In short, conventional development assistance is no longer thought of as the sole solution to the gap between Global North and Global South. On the contrary, aid is but one of many relations between rich and developing countries and one of many instruments for development. In this broad sense, trade and business relations could well be conceived as international development cooperation. The Swedish government’s bill *Shared Responsibility: Sweden’s Policy for Global Development* (Govt. Bill 2002/03:122) is a significant example of this general reorientation in international development discourse. At the time of its enactment, it was recognised as trail-blazing in international policy circles. Sida, in turn, quickly embraced the new discourse and became an important custodian of the Swedish Policy for Global Development (PGD) (Sida 2005).

The second trajectory, arguably contradicting the first, entails *outsourcing* responsibility. In parallel with policies stressing ubiquitous and shared responsibility, there has been an increasing tendency to outsource the responsibility previously associated with the donor to the receiving partner. This growing recognition of the other partner’s responsibility for development can be traced to the inception of nationally owned Poverty Reduction Strategy Papers in the late 1990s, which later evolved into a defining feature of the “new aid architecture” fashioned at the forums in Rome, Paris, Accra and Busan (OECD 2003, 2005, 2008, 2011). The trajectory has been framed as an enlightened recognition of poor people’s agency and thus a farewell to colonial prejudices about the ignorant “other.” This reorientation has spawned its own particular development buzzwords, such as *ownership, empowerment, participation* and *stakeholder*, and the widespread metaphor of the partner as somebody who should be in the *driver’s seat*.

As regards the Swedish case, the following can be concluded. If the trajectory of *expansion* was primarily imprinted on Sweden’s overall PGD, the *outsourcing* counterpart is most obviously evident at the level of Swedish ODA. While Swedish development cooperation is an integral part of overall PGD, the official goal of Swedish development cooperation is to “help create conditions that will enable poor people to improve their quality of life” (Sida 2005:13). This goal reflects a belief in the agency of poor people, who are viewed not as passive recipients but as active stakeholders with the capacity to

improve their quality of life, either individually or as a collective. The perspective of poor people on how to combat poverty is also to be taken into consideration in all development ventures. With reference to creating conditions that enable poor people to improve their quality of life, the following is stated in the fundamental principles of Swedish development cooperation:

Sweden's partner countries and other cooperation partners bear *the overall responsibility* for creating conditions that will enable such change. The role of Swedish development cooperation is to contribute, as effectively and efficiently as possible, to its partners' efforts in this direction. (Sida 2005:14, *our emphasis*)

Hence, overall responsibility for development and poverty alleviation is clearly placed on partners in developing countries, whereas the role of Swedish development assistance is to support them in their own development efforts. This is the guiding principle for all areas of Swedish development cooperation, including support to civil society and efforts to combat the HIV/AIDS pandemic (Gov. Offices of Sweden 2008, 2009).

However, what policy-makers frame as progressive reorientations should never be taken at face value. First, there is obviously a tension between "expansion" and "outsourcing" of responsibility in contemporary international development discourse. This tension encourages us to consider how responsibility is actually distributed and negotiated in contemporary practices of international development cooperation. Second, it is far from self-evident that growing responsabilisation of the partners, framed by donors as a progressive recognition of poor people's agency and perspective, is equally appreciated by the partners. Third, and most importantly in this context, responsabilisation is a political act that can generate compliance as well as criticism and resistance. Responsibilities can be accepted or rejected. This is also what our study is about.

In this report, we suggest that an important feature of contemporary international development cooperation is the unceasing efforts by various stakeholders to ward off responsibility. We refer to this as a *politics of responsabilisation*, meaning practices that transfer responsibilities from one (or several) actors to one or more partners. The rest of this *Policy Dialogue* is devoted to coming to grips with, and providing empirical examples of, how this politics is performed in aid to civil society in its HIV/AIDS work in Mozambique, Rwanda and South Africa.

## Chapter 2: International development cooperation in national context

In this chapter, we provide a basic comparative context for the three country cases.<sup>8</sup> This forms the background to the more complex analysis of local AIDS work in the context of donor funding in Chapter 3. We highlight three contextual dimensions in all these countries of particular relevance to our study: 1) the status of the epidemic and the government's response; 2) relations between state and civil society; and 3) extent of international aid for HIV/AIDS to the country and relations between donor community and government.

### Status of epidemic and government response

All three countries in our study have a generalised epidemic, but have different epidemic patterns and levels of HIV prevalence (see Table 1). This is the result of a combination of highly complex factors (Barnett and Whiteside 2006).

In Mozambique, the first case of AIDS was reported in 1986 and the early reaction to the epidemic was similar to that in many other countries: denial, blame and lack of resources, resource mobilisation and political response. The ministry of health started to respond to the disease in the 1990s with the support of WHO. In 2000, a National AIDS Council (CNCS) was established. Working with donors and CSOs, it has produced the most important policy document, PEN III (National Strategic Plan to Fight HIV/AIDS 2010–2014). As a result, the country has been able to elaborate the first five-year plan to combat the epidemic and to expand access to treatment and care. Since 2004, there has been a plan for free universal access to ARV treatment. However, for various reasons (economic problems, problems with storage and distribution of medicines, etc.) the plan is still not functioning satisfactorily (Høg 2008; Follér 2010). According to the Country Progress Report, however, the national HIV prevalence rate among adults stabilised between 1988 and 2012: that is, the infection rate has declined (RoM 2012: 8).

In Rwanda, the capital Kigali was one of two places where a team of US and European doctors first identified and described AIDS in 1983 (Barnett

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8 Further information on the AIDS situation in our three cases can be obtained from the Country Progress Reports compiled for UNAIDS and by the National AIDS Council in each country: Republic of Mozambique (2012), Republic of Rwanda (2012), Republic of South Africa (2012).

**Table 1: HIV prevalence, national expenditure on HIV/AIDS and aid dependency in Mozambique, Rwanda and South Africa**

	Mozambique	Rwanda	South Africa
Total population <sup>a</sup>	23.9 million	10.8 million	51.5 million
Prevalence in age group 15-49 <sup>f</sup>	11.5%	3%	17.3%
Net ODA received, in per cent of GNI (2010) <sup>b</sup>	21	18	0.3
Net ODA received, US\$ per capita (2010) <sup>b</sup>	81	95	21
Share of total global ODA for HIV and AIDS <sup>c</sup>	3%	2%	8%
Net flows from GF (million US\$) (2013) <sup>d</sup>	378	903	438
Net flows from PEPFAR (million US\$) (2010) <sup>e</sup>	269	131	560
Total annual expenditure on HIV and AIDS (Million US\$) <sup>f</sup>	251	174	1,600
External funding share of annual expenditure on HIV and AIDS <sup>f</sup>	96%	90%	16%

*Sources:*

<sup>a</sup> UNPD (2012).

<sup>b</sup> World Bank (2013a).

<sup>c</sup> Kates et al. (2013)

<sup>d</sup> Global Fund (2013).

<sup>e</sup> Kaiser Family Foundation (2010)

<sup>f</sup> Country Progress Reports (for UNAIDS): RoM (2012), RoR (2012), RoS (2012).

and Whiteside 2006:31). The Rwandan Government took active steps regarding the epidemic at a relatively early stage (UNDP 2008:29ff). Consequently, prevalence today is considerably lower in Rwanda than in Mozambique and South Africa (see Table 1). Rwanda's national response to the HIV/AIDS epidemic is defined in the NSP (RoR 2009), which is the outcome of a broad policy process involving a range of stakeholders, including ministries, development partners, CSOs and local communities. The strategic framework corresponds to the global triumvirate of HIV/AIDS interventions, namely prevention, treatment and care and impact mitigation.

The South African government's early response to AIDS was denialism,<sup>9</sup> with the result that large-scale ARV drug rollout only started after the change of leadership in 2008. This delay is generally perceived to have worsened the epidemic (Fourie and Meyer 2010; Nattrass 2004). The current government's

9 This position denies the causal link between HIV and AIDS, while especially emphasising the social causes of AIDS.

shift to a more proactive approach has brought significant change. Data suggest that the infection rate has plateaued. Furthermore, with the ARV rollout there has been a significant reduction in the annual AIDS deaths, from about 257,000 in 2005 to about 194,000 in 2010. Even so, with the absolute number of people living with HIV/AIDS increasing by approximately 100,000 each year (RoS 2012:52), the disease continues to have serious impacts on South African society.

## Relations between state and civil society

Independent civil society and media are fairly recent phenomena in *Mozambique*. Following independence, CSOs were closely related to the governing FRELIMO party and it was only towards the end of the civil war in 1992 that the right to freedom of association was established. Today, civil society in general and AIDS CSOs in particular are emerging. As most of them are dependent on foreign economic support, they tend to concentrate in Maputo, where donors have their offices. MONASO, the Mozambican Network of AIDS Services Organisations, established in 1995, has been the most prominent CSO in the HIV/AIDS field over the years, with substantial donor funding. Today a multitude of Mozambican CSOs and INGOs working on AIDS issues are scattered around the country, but according to information provided by AIDS CSOs economic support is declining for the moment. Compared to South Africa, civil society's role in the response to AIDS has been less significant, but compared with Rwanda, CSOs in Mozambique are clearly more independent of government. There are examples of regionalisation of AIDS CSOs in the form of networks between organisations in South Africa and Mozambique (TAC/MATRAM, The Dream project /Sant' Egidio) (Follér 2013, Godsäter 2013).

The status of civil society in Rwanda and its relationship with the government is a contested issue in the research community. Some scholars maintain the Rwandan government has, in an authoritarian manner, coopted civil society in the country to such an extent that it is effectively a branch of government. Moreover, it has been argued that the government has been able to manipulate donors and other representatives of the international community through a combination of sophisticated information management, a rhetoric of progress and reliance on the "genocide credit" (Ingelaere 2010, Reyntjens 2004, 2011). Other researchers argue there is some, albeit restricted, scope for civil society to influence policy in the country (e.g., Beswick 2010, Gready 2010). In this report, we view the relationship among the Rwandan govern-

ment, international donors and civil society through a different lens. Rather than focusing on authoritarian government practices, we are concerned with the advanced liberal strategies and methods by which international donors, in close cooperation with the government, attempt to create a particular form of civil society. In these strategies, CSOs are recognised as important partners in all areas on the grounds that they have comparative advantages such as community outreach, local legitimacy and cost-efficiency.

In terms of civil society activism, South Africa stands out in the region for its highly active and broad-based civil society, something dating back to the anti-apartheid struggle (Habib 2003, Thörn 2006, Godsäter 2013). One of many indications of the relative strength of post-apartheid civil society in South Africa is its HIV/AIDS struggles, in which TAC has led the fight for the right to treatment for PLWHA. The government's initial denialist approach was certainly a mobilising factor in South African civil society, and the TAC played an important role in changing the government's position. In 2003, TAC launched a successful campaign of civil disobedience to support a "framework agreement" on a government HIV/AIDS policy. TAC is a broad social movement: building on anti-apartheid political imagery and seeking alliances with unions, churches and CBOs, it has served as a node in the network of civic HIV/AIDS initiatives. TAC has not just confronted government, it has quite successfully sought transnational alliances in challenging the policies of pharmaceutical companies (Jones 2005, Olesen 2006, Mbali 2003).

## Aid dependency

Donors view Mozambique as a success story in terms of the peace, stability and growth achieved since the end of its devastating civil war in 1992. It has also been portrayed as a "donor darling," mainly because of its willingness to allow donors significant influence over state policies (de Renzio and Hanlon 2009). In addition to the funds distributed from CNCS to civil society, bilateral donors such as the Danish and Swedish embassies and DFID are actively involved in supporting AIDS CSOs. There is currently a shift in emphasis away from budget support to the Mozambican government because of its failure to meet good governance benchmarks.

Post-genocide Rwanda has also been portrayed as a donor darling, but for different reasons. Unlike Mozambique, Rwanda has had a high profile in negotiations with international donors. This firmness largely reflects the country's ambition, outlined in the long-term development strategy Vision 2020, to combine a strong and active state with an economy open to foreign

investment and global competition (Knutsson 2012). Rwanda's donor darling status has primarily arisen from its impressive performance rates. In other words, Rwanda provides international donor agencies with a useful example of how aid money can be used effectively. Most well-functioning CSOs in the area of HIV/AIDS receive funds from at least one of the two giants, GF and PEPFAR. Both these donors align their programmes with the NSP in Rwanda, but the funding procedures are quite different. The government, in the form of the ministry of health, has been the single primary recipient of GF money. The Country Coordination Mechanism (CCM) makes money available to CSOs through public calls and tenders.<sup>10</sup> PEPFAR money, on the other hand, is mainly channelled through American INGOs, which are used as intermediaries for transferring money to local CSOs. However, these intermediary INGOs must comply with the NSP and report to the GoR.<sup>11</sup>

In contrast to both these countries, South Africa cannot be characterised as aid dependent. It is, however, still regarded a developing country, but along with countries such as India, China, Turkey and Brazil it ranks as an Emerging Market Economy (EME) and joined the BRICS group of major emerging economies in 2010. Although some donors have started to exit the country, it still receives a substantial international aid, including funds for HIV/AIDS (see Table 1). In fact, given its extremely high number of HIV-positive inhabitants, 8 per cent of global ODA funds for AIDS currently goes to South Africa (Table 1). Many of the links between donors and South African CSOs working on HIV/AIDS were established in the context of government denialism prior to 2008, when donors relied on CSOs to bypass government.

In South Africa, HIV/AIDS policies are governed by the South African National AIDS Council (SANAC), chaired by the deputy president and co-chaired by a representative of civil society. SANAC was established in 2000 "to strengthen the strong political leadership as well as to ensure inclusion of civil society in the overall response to HIV and AIDS" (RoS 2009). It includes representatives from seven government departments and 17 "civil society sectors," such as children, traditional leaders and healers, religious organisations, business, PLWHA, etc. Accordingly, South African civil society has a strong influence on the country's NSP, which is drafted in an intense consultation

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10 For an organisation or institution in any part of the world to be eligible for GF funding, a multisectoral CCM, representing public, private and civil society actors, must be established. In Rwanda, the CCM is chaired by a person from the ministry of health.

11 In fact, a large share of PEPFAR money is channelled to public health facilities at the local level.

process and decided by SANAC. More recently, however, there have been attempts to reduce civil society membership in the council, but SANAC is still heavily dependent on CSO expertise. Despite the fact that South Africa is not, relatively speaking, heavily reliant on donor funds for HIV/AIDS (Table 1), the latest NSP (2012–16), expresses concern about donor dependency (RoS 2011:17).

### Different contexts, similar strategies

To conclude, substantial differences exist among the three countries regarding the status of the epidemic and government responses; relations between state and civil society; the extent of international aid for HIV/AIDS; and relations between donor community and government. Firstly, South Africa stands out. It has a more serious epidemic and a more highly mobilised civil society. Further, while in absolute terms it receives more funding than our other case countries – and is roughly on the same level regarding share of total ODA for HIV/AIDS per capita (see Table 1) – it cannot be defined as aid dependent since international aid constitutes a relatively small share of national spending on HIV/AIDS. Rwanda and Mozambique, on the other hand, display similarities regarding both relations between state and civil society and aid dependency. In both cases, civil society autonomy in relation to the state is considerably less than in South Africa. Regarding aid dependency, over 90 per cent of national spending on HIV/AIDS in both countries comes from external resources. As Table 1 shows, in terms of national spending on HIV/AIDS, there is, however, a significant difference. While Mozambique spent US\$ 251 million per year (in 2007/08), Rwanda spent US\$ 174 million per year (in 2009/10). Considering the total infected population in each country (see Table 1), this means Rwanda spends roughly six times as much per infected person as Mozambique.

We have pointed to significant differences between the case countries regarding the structural context for international development cooperation with civil society. Regarding the organisation, performance, evaluation and effects of such cooperation, we have, however, found fundamental similarities among the three. Consequently, Chapter 3, the heart of our report, is organised around four donor strategies common to development cooperation in all three countries, rather than country by country.

## Chapter 3: Responsibility in practice

This chapter analyses the different strategies and methods of governance international donors employ in their efforts to construct responsible and self-regulating CSOs. It further examines the effects of these strategies and methods, that is, how CSOs approach this “politics of responsabilisation” either by accepting or rejecting responsibilities, complying with them, or resisting and/or critiquing strategies and methods. Each of the four governance strategies – marketisation, managerialisation, scientisation and standardisation – has a section devoted to it. These sections start with an examination of the concrete methods through which this governance unfolds and the various “effects” they produce. The four governance strategies sometimes overlap in the actual practice of international development cooperation. For example, both tendering and preordained programmes involve the marketisation and managerialisation governance strategies. Such “overlaps” merely indicate that these practices are complex and are not driven by a single logic.

### Marketisation

In this section, we look at the methods by which marketisation comes into play, namely 1) tendering; 2) entrepreneurship training; and 3) underfunding.

#### *Tendering*

A key tendency we observed in this research project is the frequency with which donors use funding methods designed to 1) nurture competition between CSOs and 2) transform the development partnership from a donor-recipient relationship to a buyer-seller relationship. For example, during one of our workshops, the CSO of a South African intermediary organisation explained to the heads of 14 South African CBOs:

There are less and less calls for applications where you are afforded the opportunity to apply for funding for your own programs. All donors are now moving in the direction of service contracts as opposed to awarding grants and they will put a call for applications which has a predefined scope of work. We'll say we are looking for somebody to do this. Here's the Terms of Reference, these are the results we expect and this is how much money you are going to get and how you need to spend it. So there's a move away from grants. (SAworkshop)

The head of the US Center for Disease Control and Prevention South Africa (CDC), one of the two major agencies disbursing PEPFAR funds, gave a similar account when explaining the role of “sub-partners”:

So we give the money to a prime partner. The prime partner is the one who applies for the funding opportunity announcement. We put an announcement out on the street and we say we have money available for a partner who has experience and who can say that they can provide these services or this support [...] Let’s say they’re a [ARV] treatment partner but to do the counseling and testing they want to bring on another partner to work under them on a sub-agreement. It’s through a contractual agreement with the prime partner in order for the prime partner to accomplish all the goals and objectives that they said they could do when they applied and were approved to do the work. (SAinterview 4)

The significance of the funding model described here to the nature of development cooperation can hardly be overemphasised. In the transition from grant agreements to service contracts, the distribution of responsibility between development partners is effectively reversed. While a grant is a charitable donation, a service contract is a contract between the buyer and seller of a commodity. The basis of the grant is moral responsibility on the part of the donor to improve the lives of beneficiaries. Payment for services, by contrast, entails a legal responsibility by the recipient to provide the contracted services. In other words, the former responsabilises the donor, the latter the recipient. The former is needs based, the latter performance based. The difference between these methods was illustrated by a senior workshop participant by recalling earlier forms of development partnership:

I remember in the old days [when] I was working for projects with the South African Council of Churches and they had the round table. So all of the [donor] people would sit there and you would say “we need 20 million Rand, how much can you give?” you know, [...] I mean it was all literally put into one pot and they were very accommodating and you could say that “these dates don’t suit us, we are going to do it like that.” But of course those days are long gone. (SAworkshop)

In the Rwandan context, similar observations were made. The newly established Single Project Implementation Unit (SPIU), (set up to better coordinate the management and implementation of health sector projects funded by multilateral and bilateral donors), clearly states that the preferred procurement methods are now “open invitation competitive bidding” achieved through two-stage tendering (SPIU 2011).

### *Entrepreneurship training*

It has become common for donors and INGOs to provide CSOs with training and workshops to promote entrepreneurship, business and economic self-sufficiency. Hence, CSOs are encouraged to diversify their income-generating activities and stop relying solely on donor funding to sustain their organisations. In part, these efforts to promote economic self-sufficiency can be understood in light of the global economic downturn. The conclusion donors seem to have drawn is that CSOs must become more entrepreneurial. The following quote by an international development consultant working in the HIV/AIDS area illustrates this:

You know, sustainability of civil society involvement will depend very much on the level of capacity that they will have achieved by then. On their ability to attract funding from different sources. (RWinterview 1)

Of particular interest is how this promotion of entrepreneurship relates to responsabilisation. The message conveyed to CSOs is quite straightforward: they cannot rely exclusively on external funding but must learn to become more resilient and self-reliant, that is, be able to exploit whatever economic opportunities arise. In this sense, the strategy of promoting entrepreneurship is also a strategy of responsabilisation. Ultimately, what entrepreneurship training promotes is that CSOs must become much more economically self-sufficient and competitive, or they will go under.

### *Underfunding*

A cruder method to evoke entrepreneurial conduct among CSOs is the systematic underfunding of overhead costs by donors. This method drives organisations to turn any possible resource into money. The following quote from South Africa illustrates the practice.

They'll mainly want us to reduce in the infrastructural, indirect overhead costs to be able to meet their budget, which is unfair because you need to do the same level of work but at a lower overhead level. And if you want a quality product at the end of the day, that's difficult to achieve. (SAinterview 6)

Complaints about underfunding were frequent in Rwanda and Mozambique as well. What is most interesting from our point of view is how this practice forces CSOs to turn to other sources of income. This brings us to the issue of "effects."

### *Effects and responses by CSOs*

All these methods have significant effects. First, it can be concluded that tendering and procurement methods are “productive” of both identity and practice. For example, several Rwandan CSO representatives underscored that the market for external funds has become very competitive. Statements like the one below were common:

Members of these organizations [CSOs] are doing their best to make the organizations work. But the organizations need funds and it is not really easy for the organization to compete for those proposals. (RWinterview 2)

Hence, if the intention behind the new funding schemes has been to create a competitive aid market, they seem to work quite well. This competitive environment, in turn, appears to have important effects on the self-image of CSOs. For example, many CSOs now see themselves as market actors, and this in turn affects how they think about fellow CSOs. The following quote is illuminating:

We are prepared to meet and beat a competing client [...] We have consulted ourselves into a well standing organization that is able to win tenders or offers that are there. (RWinterview 3)

The statement indicates that this CSO regards other CSOs as competitors rather than as allies in the struggle against HIV/AIDS. Further, this culture of competition impels CSOs to conduct themselves responsibly in diversifying risks. Hence, they devote much time to working out and handing in proposals to different international donors. As one informant states:

The competition is obvious, so we apply to as many as we can. (RWinterview 4)

Similar examples of CSOs seeming to accept responsibility, and to an extent even embracing the culture of competition, were observed in Mozambique. The following quote by a director of a Mozambican CSO is illuminating:

We want the skills [...] to be able to stand up, to write a good proposal, to go abroad and compete with international NGOs on available funding. (MO-Zworkshop)

And in South Africa, the CEO of a successful CSO expects that many CSOs will close in coming years because they are not business-minded enough to compete for tenders.

Another noteworthy effect of tendering is that it appears to produce a

“performative” logic among CSOs. A common assumption about tendering is that it is a “value-neutral” way of allocating funds to the most “competitive” proposals. Yet, the tender, as well as the selection processes, inevitably include politically informed considerations and choices. Our data show that CSOs are mindful of this, and several informants stressed the importance of framing their organisation’s work in a way that looks attractive to donors. Hence, CSOs are well aware of the performative aspects of procurement processes, and one obvious effect is that they develop the skills to frame their organisation’s work differently depending on the requirements of each donor. This, again, albeit in a slightly different way, shows how this method of governance is encouraging CSOs to become resilient and flexible.

As far as fostering an entrepreneurial mindset is concerned, the entrepreneurship training and the practice of underfunding mentioned above also appear to be “productive.” Most CSO representatives interviewed in Rwanda recognised the need to diversify incomes and the unsustainability of relying solely on donor money to support their organisation’s work. The following quote is illustrative:

I want to start a hotel or a small centre for training. There are many trainings running and this will provide some money for the organization. It will be more sustainable. (RWinterview 5)

The spirit of entrepreneurship seemed to be less articulated in Mozambique and some informants argued that this had to do with the country’s legacy of socialist rule. Still, several people recognised the need to exploit new opportunities. In the words of a CSO ex-director:

I wanted to be less dependent on donors and to discuss other ways to get money but the board was not interested. (MOZinterview 1)

In South Africa as well, CSOs see the need to diversify their funding, not only by shifting to new areas of work as donor priorities change, but also by engaging in profit-making activities and competing with private businesses in providing services alien to the organisation’s core activity:

Our board is deciding strategically to earn 15 percent of [our] budget [...] We now offer training [and the participant has to pay]. So we have a partner in Cape Town who pays us R170, 000 this year to train bakers. So we train for profit [...] We’ve also partnered with a local business to make ribbons that tie around a product, and we’ve made 120,000 out of that [...] We’re earning five percent of our budget this year. (SAworkshop)

These examples show that the methods of governance referred to above appear to be “productive” of identity and practice in all three countries. Of note is the fact that they primarily seem to evoke acquiescence among CSOs, which accept the importance of becoming more competitive and entrepreneurial. It is, in fact, quite difficult to find clear-cut examples in the material where these methods were resisted or outspokenly criticised. In Rwanda, there were a few examples of very subtle criticism when CSO representatives argued that the culture of competition made it difficult for CSOs to unite and resist. In other words, tendering as a method of governance was seen as efficient in the sense that the competition it nurtures works.

In South Africa, we found a few other examples that could, at least potentially, be interpreted as a way of resisting these methods. One concerns the selection process for CBOs in South Africa. Thirty-two potential partners were invited to a briefing on how they could apply for funds. Instead of keeping this information to themselves, they spread the word, and more than 50 organisations showed up. Although this effectively increased the competition, the mindset among participants was not one of competition but of solidarity and information-sharing about the funding opportunity.

### *Marketisation and the politics of responsabilisation*

As we have seen, tendering, entrepreneurship training and systematic underfunding are three methods employed by donors to responsabilise CSOs. All can be seen as reflecting the broader governance strategy we refer to in this report as marketisation. As a governance strategy, marketisation is based on an assumption that competitive markets are the best and most efficient way to allocate resources. Ultimately, this strategy nurtures competition between, and fosters a culture of entrepreneurship among, CSOs. As we have argued, marketisation is connected to responsabilisation in several respects. The practice of tendering nurtures market competition and CSOs are ultimately made responsible for becoming more competitive and diversifying their risks. Moreover, the current transition from grant agreements to service contracts reinforces this trend by effectively reversing the distribution of responsibility between development partners. What was once a moral responsibility on the donor is transformed into a performance-based legal responsibility on the CSO. Entrepreneurship training and underfunding can also be seen as governance methods that evoke responsibility among CSOs. The bottom line is that CSOs must become more self-reliant economically and learn to exploit business opportunities that arise. If they fail to take on the responsibility to

reinvent themselves as self-sufficient, competitive actors in the service market, they will ultimately go under. Finally, although we found some examples of resistance to marketisation, the overall conclusion from our fieldwork is that CSOs usually comply with the methods introduced by donors and largely accept the responsabilisation achieved through this strategy of governance.

## Managerialisation

We now turn to another set of practices we encountered, which we interpret as expressions of managerialisation: 1) tendering and preordained programmes; 2) use of intermediaries and sub-granting; 3) reporting; and 4) organisational development and capacity-building.

### *Tendering and preordained programmes*

One method already mentioned in the section about marketisation is tendering. While we focused above on the competition tendering implies, what interests us here is the fact that tenders specify an exact product or service the winner of the tender will provide. As a result, donors using tenders for allocating funds leave little or no room for recipient organisations to design programmes tailored to meet their own goals or the needs of their community. Tendering – as well as narrowly defined grant programmes – therefore establish a hierarchy designed to support the implementation of goals defined by the donor. As others have pointed out (Lewis and Mosse 2006), goals are translated and thereby transformed as they pass down the administrative hierarchy from donor headquarters to local donor representatives to recipient organisations. But in terms of responsabilisation, the point is that each time a goal is handed to the next level of the hierarchy, this lower level is expected to accept responsibility for its implementation.

This chain of responsabilisation is asymmetrical in the sense that the subordinates can be held accountable by their superiors, but not the reverse. If a recipient organisation is unhappy with the goals it is asked to implement or disagrees with certain modalities, it is often told by the local donor representative that although its demands seem reasonable, there is nothing that can be done, since s/he has limited discretion to change goals or modalities. With the preordained goals of tendering, this discretionary scope has been reduced to a minimum.

The problem is that part of the system happens in Stockholm, for example, or in Washington, or wherever [...] some of our board members said, “no,

you must go and tell them [about these problems]”. I said, [...] I can go there and create [= argue] in front of the ambassador, [but] they’re not going to take me seriously because the rules are not made there. The rules are made back in Stockholm or in Washington or wherever. (SAworkshop)

In short, any attempt by recipient organisations to negotiate goals upwards is forestalled by the hierarchy of preordained goals. However, as we will see, if something goes wrong, it is always the fault of the recipients, since they accepted responsibility to implement a specific goal. It is never the goal that is wrong.

### *Using intermediaries and sub-granting*

Donors increasingly choose to work with a minimal number of intermediary organisations (or “prime partners,” as one donor representative put it), from which they buy certain services (in the case of tenders) or to which they allocate larger grants for broader programmes that will involve sub-grantees (in the case of traditional grants). This puts donors in the comfortable position of having to talk to and negotiate with just the next level down in the hierarchy. All the troubles below that level are taken care of by others, as this donor representative describes:

So the prime partner is the one that we deal with. They’re held to a certain number of targets, they’re held to a budget and outcomes. We’re not going to go to the counselling and testing [sub] partner and say “why didn’t you meet this?” We’re going to go to the prime partner and we’re going to say, “why aren’t your counselling and testing numbers up to snuff?” And then they’re going to have to go to their sub-partner and say [...] “you’re not meeting your targets” and, “I’m going to have to work with you.” (SAinterview 2)

In other words, the use of intermediaries in recipient countries allows donors to hand responsibility over to these organisations, which in turn prompts them to monitor the progress of their sub-grantees closely, as this manager of a South African intermediary explains:

In the case of the [XYZ] Program, we wrote into the contract [with our sub-grantees] that we want monthly reports, not quarterly reports [...] So that ties it down even more in terms of us being able to pick up on a month-to-month basis that people are starting to deviate or to fall behind in terms of their work-plan [...] in which case if we pick up deviation, then the project officer has to start communicating with them. (SAinterview 5)

The use of intermediary organisations, which often collaborate closely with their sub-grantees by providing advice and training, allows donors to shift responsibility on to the implementing organisations much more effectively than they could if they worked directly with those organisations. This is not only because donor agencies are hardly able to handle a high number of monthly reports, but also because they often lack the local knowledge required to responsabilise these organisations effectively.

### *Reporting*

The management hierarchy works not only to shift responsibility downwards, but also allows for upward flows of a different kind: the credits for successful projects are passed upwards in the form of reports. These reports are the concrete product subordinates are responsible for delivering, and as we have seen above, at increasingly tight intervals. Given the strong dependencies that exist particularly at the lower end of the hierarchy, implementing organisations have an interest in ferreting out and highlighting the successes of their work so that donors can be confident that by the time the reports reach the top of the pyramid, the project will look splendid. Notably, this interest in reporting success is an effect of the implementation hierarchy described here. As we will see in the section on standardisation, recipients often have a genuine interest in reporting problems rather than success.

To underscore the key role of reports, donors seem to have adopted the practice of withholding payment of the next instalment until they receive audited reports (more on auditing below), often with the adverse result that even organisations which have finalised reports on time are left with no funds to continue their implementation work due to the delays caused by the subsequent auditing process (for details, see Haug 2013). The effect of the focus on (audited) reports is that responsibility is shifted towards recipient organisations, because if what is key to a development partnership is reports, then the producers of these reports bear the main responsibility for the functioning of the partnership. If this seems trivial, consider how responsibilities would shift if partnerships revolved around endowing implementing organisations with the necessary capacity: in this scenario, the main responsibility would be on the “capacitator,” the donor, who would be held accountable for insufficient funding or inadequate training.

To illustrate the dimensions reporting has taken on as a method of top-down monitoring, consider the following description of reporting requirements by a representative from an intermediary CSO:

So it means when they [the CBO sub-grantees] do the report, they can't just say "we did the workshop that we were supposed to have this month and it was great, everything went well" [...] They've also got to tell us how many people attended the workshop and how many were supposed to be there, and was the budget approved, and what was the actual expenditure. If there was over-expenditure, what are the reasons behind the over-expenditure? If there was under-expenditure, what were the reasons for the under-expenditure? And what are they now foreseeing in terms of the saving they've made, what is their intention for the saved money in this particular activity? [...] So it has to be quite an in depth report that also has attachments. So if there is a workshop, you attach the workshop program. If it was a training session, what was the content of the training? Were there training manuals? Where are the manuals from? Where were they developed? Can we see the copies of these manuals? So that essentially you can get a good picture of what transpired, even though you might not have been there. And then, of course, the Project Officers [supervising the CBO] would go over these reports and if [there are] any areas they feel they need further clarification, then they communicate with the organization to say, you know "1, 2, 3 from your report: I require further clarification" or "can you expand on this particular issue to give me more information such as this and this and this and this." (SAinterview 5)

Reporting upward to the next level in the management hierarchy is such a common phenomenon both within organisations and between recipient and donor organisations, that it hardly needs elaboration. However, it is worth noting that CSOs, especially smaller ones, don't usually develop such formal reporting (and hence responsibility) hierarchies by themselves, but are required by donors to do so as part of a more comprehensive method of responsibility called "organisational development."

### *Organisational development and capacity-building*

Organisational development is aimed at increasing the performance of a recipient organisation by introducing and improving organisational policies and procedures. The organisational model that serves as a blueprint for this process, and which is applied to even the remotest rural CBO, prescribes a number of features an organisation must have to perform well. Among these is a governing board, whose members must "not [be] full time members of the organisation," as well as formalised "[m]anagement structures and systems" with "clear roles and functions and communication lines"; a "Financial Management Policy" with "[f]inancial controls including three signatories, income and expenditure control, petty cash control"; as well as a "Human Resource

Policy” that includes procedures for hiring and managing staff (Doc1). It is also important that the organisation has its own offices that are accessible to community members, which means that “home offices” are not admissible:

There are some other organisations that are family based organisations. You find that it’s my father, it’s my mother, it’s a family organisation. So we also discourage such applicants. (SAinterview 3)

In practice, this often means that small CBOs that have been run by one or a few key individuals need to fundamentally restructure themselves and introduce internal systems of control. Most significantly, the original leader(s) of the organisation are forced to yield decision-making power to a newly created board, which will then be formally in charge of the organisation and in the position to hire and fire managers (including the founder of the organisation). The aim of creating this divided leadership is to ensure the managers do not also “own” the organisation, and that their control is limited in various ways.

Not all donors require these structures to be in place at the outset of the partnership. Some intermediary organisations have specialised in helping CBOs develop such structures in the course of the partnership, that is, during the implementation of an actual project. Organisational development then becomes one of the project goals, in addition to other outcomes. However, even where organisational development becomes part of the workplan, certain minimum standards need to be met from the start, so that there is a probability the other intended results can be achieved. In other words, the aim of organisational development or capacity-building is not to enable organisations to achieve *their* goals, but to perform well in implementing donor goals. In South Africa, a representative of an organisation distributing PEPFAR money left no doubt that the purpose of capacity-building is to make organisations “perform”:

So you may have the senior level organization [organization A] [...] and they will mentor and build the capacity for community based OVC programmes, for example [...] So [organization A] will be responsible for making sure that they are performing. (SAinterview 2)

Donors and their intermediaries do not see capacity building as an end per se, as this representative of an INGO in Mozambique that acts as an intermediary explains:

Most of the recipient organizations say “we are going to do capacity building.” [...] And then my question is: What for? People say: “We are providing capa-

city building because people don't know how to [do things]." [I propose:] Let's start from the other end. This is result-based management; we are concerned with result-based management because the donors want results. (MOZinterview 2)

In terms of the politics of responsabilisation, the organisational isomorphism fostered in development partnerships through organisational development clearly works to shift responsibility on to recipient organisations in two ways. It does so, first, by – at least formally – turning these organisations into market actors able to compete for funds and thereby take care of themselves (and their communities). In that sense, organisational development in its present form also feeds the marketisation strategy discussed above. Second – and this is the main point of the present section – it does so by formally introducing the position of the manager as someone who receives goals from superiors and sets goals for staff. In this way these organisations are capacitated to become part of the global implementation hierarchy described earlier: while the ideal community leader is guided by needs articulated by community members, the ideal manager is guided by goals set by donors. Community leaders are responsabilised by community members, managers by donors. We return to this issue below.

### *Effects and responses from CSOs*

Some organisations appreciate the opportunities to acquire management skills and to accentuate the division of labour between implementing and management staff. Take, for instance, this South African CBO director speaking about the capacity-building training he received:

I'm a [originally] fieldworker, I'm a volunteer, I'm doing ground work. So they teach me the upstairs work as well, the elite things, the luxury things, on how to communicate, for example, with an international donor. How to better or improve the writing of proposals, they educate us on that as well, financial management skills, they better our skills because for me as the project manager for [organisation X], the Director and Founder of the organization, I cannot do things on my own. So I don't have the time to teach my staff how to do things but here [intermediary A] comes and says, "we have a workshop on financial management", then I sent the administrator and one of the fieldworkers that is assisting in book-keeping and I sent them. So they capacitate us, they ease the work on my shoulders, you know. So they are really, really good at that. (SAinterview 1)

Others such as this CSO director in Mozambique complain that donors are not providing enough such training or resources to allow them to compete with INGOs:

We want that training! We want the resources to hire staff with the technical capacity to write a good proposal. We want funding to hire staff to follow the programs, monitoring the programs with quality. (MOZworkshop)

Interestingly, although this CSO director obviously accepts responsibility for having to compete for funding, he nevertheless insists on the responsibility of donors to provide additional support that will enable his organisation to compete and comply. Similarly, in South Africa, CBO directors turned the donors' demand for professionalisation against them by criticising them for their unwillingness to pay "professional" salaries.

NGOs who have no medical aid, no pension fund, who have no benefits, nothing [...] many of us come from professional backgrounds where we've let go of all those benefits. We're earning 5–10 times less than we were before and yet we're working 100 times harder and it's just to get donors to understand this, that people need to be paid properly for what they're doing. (SAworkshop)

Others are critical of how managerialisation, in promoting new priorities, affects the content of their work. Take these two South African CBO directors interacting in a focus group discussion:

Jabulile:<sup>12</sup> And it's a lot of work to do a report for [intermediary organisation], PEPFAR, [the Department of] Social Development. [...] When you do reporting, you cannot do other things, [...] if you are funded by four to five funders, you must know you cannot be so excited because you need to report.

Pam: And you become an administrator! (SAworkshop)

Such criticism can easily be dismissed for ignoring the benefits that can come with improved management. However, if managers like these two complain about doing managerial work (such as report writing), then we may wonder whether they actually *want* to be managers. And if managers worry about managerial work keeping them from doing implementation work, then we may well interpret this as rejection of the managerial responsibilities imposed on them by donors.

We also noticed that some managers seem to interpret their responsibility as managers in terms of guardianship of their employees. The concern for the wellbeing of staff is a topic CBO managers repeatedly brought up:

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12 All the names of informants in this report are pseudonyms.

We have 55 people working at [name of organisation] [. . .] 54 people who work at our project are from [name of area]. They all come from deep rural homes with problems and they are the ones who are capacitated to deliver the services. Without them, there would be no services. And it is this ongoing challenge to get donors to understand that staff costs are actually where the bulk of the money should be going [...] [but] they want to see the money going into food parcels for children. But, who is going to buy the food parcels? Who is going to do the home assessments? Who's going to deliver them? Who's going to? – It takes people, and skilled people! [...]. It's an ongoing, burning, core problem for projects. It's that donors won't allow us to pay people who work at the project, who are the service providers. (SAworkshop)

In other words, managers interpret their professional responsibility for the organisation as a moral responsibility to their staff, and they express this concern in criticising donors for not sending promised funds on time.

### *Managerialisation and the politics of responsabilisation*

Managerialisation is the logic of promoting a particular way of organising social life, namely management. In the context of development cooperation with civil society, this means two things. First, recipient organisations are required to adopt a specific organisational model that assigns managerial tasks (setting goals and monitoring their implementation) to specific individuals in the organisation. It also constructs the organisation as an autonomous legal entity, separate from its owners (who benefit from it, but do not control it) as well as from its managers (who are exchangeable if they do a bad job). We have seen above how this strategy is reflected in various methods employed by donors.

Second, managerialisation implies a division of labour *within* each organisation. On one hand, there are managers, who set goals and devise strategies for reaching them (using their professional management knowledge). On the other, there are operations staff, who implement these strategies (using their knowledge – professional or otherwise – regarding the business at hand) (Orford 2010: 246). As a result, “management is often remote from the actual functioning of the organization [...] [It] is removed by its position on the hierarchy and its numerous responsibilities” (Enteman 1993:162). This was confirmed by a CSO manager from Rwanda:

I've done management, of course, I've done a bit off business law, but I don't know anything about civil law, I don't know anything about human rights, you know. (RWinterview 6)

In most CSOs we spoke to, however, there is still a far from complete detachment of managers from the implementation work of their staff. As we have seen above, CBO managers still live in both worlds and are either excited about being introduced to the “upstairs work” or annoyed at becoming an administrator rather than doing the actual (implementation) work they originally set out to do. The division of labour between management and implementation staff in these organisations is still a work in progress, but the clear effect of managerialisation, even for them, is that they are incorporated into the global management hierarchy in which CSO managers respond to the goals set by the managers above them: the managers in intermediary organisations, who report to local donor representatives responsible for managing a particular programme, who report to middle managers in the donor agency overseeing a portfolio of programmes, and so on.

This hierarchy works in such a way that every manager has to interpret the goals set by their respective superior manager within an increasingly narrow scope of discretion and to devise strategies to implement them, which they pass on as goals to the managers below them until they reach the implementing organisation. Since the aim of using CSOs is that these should be close to or even part of poor communities, this means that responsibility for getting things done, for improving the lives of the poor and diseased, is successively passed on downward to the poor themselves.

Our impression is that the poor and their CSOs largely comply with these methods of responsabilisation. But does that mean they actually accept the responsibility donors hand off to them? Not necessarily. Through their divergent interpretations of their management role as guardians for their staff, leaders in recipient organisations can also re-responsibilise the donor to also care for potentially suffering staff.

We therefore conclude that if managerialisation is a strategy of “divide and rule” (divide owners from managers as well as managers from staff), at least some managers at the level of CBOs do not submit to this logic, but affirm the solidarity among these groups.

## Scientisation

In this section, we look at how scientisation comes into practice through the methods of 1) M&E, surveys and results-based management; 2) evidence training (to invoke a more evidence-based way of working); and 3) reporting tools.

### *M&E, surveys and results-based management*

An important observation during our fieldwork was how donors employ various methods to invoke a more evidenced-based way of working and a more “science-like” mindset among CSOs. This tendency was evident in all three countries. It is, for example, clearly manifested in NSPs, in which one overarching principle is that all HIV/AIDS interventions be guided by scientific evidence and knowledge of the most effective strategies (e.g., RoS 2011:21). Most civil society representatives are well aware of this principle, as the following quote by a representative of a major INGO operating in Rwanda demonstrates:

We intend for evidence, and scientifically sound evidence, to back up the decisions that affect our program management [...] So when we adopt a certain intervention, for example at a health program, we would want to have scientific evidence that this is an intervention that has proven success, that it has been evaluated, that it has a certain rigor of having been proven as an effective intervention. (RWinterview 5)

Since CSOs are obliged to base their decisions on evidence, they basically have two options. Either they conduct surveys and do M&E in order to evaluate the impact of their own interventions or they have to be updated on the latest evidence produced by other actors in the field. Both are, quite naturally, demanding tasks and therefore it is hardly surprising that training again emerges as an important method of governance.

### *Evidence training*

Donor agencies and INGOs in all three countries use training and workshops to instil a more evidence-based way of working among CSOs. The intent of such training is building capacity among CSOs so they are able to do their own M&E, conduct surveys and analyse whatever data they collect. A representative of an INGO operating in Rwanda explained the connection between such training and science-like conduct among CSOs in the following way:

Part of the capacity building we are doing for the local organizations is also to make sure that they are able to do the analyses themselves. So we train them. Like last year we trained some of the program managers how to capture routine programmatic data. This year, we are planning another workshop for proper M&E design and use. And we want at some point to be able to tell them, “please do the analysis for this quarter and produce a report” rather than us collecting the data and then compiling and doing the analysis for them. (RWinterview 7)

This quote illustrates how INGOs want to endow CSOs with the necessary capacity and how this becomes a way of responsabilising them. While these organisations are trained and empowered to do their own data collection and data analysis, they are rendered simultaneously accountable and responsible for conducting themselves “scientifically.” In other words, CSOs are called upon to self-regulate in accordance with scientific ideals and principles.

### *Reporting tools*

Alongside training, donors employ a range of methods to mobilise evidence-based conduct among CSOs. We refer to these as reporting tools, that is, templates, matrixes and other technical devices designed to facilitate reporting. Donor funding today comes with an obligation on CSOs to do M&E and to account for their activities and interventions through frequent and extensive reporting. CSOs are obliged to report on an annual, quarterly, monthly, and sometimes even weekly basis. An INGO representative in Mozambique offered this example:

We are using certain assessment tools to assess potential partners [...] We work through result matrix and the result matrix have three sections in which the first set is more on the impact level – what the program has to achieve in a long-term – the partners. That part of the matrix is more or less individual for each intermediary depending on which thematic area the intermediary is working. [...] It is based on result based management and outcome matrix, that is the philosophy. (MOZinterview 3)

On the other hand, it is important to realise that reporting is not only a matter of external control but also largely a matter of invoking self-regulation, for example, to foster evidence-based management among CSOs. Hence, these reporting tools can also be seen as devices to mobilise self-government among CSOs. This, in turn, brings us to the issue of “effects.”

### *Effects and response from CSOs*

The effects of these various methods are wide-ranging and complex. As indicated above, the attempts to instil evidence-based practices can be seen as a way of responsabilising CSOs, which are made responsible for effective use of aid money. Since working in accordance with scientific ideals and principles is believed to help guarantee effective and accurate spending of donor money, CSOs are basically made responsible for conducting themselves in accordance

with these ideals and principles. Hence, measurement, M&E and scientifically inspired analysis become pivotal, as the following quote illustrates:

All we are doing is based on evidence. Without evidence, no intervention [...] It's something which is part and parcel of all programmatic interventions because there is no way you can go out there and spend donor resources and government resources without proving that you are being effective, that you are reaching the right people, that you are having an effect. (RWinterview 7)

However, there is much more to this than simple responsabilisation. In fact, CSOs are at the same time largely *deresponsibilised* in the sense that certain forms of knowledge and knowledge production are imposed on them. In short, they are deresponsibilised in terms of how to conduct their work and in the process local knowledge is devalued. The following quote by a South African CSO representative offers a good example. In talking about how training based on scientific knowledge can provide blueprints for correct and value-free conduct, the informant stressed the need to provide CBOs with more training:

They've never been trained on counselling but they [are] counselling people in these communities. Now they're not doing it correctly because they've never been trained [...] You need people who will say, we will be willing to learn *to do things the right way*. And the right way will be to attend training, a training which talks about HIV/AIDS, maybe counselling, that will help me. Once I'm capacitated there, I will be able to improve the quality of my service which is counselling in this instance. (SAinterview 7, our emphasis)

There is a certain irony in this deresponsibilisation, in the sense that partnerships with CSOs are often justified by donors on the basis of the unique and essential knowledge such organisations have of the local contexts in which they operate. Thus, evidence-based approaches actually offer opportunities for *both* donors and CSOs to evade responsibility by referring to an authority external to themselves. This statement by a Rwandan INGO representative illustrates such deresponsibilisation:

They are proven scientific approaches we are using. Our approaches are not something that just came out of the blue. (RWinterview 7)

By referring to the authority of science, the informant is able to present the organisation's work as value-free and at the same time pass off responsibility to an authority external to the organisation, namely scientific knowledge.

Another effect of attempts to cultivate evidence-based work is the growing

professionalisation of CSOs. Since many donors require that CSOs introduce evidence-based working methods, the organisations are basically forced to employ staff with such skills and competences. The following statement by a South African CSO representative illustrates this trend:

When you design a proposal, it's not just about asking for money but asking for money and coming up with solutions and ideas of how we can deal with the program in an innovative way or effectively. I'm also good at taking an idea and translating it into action to say, if this is what we want to do – to get to the desired goal – what is it that we have to do? Logical frameworks and things is an area that I'm very good at. So it happens to just be the talent that I have, so consequently that responsibility has always resided with me even when I wasn't the Director. (SAinterview 4)

The next quote is interesting for recounting the process by which an activist becomes a skilled professional, using an approach that stresses “results” and “outcomes”:

In order to get things done, you have to have these skills. Because what I usually say – and I say it very often – is that to be an activist, you might be born with it or you might get it from your church or your family or from your community, which is very good. You have the soul of an activist. But in order to do this, you have to have skills. You have to be skilled at something – at the activity. But you have to be aware that you only plan for activities because those activities will bring you certain outcomes. And these outcomes will bring you certain results. This is result-based management. (MOZinterview 2)

The informant here contends that “skills” in evidence-based work are necessary since they enable the organisation to determine whether “effectiveness” and “results” are achieved. Hence, according to the informant, the activist “spirit” is useful only insofar as it is channelled into evidence-based work and results-based management.

All of this suggests that CSOs are currently under pressure to reinvent themselves as professional organisations whose everyday work is guided by sound, value-neutral, “scientific” evidence. Our findings also show that CSOs are largely taking on this responsibility. Hence, these methods of governance employed by donors appear to be fairly effective. Moreover, several CSO representatives maintained that the reporting tools donors provided them facilitated the handling and analysis of data. In our probing of whether reporting requirements really were helpful in CSOs everyday work, one informant offered the following:

The answer is yes. The answer is yes in the way that these formats most of time are dictated by donors. So those donors they pay better than CSOs, meaning that there are technicians who work on these sheets that are more qualified than CSO staff. They have longer experience than CSO staff. So without going into details [...] I think, generally speaking, they provide us with much more expertise. (RWinterview 8)

The informant's point is that the templates and other technical devices donors have designed to facilitate reporting are generally very functional. He explains this functionality by arguing that donors have the financial muscle to employ people qualified to develop such tools. Several informants also maintained that the training offered by donors is very helpful in that it enables them to monitor, evaluate and develop a more efficient and evidence-based way of working. The quote below is interesting in connecting the capacitation that comes with training to a notion of responsibility and duty.

Each and everybody are trained to achieve their duty. The project manager is trained on how to elaborate the project and on management of the project [...] evaluation and monitoring. So those two trainings are given in order to fulfill the responsibility of beneficiaries. (RWinterview 4)

Still, although many CSO representatives considered these reporting tools and training to be helpful, the duty of becoming more “scientific” was also considered to be demanding. Several organisations admitted this mission entailed serious difficulties and that they were struggling to learn evidence-based ways of working. On the other hand, it should be recognised that certain informants criticised monitoring and evaluation and the extensive reporting that comes with it. Some complained that this work was very burdensome and that it drew their attention away from other tasks they considered more important.

### *Scientisation and the politics of responsabilisation*

The methods above – M&E, results-based management, training and reporting tools – are being employed by international donors to influence the everyday practices of CSOs. In our analysis, all these methods reflect a broader strategy of governance, which we refer to as *scientisation*. Scientisation is grounded on the assumption that accuracy and efficiency in everyday work requires that it be conducted in accordance with scientific principles, theories and methods. Thus, this governance strategy engenders evidenced-based work among CSOs, involving measurement and scientifically inspired analysis. Scientisation involves a complex interplay of responsabilisation and deres-

ponsibilisation. On one hand, international donors render CSOs responsible for conducting themselves in accordance with scientific ideals of evidence and efficiency. On the other, CSOs are deresponsibilised in the sense that certain forms of knowledge and knowledge production are imposed on them while local equivalents are devalued. Somewhat ironically, scientisation further implies that international donors and CSOs alike can fend off responsibility in everyday decision-making by referring to the external authority of “scientific evidence.” Finally, although we encountered some critiques of these methods of governance, the overall conclusion from our fieldwork is that CSOs usually comply and largely accept the “double-edged” responsabilisation and deresponsibilisation this strategy of governance entails. In short, they are doing their best to reinvent their organisations as “scientific.”

## Standardisation

In this final section, we discuss another set of methods, which can be understood in terms of standardisation: 1) auditing ; 2) indicators; 3) templates and standard operating procedures (SOP); and 4) information technology.

### *Auditing*

Despite the rhetoric of RBM and the focus on “achieving results,” it is striking that informants seem to talk relatively little about the process of achieving these results and more about *financial* management and the *administrative* skills required to perform well:

Things like financial management and learning how to manage a pretty complex sub-agreement that has strict reporting requirements [...] it requires a lot of documentation [so] that maybe initially, an organization is not ready to be able to do [the work] and so we have a way of intervening with that type of organization where we're much more hands-on in managing the money, but others show their graduation or their evolution in their capacity to manage funds and to implement a programme. (RWinterview 1)

In South Africa, an intermediary organisation has built its reputation among donors for its expertise in financial management. This ability now allows the organisation to react to shifting donor priorities and attract funding that is only remotely related to HIV/AIDS.

One of our strongest points here is our skills when it comes to managing money. Our finance department is the strongest department here and I'd say it's the strongest out of any NGO in South Africa. So our systems and our

compliance requirements and our policies and our procedures and the segregation of duties and functions is very strong, so we do very well when it comes to these corporate governance assessments [...]. So managing money on behalf of a government or a third party is something that we do very well. (SAinterview 4)

Why is financial management such an important issue for recipient CSOs? As this informant briefly notes, donors require partner CSOs to comply with established standards of corporate governance, particularly of financial management. The method to verify compliance with these standards is audits of various kinds, especially financial audits, including of internal systems of control. As a result, it is very clear that the finance department usually has the final word in crucial decisions, since “clean audits” have become the gold standard of organisational assessment in development cooperation. For example, in South Africa, the contract with a CBO was cancelled because several petrol bills were missing to prove that funds were indeed used to drive to remote places to hold workshops. This happened despite the organisation’s excellent performance and reputation in the community and despite undisputed evidence that the workshops occurred and that petrol was necessary for this to happen. What counted was the formal requirements of the financial audit.

A strong indication of the adoption of global standards is the frequent requirement by donors that audits be conducted by one of the major global consultancy firms, such as KPMG or PricewaterhouseCoopers. In South Africa, these audits are conducted according to the same standards as for private businesses, the *King Code on Corporate Governance* (IoDSA 2009).

### *Indicators*

It is hardly a secret that in their quest for “measurable results” donors use a variety of indicators (such as “number of clients undergone HIV Counselling & Testing” or “Income and expenditure monitored monthly”) that allow them to monitor progress and compare the performance of recipient organisations. Donor organisations working in different countries are proud to say they are using the same approach across the globe:

Yes, they [tools for evidence-based work] are standardized in about 70 countries where X [name of organisation] is working. Actually we are working with the different universities that own these tools, and over the years these tools have been proving effective and scientifically sound in addressing or just producing the reliable results, and they are not dependent on one particular platform. If you go to XKenya, to XBurundi, to XTanzania, you see we have the same approaches. (RWinterview 7)

By using the same indicators everywhere, this INGO circumvents a myriad of potential conflicts about how to measure results or what counts as evidence. Whenever this donor negotiates a partnership with a local CSO, the indicators – and hence the measure of success – are preordained and the response to questions about why this cannot be changed will be, “this is how we do it everywhere.” As with the deresponsibilising effect of scientisation (and science is indeed also mentioned here), standardised indicators allow donor representatives to avoid responsibility for the criteria used and so exclude them from negotiation. They are thus concrete tools for maintaining the asymmetry of the implementation hierarchy we described in the section on managerialisation and for minimising the translation of goals by tying results achieved “on the ground” directly to the donor goals.

### *Templates and Standard Operating Procedures*

Closely related to indicators are templates of various kinds as well as standard operating procedures. Any of these tools make it possible to disregard the person using them in the sense that they are designed so that the result will be the same no matter who resorts to them. By the same token, the person using the templates and procedures is not responsible for any effects their use might have, or for the evaluation criteria built into them, as this is simply how “the system” is supposed to work and the assumption is that this is for good reason. At the same time, the person filling in the templates or following the SOPs is responsible for doing so correctly. Much of the training donors provide is geared to enabling recipient organisations to fill in forms correctly and to comply with procedures.

### *Information Technology*

Another way of ensuring that forms are filled in correctly is the use of computers and information technology (IT). This makes it possible to prescribe a certain format or procedure the user is supposed to follow, and the computer can also be programmed to force the user to comply by not accepting entries deviating from the required format:

You have to go through a whole set of steps and if you don't fill them in correctly the system blocks. That makes you aware and you can always see what is lacking. And the system itself will also call attention when it is report time, visit time. (MOZinterview 3)

Compared to personal decisions that entail personal responsibility, the IT system applies selection criteria objectively so that if an organisation is not

selected (or is dismissed for bad performance), this is clearly the failure of that particular organisation and hence its own responsibility.

Consider how this project coordinator, Moeletsi, describes his relationship with the partner CBOs he is supervising for a South African intermediary CSO:

You fall in love with these organizations [...] That is why they say [...] Eloise has her own organization, I have my own organization. I know my organization, she knows her own organizations and this is how we work [...] You know that these are my babies because I formed part of the selection and screening process. That is why the project coordinator has more power. Yes, it means that the finance person cannot— okay they will advise, they will say: “That organization, I saw their finances, [these points:] 1, 2, 3, it’s a problem.” But myself, I can say: “Yes Jade [the finance officer] I hear what you are talking about. But give that organization to me. Just give me a period of a month and I want you to go again and review their finance file, you will see.” [...] So it means that you have taken their burdens on your shoulder. Once they fail, you fail. (SAinterview 3)

In a nutshell, what Moeletsi is describing is his close contact with and personal involvement in selecting the organisations he supervises. This puts him in a powerful position that allows him to defend his “baby” vis-à-vis more distant observers (like finance officer Jade), who lack the local information needed to really make informed judgments about a partner organisation and who might, therefore, prematurely cancel the contract or impose other sanctions. And he clearly states that such guardianship is his responsibility. Later on in the interview, he also remarks that “you need to be very careful” in defending your organisations upwards in the hierarchy, because this can lead to dismissal as project coordinator, if, for example, money has indeed been mismanaged. Even so, “sometimes, yes, you can defend them [...] but it depends on what basis” (SAinterview 3). It is his personal relationship with and thorough knowledge of the partner organisations that allows him to make an informed judgment as to whether certain irregularities can be fixed or not. From that perspective, his “love” of his organisations does not bias his judgment, but enables it. Without it, he would be unable to take the responsibility of solving the problem and thereby act in solidarity with the organisation (“Once they fail, you fail.”), but he would have to submit to the distanced judgment of the finance officer.

So what does this mean for the use of IT and the distribution of responsibility between donor and recipient? The short answer is that IT deres-

ponsibilises the donor, because it allows donor representatives to disregard information not in the IT system and thereby ignore the complex realities in which implementing organisations find themselves. Dealing with the risks and limitations of the local context thus becomes the sole responsibility of the recipient organisation.

### *Effects and responses from CSOs*

Given the above example, it is hardly surprising that Moeletsi and his colleagues are reluctant to use the new IT system the intermediary CSO is starting to use. Although this may also stem from a preference for existing routines rather than learning new ones, it is clear that switching from paper templates to the IT system is likely to reduce coordinators' latitude to reject the responsabilisation of recipient CBOs on their behalf. Rejection of extensive use of IT in managing donor-recipient relationships can therefore be seen as rejection of shifting responsibility towards recipient organisations in favour of a more holistic approach open to dialogue and negotiation over that which would otherwise be set in stone in formal procedures.

Of course, this aspect of IT systems is only one way of materialising the use of indicators, templates and SOPs. In this section, we want to look at all of these methods of responsabilisation and how recipient CSOs respond to them.

When it comes to auditing standards and indicators, a key question is: who defines them? Who decides what is counted and thus what counts in a particular development project or programme? Assuming that indicators are useful tools that allow development practitioners to see certain things more clearly, the question arises: whose tools should they be? Whose work is facilitated by the use of a particular indicator?

Another problem has been the application of standards agreed among corporations for the business world to non-profit CSOs, including rural CBOs (see also Hendricks and Wyngaard 2010). In South Africa, this has led to coordinated attempts by CSOs to develop a code of conduct deemed to be more appropriate to the non-profit sector.<sup>13</sup> So far though, the corporate *King Code* remains the gold standard with which recipient CSOs must comply. Moreover, it remains to be seen whether a dedicated standard for non-profits will solve the problem of delayed funding, since the basic method of auditing remains the same.

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13 *The Independent Code of Governance for Non-Profit Organisations in South Africa* was published in July 2012 after two years of consultation among hundreds of CSOs (Working Group 2012).

In our case studies, it was also clear that indicators and reporting templates are designed according to donor needs and that some CSOs have identified the disregard for local contexts and devaluation of local knowledge as problematic:

One thing I would like to do is to avoid standardizing [...] So if I do things like this in Tanzania, it's not easy to expect this to happen in Rwanda. The environment is different. This format can ask for information that is easily available in Rwanda but very hard to get in Tanzania. But donors think it's OK. For Rwanda we have this package, for Uganda you have this package and they try to standardize conditions, working conditions and policies. (RWinterview 6)

One effect of indicators designed according to donor needs is that the reported figures become “meaningless, absolutely meaningless,” as one CBO director put it (SAworkshop). Clearly, the most frequent criticism our informants raised against donors was not their use of standardised reporting formats and indicators, but their use of different ones:

Another bad experience [that we talked about] was different donors coming with different templates making reporting very problematic and difficult. And added to that is donors don't seem to understand that we're actually fielding [...] a whole range of different people not just them. They come with just their own kind of idea about everything, forgetting that we're actually fielding 5, 6, 7, 8 others. (SAworkshop)

Given the amount of reporting these organisations are required to do, it would seem plausible for implementing organisations to demand that they write fewer reports or none at all. Indeed, our informants generally agreed that it would be a tremendous improvement if donors allowed them to submit one overall report on their activities to all donors, rather than filing multiple reports using different indicators. However, the *volume* of different reports and the frequency of reporting was not the sole concern raised by participants in one of our workshops. In fact, one focus group agreed they would actually like to report *more*, but that but they were not allowed to:

Bhekabantu: We want to report about the overall–

Jabulile: Everything!

Bhekabantu: Everything that we are doing. Not only the specific–  
[...]

Bhekabantu: We don't want to be – to report only for their funded items, we want to report about the overall work of our offices, you see. They must not limit us in reporting! (SAworkshop)

The complaint that donors require too many reports but do not provide sufficient space for reporting seems paradoxical at first, but the contradictions can be resolved if we understand that the argument is not just about the quantity of reporting, but also about the quality. Consider how the CEO of a South African intermediary organisation talks about the problems she experiences with the reports from sub-grantees:

The other problem is report writing. It's a big problem because the education system in this country has had a terrible history and legacy [...], so people tend to describe processes as opposed to outcomes and results. So if you want to know how many people were tested for HIV, they'll tell you the story of how they drove to the mountain and when they got up there they had a meeting with this person and then they said, okay won't you go out and call people and then they met with the people at the clinic and did all of these things, but then you say, well how many people were tested? (SAinterview 4)

Jabulile and other CBO directors reject this charge of “over-reporting”: “Is there such a thing as over-reporting?” (SAworkshop). In suggesting that the very idea of “over-reporting” makes no sense, Jabulile invokes a notion of reporting fundamentally different from what donors understand by the term. In a world where over-reporting makes no sense, reporting basically means sharing your experiences with others, telling others what happened, or telling the whole story, “everything that we are doing.”

What is at stake here is not numbers or templates *per se*, but the relationship between donor and recipient organisations. At the core of these complaints about reporting requirements is a demand for more balanced communication between development partners and a rejection of the one-sided responsabilisation of recipients. Why do CBOs want to spend additional time on writing elaborate narrative reports? Because a story elicits a sense of moral obligation in the listener, in this case the donor, who will then be obliged to help:

Jabulile: You know what? Sometimes, if you tell the whole story, there will be something that the donor will find out about the organization, and maybe say “how about you create a program that will speak to this problem, then I will fund it. [...]

Pam: But would that be the role of the funder?  
[...]

Jabulile: I'm saying [...] there can be challenges that you might have which a funder can help you in other ways because funders are well connected [...] “So please assist me! I have this problem.” And then the person will go and say: “Did you try this? Did you do this?” Then you have somebody that you talk to [...] We need to support each other!” (SAworkshop)

The reason, then, most donors do not want to hear the stories the CBOs want to tell is not just that they want to keep things simple and focus on results, but that they want to evade the responsibility these stories would conjure for them. The donor's reporting template allows them to filter the information that will reach them and that will have to be processed by the organisation. By blocking the stories about the often heartbreaking suffering outside the confines of their particular programme, they evade the responsibility to help more than they are. Differently put, by focusing on results they avoid being overwhelmed by the scope of poverty that they cannot hope to address with existing strategies. Reporting templates and statistics work to preserve a sense of agency among donors and to avoid images of failure that could call the agency's existence into question.

This interpretation is supported by the fact that at least some CBOs welcome donor visits (as long as they are not overtly policing or disrespectful). For these organisations, site visits are important opportunities:

Because there's a huge gap in understanding between donors and us on the ground and we felt that with donors coming out to our deep rural areas and actually visiting us on site and seeing the conditions under which we work and the project operates, it improves understanding. We've had some real breakthroughs. (SAworkshop)

In an era of indicator-based and standardised reporting templates administered through IT, a site visit is one of the few occasions when recipient organisations can show donor representatives the (often sobering) realities they will not otherwise see, and perhaps engage the donor sufficiently for additional funding to be made available to address certain problems. We have not witnessed a successful example of such re-responsibilisation of the donor, but we have seen attempts and expressions of an urge to do so. Our point is, however, that neither reports nor site visits are commonly seen as opportunities to raise problems and to induce responsibility in donors. Rather they are viewed as opportunities for showing successes and results. That this is the common view illustrates just how dominant the donor perspective in development partnerships is, thanks to the various methods described in this and the previous sections.

### *Standardisation and the politics of responsabilisation*

It is not difficult to see how all the methods we have discussed in this section can be understood as expressions of a much broader strategy known as standardisation. Standardisation is the logic of:

[...] constructing uniformities across time and space, through the generation of agreed-upon rules. The standards thereby created tend to span more than one community of practice or activity site; they make things work together over distance or heterogeneous metrics. (Timmermans and Epstein 2010:71)

Standardisation is often experienced as a process of formalisation in which abstract rules and procedures take precedence over substantive matters. But this is not necessarily the idea of formalization.

It is the essence of formality that most people most of the time do not have to go behind the formality to the substance, *because someone else can be trusted to have done so already and to do so again when necessary*. (Stinchcombe 2001:4, original emphasis.)

In other words, if formality works, it is not devoid of substance, but a placeholder that allows us to get on with our business while relying on others to do theirs. Standardisation as well as formalisation thus require the division of labour between those who make the standards and define the forms, and those who comply with them. Hence they are instrumental in the politics of who-is-responsible-for-what. In this sense, the methods of standardisation deresponsibilise recipient CSOs, since local knowledge may be devalued as they adjust their activities and the reporting of these activities in accordance with standards defined by agents distant from their everyday practices.

On the other hand, as we have shown, donors are working hard to mimic the corporate example in responsabilising their partners as formally autonomous agents that are audited according to standards of global accounting and consultancy firms in order to render them “reliably complicit in their own government” (Higgins and Tamm Hallström 2007:699). Standardisation effectively shifts responsibility within the development partnership from donor to recipient, because the partnership is no longer primarily about meeting the needs of the poor and diseased, but about performing well in terms of indicators and audits. But this attempt by donors to responsabilise recipients also encounters practices of re-responsibilisation of the donor by recipients through storytelling and “over-reporting,” as well as insistence on personal relationships and local knowledge. While donors are interested in reported *results* that legitimise their existence, implementing organisations are interested in reporting *needs and problems* that responsabilise donors to send more support.

In the context of international development cooperation, the standards by which implementing organisations conduct and report their work are primarily designed to work at the global level, to make a specific donor programme comparable in all the countries where the donor is active.

## Summary and Conclusions

We set out to study and analyse international development cooperation with civil society in combating HIV/AIDS in sub-Saharan Africa. More specifically we focused on assistance to civil society in Mozambique, Rwanda and South Africa. Our initial findings soon led us to focus on the methods by which civil society is incorporated into international development cooperation. These methods are not unique to HIV/AIDS assistance, but can be found in donor policies in other areas as well. Accordingly, we believe that our findings are relevant to anyone concerned with contemporary development cooperation.

We argue that the transfer of responsibilities is central to these methods, as well as to their problematic consequences. A common assumption about international development cooperation is that affluent countries have a responsibility to aid “developing countries” in their struggle against poverty and the problems poverty brings. In the “new aid architecture,” articulated in high-level forums in Rome, Paris, Accra and Busan in the 2000s, there is however *a tension over responsibility*. This has led to two different, and perhaps contradictory, trajectories regarding how responsibility is approached in international development cooperation.

### Responsibility according to donors

First, in the trajectory we call *expansion of responsibility*, the key notion is shared responsibility for development and poverty alleviation. Here, it is argued that a global partnership for development is required in the context of intensified globalisation. Such partnerships should embrace a broad range of actors and institutions on global, national and local levels, including governments, the private sector and civil society.

In the second trajectory, what we call *outsourcing of responsibility*, the tendency is for donors to seek ultimately to responsabilise the receiving partner.

In both trajectories of international development cooperation, civil society plays an important role. This is based on the assumption that CSOs have unique knowledge of the everyday practices, needs and interests of local populations, and therefore have strong potential to take full responsibility in the fight against poverty. International aid that transfers funds to civil society can be thought of as a multi-link chain that binds donor and beneficiary “on the ground” at either extreme. Aid involves multiple transfers such as from national donor to international fund (GF), to national government departments in

recipient countries, to INGO or national CSO in the recipient country (such as intermediary organisations), to regional CSO, to CBO, and so on.

The transfer of funds and responsibilities also involves *control* as a key component. However, considering the multiplicity and complexity of the transfers of funds and responsibilities along the chain, controlling contemporary aid to civil society is hardly an easy task. This is what we have referred to as *the problem of governing at a distance*. We have found that such control is less concerned with *what* is done, but rather with *how* activities on the ground are managed and if they produce *measurable results*.

It can easily be imagined that attempts to control all the actors involved in the chain of global transfers of funds and responsibilities could create a regulatory monster, a huge global aid bureaucracy, and could overburden aid work with control mechanisms. However, responsabilisation not only involves transferring responsibilities for important work to counter poverty and disease, but aid recipients are also given *responsibilities to control themselves*. This is what is called self-regulation. This does not mean that donors surrender all control of how their funds are used: instead they engage in the *regulation of self-regulation* (Miller and Rose 2008).

This, in short, is our interpretation of how contemporary development aid to civil society regarding HIV/AIDS is organised, and how it is supposed to work, at least according to donor policy documents. Beneath the surface of policy declarations, international development cooperation networks may also be governed by numerous interests, ideologies, values and norms not clearly expressed in official narratives. We have, however, chosen to focus on the manifest level of donor programmes and governance strategies and methods, in particular their effects.

## Governance strategies and methods

We have found that the organisation of development cooperation with civil society is practised through four major governance strategies, meaning logics of action that are expressed in certain methods.

*Marketisation* strategies (creating competition between and fostering a culture of entrepreneurship among CSOs), and *managerialisation* strategies (separating organisational control from both ownership and operational work by creating professional management positions) are apparent in the implementation of the following work methods: tendering/procurement, training in entrepreneurship, the use of intermediaries and sub-granting, extensive “bottom-up” reporting and financial management and auditing. The strate-

gies of *scientisation* and *standardisation* are evident in the implementation of methods such as standard operating procedures, indicators, training in M&E, evidence-based work and other “scientific” approaches and the use of certain reporting tools, including forms, templates, log frames, algorithms, etc.

Taken together, these methods create an environment governed by market mechanisms, in which CSOs are encouraged to establish management hierarchies that adopt scientifically legitimate and standardised methods for measuring results according to the model of results-based management.

We have found that the four governance strategies through which donors exercise control at a distance are, in one sense, extremely effective. In the chapter on international development in national context, we showed that there are significant differences between the three countries we studied. With respect to epidemic pattern, economic wealth, influx of aid, expenditure on HIV/AIDS, the character of civil society and its relation with the state, Mozambique, Rwanda and South Africa have distinct characteristics. Given these differences, it is reasonable to expect that the actual implementation of the four governance strategies would need substantial adaptation in each case and that the effects would also show significant variation. For example, given the differences between South Africa, classified as an EME, with a highly developed market economy and educational system, and relatively poverty-stricken and highly aid-dependent Mozambique, governed by a socialist government, one might expect marketisation, managerialisation and scientisation to work more smoothly in the former than the latter. And considering the government’s relatively strict control of civil society in Rwanda, one would expect international donors to encounter greater difficulty there in implementing certain strategies on the ground. Given the vast differences between the epidemic patterns in South Africa and Rwanda, one would also anticipate great difficulty in the use of the same standards for measuring results. Of course, there may be differences in how well the four strategies work in each of these countries that our limited study has been unable to capture. However, in the cases we studied, *we found striking similarities in all three countries in the practice of governance strategies and methods and in their effects.*

### Effects (1): (de)responsibilisation

Our starting point was an examination of international development cooperation with civil society from the perspective of responsibilisation in order to identify methods of transferring responsibilities from one actor to one or more partners. The politics of responsibilisation include a certain dissension

between donors and recipients over responsibility. Accordingly, we focused on what the four governance strategies mean in terms of (de)responsibilisation.

In connection with *marketisation*, we point to the method of introducing a service contract between donor and recipient, and note that such contracts involve tendering, which endorses strong competition among CSOs. We also argue that when a donor buys a commodity from the CSO instead of providing a grant, a needs-based moral responsibility on the donor is transferred and transformed into a performance-based legal responsibility on the CSO. In this regard, donors also urge CSOs to acquire entrepreneurial skills in order to be able to achieve eventual economic self-reliance. The form of independent actor being promoted here is the small business competing on a service market.

Implementing a business model in civil society also involves *managerialisation*, a strategy in which a specific organisational model is adopted. Most importantly, this means certain individuals are assigned managerial tasks (setting goals and monitoring their implementation). In terms of responsibilisation, the result is separation of tasks in CSOs, basically corresponding to the transfer of two different forms of responsibilisation from donors to CSOs. Such division of labour also involves two different organisations: a CBO doing the “actual work on the ground,” and an intermediary organisation to channel the funds from the donor. This is a form of professionalisation that strengthens the process of transferring and transforming moral responsibilities into legal responsibilities. As a form of professionalisation of organisational control, managerialism is (ideally) based on scientific knowledge and thus contributes to the scientisation of civil society through international development cooperation.

With regard to *scientisation*, we show that in the process of building capacity to use evidence-based methods, CSO workers are made accountable and responsible for thinking and acting in accordance with a science-like logic, so that they can engage in self-regulation governed by scientific ideals and principles. When scientisation is based on quantitative scientific methods, it also promotes *standardisation*, as in the requirement to produce measurable results, as well as evidence-based reporting templates and other administrative devices. In the context of global governance, standardisation also becomes important as a means to measure results by applying the same standards to different situations around the world: different units of measurement (indicators) need to be made “compatible” with each other. This too involves a transfer of responsibilities: donors need standardisation to compare results of international development cooperation around the world and CSOs are held responsible for producing knowledge about their activities according to principles of standardisation. However, when these standards, which shape both

CSO reporting and their actual practice, are predefined by external agents, the result is also deresponsibilisation of CSOs.

## Effects (2): acceptance, rejection, compliance, resistance and critique by CSOs

Our analysis has not been restricted to examples of compliance and successful implementation, but also involves detailed accounts of how CSOs attempt to negotiate and resist the strategies and methods that make up the overall politics of (de)responsibilisation. As part of our research, we examined whether partners in development cooperation accept or reject responsabilisation; whether they comply with the methods we have examined; or whether there they resist or critique them.

We have already noted that our results show that the model “works,” in the sense that it seems to function more or less similarly in three countries with very different political and economic circumstances. Self-evidently, this presupposes that the CSOs involved largely accept the responsibilities and comply with the prescribed methods. On the other hand, informants in the pilot project mentioned in the introduction stated that it is hard, if not impossible, to be inside the system of current development cooperation without strictly following its rules. When asking about an old-style conditionality – PEPFAR’s previous contracts prohibiting funded CSO recipients from distributing condoms – we learned that certain CSOs signed the contract but, confident that the donor would be unable to enforce compliance, handed out the condoms anyway (Thörn 2011). The same CSOs, however, conceded that the methods analysed in this report are extremely difficult, if not impossible, to resist.

Against this background, it is important to stress that our research did not explore whether there are CSOs who resist the current governance model for development partnerships with civil society by not participating in them. Considering the lack of resources among CSOs, it is, of course, difficult to find alternative ways to do important work. Such an alternative strategy would presuppose the mobilisation of significant numbers of supporters and activists and the emergence of a social movement organisation, as in the case of TAC in South Africa (which for a time was able to take a relatively independent position in relation to donors).

Against this background, it is hardly surprising that we have not found much by way of resistance among the CSOs we studied. However, we have recorded criticisms expressed by several informants in each of our countries.

We have chosen to highlight such critiques as significant, if they are supported by our own theoretically and empirically informed analysis of governance strategies. In some cases, our informants provided us with initial and important insights, which were then confirmed by our own analysis. In other cases, informants have confirmed a preliminary analysis.

With respect to *marketisation*, we found substantial evidence that the fostering of competitiveness through marketisation is very effective. In South Africa we encountered a few examples of what might be interpreted as resisting the methods of marketisation, for example, when a competitive selection process was met with solidarity and information-sharing among CBOs about the funding opportunity. We also recorded a few cases where managers resisted the logics of *managerialisation* by referring to responsibility not in terms of control as first priority (the task as defined by the employer, the donor), but in terms of moral responsibility to support staff and their families.

Regarding *scientisation*, we found that a scientism approach was widespread among informants in the three countries. Perhaps the most commonly repeated criticism we have heard was about reporting requirements: not against reporting as such, but its current, standardised form. The CBO manager we quote as stating that reported figures become “meaningless, absolutely meaningless,” is certainly not alone in this regard. We have, however, also related a more profound critique of responsabilisation through *standardisation*. As donors transfer the responsibility for control by imposing self-regulation through standardised reporting templates, they create a sense among recipients that development cooperation with civil society is less about meeting the needs of the poor than about reporting in terms of certain indicators defined by donors. This is also countered by recipients through storytelling and “over-reporting,” which may be interpreted as attempts at rejecting responsabilisation by re-responsibilising the donor. This means that donor interest in reported *results* that legitimise their activities is countered by a practice of narration, which allows CSO activists to tell a story about, or at least including, needs and problems.

## Our critique

Our findings and analysis lead us to conclude that current forms of governance in international development cooperation are deeply problematic. As a point of departure, we return to the World Bank study (Bonnel et al. 2013) referred to in the introduction, which explains why the donor community has highlighted the role of civil society in development cooperation. The state-

ment below about what civil society can achieve according to dominant donor perceptions is largely supported by our own analysis of donor documents:

[...] the engagement of CBOs would provide added benefits by empowering communities, mobilizing political support, contributing to democratic pluralism, and developing both local ownership and longer-term sustainability. (Bonnell et al. 2013:7)

In this view, there are four key possible achievements arising from support to civil society: *engagement* of CBOs, *empowerment* of communities, *long-term sustainability* and *democratic pluralism*. If we take these claims at face value (setting aside other possible agendas), do current governance strategies work to accomplish these ends?

First, the market and business models implemented in civil society through marketisation and managerialisation foster a culture of competition that undermines *the engagement* (in social science usually conceived as something that builds on solidarity or trust) that donors celebrate in policy documents.

Second, this also means that the *long-term sustainability* that is supposed to be built through “Community Driven Development” is undermined.

Third, regarding possible *empowerment* of communities, we have shown that donor strategies and methods have (de)responsibilising effects. This means that CSOs – and communities – are both responsabilised and deresponsibilised at the same time. On the one hand, the overall responsibility for doing actual everyday work is largely within communities. On the other, the formal requirements imposed on communities through various prescribed methods deprive them of basic control over the direction of this work, as the goals are set “from above.” We argue that this means communities are ultimately *disempowered rather than empowered*, as they are degraded to service providers and are far from sitting “in the driver’s seat.” Rasmussen’s (2013) study of international development cooperation with civil society in Malawi came to almost identical conclusions regarding the effects of responsabilisation. It further emphasises another problematic disempowering dimension of the process. While the lion’s share of donor funding pays for administration and the salaries of staff of both donor organisations and intermediary CSOs in recipient countries, the actual work in communities is often done on a voluntary basis. In Rasmussen’s analysis, international development cooperation thus becomes a self-reproducing system built on exploitation of the free labour (voluntary work) of individuals in local communities.

Fourth, the goal of *democratic pluralism* stressed in donor programmes, implicating the political dimension of civil society, is undermined by the tech-

nocratic approach to governance promoted primarily through scientisation and standardisation strategies. When methods of governance are presented as science-based technical solutions to problems of efficiency, administration and regulation, they are not amenable to democratic debate and critique. We found that donor programmes, as well as development-cooperation practitioners, often embrace scientism. Such an approach, however, ignores the fact that the way in which “scientific” questions are posed, or “scientific” problems are constructed and dealt with, is value-laden and politically informed. Deciding what constitutes legitimate and desirable effectiveness and results is not a matter of scientific objectivity, but of politics – and should be open to debate, rather than presented as a technical matter to be ultimately decided by experts.

Against this background, we have aimed in this publication to initiate and contribute to a political debate about the distribution of responsibility in international development cooperation with civil society, as well as about introducing more appropriate and meaningful methods of supporting civil society actors.

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# Interviews<sup>14</sup>

## *Interviews in Mozambique*

- MOZinterview 1: CSO representative, Maputo, 26 November 2012
- MOZinterview 2: INGO representative, Maputo, 21 November 2011
- MOZinterview 3: INGO representative, Maputo, 2 March 2011
- MOZworkshop: Workshop, Maputo, 8 November 2011

## *Interviews in Rwanda*

- RWinterview 1: International consultant, Kigali, 19 October 2011
- RWinterview 2: CSO representative, Kigali, 16 March 2012
- RWinterview 3: CSO representative, Kigali, 7 March 2012
- RWinterview 4: CSO representative, Kigali, 6 March 2012
- RWinterview 5: CSO representative, Kigali, 28 October 2011
- RWinterview 6: CSO representative, Kigali, 26 October 2011
- RWinterview 7: INGO representative, Kigali, 14 March 2012
- RWinterview 8: CSO representative, Kigali, 1 November 2011
- RWworkshop: Kigali, 27 March 2012

## *Interviews in South Africa*

- SAinterview 1: CSO representative, Kimberley, 15 March 2011
- SAinterview 2: CDC South Africa representative, Pretoria, 16 November 2011
- SAinterview 3: Intermediary CSO representative, Durban, 17 March 2012
- SAinterview 4: CEO of intermediary CSO, Durban, 29 March 2011
- SAinterview 5: Intermediary CSO representative, Kimberley, 13 March 2011
- SAinterview 6: European donor representative, Pretoria, 15 November 2011
- SAinterview 7: Programme manager of intermediary CSO, Durban, 1 April 2011
- SAworkshop: Workshop, Durban, 23 March 2012

## **Other sources:**

Doc1: Outcome monitoring template to assess “Organizational Baseline,” used by a South African intermediary for monitoring the organisational development of its sub-grantees.

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<sup>14</sup> “Representative” below does not refer to an official representative of an organisation, but to any member