

Preface

Winter finally loosens its grip on Malmö and signs of a much longed for spring begin to show as I add the final elements to a book that has much too long a history. A recurrent question in interviews during the course of this project has been why I have chosen to write about the AIDS epidemic rather than a more common theme in international-relations scholarship. Why undertake the investigation of what is currently one of the most divisive topics in terms of both policy and scholarly discourse?

I still have no answer to this question, but a growing understanding of the severity of the HIV/AIDS pandemic—and of the human suffering associated with it—has added a human dimension to my international studies that has been stimulating. Moreover, a consequence of studying and writing about HIV/AIDS has been an increasingly felt need to contribute something useful, however insignificant: that is, I wish to offer what I can to the many people I have had the privilege to meet who have helped me realize the relative insignificance of the problems with which I must struggle in comparison with the ones linked to HIV/AIDS that they must face every day. Thinking about the spirit with which AIDS activists from all walks of life approach AIDS politics—always seeing in terms of possibilities rather than obstacles—continues to enrich me. Thus, on a personal note, writing about AIDS has broadened my own perspectives, giving me added strength to deal with the problems that I face myself.

This change in perspectives has been useful but has also created certain problems. Scholarly production is inundated with petty details and paraphernalia that sometimes seem counterproductive from the point of view of action. In other words, sometimes form takes precedence over content. This study is an attempt to accomplish two goals; both a scholarly product of high quality, and a useful analysis from the perspectives of AIDS practitioners. These goals are not evidently reconcilable at the same time, and there is a latent risk that I have reached none of them.

Numerous colleagues and friends have assisted me during the project. My thoughts first go to the many people who have volunteered their time for interviews and talks. Without their firsthand reflections on the global governance of AIDS, this type of study would not have been possible. A list of their names is provided at the end of this book. Moreover, my adviser, Christer Jönsson, more than anyone else, has had the ability to see beyond my first feeble attempts at scholarly work. His patience has encouraged me to continue in spite of sometimes ample evidence of poor judgment on my part. The opportunity to work together with Christer on the *International Cooperation in Response to AIDS* project broke new ground for me, providing an opportunity to work professionally alongside established scholars—including Leon Gordenker and Roger Coate, who deserve sincere appreciation for allowing me, as a fresh graduate student, the chance to work basically on an equal level during the AIDS project. The present thesis should be seen as a continuation of that beneficial collaborative relationship.

To Roger, again, goes my deep gratitude for his unselfish assistance during my stay as a Fulbright fellow at the University of South Carolina—assistance and encouragement that continues today. Roger has helped me in ways too numerous to list here completely, including providing welcome companionship to my entire family. Roger’s generosity and good spirits (he showed me that research can also be fun!) during many research and conference trips was significant in encouraging my interests toward the theme of global governance as a focus for research. I hope our friendship will continue.

Annica Young Kronsell and I have worked together for five years now, and I have enjoyed every minute of it. As a scholar she has had the strength to break new ground that has served as inspiration for me, and, as a friend, she has put up with my frustrations and complaints, as the arduous, and not always clear, research process has continued. Magnus Jerneck and Kristian Sjøvik took time to read a first version of the final product and gave me not only valuable comments and criticisms but also the energy to muster yet even more energy, which was indispensable in taking the thesis across the finish line. For that, I am ex-

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Despite all of the gracious assistance given me over the course of this project, I take full responsibility for any errors found within.

Peter Söderholm
Malmö, spring 1997

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List of Abbreviations

ACT UP	AIDS Coalition to Unleash Power
AIDS	Acquired Immunodeficiency Syndrome
ASO	AIDS Service Organization
CAS	Canadian AIDS Society
CDC	Centers for Disease Control and Prevention
CGG	Commission on Global Governance
CIDA	Canadian International Development Agency
CONGO	Conference of NGOs in Consultative Status
DANIDA	Danish International Development Agency
DIESA	UN Department of International Economic and Social Affairs
ECOSOC	Economic and Social Council
FAO	Food and Agriculture Organization
GIPA	Greater Involvement of People Living with HIV/AIDS
GMHC	Gay Men's Health Crisis
GMC	Global Management Committee
GNP+	Global Network of People Living with HIV/AIDS
GPA	Global Programme on AIDS
HIV	Human Immunodeficiency Virus
IAAG	Inter-Agency Advisory Group on AIDS
IAS	International AIDS Society
ICASO	International Council of AIDS Service Organizations
ICRC	International Committee of the Red Cross
ICW	International Community of Women Living with HIV/AIDS
IGO	Intergovernmental Organization
ILO	International Labor Organization
IO	International Organization
IR	International Relations
NAP	National AIDS Programme
NLC	NGO/PWA Liaison Committee
NGLS	Non-Governmental Liaison Service
NGO	Nongovernmental Organization

NORAD	Norwegian Agency for Development Cooperation
ODA	Overseas Development Agency
PCB	Programme Coordination Board
PWA	People with AIDS
SIDA	Swedish International Development Authorities
SOP	Standard Operating Procedure
STD	Sexually Transmitted Disease
TASO	The AIDS Service Organization
UN	United Nations
UNAIDS	Joint United Nations AIDS Programme
UNCED	United Nations Conference on Environment and Development
UNDP	United Nations Development Programme
UNESCO	United Nations Educational, Scientific, and Cultural Organization
UNFPA	United Nations Fund for Population Activities
UNICEF	United Nations International Children's Emergency Fund
USAID	United States Agency for International Development
WHA	World Health Assembly
WHO	World Health Organization
WTO	World Trade Organization

Chapter One

Introduction

Is the present state of the global governance of AIDS indicative of a postsovereignty global organization? The development of cooperative relationships aimed at curing the world of the many scourges plaguing it stands out as the principal challenge for the twenty-first century. In that context, the Acquired Immuno-deficiency Syndrome (AIDS) pandemic carries particular weight. Predictions indicate that, by the year 2000, as many as 110 million people may be infected with the Human Immunodeficiency Virus (HIV), the virus causing AIDS (Mann et al. 1992: 3). This study looks at the many and varying efforts by individuals and organizations to cope with the AIDS pandemic. In spite of the fact that AIDS is occurring at a time of hitherto unreached heights of scientific medical knowledge, of economic resources that surpass those of any previous era, and of organizations well established for the management of pressing problems, AIDS continues to run its course. Failure to halt effectively the spread of AIDS—a global problem of considerable magnitude—constitutes a genuine puzzle that invites intriguing questions about the prospects for global governance in the twenty-first century (cf. Rosenau & Durfee 1995: 188).

AIDS concerns everybody. The disease links life and death: the same sexual act that contains the seeds of life, contains those of death at the same time. With AIDS, the personal is in a very real sense political. The most intimate of situations is what must be problematized and become the focus for large-scale programs. Current human organization, dominated by state governments, has had serious problems in affecting the issue of AIDS in any substantial way—a reality that indicates clearly the dire need for organizational innovation.

Of the countless attempts to formulate proactive responses to this pressing issue, those that aim to establish stable partnerships across the intergovernmental-nongovernmental divide are the focus of this study. Establishing durable institutions encompassing intergovernmental organizations (IGOs) and nongovernmental organizations (NGOs) that reach from the global to the local has been a central concern for decisionmakers on all levels. As of yet, however, the forms this cooperation should assume remain elusive. Indeed, the question of whether the AIDS epidemic is at all affected by governance responses seems warranted. Are we witnessing a “global epidemic out of control” (Mann et al. 1992:1)?

Following recognition in 1981, AIDS soon became the focus of intense activity by a large number of individuals and organizations representing a vast spectrum of interests, values, and resources (see Gordenker et al. 1995). In many respects, the factors that obtain regarding the AIDS issue seem as valid and common as in the processes for developing cooperative response to other issue areas, including the protection of the earth’s physical environment, the alleviation of poverty, and so on. Thus, it is possible that this case study may shed light on some possibilities for further studies of other issues and problems that show a similar high degree of interdependence between actors and that touch on several historically pertinent structural configurations and power practices (cf. Rosenau 1990: 106).

Judged specifically from the case of the AIDS issue, relationships among and between NGOs, governments, and IGOs are changing, possibly diminishing the domination of governments and big international NGOs. Action-oriented networks, assembled on ad hoc basis for the explicit purpose of a particular objective, have evolved, and enduring contacts have been established that warrant close investigation. Old, experienced NGOs exist side by side with newly founded ones, and organizations with broad mandates coexist with more specialized and narrowly focused ones. Methods differ considerably: some favor negotiations and struggle for close connections with governments, while others stage high-visibility demonstrations and encourage civil disobedience.

The Joint United Nations AIDS Programme (UNAIDS)—an IGO—has included people with HIV/AIDS, along with NGOs, on

its governing board and has routinely involved NGOs of various sorts in all stages of policy development. Together, they contribute an important voice in an increasingly global dialogue over who gets what in terms of scarce resources, legitimacy and recognition in AIDS governance, as well as when and how. The focus of this study is on how these institutional developments have been generated. After a thorough analysis of the global governance of AIDS, the intriguing question of whether the organizational innovations spurred on by AIDS also indicates the birth of an entirely new type of international organization is briefly addressed. Is global governance of AIDS an instance of postsovereignty global organization?

Global Governance, the UN, and NGOs

AIDS provides a singular opportunity for the study of evolving partnerships between IGOs and NGOs. As will be elaborated in the pages to follow, international cooperation in response to AIDS has, in a relatively short period of time—ten years—influenced a move of global governance in the direction of deepened and broadened partnerships between IGOs and NGOs. AIDS, then, is something of a model case for studying this process. In a preface to a book on the topic, the former UN secretary-general Boutros Boutros-Ghali reflected on the dramatic change in the way the UN conducted its business. In his view, NGOs have within the space of a few years become “full participants in international life” (Boutros-Ghali 1996: 7). Boutros-Ghali’s reflection is readily corroborated, and modified, by empirical observations. Willets, for instance, concludes that the UN can “be characterized as being open to influence not just by established NGOs but by diverse elements from a whole social movement” (Willets 1996: 58). The number of NGOs currently operating at or near UN headquarters in New York and around the various specialized agency headquarters is rising steadily, and NGO participation in the global conferences arranged by the UN is also expanding. Indeed, to say that NGOs form important actors in world politics will probably not cause any raised eyebrows.

The end of the Cold War has seen remarkable changes in the opportunities for the UN to act in accordance with its charter but also has triggered a legitimacy crisis as the increased expectations have not been coupled with speedy delivery of peace, security, and human well-being. The fiftieth anniversary of the UN pushed authors and publicists to dwell on how to make the organization more effective. Suggestions—going beyond the standard prescriptions of administrative and fiscal reform, such as streamlining budgetary processes and enlarging the Security Council to include the major centers of state power—invariably argued for the democratization and pluralization of the global policy process and the involvement of NGOs more fully in the work of the organization (e.g. The Commission on Global Governance 1996).

The issue for the UN concerns whether it will be able to transform itself from a conduit for major states' power and struggle for domination (Schechter 1994) into an organization based on participation and partnership that takes part in what Alger calls the articulation of global values (Alger 1980). AIDS spearheaded developments currently underway at the UN more generally, but UNAIDS moves ahead of even the last resolution on UN-NGO consultative relations (ECOSOC Res. 1996/31), as it includes NGOs as nonvoting members in its highest decisionmaking body. Thus, with AIDS, the clear distinction between "participation without vote" accorded to nonmember states and specialized agencies (UN Charter articles 69 and 70) and "consultation" accorded to selected NGOs (UN Charter article 71) has lost its relevance. To be sure, member governments continue to sit in the driver's seat constitutionally, but that position is challenged.

Some Problems with Partnerships

At first glance, the problem of partnerships may seem easy enough to solve. A brief introduction of some of the problems associated with this process gives a different picture. Perhaps the most apparent paradox lies in the UN's constitutional base in state sovereignty as expressed in article 2(7): "Nothing contained in the present charter shall authorize the United Nations to inter-

vene in matters which are essentially within the domestic jurisdiction of any state.” The same dilemma applies to UNAIDS. Direct contact with NGOs unauthorized by national governments is banned legally. As those working against a particular government, or merely critical of it, are oftentimes the ones most critical to reach, this legal obstruction proves even more cumbersome. Constitutionally, UN-NGO relations are still very much of a one-way street. NGOs, to be eligible for accreditation, have to “support the work of the United Nations,” and the “aims and purposes of the organization [NGO] shall be in conformity with the spirit, purposes and principles of the charter of the United Nations” (E/1996/58: paras 2 & 3).

The need to cooperate under constitutionally awkward conditions has plagued cooperation efforts for the entire era of the UN—but also under the League of Nations. Murphy refers to Mary Parker Follet, an early interorganization theorist who tested her ideas on the Geneva specialized agencies in the 1930s, as those were forced to devise cooperative structures between autonomous agencies, equally autonomous national governments, and NGOs such as the Red Cross in their efforts to rebuild war-torn societies (Murphy 1996). The problem, therefore, is hardly new. Sadly enough, though, knowledge about the processes involved is still rudimentary.

Other problems are also salient. Donini (1996) refers to UN-NGO relations as a structured bureaucracy colliding with the “free spirits,” as the UN, forced to abide by strict procedural rules of accountability, tries to cooperate with NGOs embodying the essence of product orientation. A perceived need among civil servants not to break any political sensitivities—or to cut any corners—clashes with the NGOs’ desire to cut every corner in order to get projects and programs off the ground. This contradiction poses a serious dilemma: that is, there is no win/win solution to be found. Procedural rules, consultations with concerned parties, and the like are crucial in a bureaucratic process purporting to be democratic. Democracy can get bogged down in seemingly endless discussion and debates, thus clashing with demands of efficiency and effectiveness. This also concerns NGO participation, since too many NGOs

eager to deliver statements can transform every international forum into one purely of debate.

Furthermore, there is the perennial problem of whether those that take up valuable space in deliberations are actually those that are crucial in terms of power over outcomes, that hold issue-specific knowledge and expertise, or that represent individuals who are affected in the end. The sovereignty-based interpretation of representativity in terms of government is, needless to say, faltering. The UN welcomes many dictators with dubious methods and track records of violating human rights, while effectively shutting out a number of legitimate NGOs. That may be an easily recognizable reality, but the question of what should replace that principle remains open. NGOs, in some cases, are clearly just as biased as governments. Criteria for distinguishing the professionals from the charlatans are lacking, and this reality is essential to the question of what this transformative process is all about.

Lastly, NGO participation invites doubts as to the competence of IGOs and governments. With WHO, for instance, NGOs challenge the allegedly apolitical nature of health work embodied by the predominantly medically trained staff of the organization. Many NGOs claim that AIDS cannot be treated as a purely scientific problem and cured with traditional medical approaches. AIDS is a political disease just as much as a medical disorder. The technical competence of staff—often brought up as a vital asset and a considerable advantage of WHO in deliberations with donor governments—may be questioned, and new forms of competence, called for. The same doubts can be raised regarding other IGOs as well.

The Academic Study of Global Governance

Academics focusing on international organization have also only begun to study this process of transition. Falling in between traditional academic categories—outside international relations (IR) scholarship through its inclusion of locally based actors, on the one hand, and beyond classical sociology and political science

given the global structures and processes under investigation, on the other—global governance awaits appropriation.

The poor state of theory is particularly detrimental for understanding NGOs. The study of NGOs, as noted by John Farrington and Anthony Bebbington, is of a fairly recent origin. The “conceptual tools (and empirical information) for understanding them as sociological phenomena are still at an early stage of their development” (Farrington & Bebbington: 29). Moreover, until recently, what has been produced exists in anecdotal form outside of the leading journals of IR, political science, and sociology (Cooperrider & Passmore 1991). Even research explicitly targeting international organization and organizations, frequently overlook NGOs (cf. Willets 1996: n3-n5). The very term *NGO*, undoubtedly a way out of a “definitional quagmire” (Najam 1996: 5), may be an unhappy solution, as it fails to acknowledge the enormous diversity of the category and portray NGOs simply as that which they are not; but, since it is the term used by the UN Charter, it will be used here as well (cf. McCoy & Cully 1993: 12).

Even from the short discussion of AIDS above, it is clear that the traditional ontology positing states as the only relevant actors has been abandoned in favor of a worldview acknowledging a multitude of different actors linked together in complex social, political, and economic patterns and engaged in several different practices: an ontology of postsovereignty.

This does not imply that the material capabilities either of states or controlled by states are all gone, that national identities have become void, or that governmental and intergovernmental political structures are negligible—world revolution is not around the corner! But, again, the current erosion of sovereignty is not likely to go away either. NGOs are theoretically interesting foci since they have an ability to influence social change processes from the local to the global levels (Willets 1996). As governments and IGOs—and, for that matter, NGOs—are incapable of single-handedly mustering the resources necessary for designing and implementing large-scale global programs, cooperative processes aimed at the establishment of global rules, norms, procedures, and policies are a proper and urgent focus of social scientific study. The ambitious goals of the UN Charter and the many goals of

governments, NGOs, and people around the world all require some degree of cooperation. UN organizations offer a place where cooperation can, and does, occur with relatively low transaction costs, and constitute historically important loci of governance. The continuing reassessment and reinterpretation of both the theory and practice of sovereignty (cf. Camilleri and Falk 1992:199) that these crises have spurred are far from completed. The point to be made is that a thorough examination of sovereignty-based theory is warranted, at least a start in the process of reassessment (cf. Camilleri and Falk 1992: 236-257; Cox 1992).

The lack of postsovereignty-based theoretical traditions coincides with heightened debate in IR scholarship—indeed, in social science in general—on possibilities of postpositivist epistemologies. The dominating assumptions of positivism appear to be losing their grip on scholars. Two recent textbooks convincingly argue the point. Steve Smith, Ken Booth, and Marysia Zalewski's *International Theory: Positivism and Beyond* and Scott Burchill and Andrew Linklater's *Theories of International Relations*, both published in 1996, attempt to sketch a postpositivist research agenda for international studies.

Although the term *positivism* is itself contested, I take positivism to rest on two interrelated fundamental assumptions, both of which are challenged in this study (cf. Smith 1996: 16). First, positivism entails a quest to “discover” objectively existing laws that cause the observed phenomena. Secondly, positivism rests on the possibility of observing these phenomena from an uncontested position outside the studied process. The researcher can thus be removed from the studied subject. This is a dangerous assumption—one that is irreconcilable with the growing realization of the necessarily sociocultural and context-determined conditions of the researcher. It is therefore folly to believe that research can be an “objective” search for societal laws. Awareness of the political nature of research and transient nature of knowledge is central to the postpositivist epistemology held here.

This fundamental epistemological move carries two implications. First, theories cannot be conceived as politically neutral tools that provide better or worse explanations of a process. Instead theories can only provide partial, aspectual understanding:

by highlighting certain aspects and rendering others a place in the darkness, theories display a limited reality. Second, removing the assumptions of immutable and inevitable objective laws implies a possibility of real change. Taken together, they imply that a different social, political, and economic order becomes conceivable and that the researcher plays a part in this process (cf. Smith 1996).

A postsovereignty ontology and a postpositivist epistemology form the metatheoretical backdrop of this study. Since I try to understand a specific process, concrete theoretical tools built on that metatheoretical ground are necessary. Since the belief in the possibility of one undisputed operationalization has been discarded, a multitheoretical approach has been chosen. Such an approach can demonstrate practically the limited understandings offered by single theories as well as avoid of sneaking in claims of having found the “best explanation.” Rather, three separate stories will be told, each from a different theoretical framework.

The Research Problem

From these brief introductory remarks can be derived a statement of purpose. The main purpose of this study is to understand how and why global governance of the AIDS epidemic has changed in terms of the status and involvement of nonstate actors during the last decade. Related to this empirical ambition is a theoretical goal. The AIDS case will be analyzed using three different perspectives—in order to demonstrate the usefulness of a multitheoretical approach to global governance.

The discussion so far unfolds in two interrelated, but distinct, parts. First, the ontological starting point needs backing. A brief look at global governance as practiced regarding other issues will be given here. The ambition is to give empirical support of the usefulness of departing from a postsovereignty ontology for understanding AIDS. The empirical reason for this ontology will be followed by theoretical reasons. The primary concern in the next part is a discussion of a postpositivist epistemology. The lines of inquiry are basically that research matters politically and, hence,

cannot be seen as a neutral or objective mirror of reality. Instead, theories highlight only limited parts of the real world, offering but partial understandings. First, however, a short introduction to the epidemiology and etiology of the HIV/AIDS epidemic is offered, with the ambition of demonstrating the postsovereignty character of the AIDS epidemic.

AIDS from a Medical Perspective

Although this is not a medical study, the etiology—that is, the causes of disease—and the epidemiology—the study of how and where disease is transmitted—are of primary importance when trying to understand responses and efforts to stop it. The virus limits the range of possible responses. AIDS, as commonly understood, is a pathological state caused by the Human Immunodeficiency Virus (HIV). Infection with the virus can manifest itself through a wide variety of clinical conditions. Although the term *syndrome* may connote many different manifestations, it is now clear that HIV infection does lead to AIDS. Hence, we are not talking about a syndrome with different causative agents; AIDS is just one disease.

Just like other diseases, AIDS is the result of an infection, much as tuberculosis is caused by Koch's bacillus (cf. Grmek 1990: 33). HIV belongs to a class of viruses called retroviruses, only discovered some thirty years ago. These viruses linger within the host organism, without destroying the cells at once; thus, HIV also belongs to the category "lenti-viruses." Retroviruses contain an enzyme, reverse transcriptase, that enables them to enter into symbiosis with the host rather than killing it. Once on the inside, HIV uses the host to multiply itself through the normal process of cellular division. Only in 1976 did the intellectual underpinnings evolve to allow discovery of such viruses (Grmek 1990). This coincides in time with the silent spread of HIV, prior to its detection in 1981. Undoubtedly, the poor knowledge of this kind of viruses contributed to the slowness of the response. Without knowledge of what was causing the incidence of rare forms of skin cancer and pneumonia—including whether they were even related to each

other and whether the patients had anything in common—it is difficult to do anything to prevent it.

Thus, most viruses behave differently, putting themselves in opposition to the host's cells. With HIV, the only way of killing the virus is to kill the cells that contain them. Once embedded, HIV can hide for long periods of time, silently multiplying. HIV has a particular preference for T4 lymphocytes, the backbone of the immune system, but attacks all cells that have the CD4 molecule on their membranes—one that is common also in the central nervous system and in the brain. HIV is apparently fatal—no-one so far has beaten the virus—although the time an infected person can live with AIDS can be considerable, particularly persons under treatment with those life-prolonging drugs available.

The Process of Infection

The process of infection starts off much as with the common cold. After initial exposure to HIV, the virus multiplies rampantly in the body, causing flulike symptoms—muscle ache, diarrhea, mild fever, and sore throat. Also, these symptoms, not particularly unusual or remarkable, disappear rather quickly. After this period of viral activity, the infected person enters a period of chronic infection, during which the virus “sleeps.” The only way of noticing the virus during this “latency period” is through biological tests. This is also the case for the carriers themselves, who may thus transmit the virus to others unknowingly. Only minor clinical signs, such as swollen lymph nodes, indicate HIV infection, but there need not be any visible sign of infection at all.

During this time, infected persons seem healthy and are able to continue living as before. But, under certain conditions, the viral agents start to kill T4 lymphocytes, paving the way for opportunistic infections, for natural defenses are no longer operative. Advanced forms of infection can include the inability of the immune system to provide any sort of balance between viral reproduction and ordinary cellular division. Not only is the immune system destroyed by HIV, but the very process of immune response actually speeds up the replication of viral agents as con-

tained within the T4 lymphocytes. Kaposi's sarcoma, Pneumocystis carinii, neurological effects, cancer of the cervix, and a wide range of other clinical manifestations follow, none of them fatal in its own right. Yet they are life-threatening in the absence of effective immune response, and, ultimately, the person dies. Although several different strains of the virus have now been isolated—the most common simply labeled HIV-1 and HIV-2—no significant differences are extant regarding the modes of transmission or the progression of the disease between the two.

The long latency period provides extraordinary challenges for public health. Without the possibility of detecting infected individuals for targeted education campaigns or other public health measures, broad campaigns directed at everyone are the only method. With no trace of the disease, moreover, scapegoating and blame have been directed at larger groups—the so-called high-risk groups. The scant knowledge of the epidemiology of HIV gave reason to believe that the virus attacked only homosexual men, drug users, Haitians, and hemophiliacs—given the apparently high incidence of cases within these particular groups. These groups were often singled out and castigated before more accurate knowledge of the true behavior of HIV was found.

HIV is communicable, but not contagious: that is, casual contact does not transmit the virus from one person to another. The virus travels by means of bodily fluids such as blood and semen. Sexual intercourse is by far the most common mode of transmission, but receivers of both blood and products derived from blood risk infection as well. Mother-to-child transmission—whether in utero, during birth, or through breast-feeding—is also common. The sharing of needles, common among injecting drug users, actually transmits the virus because of the tendency of an individual's blood to draw back into the syringe before it is passed on to the next person, but unclean needles themselves can also spread the virus. Simple bleaching or heating of needles and other piercing instruments, however, suffices to kill HIV. Direct contact between infected bodily fluids and an individual's blood is the most effective means of transmission.

However, the virus can also enter the body through the mucous membranes, making sexual intercourse the most common high-

risk practice. Between 75 and 85 percent of all infections were transmitted through unprotected sexual intercourse—where heterosexual intercourse accounts for 70 percent. Five percent of infections are from infected blood or blood products, and another 5 to 10 percent are from unclean injection equipment. Among children, more than 90 percent were infected by their mother before or during birth or through breast-feeding. Approximately 35 percent of all infants born to infected mothers become infected themselves (UNAIDS 1996).

The epidemiological patterns of HIV resemble those of sexually transmitted diseases (STDs) in general. Historically STDs have proven extremely cumbersome to prevent or control. Interventions to control and prevent STDs rely to a large extent on curative rather than preventive measures. Almost no society discusses sex and sexual practices freely and without hesitation. The early connection between homosexual sex and HIV further reinforced the taboos on discussing transmission routes and educational campaigns. Still, education coupled with condom distribution stands out as the only viable AIDS-prevention strategy in the absence of vaccines. Avoiding behavior that places oneself at risk of exposure is, in truth, the only completely failsafe option. And even today, ten years into the epidemic, sex education and condom availability are disputed in many societies. Many people still find the embarrassment and costs associated with condom use too overwhelming, opting instead to continue to put themselves as well as the other members of the society at risk.

Global Predictions of HIV/AIDS

Tragically, all estimates indicate that we are in for a long and difficult road in terms of the AIDS issue. Official reports to UNAIDS indicate the existence of 1,393,649 cases of AIDS in adults and children worldwide as of 30 June 1996. And that figure is only the tip of the iceberg: taking the extensive underreporting and underrecognition into account, UNAIDS estimates more than 7.7 million AIDS cases since the onset of the epidemic in 1981. HIV/AIDS is now being transmitted in every corner of the world making it a

truly global epidemic—a *pandemic*. From the perspective of AIDS, the world is one. So, a vaccine today, even if effectively distributed, does nothing to prevent the deaths of the already infected. It would, of course, be a valuable tool in the efforts to prevent further transmission. UNAIDS estimates that about eight-five hundred new infections occur each day, amounting roughly to one new infection every ten seconds.

It goes beyond saying that the virus itself exerts a profound influence on the kinds of responses and efforts made thus far to check the pandemic as well as planned activities for the future, but—without downplaying the significance of the virological basis for the disease—equally pressing concerns have also arisen. Issues of social and economic character have from the onset been trailing the spread of HIV itself. “AIDS has catastrophically costly consequences,” writes the World Bank (1993: 100). Not only is AIDS an extremely costly disease in terms of medication and needs for healthcare in hospitals. The main economic consequence lies in the tendency of AIDS to hit people of productive and child-producing ages. The majority of newly infected are between fifteen and twenty-four years of age (UNAIDS 1996). Labor shortage and loss of family breadwinners have severe consequences for the ability of households to support themselves.

Moreover, as do all epidemics, AIDS reveals societal prejudices and brings to the fore discrimination and stigmatization. The tendency to hit already marginalized groups the hardest has only served to reinforce this historically so prevalent pattern. Quarantine, open discrimination, evictions, termination of work contracts, refusals at health centers, and so forth have proven equally painful experiences for People with AIDS (PWAs).

These etiological and epidemiological characteristics designate HIV/AIDS as a formidable challenge. Like no other issue, AIDS embodies the modern era. “With its links to sex, drugs, blood, and informatics, and with the sophistication of its evolution and its strategy for spreading itself, AIDS expresses our era,” writes Mirkko Grmek in an early history of the epidemic (Grmek 1990: xii). Coping with the AIDS pandemic requires the highest levels of transnational collaboration involving everyone affected, those with control of needed resources, and everyone with technical

knowledge pertaining to disease control and prevention. AIDS is a global challenge.

Even this brief description of HIV is sufficient to make apparent the problems of choosing any of the state-centered ontologies as a starting point. Three aspects stand out as particularly cumbersome: AIDS connects people irrespective of state borders, and the absence of “AIDS markers” makes detection and subsequent interception at the borders practically useless; AIDS involves political sensitivities that governments have historically had problems dealing with; and unless AIDS is stopped globally, it will continue to spread. Hence, AIDS, epistemologically speaking, can be seen as a postsovereignty epidemic.

Some involved in AIDS governance continue to see the world as essentially comprised of states and state entities, while others conceive of the world differently. At its most abstract level, global governance of AIDS concerns a clash between competing ontologies. With the current organization partly based in sovereignty and partly transgressing it, global governance of AIDS is bound to encounter contradictions and paradoxes. For a scholar in such a situation, it seems most useful to embark on a study of these issues from an ontology that harbors both: one that does not privilege states, but that does not exclude them either.

How, more concretely, can one conceptualize such an ontology? The next chapter inquires directly into this issue.

Chapter Two

Global Governance

Why does the global governance of AIDS present a problem for international studies? One answer can be found in the disturbing reliance on a constructed dichotomy between *inside* state borders and *outside* state borders—particularly with IR theories but, in reality, with social theory generally (Walker 1995: 306). This distinction has reduced political study to either that which occurs within states or that which occurs between them. The question of ontology, therefore, is more difficult to resolve than by simply borrowing from nearby disciplines, such as political science and sociology.

The oddity of the current domination of state-centered theory is its relatively late ascendancy. The world's first IR chair in the world, in 1919 at University College in Wales, was devoted to the study of social relations in their widest extent (Scholte 1993: 13). Perhaps the turn of the century, and a few decades after that, is the zenith of state-dominated views, a reality supported by such IGOs as the League of Nations and the UN. Theories reflecting and legitimizing state centrality were created to facilitate and stabilize state control. Walker sees sovereignty as a “discourse of limits,” marking the extremity of where political analysis may venture, the kinds of questions researchers may ask, and so forth. (Walker 1993: 34). Typical for state-centered IR theory is the absence of problematization of statehood: states' borders are taken for granted.

Understanding during formative moments is difficult. Particularly tricky to handle are constitutive dichotomies (Bartelson 1993: 10), such as the inside/outside problem in the social sciences—the territory-based separation of the global from the domestic. The easiest way out, perhaps, is to maintain the realists'

insistence on the impossibility of international community but to allow for the possibility of an international society (Bull & Watson 1984) of states, in spite of anarchy. This breaks the ever-continuing balancing of power posited by (neo)realism in favor of an anarchical society (Bull 1977). However, the English school does nothing by way of explaining governance as conceptualized in this study, and even less to avoid privileging states as the only relevant and legitimate actor in world politics.

Another solution is to posit an interrelation between the global and the domestic—as proposed by Putnam (1988) with “two-level games,” and Rosenau (1990) in his “bifurcated” global system approach. Although these approaches represent attempts to escape the sovereignty straitjacket, adding levels seems merely to increase confusion and, moreover, serves to reify the distinction. The answer seems to be that (1) global relations should not be perceived as different from other relations, (2) that global organizations should not be seen as different from other forms of organization, and (3) that global institutionalized practices and ideas should be treated similarly to other institutions.

In regard to sociology, it appears that, after leaving the universalistic movement and the positive sociology of Comte, Marx, and Saint-Simon, it, too, has proceeded as if societies were isolated from one another. Classical sociologists such as Durkheim, Weber, and Tönnies concentrated on national societies. Frequently, these societies compared, in a quest for trajectories common to all societies. The question posed has been in regard to which configurations of social, economic, and political forces make up the state at a particular moment of interest (cf. Krasner 1988: 67). Relations between societies should be dealt with by IR (Robertson 1992: 8–31). Those sociologists who have ventured outside state-centered sociology have frequently embraced a realist view of relations between states (e.g. Giddens 1985). Thus, the border between IR and sociology has been maintained, and the state, taken for granted as final arbiter of relations and processes.

A Post-Westphalian Ontology

A term that denotes a post-Westphalian worldview and that has taken on some notoriety in recent years is *global governance*. In the combination of the two concepts “global” and “governance,” two implications are intended. First, “global,” rather than the historically more common “international,” is meant to imply that actors and structures are more varied and inclusive than are states and interstate relations. Second, “governance,” rather than “relations,” is intended to convey a picture in which a wide variety of forms of actions, processes, and structures is included—not only guns and butter issues managed by diplomacy, legal treaties, and high-level negotiations. The term *global governance* captures the essentials of AIDS as well as transcends the inside/outside dichotomy.

The concept of global governance, then, is important, since it challenges the subdiscipline of IR to include more than those activities either performed or controlled by states. Old IR implies that there is nothing important going on in the world outside of the state system, that there is no space beyond sovereignty where politics can happen (Jarvis & Paolini 1995: 4). IR has dealt with transactions between states, whereas global governance refers to multilevel interaction between various actors and groups, with multiple forms of association both patterned and unpatterned (Jarvis & Paolini 1995: 4). In the words of Christine Sylvester, the field is concerned with “the myriad positions that groups assume towards one another across the many boundaries and identities that defy field-invented parameters” (Sylvester 1994: 219). The term *postinternational politics* has been suggested for this confusing time in which we do not have what we used to but do not yet know how to characterize what we have (Rosenau 1990:3).

However, one additional “post-ism,”—or, for that matter, another “neo-ism”—seems to add nothing particularly valuable to understanding. On the other hand, the concept of global governance does. Global governance is to be understood in reference to world orders, and it refers to the many different ways in which those world orders are maintained, challenged, and changed. As usual, several subtly different versions of the concept are extant

in the literature (Finkelstein 1995), but the one offered by the Commission on Global Governance (CGG) captures the sense in which I use the term (*The Commission on Global Governance* 1995: 2): it is defined as

the sum of the many ways individuals and institutions, public and private, manage their common affairs. It is a continuing process through which conflicting and diverse interests may be accommodated and co-operative action may be taken. It includes formal institutions and regimes empowered to enforce compliance, as well as informal arrangements that people and institutions either have agreed to or perceive to be in their interest.

Global governance, therefore, is a potentially messy process that involves a broad range of actors related to each other in a great variety of ways, both conflictual and cooperative. Thus, global governance, makes sense from the perspective of AIDS. In this instance, it is quite obvious that states are unable to design and execute global policies on their own. As pointed out by Michel Foucault, states and governments are neither omniscient nor omnipotent (Gordon 1980: 122). Nor is any other entity capable of assuming such a role and responsibility. What we have with AIDS is an issue for which processes of cooperation and conflict occur across porous and flexible boundaries. With AIDS, the world has become “a single place” (Robertson 1992: 183). It is the first truly global epidemic (Mann et al. 1992: 2).

IGO-NGO Partnerships

Building sustainable partnerships between IGOs and NGOs stands out as central in the global politics of AIDS. An additional reason for taking global governance as an ontological basis is that a state-centered ontology inevitably biases understandings of these partnerships. Governments and intergovernmental organizations are the key actors in IR-style multilateralism. Ruggie, for

instance, defines multilateralism as the practice of “coordinating relations between three or more states in accordance with certain principles” (1993: 8). All in all, a vast and unwieldy family of intergovernmental organizations is in place, and, to varying degrees, they steer and structure global governance.

Although states are, formally, the members of these organizations, one particular entity or another cannot adequately account for global governance. Within the system of governance now in place around several issues of global political concern, it is not only states and governments that play important roles. Although governments are the centers of the putative international legal order, the set of expectations and shared understandings among and between actors in governance also includes other types of actors—which remain hidden in an ontology such as Ruggie’s. As suggested by Gordenker and Weiss (1996: 17), “NGOs and intergovernmental organizations (IGOs) grope, sometimes cooperatively, sometimes competitively, sometimes in parallel towards a modicum of ‘global governance’.” A sovereignty-based ontology like multilateralism has difficulties when it comes to understanding the process leading to IGO-NGO partnerships, since partnerships imply equality between IGOs and NGOs. If one takes multilateralism as a starting point, NGOs will inevitably be included only as an epiphenomenon (Boli & Thomas 1995: 3)—as junior partners, inferior to, or held hostage to, IGOs. A look at the existing arrangements for NGO consultation reveals the shortcomings of multilateralism as point of departure.

The UN Charter establishes NGO presence in article 71, whereby the Economic and Social Council (ECOSOC) is authorized to “make suitable arrangements for consultation with non-governmental organizations which are concerned with matters within its competence.” This opportunity was followed by an operational paragraph for ECOSOC in 1968—paragraph 1296, which establishes the three kinds of NGOs as “category 1,” “category 2,” and “the Roster.” As of 31 July 1995, 1,068 NGOs had become accredited to ECOSOC and, thus, had been granted access to ECOSOC meetings and the like (E/1995/INF/5). Consultative status entails, in addition to a right to attend meetings and to be consulted, certain opportunities to deliver statements from the

floor as well as the right to circulate documents (Resolution 1996/31).

Based on the paragraph 1296 structure, NGOs have undertaken many tasks and become indispensable for the UN in a number of ways. Characteristic for all of them, however, has been the tendency to be located at the end of the cycle, at the implementation stage, or as expert advisers at the request of the UN. Expertise, service delivery, and government contracts have been the fundamentals of NGO involvement.

The knowledge and expertise possessed by local NGOs and community-based organizations have made these entities useful in the implementation stage, as minor adaptations in abstractly formulated policies are always necessary. The list of NGO functions also includes the monitoring of governmental activities and the reporting of breaches of treaties or implementation failures (Najam 1996). As NGOs have gained both wider acceptance and notoriety, it has become more and more difficult for governments and IGOs to ignore the nuisance potential of NGO monitoring and reporting, leading to closer relations both between IGOs and NGOs and between governments and NGOs.

The relevance of article 71 and paragraph 1296 is obvious, but, to some extent, a focus on formal criteria and rules hides actual developments and dynamics in UN-NGO relations. The “rule book” may be in place in some sense, but do we even really know who has heard of that book?

The sovereignty principle that excludes NGOs from formal negotiation processes is evidently eroding in practice (Ritchie 1996), although it is still maintained in the text of the new 1996 resolution. NGOs are appropriating space in negotiation processes in different ways. Many national delegations are now routinely including representatives from NGOs. As negotiations are a long and arduous—and not always productive—exercise, it is not uncommon to find an NGO as the sole representative present in the negotiation room. This indirect way of influencing has let the genie out of the bottle, so to speak, as, with the NGO representatives actually in the building, ample opportunities have presented themselves for informal contact with governmental delegates.

NGOs, either in their own right or via their respective governments, have been instrumental in moving texts forward at many world conferences. Both the action plans emanating from UNCED and the UN Conference on Population and Development bear witness to considerable NGO impact (Enge & Malkenes 1993). Also important as an event with enormous symbolic value is the practice ever since the United Nations Conference on the Human Environment (UNCHE) in Stockholm in 1972, of arranging parallel NGO conferences in conjunction with UN events (Willems 1996).

However, these parallel conferences only convey one part of the story. Once allowed into the meeting arenas, NGOs have learned how to attract the attention of governmental representatives as well as to catch them in hallways and cafeterias. Moreover, although not recognized as formal participants, NGOs can now be seen in “non-meeting” meetings, a semiofficial UN standard operating procedure. Since NGO presence is still contested among governments, innovative diplomacy has reacted with the practice of “informal informal meetings,” which are still off-limits for NGOs (Enge & Malkenes 1993). Nevertheless, although far from the tripartite structure of the International Labour Organization (ILO)—the only institutionalized IGO-NGO organizational structure in place as of yet—NGOs have become deeply involved in the actual negotiating process (Ritchie 1996: 185). Thus, although a clear demarcation of member governments as members and NGOs as observants is still in place, both governments and NGOs have found ways to bypass that rule. Only an ontology of global governance can inquire into these trends.

A similar process occurs when treaties, covenants and action plans are drafted and negotiated. The expert knowledge possessed by NGOs has been valuable in many instances, including the formulation of treaties in those areas lying outside the ECOSOC mandate, like human rights and humanitarian law. The status and expertise provided by the Red Cross in this context have, for example, led to the unprecedented practice of consultation between the International Committee of the Red Cross (ICRC) and the president of the Security Council on a regular basis (Donini 1996). UN officials are frequently joining together in efforts to

persuade governments to accept particular outcomes (Ritchie 1996: 181).

Yet another example is the NGO ability to offer a refuge away from the highly politicized surroundings of headquarters—as well as from the crowded restaurants and coffee shops around them. In New York, for instance, the Quakers have hosted many informal get-togethers between political adversaries, allowing productive discussions in a calm environment.

Also, the changing nature of UN-NGO relations can be seen on the field level. Most development agencies now have direct contacts with NGOs institutionalized in specific programs for support, either in the form of partnerships or small grants and seed money. This is new, as previously money was channeled through national bureaucracies. Governments are still involved in this process—as clearance is always required—but funds are regularly moved directly to the NGOs.

NGOs have also been brought into closer contact with the specialized agencies. Although these agencies are governed by their own constitutions, the arrangements for NGO relations mirror ECOSOC regulations. As the WHO constitution states in article 71, the organization “may make suitable arrangements for consultation and cooperation with non-governmental organizations. . . .” They have done so, and, as of April 1996, 181 NGOs were registered as having an “official relation” to the agency (WHO 1996). In a recent press release, Director General Nakajima stated that “WHO must open itself up to all sectors of society, including non-governmental organizations and the private sector” (Press Release WHO/3, 15 January 1996). According to the same press release, establishing new partnerships for health is a high priority for WHO.

Peter Uvin describes the current dynamic in social and economic areas as being dominated by two processes: of “scaling up,” on the part of the grassroots organizations and local NGOs, and “scaling down,” in the case of big development cooperation organizations, including government departments and ministries and UN agencies (Uvin 1996: 159). What appears to be happening is that the big international development organizations are trying to acquire some of the traits normally associated with NGOs, such as

community connection, flexibility, rapidity, and responsiveness to local needs, whereas local NGOs are trying to grow both quantitatively, in terms of increasing funding and staff, and qualitatively, in terms of branching out into new areas of activity. Thus the big are trying to become smaller at the same time as the small are trying to become bigger. It appears as though NGOs and IGOs frequently engage in the same battles and face similar problems. NGOs, says one author, have played important roles during the entire policy cycle—that is, from agenda setting via policy development to implementation—and have functioned as monitors, advocates, innovators, and service providers (Najam 1996).

The gradual realization that IGOs and NGOs often have more commonalities than differences forms an important element in the transition from multilateralism, in the state-centered fashion, toward global governance.

An ontology assuming the preeminence of states and states' ability to control world affairs—which thereby renders to influence and capacity of NGOs as secondary to that of states—then, must be replaced, or at least extensively modified, to contribute to an understanding of governance. There is little to indicate that states will regain the capacity to control world politics in the near future. A more compelling interpretation instead indicates that global politics is moving in a direction of more, rather than less, complex and dynamic processes. Naturally, there is nothing inevitable about this trend, but for now it is a plausible assumption. Global governance does not prejudice or bias the relative status and abilities of either IGOs or NGOs and is therefore useful for this study as well.

By way of summing up the foregoing discussion, the world of global governance is constituted through multiple, intersecting, and overlapping power centers, where no center has full control. Interdependence is profound and power diffused. No organization or individual possesses enough resources or commands enough obedience to have the ability to steer world politics. That is to say, global governance is open-ended, multicentric, and highly dynamic. This interrelatedness is deepening and spreading, giving rise to an incipient global society. Moreover, in this global society, state organizations, most notably governments and their corollar-

ies embodying sovereignty, interact with civil-society organizations, including economic actors imbued with other values and identities. This relation constitutes a primary dynamic force in global governance. The ontology of global governance is appropriate for this study because we are dealing with AIDS, a postsovereignty epidemic; because we want to address NGOs explicitly in their own right and as equal partners with IGOs; and because that ontology allows questions regarding the role of people in relation to global processes, including researchers. Global governance stimulates awareness.

Global governance, therefore, allows and stimulates a wider set of questions than does a state-centered ontology. Although it is a first and necessary step, merely opening up the topic for interrogation does not suffice; we need concrete questions to ask. In that regard, a discussion on which kind of questions would be appropriate, what kind of answers to expect, and how to use these is useful. In other words, an epistemological discussion is warranted.

A Postpositivist Epistemology

From the literature referred to above, as well as from discussions with practitioners, a rather clear consensus emerges as to both what is happening and what problems are associated with it. The description offered above regarding the changes in the ways in which politics is carried out is not extreme; it appears in many journal articles on the topic and is familiar terrain for numerous scholars and practitioners alike.

Using Theory Critically

Agreement on what changes are happening is only one issue, however; the reasons *why* these changes occur is quite another. What are the problems with the current state of increased collaboration? Why do IGOs and NGOs strive toward increased cooperation? In attempts to answer questions like these, the above-mentioned consensus effectively becomes shattered, and the answers one

finds adequate and the analyses judged as correct depend on factors aside from merely the material available and the methodological rigor and skill of the researcher. As shown powerfully by Graham Allison in his *Essence of Decision*, what stands out as important depends on what the analyst brings to the situation (1971:2). A theoretical concern forming the epistemological backdrop of this study has been the goal of using models belonging to what Cox (1986) has called critical theory, rather than those of problem-solving theory. Assuming a critical posture entails questioning the current order and patterns of thought, investigating how that order came about, and asking if and how it may be presently involved in a process of changing. Rather than accepting the world as one finds it, as problem-solving theory does, using theory critically is “directed toward an appraisal of the very framework for action, or problematic, which problem-solving theory takes for granted” (Cox 1986: 208).

By means of departing with the realization that research is political in nature— in addition to showing that theories are underpinned by biases, which privilege and highlight certain aspects at the expense of others—the analyst is forced to consider the practical consequences of his or her work. Research always expresses philosophical standpoints and values, more or less explicitly. As Robert Cox puts it, “[T]heory is always for someone and for some purpose” (Cox 1986: 207). If these values are not made explicit, the researcher may end up defending values or legitimizing political processes unknowingly. Moreover, readers have a right to know the underlying value premises of theories, since interpretation of results and arguments is facilitated if basic parameters are openly and clearly stated.

Critical approaches to global governance would necessarily involve an exploration of the feasible orders into which such a common manifestation of management could possibly transform the current order. As collectivities shape future orders, the possibilities of various alternative futures are constrained by the nature of existing power arrangements and patterns of thought. Purposefully used, theory is a strategic tool, but unreflexively used, it may contribute to simply reproducing the status quo (Devetak 1996: 147). It is the nature of critical approaches, conse-

quently, to assume a critical stance toward the present holders of influence, since capacity to act is dependent on an understanding of the current situation and the mechanisms underlying it.

It is worth noting that many studies of world politics, global governance, and international organization lack a discussion of epistemology. It is as if scholars either believe, or want others to believe, that everything important has been included in the analysis—which obviously is not the case. Theory is always used to structure and categorize empirical observation, and, thus, some aspects and phenomena are included while others are sorted out as irrelevant, or even made invisible. A theory distinguishes itself from others by establishing what is to be considered meaningful and relevant, and what is peripheral and irrelevant (cf. Bartelson 1993: 5ff).

This lack of awareness of the shortcomings inherent in any single theory on behalf of much international organization scholarship may be caused partly by the relatively short existence of the subdisciplines, although shortness of time hardly explains the neglect fully. A second reason may be the dominance of positivist epistemology, for reasons touched on in chapter 1. Whatever the underlying reason for this absence, Walker singles out the distinction between inside and outside state boundaries as prohibiting questions of justice, freedom, moral aspiration—that is, questions about good governance. Outside state borders, goes the argument, social theory is void. Anarchy provides no basis for questions of social being, community, agency, structure, and forms of explanations. The international is not open for people's relations to other people or community. Inside states, to continue that line of reasoning, political theory is possible, meaningful, and even necessary (Walker 1995).

A global governance ontology, on the other hand, does allow these kinds of questions—the importance of which can hardly be exaggerated. The poverty of the state-centered approach has damaged the credibility of IR scholarship in general and has served to hide the connections between the everyday activities of people and global relations. A state-centered ontology assumes a certain stability in world order and tends to interpret change as threats to the extant state-dominated order. The underlying task is usually

to reconstruct the present multilateral order, without questioning the basis or effects of this order (Cox 1992).

This certainly has implications, although it may appear simple and self-evident. In fact, the practical dimension with which both UN staff and NGO staff—as well as theorists!—have to struggle is how to establish relations with the “good” NGOs and to avoid the “bad” ones. For NGOs, with no demands to follow any other dictates than those of their members—that is, without the strings attached, as with a world organization, of having to be sensitive to all people irrespective of race, gender, class, or any other conceivable condition—this may be a rather minor consideration. For the UN, however, this lies at the heart of the matter. Governments have been treated as the legitimate representatives of people: in a sense, “we the people” has, at least up until now, been operationalized as “we the government.” As this operationalization of people becomes increasingly tenuous, the need to find a workable formula becomes more and more urgent.

Global governance offers a better departure for asking questions than do other methods, since it approaches the subject matter more openly, which may be important for how we end up organizing work, with whom we choose to cooperate and in what manner, what processes to strengthen, and so forth. This thesis investigates how GPA and later UNAIDS have worked out this dilemma, but the implications of the study are potentially more far-reaching than that.

The most immediate implication for me as a scholar has been a deliberate attempt to avoid the sometimes overcomplicated theoretical fine-tuning characteristic of debates such as that concerned either with agency and structure or with sovereignty. To some extent, this involves disregarding nuance and sophistication in favor of accessibility. That is, practical usefulness requires that jargon be balanced against language that is more readily accessible and transferable into practice by people without prior social-science training. There are potential new audiences for scholarly work on global governance. Activists of various sorts, and in diverse fields, are now consumers, joining the more traditional customers—that is, diplomats and generals (cf. Coate & Murphy 1985: 124f).

Theories as Conceptual Lenses

The second epistemological point to be raised here concerns the approach from various perspectives—using several competing conceptual models rather than merely a single, albeit more elaborated and comprehensive, one—along with the reasons for doing so. Theories as lenses through which to comprehend reality are based on distinct assumptions about reality and possibilities of knowing anything about that reality—assumptions that differ from those of positivism. Rather than nurturing an idea of theory as a mirror of—and as a research method geared toward the discovery of laws governing—society and culture, the suggestion here is that theories are perspectives bringing out different aspects of the studied reality. “By ordering what we look at, each lens enables us to see some things in greater detail or more accurately or in better relation to certain other things” (Peterson & Runyan 1993: 1).

The social world, which encompasses global governance, is made visible through theory. Knowledge of this world is critically dependent on a self-consciousness on the part of researchers, rather than on possessing greater skills in manufacturing a thesis according to the “scientific method,” or on having discovered new materials or sources of data. A theoretically possible way out of such “aspect-seeing” is advocated by Scholte (1993), in his proposal of a “fully-integrated world-historical-sociological enterprise,” a harmonious synthesis of IR, history, and sociology. Although it is clear that his goal is to avoid the partial understandings offered by traditional disciplines, how this mixture would actually operate in practice is not clear. First of all, Scholte only wants to maintain certain yet-to-be-articulated idealized assumptions from each tradition. Second, these traditions are reified and homogenized. Finally, a synthesis would not escape the biases and flaws of the respective parts—even if the synthesis would be “better equipped” in some respects to deal with the modern-day predicament.

To some extent, the three theoretical frameworks employed in the present study appear to be the sort of synthesis of which Scholte speaks so optimistically. The Gramscian notion of global

hegemonic orders bears traits from both history and IR, interorganizational theory have strong roots in sociology, and interpersonal networks take up a historian's interest in individuals capable of radically changing historical development. I maintain, however, that a synthesis of the three would cause more trouble than it would facilitate explanation and understanding. We simply have to learn how to live with fragmented and temporary understandings, however unsatisfactory those might seem to some.

What Scholte attempts is to study "how world-systemic dynamics produce transformations in local settings, in national contexts and/or in cross-border situations through the continuous interplay of these arenas, where each simultaneously shapes and is shaped by the others." (Scholte 1993: 25–26). I admit being sympathetic toward this sort of endeavor—at least from the vantage point of moving away from disciplinary parochialism and static reasoning—but an analysis proceeding in a piecemeal fashion, with different approaches allowing several aspects at the forefront of each cut, would also accomplish that task. Moreover, a three-pronged approach highlights more forcefully that perspectives inevitably hide some aspects while showing others. Scholte and others in the tradition of theory building face problems in this regard.

Another theorist, Heikki Patomäki, also has admirable intentions toward comprehensive modeling and grand theories, as he advocates constructing "ironic models" that are complex and nuanced (1996: 127). As of yet, Patomäki has not, to my knowledge, actually produced any of the IR stories for which he is interested in paving the way. Thus, although it is easy for such theorists as Scholte and Patomäki to argue for comprehensive models, it is quite another thing to conceptualize such models and theories and actually to bring them finally to bear on empirical research.

Rival perspectives sharing basic underlying characteristics would allow several answers to the same question. Social science, then, can have the potential to exist as an ongoing process that continues to be enriched. The search for "The Theory" that will end further theoretical discussion, from this perspective, is a Sisyphian enterprise.

The main objection to this approach stems from its antifoundational character (Smith 1996). When rival perspectives are em-

ployed, the question of how to make comparisons between rival truth-claims is unavoidable. How, if at all, can the relativism inherent in this approach be avoided? Admittedly, treating theories as lenses does not live up to the demands posited by positivist dogma—i.e., universality and parsimony. Still, the view that everything that does not conform to this ideal is a “dead end” or an “intellectual and moral disaster,” as suggested by Keohane in relation to the same ideas expressed by feminists (1991: 46f), may simply be unproductive. If diversity and complexity are the fundamental terms of life, they should be those of social science as well. The ultimate test of a framework need not be whether it faces up to a contested reality or correctly predicts future events. A more humble attitude toward the possibilities of knowledge, the tolerance of different perspectives, and the quest for consensus rather than battles between universalistic projects may be more valid criteria (cf. Murphy & Tooze 1991: 6). Keeping the debate open and lively and avoiding premature closure may simply be more relevant. It will also be the guiding principle of this study.

Allison has pointed out that increased understanding in the case of the Cuban missile crisis was not primarily a case of awaiting additional information or the release of classified materials. Rather, what was needed was a greater awareness of the “conceptual lenses” used by the researcher. The lenses, as it were, select a reality and highlight aspects of that reality. In more modern jargon, theory *constructs* reality, thereby opening only a limited fragment of the totality available to be researched. The primary issue, then, is not one of correctly adding one piece of the jigsaw puzzle after another in order to discover gradually the objective reasons behind a process. Information and data exist in overabundance, and what is most urgently needed is a way of screening out irrelevant material and discovering the important pieces.

This thesis is supportive of the gist of Allison’s argument and adopts the same approach. What comes out as salient features in an explanation of global governance depends on the theoretical apparatus employed. As in Allison’s approach, three different conceptual lenses are used here, each providing a different picture and offering different answers to the question why these processes

developed the way they did—and what to make of it. It moves beyond Allison, however, in that it insists that theory be used critically. Allison’s goal was to show the limited explanations offered by his three models, but he had no intention of using his analysis as critique.

The goal, therefore, is to adopt a broadly critical attitude toward the current order, with an aim to make the analyses accessible for a broad set of concerned activists. Research can, if carried out critically, contribute to better AIDS governance. It would be erroneous, however, to presume that research can discover a “most appropriate way.” Theories can never provide total coverage. Instead of seeing theory as mirroring an objective reality, it should be seen as perspectives opening up limited aspects of reality for debate. An infinite number of aspects is possible. As discouraging as that may seem, to abstain from trying is worse. Awareness of the limitations of knowledge and a humble attitude toward alternative understandings among theoreticians, avoid closing debates and offer some prospects for improvements in the global governance of AIDS and of other issues. Now, it will be useful to turn to some actual models.

Chapter Three

Frameworks, Methods and Materials

The question of how to analyze global governance stems from the fact that, since its reach and ambition are so far-reaching and vast, it seems that no answer in a proper sense can be offered. The avenue into this question that will be taken here has been pointed out by Walker (1993: 81f), who has argued persuasively that approaches to world politics should be discussed with reference to ontological assumptions. Chapter two—which set out to establish such a basic ontology—suggested three reasons for the appropriateness of employing that of global governance. Thereafter, it elucidated an epistemological position, wherein a broadly critical goal was linked to an argumentation for a multitheoretical approach to understanding global governance.

Problematizing Global Governance

Which theories are most worthwhile to employ? Although the general argument so far has been an emphasis on a need for the critical reexamination of extant ontological assumptions and epistemological positions, the unorderliness of the processes of global governance should not be overemphasized. Long-standing patterns of relationships exist, ordering and providing meaning to practices in which these actors are engaged. Time-honored practices provide actors with meaningful activities—as well as researchers, with a field of study that can be described and understood. Thus, even if there are a number of organizational forms in existence that might constitute such profound departures from conventional knowledge so as to represent a “social invention,” in-

spiration can be obtained from several research traditions in addition to the now-faltering traditions of IR.

Constructing Theory

As pointed out by Kratochwil, taking the problem of governance as a basic ontology places high demands on theory. It becomes absolutely necessary that theories be attentive to how the system of governance and the units comprising the system are coconstitutive of each other. The very units and the way they interact and to create and re-create governance arrangements is the central focus of the approach (Kratochwil 1994: xi). With change as a central focus and governance essentially perceived as active, a crucial concern for this study becomes how actors have a capacity to decide on, and form arrangements to further, their goals under conditions that, on the contrary, are not of their own choosing. Change is understood as a myriad of social choices and actions by individuals and collectivities—but choices and actions based on the material and institutional fabric at their disposal.

Unfortunately, structuration literature, which is the home of Kratochwil's comment, is less clear practically. Outlining the requirements for a satisfactory contextual theory is as far as the debate has moved. As of yet, the structuration principle offers no more than a general guideline for studies of social change. Giddens (1979: 80), in a very abstract manner, outlines the approach:

To examine the constitution of social systems as strategic conduct is to study the mode in which actors draw upon structural elements—rules and resources—in their social relations. “Structure” here appears as actors’ mobilization of discursive and practical consciousness in social encounters. Institutional analysis, on the other hand, places an *epoché* upon strategic conduct, treating rules and resources as chronically reproduced features of social systems.

How to conceptualize global governance theory more exactly based on these notions, hence, is still a very open and contested question. Structuration can be understood not as a substantive theory but as an analytical one (Wendt 1987: 355). One could say that structuration is more of a “metatheory” that forms the basis of a wide range of empirical theories of social life, including global governance (cf. Lundquist 1993: 77f).

The highly abstract level of the debate does not further the cause for increasing the use of contextual models in the eyes of many of the more empirically oriented researchers. One might, along with Dessler (1989: 443), ask why, “[G]iven the reluctance of these ‘new philosophers of science’ to address the problems of substantive research . . . anyone other than philosophers should be interested in their work?” Frequently, what are advertised as breakthroughs are little more than new wine in old bottles, so to speak—merely exercises in academic navel-gazing (cf. Mortensen 1991:42). Rothstein, similarly, accepts the claim for contextual models but does not think that the debate has moved beyond the level of repeated claims about the necessity of agency-structure models (1988: 29).

In spite of the hitherto-intractable methodological rules following from structuration, I think that the debate is an important contribution to global-governance theory. The reason, it seems to me, is that an unprejudiced discussion of actors, structures, and processes—the basic building blocs of social theories—offers a fruitful avenue by which to break away from state-centeredness. Although it does not necessarily offer a solid and stable base, addressing the kinds of questions that arise from this debate is an important first step. Contextual theories may be hard to grasp, but as straightforwardly stated by Lundquist: “When must an actor-structure approach be applied? The answer is: *always*” Lundquist 1987: 192).

Regardless of which theories one uses, they have to depart from the realization that structure is the result of human action and, thus, possible to change. Individuals—and, logically, also organizations—have a fundamental capacity to reflect on and sometimes to change the conditions that form them. However, old habits die hard, in the sense that the notion of sovereignty dominates debate

and multilateral practices carry weight by virtue of familiarity. More important, though, are the vested interests of individuals profiting from the current ways of multilateral organization, including those researchers who purport to explain it. These interests will obviously not give in without a struggle. Structural analysis answers the central question “cui bono?”—who benefits—which is an inescapable question in understanding global governance.

In the following, three frameworks will be elaborated that problematize global governance in different ways. Each theory has a central problematic, which can be seen as a structure of practices guiding contributions and sorting out the relevant from the irrelevant research questions—thus establishing a central research agenda. Each problematic consists of an “integrated framework of concepts and propositions defining the concerns of the field, that is, its primary intellectual problems” (Benson 1982: 140). Moreover, each framework privileges different actors, emphasizes different structures and posits the processes linking actors and structures in a different manner. By building theory from general assumptions like these, the traps of much earlier theorizing on global governance can be more effectively overcome.

Three Frameworks

Publications addressing IGO-NGO relations have been heavily influenced by the idea of a civil society existing between the state and the economy. Thus, Lipschutz (1992) discusses the emergence of a global civil society of voluntary, nonprofit, and nonstate organizations, and Paul Wapner (1996) dwells on civil-society organizations engaged in world civic politics. The trend of using civil society as a concept is reinforced by the rise of a neo-Gramscian wave within international political economy scholarship. Scholars such as Robert Cox, Stephen Gill, and Craig Murphy have persuasively interpreted global political economy in Gramscian terms.

It appears impossible to treat the subject of IGO-NGO relations today without building on this literature to some extent. Gramsci discussed civil society as the sphere of voluntary associations, as

apart from the state in an organic sense; and NGOs, by and large, come very close to this notion. The dynamic of the theory grows out of a struggle between those interests dominating within the state and those outside striving to establish a new order. NGOs of various brands indeed have such ambitions and actively strive to build coalitions around shared understandings of problems and solutions. These shared understandings of meaning—that is, discourses—form the basis for order and stability and establish what is to be considered right and wrong, legitimate and illegitimate, and so forth. One of the cuts I intend to make into this phenomenon, then, is inspired by Gramscian scholarship and thus treats IGO-NGO relations as cooperation and conflict between discursively constituted alliances—whereby the current intergovernmental order, privileging IGOs and governments, is challenged in various ways by coalitions of organizations striving to establish alternative orders.

A different approach emphasizes that global governance is dominated by small and large organizations cooperating and conflicting over desired goals in a context of scarce resources. Interorganizational dependencies evolve where certain organizations manage to attain control over resource flows and establish a specific way of defining problems and solutions. IGO-NGO relations in this cut would be understood primarily as a result of changes in resource-allocation patterns. The logic of this model lies in the ensuing bargaining, as organizations try to manage uncertainties by securing a steady flow of necessary resources for their activities.

The third cut finds its home in the jargon adopted by many practitioners. “Networks” and “networking” appear to be part of the language used to describe evolving processes that is preferred by those actively engaged in these processes. Networks between key organizational members and individuals, for certain, are the stuff bargaining is really made of—that is, only people can speak and communicate. Boundary-role occupants transmit the outside world into organizations, and frequent interaction among individuals may stimulate the evolution of cross-cutting networks able to dominate policy.

“In-and-outers”—or, individuals with experience and contacts from both of these worlds—are more common today, and NGOs in many cases command more resources and attract staff otherwise bound for government service, thus eradicating the hierarchical relation that previously characterized the relation. In this context, the activities of single individuals should also be included. The persuasive skills of individuals in setting agendas and devising acceptable solutions to seemingly intractable problems are captured in this individual-conscious model. The underlying assumption is that people, as they interact, adapt and modify their thinking to each other and manage to develop shared understandings. These common conceptualizations are then incorporated into their respective organizations, which, subsequently, develop novel approaches that harmonize with those of other organizations.

To sum up the foregoing theoretical frameworks in a few sentences, one could say that the first model emphasizes discursive formations; the second, interorganizational relations; and the third, the role of interaction between individuals and leadership in processes of global governance. Each contributes aspects hidden by the others; neither can be reduced to any other.

The three models employed single out different actors: Individuals are highlighted in the networks perspective; organizations, in the interorganizational one; and social forces, in the discursive approach. They highlight different structural forces as well. Structures of domination and subordination are central in a Gramscian framework, resource interdependencies are emphasized from an interorganizational framework, and shared understandings and mutual trust are important in a networks framework. The three frameworks conceptualize the important linkages between actors and structures in different manners, each focusing on particular processes. Organizations discover, change, or preserve interorganizational fields through processes of bargaining and competition for scarce resources and recognition, whereas the processes made visible in a discursive framework are those of social forces’ efforts to articulate counterhegemonic discourse. Negotiations and mutual problem solving, lastly, cause individuals to encounter structural possibilities and obstacles.

Significant aspects of the three alternative frameworks can be presented usefully in chart form:

Figure 1. Chart of Frameworks		Framework		
		Competing discourses	Inter-organizational relations	Inter-personal networks
Dimension	Actors	Social forces constituted through discursive formations	Organizations	Individuals in roles
	Structures	Discursive practices enabling and constraining action and thinking	Organizational interdependencies and institutionalized ideas and practices	Roles, cognitive barriers, prejudices and stereotypes
	Processes	Socialization and articulation	Institutional Bargaining	Mutual problemsolving and communication

Although the chart may give rise to certain questions regarding categories and overlaps, it does manage to convey that neither of the theories can be reduced to the other: that is, each prescribes a different way of grasping actors, privileges different structures, and problematizes the crucial link between different actors and between actors and structures in different ways. Each model will be dealt with extensively in subsequent chapters. Before turning to the empirical portion of this study, however, a general discussion of materials and case studies as methodology is warranted.

Single-Case Studies

This study is a single-case study. Robert Yin argues that the case study is a good method to employ when research aims to explain “why” a certain event has taken place and “how” the event happened. Moreover, when the topic concerns a contemporary

phenomenon, case studies are a good choice (Yin 1984: 13). The distinctive need for case studies, Yin continues, “arises out of a desire to understand complex social phenomena” (Yin 1984: 14). Case studies may be useful when the subject of study and context are not easily distinguishable, when the subject of study is contemporary, and when multiple sources of information are used (Yin 1984: 23). All of these conditions are present in this study.

Although based mainly on only one case, this study clearly includes strong comparative elements. With partnerships in AIDS a common denominator, different theoretical frameworks create three distinct case stories, which can be compared. Rosenau’s (1995: 3) infamous question “of what is this an instance?,” then, receives three distinct answers. Methodologically one looks for different things use different techniques and sort observations into different categories. Each case-story will be discussed regarding procedure in conjunction to the theoretical elaborations.

Validity and Reliability

The important question regarding case studies obviously circles around the case as identified by a researcher and the research problem about which she or he intends to say something. The issue here, then, is whether changes in global governance arrangements are linked at all to what transpires concerning AIDS. Naturally, I claim that, indeed, they do so; however, the degree of generalizability of this study can be questioned from that angle of approach.

What resurfaces in a discussion on the value of single-case studies is the familiar positivist insistence on larger numbers and on the search for empirical invariance independent, of context. Single cases become useless from such a perspective and, thus, cannot contribute to the cumulative search for “truth.” As has already been stated several times. this ideal may be especially misplaced in social and political studies, where contextual knowledge is of substantial value and use (cf. Flyvbjerg 1993: chap. 8). From the metatheoretical discussion above—regarding awareness of political context and a critical posture aiming for action—cases

appear to be suitable: that is, the richness of description offered by a detailed case study generates exactly the nuanced understanding such an epistemology seeks.

It is true, however, that when the extent to which a phenomenon occurs—as, for instance, the extent to which sovereignty-based practices have receded and been replaced by more participatory processes—several case studies would increase the ability to judge. Although a single case can give a false impression—if it turns out to be a “deviant” case—but the general trend toward more inclusive processes involving a broad range of actors is not what is to be verified or falsified. Rather, the trend of globalization has already been suggested and empirically demonstrated in a number of studies and, thus, serves as the point of departure for the study. The primary objective here is to see how this process can be understood from various vantage points—hence, a detailed analysis is needed. Such an analysis is only possible for one case, given the space and time available. Of course, a single-case study cannot say, with confidence, very much beyond the actual case. But because the level of interdependence between actors is so large and the creation of cooperative structures ranging from the global to the local is so necessary, AIDS typifies globalization and, thus, can be seen as a “paradigmatic case”—one that serves as a metaphor or pattern-case for this broader class of problems (Flyvbjerg 1993: 150). Moreover, the range of interdependence issues in global politics is overwhelming, further increasing the relevance of the case.

The other standard question in scholarly work concerns reliability. That is, would any other scholar come to the same conclusions going down the same road? Reliability—understood as the possibility of replication—is dependent on a static environment. But this is never the case, and, hence, replication is to some extent a nonissue.

Both validity and reliability, conventionally understood, assume the existence of a stable reality that is possible to be experienced directly. In the absence of such an environment, the judgment of coherence and plausibility of the argument has to be grounded differently. The important methodological element is the awareness of the researcher regarding the character of social sci-

ence, the reflections and interpretations of a wide variety of data, rather than the technical capacity to manipulate empirical data according to models set out in the sacred texts of methods (cf. Alvesson & Sköldbberg 1994: 369). An important source for judging the plausibility of interpretations and conclusions presented in scholarly work of this kind is the consideration of the materials used as the basis for analysis.

Materials and Sources

A multitheoretical approach demands the use of a wide variety of sources. Yin (1984: 78) discusses six different types of data that can be used in a research enterprise. These six, moreover, can be conceived as falling essentially into three general categories: written sources, interviews, and participation. Written materials in the form of documents, letters, memoranda, notes from events, journalistic reports, and other reflections both by participants and by observers as well as archival records in the form of official documents and negotiated agreements exist in abundance at the UN, as do organizational charts, budgets, and the like. And the documentation reaches far back in time. In many instances, these records can now be accessed via the Internet—otherwise, at UN depositories and at the headquarters of UN agencies. The problem in this regard concerns the NGOs, whose ways of doing business normally do not require the same degree of documentation. This study makes extensive use of accessible written sources.

As a necessary complement that adds nuance and depth to official printed materials, interviews with staff form a substantial basis for analysis. Interviews are important in at least two major respects. The obvious one is that interviews reveal aspects not mentioned in protocols, making it possible to trace a process and, thus, to see conflict lines and problems that may have been “masked over” because of the more rigid formats of official documents. That is, documents only show a picture of apparent consensus, an “after the process” version. Interviews can fill in and add “politics” to texts. This is important in relation to both IGOs and NGOs, be it for slightly different reasons. NGO files are often

poor and incomplete and, therefore, unreliable; speaking with people directly can help. For IGOs, the main reason for interviews is the widespread presumptions of a certain sensitivity surrounding official affairs of governments. Interviews with staff, to the extent that those staff members dare reveal certain aspects of what they know, may be a means to break through some of the red tape, so to speak.

Anonymity, although problematic from a scholarly perspective since it opens up a possibility for fraud and fabrication, is helpful in this respect. A list of interviews conducted is included among my references. No direct citations from interviews have been attempted. Moreover, in instances where concrete data have been obtained in the interview situation *as well as* in official written form, the latter has been referred to. In general, as few direct links between interviewees and data as possible have been delineated in the text.

A sometimes-neglected side effect of interviews involves the ability to get access to documents not intended for public consumption. All organizations, especially complex bureaucracies, leave a trail of paperwork, as drafts and working papers are circulated to various departments for comment and approval. During the interview, the researcher and the interviewee have the opportunity to develop a more personal relationship, and residue of this drafting process can be obtained. Disclosure of this kind of material often necessitates a series of interviews—trust takes time to establish—but it is well worthwhile. Of course, as with the anonymity of interviewees, abstention from citing these documents must be respected.

Multiple interviews with key participants have been used in this study for the purpose of establishing such a trust. But another reason is that interviewees have been selected using a snowball method: that is, each person was asked to identify other persons to interview. A last step in the use of this method has been to confront some of the interviewees with the final product and allow for feedback and commentary—on the interviews themselves but also on the theoretical frameworks used for interpretation. This procedure has proved quite valuable and should serve to increase both validity and reliability.

Both written materials and interviews tend to present the process in positive light from the perspective of the interviewee. Interviews with many different persons to some extent help remedy that problem, but another method has been employed as well: observation at meetings and conferences. The possibility to observe what happens at meetings increases understanding immensely, giving the researcher an invaluable “feel for the subject.” Without a firsthand experience of interaction and of actual bargaining and negotiation, interpretation is, if not impossible, at least extremely difficult. For instance, such factors as dress codes and other differences in appearance—important elements of discourse analysis—are completely lost both in written materials and in interviews. Other examples include the demonstrations staged by activists during conferences, aimed at alerting both other participants and the media. The effects this practice has on the entire atmosphere at the meetings can only be experienced firsthand. A list of conferences and meetings attended by this author is included in the references.

With the realization that data are always already infused with value as well as interpreted once or twice by others, and then by the researcher her- or himself as written material and interviews, one begins to get a sense of the enormous difficulty one undertakes when attempting to piece together a chain of events. Comparing different sources frequently reveals contradiction and conflict as to the “proper” meaning of data. Assessing the relative strength of various elements requires a continuous confrontation between different sources and a process of exchange between the different persons involved.

The methods used here—and I now refer back to the critical-theory discussion above—is a continuous confrontation of my interpretations with those of others, including those who come to the problem from differing perspectives. This particular study has grown out of a larger research enterprise on international responses to the HIV/AIDS epidemic in which I participated. That project involved four scholars, and the discussion and debate within the project team naturally provided added depth to the analysis. Moreover, interviews and participation have been conducted individually with the ensuing possibility of sharing results

and data—and as a group as well. The present study draws on that project work, and I myself have benefited enormously from the continuous exchange with the researchers.

The approach followed here is neither radical nor new. In all important respects, it reflects the “evolving research strategy” of one pathbreaking scholar of global politics, Chadwick Alger. Twenty years after his essay (1976) was published, the four concerns Alger identified as particularly salient are still pertinent. Alger wanted researchers to break away from the nation-state as the unit of analysis, to engage scholars from other societies in dialogue, to use observation as a data-gathering methodology, and to connect more effectively with their own communities. At least two of Alger’s admonitions are considered here—breaking away from the nation-state and using observation as method—and perhaps even a third, to the extent that Americans can be said to be from a different society than I.

This concludes the first, essentially theoretical, part of the presentation. A postsovereignty ontology has been established, referred to as global governance, and an epistemological position has been declared, moving beyond positivism. Lastly, the three frameworks of this study have been summarily presented following an agency-structure logic. The next three chapters include analytical cuts into the global governance of AIDS. First follows the Gramscian approach honing in on competing discourses.

Chapter Four

Gramsci, and Competing Discourses

Can sovereignty-based ideas and practices maintain their hold relative to ideas emphasizing alliances and partnerships comprised of a wide variety of social forces engaged in joint policy endeavors? A Gramscian perspective highlights tensions and forces constituted as systems of thought enabling and preventing activities in which people are engaged and that they use to make sense of the world around them. In the currently dominating discourse states are real and, also, more important than any other type of actor.

A Gramscian Perspective

A discursive conceptualization of global governance has gained increased prominence during the last ten to fifteen years, and it takes its starting point in the writings of Antonio Gramsci. The key concept in Gramsci's thinking is that of hegemony, and the central dimension of hegemony highlighted by Gramsci is of a system of thought—a discourse—shaping and constraining people's perceptions of what is possible and legitimate. Gramsci emphasized the noncoercive side of power and analyzed how dominating groups governed through a clever manipulation of ideas— influencing both the categories and the very manner of thinking of the oppressed. Status quo, hence, was seen as perfectly natural—and even necessary. During hegemonic times, argued Gramsci, revolt never even enters practical consciousness.

Gramsci wrote during the 1920s and 1930s in Italy, and his work almost exclusively deals with Italian politics under Fascist rule. So, it remains an open question whether Gramsci himself

would have felt comfortable with the contemporary theory of IR labeled “Gramscian,” as outlined in the following. The development of the concepts and subsequent application to IR has taken Gramsci’s writings as a starting point and, based on them, developed a framework for analyzing current political events. A relevant question that has to be raised in this context was posed by Gramsci himself: “How is it possible to represent the world with a mode of thought that was elaborated for other quite separate times, a past often remote and superseded?” Thus, Gramsci was well aware of this difficulty. His opinion of social science necessarily involved the criticism of past theories, and his view of those who uncritically appropriated theories of the past was not lenient. He argued that those who did so were fossils, “anachronist[s] and not living in the modern world” (Gramsci 1971: 324). A principal task here is to develop theory appropriate for this particular study.

As a consequence of the lack of concrete theory, what has followed in Gramsci’s footsteps has been necessarily impressionistic. Indeed, as suggested above, it might not even be Gramscian, *per se*. Anyhow, the task here is not to find “The Gramscian Theory.” The endeavor, rather, involves creating a sort of prototypical Gramscian framework, building on the thinking of Gramsci as left behind in his written works as well as on elaborations attempted by others.

The applications of Gramsci to current international relations phenomena, hitherto undertaken, have first and foremost employed international political economy as their basic ontological entity. In this way, for instance, did Stephen Gill and David Law (1989) theorize and explain global political economy, in their book of the same name; Craig Murphy (1994) tried to explain how international organizations have shaped the ways in which “liberal internationalism” has come to dominate discourse and practice in the twentieth century; and Robert Cox (1987), in his research program, has focused on world orders in the late capitalist era. A slightly different body of literature, more explicitly targeting NGOs, relates to the Gramscian notion of civil society and is associated with scholars like David Korten (e.g. 1990), Ronnie Lipschutz (e.g. 1992), and Paul Wapner (1996). It is also to these

two bodies of literature that the present study owes most in terms of the groundwork for a Gramscian framework.

Judging from studies departing in terms of Gramsci's writings, it would seem that the problematic proper of a Gramscian approach to global governance would be concerned with medium- to long-term historical developments. Neither Cox's, Murphy's, nor Gill's ambition concerns the elaboration of theory directly applicable to the fairly concrete issue analyzed here. All three are predominantly associated with the much broader issues of international political economy and world orders. In Braudel's words, they are engaged in explaining the *long durée* of historical development, the second plane of Braudel's historical method: the history of "periods, phases, episodes or cycles." It is an account without "superfluous detail" (Braudel 1994: 34). Thus, the focus of this study—processes where actors try to change or maintain patterns of interaction and thought guiding governance of AIDS—appears to be hard to grasp with such a body of theory.

A focus on the long-term historical development implies that more discrete events fall outside the purview of the analysis. It means an emphasis on the processes leading up to the current situation and the ways in which past activities limit the options for current actors. A Gramscian approach would inquire into which general forces are at play, influencing not only AIDS but global governance of such issues in general.

Hegemony and Historical Structures

The logic introduced above, where the frameworks were presented summarily according their positions on actors, structures, and processes, will now guide the elaboration. First, a discussion of the structural component will follow.

The basis for explanation is that of *historical structures*, enabling and constraining activity and thought. These structures are not to be understood as givens, as preexisting entities outside time and space. As discussed in chapter 2, structures are remnants of past human activities in the legal, political, economic, and social spheres. The analyst, then, needs to "discern the structures that

give a framework for action and that form the actors” (Cox 1987: 395). Important in this regard is to note that these structures are both of a material and of an ideational character. Particular ways of acting are dominant, as are prescribed ways of thinking. A guiding question is of who is privileged and perceived as natural holders of power and influence, as well as of who controls resources and directs their allocation. Of central concern is whether the configuration of power these patterns constitute is stable and uncontested and if the current order is perceived as legitimate and natural.

In this study, hegemony needs to be confronted on two planes. On the one hand, there is the hegemony of international cooperation along Westphalian lines—holding state actors in higher regard than nonstate actors. On the other hand, there is the hegemony of health cooperation chiefly along public-health conceptualizations, with the ensuing disregard of other aspects of health, such as those involving human-rights violations or poverty. Both aspects of hegemony are important for the global governance of AIDS.

Hegemonic Orders

Some social orders may be characterized as *hegemonic*, the most central concept in this perspective. Structures covering various spheres of human activity—political, social, economic, cultural, etc.—may correspond to each other to varying degrees. A situation with harmony between structural elements of a given society, a nice fit between the different structures, Gramsci called a hegemonic situation. *Hegemony*, then, implies that all structures of governance lean toward the same ends, pull in the same direction. Hegemony is “the key concept in understanding the very unity existing in a concrete social formation” (Laclau & Mouffe 1985: 7).

Intergovernmentalism as hegemony implies such a reinforcing relation between ideas of good governance and multilateral practice. The extent to which marginalized groups also perceive multilateralism as inevitable and appropriate is an indicator of hegemony. Global governance of health can be understood as a field of

competing ways of conceptualizing good health work and the ways in which these ideas are carried out practically.

Hegemonic times are characterized by harmony between the material and technological base, on the one hand, and the ideological and cultural superstructure, on the other. Important to note in this regard is that Gramsci differs from many Marxist understandings of base and superstructure. Ideas and culture are not simply perceived as derivatives of the material condition but have a material dimension in their own right and assume an independent function in the evolution of history: they are not simply reflections of a particular mode of production. Gramsci's emphasis of both ideas and shifts in ideas warrants attention. Whereas the concept of hegemony has been used by scholars from differing traditions, the explicit focus on ideas, as influential in their own right, has frequently been neglected in studies of global governance.

A celebrated approach to the study of international cooperation has been to explore the possibilities of continued international cooperation in the absence of hegemony. The proponents of this approach typically have a restrictive material understanding of hegemony, focusing mainly on economic or military capacity to induce cooperative behavior from recalcitrant states. An essential argument in this tradition is the necessity of a benevolent hegemon, bearing transaction costs and maintaining a modicum of order among the otherwise defecting participants. The actor on which this model has been modeled, the United States, allegedly no longer has the economic strength to carry out these functions, and multilateral cooperation will therefore flounder. The scholar most commonly referred to in this tradition is probably Robert Keohane (1984).

Little, if anything, connects the two usages of the term. The inclusion of ideas in the analysis would have led to very different conclusions regarding hegemony, as it would have noted that a discourse such as free trade—embodied, for instance, in GATT and the World Trade Organization (WTO)—adds more to understanding the current global economic order than a single state's ability to manipulate incentive structures. Likewise, ideas underlying AIDS prevention and control programs, emanating from ide-

ologies for public-health protection and promotion, are just as important to include in an analysis of AIDS governance as are who has control over needed resources for global health programs. A Gramscian approach makes the independent influence of ideas a necessary component of the analysis. Subsequent elaborations of Gramsci's concept of hegemony have to a large degree focused on this discursive dimension and will be treated below.

Competing Discourses

In Gramsci's thought, then, the leading elites' ability to govern hinges to a great extent on their ability to gain "common acceptance of a consensual normative order that binds ruler and ruled and legitimates power" (Ikenberry & Kupchan 1990: 283). This kind of integration is maintained through ideas, or by way of establishing a certain discourse. If the discourse is accepted by actors, it produces the desired behaviors and thoughts (Keeley 1990). *Discourse* can be understood as a systematic set of relations between objects and meanings, socially constructed (Billing & Stigendal 1994: 142–152). In the constant process of historical change, discourses arrest the development and fix meanings for longer or shorter periods of time.

Discourse should be understood as systematic sets of meanings associated with subjects. Nevertheless, the limits of a discourse are never absolutely fixed; they are in constant flux. Moreover, the transformation of free-floating elements, not yet carrying a specific connotation, into "moments" with a fixed meaning can never be complete (Laclau & Mouffe 1985: 106–107). Although discourse theories have grown out of linguistics, they are not concerned with language only. These so-called moments are also other types of signs: they may be practices, ways of dressing, fashion, hairstyle, music, art, etc., as well. Discourses, thus, are much more than merely groupings of signs. For Laclau and Mouffe, discourses also *form* subjects. Since subjects are constituted through discourse, discourse, hence, can be understood as establishing identity. One can say that, through discourse, it is established what exists and what does not—who we are, what nature, society, men, and

women are, and so forth. Furthermore, discourses establish what is good, fair, and desirable. And, finally, discursive formations establish what is possible and what is not possible as well as people's perceptions of the very nature of history, of change and its consequences, of their aspirations and fears, of the very existence of people as people.

In the present context, particular ways of dressing— for instance, a suit and tie—and a particular diplomatic language establish a person as a civil servant working for a governmental agency, whereas, say, a white coat and a stethoscope would imply a medical identity. Language as used in written documents and appearances at meetings and conferences will be taken as evidence of discursive power.

Moving Beyond Structuralism

A problem inherent in discourse theories is a risk of reducing *everything* to discourse. Human behavior becomes an endless repetition of discursively given practices, and the very existence of subjects is only visible through their enactment of discursive practices. In order to avoid this fallacy of structuralism, and open up the possibility for real change, the assumption of a fully fixed system of meaning has to be discarded. In the words of Laclau and Mouffe (1985: 106–107), “no discursive formation is a sutured totality and the transformation of the elements into moments is never complete.” The opposite is also impossible: in order to be able to establish identity through discourse, there has to be *a* meaning, a partial fixity. Every discourse, in fact, is an effort to dominate the field of discourses, establish fixity, and, hence, instill among people a particular set of meanings and relations.

In addition to structuralism, the prior assignment of economic structures over other forms will have to be discarded as well. Since Gramsci was writing from a basically Marxist orientation, the concept of hegemony is frequently tied with a tendency to view economic structures as prior to, and thus as that which enables, any other structure. For Marx, the capitalist economic system gave rise to classes, and the struggle between the classes was seen

as the fundamental driving force in the evolution of history. In essence, identities other than class were perceived as either derivatives of class or simply false.

If a discursive element in an analysis cures the problem of how to treat ideas and culture as material forces in their own right, there is still the problem of how to relate various discursive formations to each other. In one sense, this leaves us with two choices: either we stick to the problematic designation of the economy as ontologically given, or we relax that assumption and use the concept of hegemony as “the formation of a common struggle by a plurality of social movements against a system of domination that the groups face in common” (Westlind 1996: 78). If the a priori designation of the economy as fundamental disappears, the class as fundamental actor, the only actor with a real possibility of changing society, also vanishes. One cannot claim beforehand that the struggle over the economy is paramount to struggles over other issues. This is an important step for this study, as NGOs, social movements, and, indeed, secretariats of IGOs cannot be explained readily from economist logic.

Hegemony is the result of the presence of a “historic bloc.” In coherent, unified orders—during times of hegemony—social forces combine to produce a widely accepted and adhered to method of carrying out governance. The historic bloc, then, embodies institutions that stabilize the particular social order and is able to rule both by discourse legitimizing that order and its hegemonic leadership and by the control over material and organizational capabilities. The historic bloc is thus to be conceived of as an implicit alliance between the different social forces privileged by the current order. The self-reinforcing nature of hegemony—the current order is seen as legitimate and desirable—makes coordination and planning superfluous. Hegemony, hence, is not dependent on “a hegemon” steering and manipulating others. Instead, most of societal institutions pull in the same direction, and the suppressed groups as well see little hope for alternative orders, ideas, or practices. A tight kernel administering hegemony is nevertheless identifiable, embodying the very core of the historic bloc. This leads over to the actor dimension of this perspective.

States and Civil Societies

For Gramsci, control of the state was the goal of competing social forces in the country. In this regard, an important distinction is made between the *state proper* and the *state in a more organic sense*. The state proper is the state as coercive and administrative apparatus in a very restrictive sense. Gramsci, however, argued that, alongside these coercive institutions, other essentially non-coercive institutions worked to reinforce the politics of the state proper. These other forces operate in the realm of what Gramsci calls *civil society*—the realm of voluntary associations, churches, trade unions, and other collective institutions. During hegemonic eras, the historic bloc not only controlled the state proper but had managed to instill in the people, through the use of ideological apparatuses such as education and church, a sense of legitimacy. The state, thus, not only acts as “the practical and theoretical activities with which the ruling class justifies and maintains its dominance, but manages to win the active consent of those over whom it rules” (Gramsci 1971: 244). The state actively tries to establish and distill consensus. A Gramscian analysis, then, would have to treat the state in a wide sense, including more than merely the government, the state bureaucracies, and the coercive apparatuses. “To be meaningful, the notion of the state would also have to include the underpinnings of the political structure in civil society” (Cox 1993: 51). In his thinking, a hegemonic world order would have to be expressed in universalistic terms, that is

not [as] an order which directly exploits others but an order which most other states (or at least those within reach of the hegemony) could find compatible with their interests. Such an order would hardly be conceived in interstate terms alone, for this would likely bring to the fore opposition of state interests. It would most likely give prominence to opportunities for the forces of civil society to operate on the world scale (Cox 1993: 61).

Understanding global hegemony involves exploring the tasks of hegemonic regulation, the ever more encompassing means of control reaching larger number of individuals, and the sites of regulation covering larger areas of the world commanded by the dominating blocs of power (cf. Murphy 1994: 42). A question in this regard is whether the existence of more participatory mechanisms for global governance of AIDS is a sign of a felt need to penetrate more fully civil society organizations in order to use them as tools for a more efficient legitimation process. Those controlling the intergovernmental hegemony are using NGOs as vehicles for maintaining the status quo and may feel able to grant some symbolic access and participation in the process. Simultaneously, by virtue of the relative openness in every situation and contradictions in the present order, elements of civil society may be engaged in activities challenging hegemony

Civil society on a global scale, then, is made up of all those entities outside the purview of state organizations and organizations controlled by governments. As easily noted in the citation, multilateralism as a dominating organizing principle would have to include opportunities for NGOs to participate as well as provide some benefits for NGOs of cooperation with IGOs. *The Global AIDS Strategy*, conceived as a hegemonic order of AIDS prevention and control, was indeed presented as a strategy for everyone interested in efficient AIDS prevention and control. Moreover, GPA provided support to cooperating NGOs not only in the form of modest financial resources, but also through their inclusion on various boards and committees.

It is worth noting that a common problem with much of the “civil society” literature in IR scholarship is that it tends to view civil society as somehow existing parallel to states, and not, as in Gramsci’s understanding, as a sphere penetrated by states. Civil society sometimes is equated with an untainted sphere of human activity, without the corruption of the state and the greed and ruthlessness of the economic sector (Korten 1991). In addition to reifying “civil society,” such an understanding hardly appreciates the variation of values, interests, and desires within this sphere.

In the field of IR, the notion of a dual system heralded by James Rosenau comes easily to mind in this context. His

“bifurcated system” of international politics resembles a civil society coexisting with a state system. A sphere of voluntary association not following a sovereignty logic, a multicentric world lacking an overall design—derived from multiple sources and marked by uncertainty (Rosenau 1990: 244)—competes for legitimacy and dominance with the state-centered world. Notable, however, is a weakness in Rosenau’s theorizing. As soon as this multicentric world of organizations, movements, churches, business groups, and individuals is to be more systematically treated, it appears as if the only thing they have in common is their belonging to some world other than the state-centric one—they are “nonstate.” A similar shortcoming can be found in Lipschutz, for whom civil society is constituted by large-scale resistances to the current dominating discursive formation of intergovernmentalism (cf. Lipschutz 1992: 399). Both fail to see the basis for resistance. How are these resistances constituted? What binds a counterhegemonic movement together? The constitution of counterhegemonic identities and the loyalties of various resisting groups, it will be argued here, are constituted by other discursive formations that also compete with each other.

Processes of Articulation

So far, the Gramscian framework has been presented as a field of discursive formations constituting states and civil societies competing for hegemony. But how are these discourses created? From where do they come?

It is one thing to claim that the ruling elites exercise control over the majority of the people through their control of the organic state, that is, including those elements of civil society working to stabilize and legitimize the current order. Quite another is to show how, with what means, through what media, and from which places this hegemonic control is enacted (cf. Murphy 1994).

One element of this analysis has already been touched on and concerns the fact that hegemons govern both through *coercive means* and through *consensual means*. Here, Gramsci has borrowed from another Italian philosopher, Niccolò Machiavelli, the

notion of power as a centaur—half beast and half human. The first type of power is akin to the familiar realist understanding of power based on superior strength and control over crucial resources—brute force and the ability to change material capabilities would be the corresponding power strategies.

For both Machiavelli and Gramsci, power operates in a more subtle way, too—on the level of ideas and culture. Brute force alone is a very cumbersome way of ruling a society—a very resource-demanding way. This holds true particularly for governing globally. Instead, the ruling elites base their rule mainly on consensus. Individuals are socialized to internalize the expectations of the dominant groups and consequently to perceive the current order as legitimate, even desirable. In Cox's words, hegemons try to establish an order

based ideologically on a broad measure of consent, functioning according to general principles that in fact ensure the continuing supremacy of the leading state or states and leading social classes, but at the same time offer some measure or prospect for satisfaction to the less powerful (Cox 1987: 7).

Those who control the state apparatuses, pose as able to transform the entire world society, assimilating everyone to the same level of economy and culture. There is no need to show one's own strengths, since people do not question either the goals or the means to reach those goals.

How is this socialization process managed, and the continued hegemony, maintained? It is in this context international organizations become relevant. Cox can see international organizations expressing hegemony in several ways (Cox 1993: 62–63): they embody the rules; they are themselves products; they legitimate ideologically; they co-opt the elites; and they absorb counterhegemonic ideas.

In international organizations, participants may be engaged in dialogue aimed at the reconciliation of opposing views with the ultimate goal of reaching a working agreement on policies and

programs. International organizations, in this vein, would be complements to more coercive means and a place where consensus, and subsequently hegemony, can be established on a global level. Furthermore, cooperation within international organizations could be seen as efforts by the hegemonic actors to help faltering groups, be they state elites or nongovernmental groups, to maintain their legitimacy vis-à-vis their constituencies—groups forming necessary partners for the continuation, or establishment, of global hegemony (Murphy 1994: 214–218). Cooptation, in this light, is an important strategy for those in power.

The opposite perspective is also possible, though. Hegemonic systems are never fully closed, as discussed above in relation to structuralism. In addition to relatively well established and partially fixed systems of meaning, the discursive field contains free-floating elements without exact discursive meaning. The term used by Laclau and Mouffe (1985: 105–114) for the mechanism that establishes the relation between a sign and an object is that of *articulation*. Articulation involves fixing a meaning to elements, transforming them into moments. This articulatory practice forms the basis of Laclau and Mouffe's social theory and will be used in the following analysis. Once engaged in dialogue, critics have overcome one obstacle to the formation of potent counterhegemonic alliances, as people in important positions within the historic bloc can be reached by critical voices. This way, ever more encompassing alliances can be formed.

Once critics are inside, however, the very participation itself could exert considerable pressures for adaptation to norms of appropriateness, pressures possibly difficult to withstand. "Hegemony is like a pillow: it absorbs blows and sooner the would-be assailant will find it comfortable to rest upon" (Cox 1993: 63). Insiders face a real risk of becoming instituted either as organic intellectuals or as hostages of the ruling elites. In any event, the status of those on the inside runs a risk of changing in the eyes of those actors still on the outside, undermining their legitimacy and credibility as forces for change.

To be sure, counterhegemonic movements and resistances to some extent are always present. Even during situations of hegemony, relations are never fully fixed or constituted as a closed sys-

tem; openings that allow for the articulation of counterhegemonic ideas are always present. Every given situation, then, is penetrated by contradictions and ruptures, even though the space available for articulation of alternative developments is sometimes very limited. Resistances always exist, but “hegemony is enough to ensure conformity of behavior in most people most of the time” (Cox 1993: 51).

Counterhegemonic activity is relatively easier during periods of social, economic or political unrest. When no historic bloc is able to establish hegemony, points of antagonism and conflict may proliferate. This signifies that people no longer believe in what they used to believe. In complex social situations, antagonisms can be formulated focusing on a high number of issues. A question from this perspective, hence, is whether the AIDS epidemic has created tensions and made visible contradictions conducive to change?

Summary of the Competing Discourses Framework

By way of summing up the theoretical elaborations of a Gramscian approach, the central feature of this perspective is a hegemonic struggle over discourse. Discourse frames thought and thereby guides action. Through discursive formations, actors’ perceptions of the possible are formed. Discourses are sets of established relations and meanings between objects and signs, which can be language, styles of dress, music, art, etc. Any discourse is an effort to arrest the development of history and instill a particular order in society—an order, moreover, that works to the advantage of some and serves certain purposes.

When discursive formations are framed in universalistic terms and people perceive that order as legitimate, it is called hegemonic. Hegemony is maintained by a historic bloc, comprised of the actors necessary for the maintenance of hegemony. Although hegemony appears solid, resistances are always present, since permanent and total closure of discursive formations is impossible. Contradiction and conflict are inevitable features of any social system. In order to maintain hegemony, control over coercive apparatuses must be complemented by the use of consensual

strategies. Institutions based in civil society—the world of voluntary associations, NGOs, and social movements, but also of church, school, and the media—underpin the state proper; coercive functions are complemented by general acceptance of that current as inevitable and desirable.

A universalistic, hegemonic order has to provide a modicum of satisfaction to those groups in society that are vital for its maintenance. As participants, counterhegemonic forces may form alliances with important groups in the historic bloc and lead the system into crises and radical change, or, alternatively, the historic bloc may be able to restore hegemony. The potential of counterhegemonic alliances depends on their ability to articulate in concordance with other groupings. Now, let us see how global governance of AIDS appears from this perspective.

Chapter Five

AIDS through the Discursive Lens

The first task here is to map the discursive field as it was before AIDS, with the guiding task being to lay bare the structures and deconstruct the discourses governing action and thought. The virus responsible for AIDS—HIV—has been around for much longer than knowledge about its existence. AIDS is a very specific disease, but the virus HIV has in addition spawned many complicated subepidemics. A host of political, social and political ideas and practices has arisen in the wake of the spread of HIV. AIDS, stated differently, means different things to different people. Several competing discursive formations have been, and continue to be, articulated around HIV/AIDS, creating very different understandings of the pandemic as well as of what to do about it.

These different discourses establish different priorities, privilege some actors over others and prescribe highly divergent courses of action to cope with the virus and its derivative epidemics. Furthermore, each discourse refers to broad forms of power relations that have deep and disputed meanings. HIV/AIDS has revealed the complex of attitudes, values, feelings, prejudices, and myths historically so prevalent in conjunction with epidemics, but so forgotten in our times of alleged mastery of nature and disease by means of science and organization. The scapegoating, repression, isolation, and segregation associated with previous outbreaks of epidemics have also characterized societal responses to HIV/AIDS (Johannisson 1990: 198–199). Regardless of which discursive formation is offered for understanding AIDS, it “is laden with historical references and assumptions which relate our lived experience to particular historical institutions,” writes Cindy Patton (1990: 2). What were the relevant discursive formations governing the field of global health at the time of AIDS discovery,

and how were these configured? Which social forces were privileged and how did these manage to control dissenting groups? When AIDS gradually came to be perceived as a problem of some proportions and became the focus of activity for different actors, the discursive field of health governance was already well established.

A Hegemonic Intergovernmental Public-Health Order

Regardless of whether health is understood as medicine, as development, or as human rights, different power and status are bestowed on actors depending on their association with states and governments or communities and people. Forging partnerships between IGOs and NGOs in the health area has been, and continues to be, confounded by the competing understandings of the meaning and the challenge of disease.

The challenge for policymakers is complex and involves both the articulation of a dominant definition of the problem—medicine, human rights, development, or something else—and to identification of those groups that are crucial for the continued hegemony of this discourse and to find efficient methods of socialization to establish that order as hegemonic.

At the time of AIDS, the international health regime was situated somewhere at the intersection of three formations. The major donor governments, the United States, Japan, and West-European states tend to identify with medicine, which has pushed practice in that direction. The relative preponderance of health-as-medicine has been secured through staffing policies of the major health organization, WHO. Lack of resources makes any attempt at seriously tackling the root causes of poor health a futile task. Moreover, concerns for human rights surface in numerous recommendations and guidelines. The implications of serious advocacy would risk aggravating many governments, including the U.S., preventing serious attempts at this, since public-health measures sometimes infringe on human rights and the right to adequate health care still is poorly guaranteed in many places, including the United States.

The means for establishing any hegemony, as discussed above, may be both coercive and consensual and also provide a modicum of satisfaction also for those groups that end up underserved or suppressed. NGOs have been given the opportunity to participate in the work of WHO by way of their Official Relations status. So far, 181 have been granted accreditation, but, here also, the main groups are medical in orientation. Some development NGOs are included, however, as are women's organizations and family-planning associations (WHO 1996). A focus on primary-health-care centers, furthermore, has given legitimacy to development organizations at the local level. All in all, the dominant mode of operation is governmental and intergovernmental: health authorities within states organized under governmental health ministries that cooperate in intergovernmental health organizations are those that dominate policy.

Each discursive formation provides part of the institutional backdrop for articulation in the AIDS case, and together they form the field of discourses with its ensuing power configurations. Articulation of HIV/AIDS followed preexisting discursive formations, as we shall see. First, however, I will discuss each formation.

Health-as-Medicine

Health-as-medicine centers on the body and understands health as absence of disease or infirmity. The global character of health and epidemic disease is an issue of long standing for various groups. Disease does not carry a passport, and cooperation for health is a practice dating back to the first International Sanitary Conference in July 1851 (Siddiqi 1995: 14-20). The meeting, the first in a series of eleven, had its origins in the increasing trade and travel as a result of technical and social innovations in the wake of the industrial revolution. Impotent efforts had been made at stopping violent cholera epidemics overrunning Europe in 1830 and again in 1847. Popular demand for stricter rules of quarantine had ensued. Tremendous growth in trade had, however, made quarantine increasingly cumbersome to manage, and also expensive. The great maritime trading nations—predominantly Euro-

pean—had much to lose from the often indiscriminate use of isolation and quarantine of people and goods. Convening an international meeting was a solution found acceptable to the major stake-holders. No other resort was readily available but to embark upon a series of collaborative efforts aimed at curbing cholera and other epidemic diseases, such as plague and yellow fever. The decision to arrange an international meeting was also fashionable at the time, adding yet another element toward that direction.

Already at this early point in history, collisions were apparent between the discourses of medicine, on the one hand, and diplomats acting in the “national interest,” this time in the disguise of trade interests, on the other. All physicians were at one point even excluded, and a couple of conferences saw only diplomats as participants (Siddiqi 1995: 16). The major battle line concerned the policing of borders, as quarantine increasingly clashed with trade. At the same time, the efficiency of isolation of goods and people for longer or shorter periods of time was rendered dubious, as scientific progress discovered the real causes for many diseases, including cholera. “Not only were these measures of quarantine generally useless,” claims Neville Goodman, “but they were exasperating, obstructive, oppressive and often cruel to the point of barbarity” (Goodman 1971: 34). Quarantine was abused, and the burning of goods and ships, frequent; even executions occurred in overzealous efforts to prevent disease from entering a country.

Gradually, the theory of contagion inside borders was challenged by medical research into the real causes of epidemics. International cooperation took on new forms, based less on tracking and isolating allegedly infectious individuals or goods than on epidemiological surveillance and information dissemination. The setting-up of epidemic intelligence systems was an important task for health organizations, such as the League Health Organization from 1920 onwards.

Exchange of information and reporting, or rather facilitating the creation of logistics for such exchange between governments, continues to be the most favored activity within this discourse. Governments are the key players, aided by medical experts to the extent these same governments see justified. The institutional outgrowth in the IGO system of this approach is the World Health

Organization. Created in 1946, it supersedes previous health organizations, most notably those of the League and the Pan-American Health Organization (although the latter exercises considerable autonomy under the regionalized structure of WHO). WHO, like all other IGOs, “as a piper, has had to play the tunes which its political masters in the Assembly [have been] prepared to pay for” (Brockington 1975: 177). And in the Assembly, of course, governments rule.

Although the medical governance of health is dominated by governments, civil-society organizations have important functions within that order. With WHO’s emphasis on both treatment and research, people knowledgeable in these areas—who can perform these tasks—are necessary. Modern research certainly is an international endeavor, and it involves research exchange between research centers and at international conferences as well as peer review of results published in international journals. Both public research institutes, like the National Institute for Health in the United States, and private ones, like Institute Pasteur in France, uphold this formation. The logic of scientific research itself does not follow intergovernmentalism. Rather, validation of research results follows criteria laid down in the tradition of science. The use of the results, however, is left largely to the discretion of governments.

What is the basis of this formation? That is, what are the mechanisms by which the medical intergovernmental discourse is maintained? First of all, the vocabulary is a boundary-maintaining one. Scientific jargon is difficult to grasp without prior training. Vocabulary serves to shut out those who do not fully master scientific language. Harold Jacobson (1973) notes that the exclusiveness with which WHO has been operating has virtually allowed health to remain outside other issues as a separate domain controlled by the doctors. To the extent that outsiders have been allowed to participate, they have most commonly come from the medical profession, as the list of organizations in official relations with WHO reveals. Of the 181 NGOs currently affiliated, the vast majority—150—comes from the medical sphere (WHO 1996).

Furthermore, recruitment follows medical lines. The primary players are scientists and doctors. WHO's "staff is predominantly medical," according to Fraser Brockington (1975: 150). Also, Harold Jacobson found that the majority of those dominating WHO were medical doctors (1973: 195ff), including governmental representatives in the World Health Assembly. This facilitates a steady flow of resources from national governments, the main financial contributors to the organization, and constitutes a crucial part of the formation. Yet another indication of the medical profession's hold is the fact that every one of the directors-general has been a medical doctor (Gordenker 1994).

People willing to accept "patienthood" are a part of health-as-medicine discourse and a prerequisite for its workings. In the AIDS context, epidemiologists and public health authorities have used the categorization of people into "high-risk groups" and "the general population," in order to denote the epidemiological pattern associated with HIV infection. Moreover, there is a tendency to submit patients to the care offered at clinics and hospitals and to drugs manufactured by pharmaceutical companies without the active participation and informed requests of the sick, and to treat them as somehow incapable of taking care of themselves. The unequal relation between the care seeker and the expert characterizes the situation.

To sum up, the main elements of health-as-medicine are a focus on epidemiological surveillance and an exchange of biomedical research results. The primary groups are scientists and doctors, linked to government bodies that provide the necessary financial resources. The emphasis is on large clinics staffed by professionals trained in Western medicine. Civil society enters into this discourse mainly in the form of professional associations oriented toward medicine. Patients are normally seen as a package of symptoms and clinical manifestations rather than as informed and knowledgeable individuals. As will be evident below, the latent victimization of people infected with HIV and AIDS (PWA) early on triggered resentment and counterarticulation. In fact, AIDS may be the first disease to have its own organizations formed by the patients. Many in these groups rejected the unequal and patronizing relation between doctors and patients. Not much

was known about treatment, and no drugs had proven efficient. Health-as-medicine, hence, had difficulties accommodating and adapting to HIV/AIDS. Similarly, from within, front-line public health had started to connect poor results in public-health campaigns with the sometimes repressive methods used in efforts to prevent transmission of disease into society at large. Forced treatment and isolation, coupled with stigmatization and discrimination, frequently drove sick people away from authorities rather than encouraged seeking professional assistance. A link between health and human rights gradually emerged, which struck an important chord among PWAs.

Health-as-Human-Rights

Infringement of human rights is by no means a novelty in public health practice. Already in the beginning of international cooperation for health, physicians participated and provided scientific information used and abused in negotiations by public authorities. Public health as idea and practice essentially concerns protecting the health of societies against anything that may threaten it. As such, it runs a risk of pitting the interests and well-being of people infected or sick against those of the still uninfected. Quarantine obviously can be viewed in such a perspective, as the main rationale behind it indeed was that of making certain that nothing infectious entered a particular territory.

In spite of the obvious connection, health and human rights have rarely been explicitly linked (Mann et al. 1994: 7) and, as a discourse, such a link still leads a somewhat marginal existence. Although linking two powerful and modern concepts regarding the nature and foundation of human well-being, methods of work, vocabulary, and societal roles differ in health and law. Increasingly, however, health workers and human-rights advocates have realized the added value of each other's perspectives and have articulated a discourse that is important for the relationship between IGOs and NGOs regarding HIV/AIDS. One reason for this trend is the strong status of participation in the protection of human rights in all areas.

Already, the preamble to WHO's constitution invokes the notion of human rights, stating that "[t]he enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being." This connection is most obvious in relation to specific activities directly threatening a person's health: torture, cruel and degrading punishment, disappearances, and living under conditions where this happens to others, etc. History provides a long list of examples of practices that threaten mental and physical well-being.

Furthermore, the definition of health offered by WHO is extraordinarily broad and points toward an understanding of health, away from the pathology and biomedical absence of disease—toward "well-being." The definition implies that health work is about securing people's control over, and improving, their health—thus social and economic issues are brought under the health umbrella. Perhaps more directly relevant for the third discourse in this field, health-as-development, this also has implications for the health-as-human-rights discourse. Health here is seen as a prerequisite for the ability to take part in social and economic life. The right to health, then, needs to be understood broadly in terms of state responsibility to create opportunities for people to shape their lives in healthy ways, with ensuing implications for participation. Moreover, an ability to create conditions for health includes such issues as access to health-care facilities and ability to purchase drugs and medicine.

A brief look at medical history, especially regarding epidemics, quickly makes apparent the extent to which sickness has been associated with activities publicly deplored or said to reflect characteristics not part of societal mythology and fabrics. Sickness as punishment, sin, or deviance is a common theme in the history of disease (Johannison 1990; Sontag 1988) and has frequently triggered discrimination and/or neglect and marginalization. The "stigma model" (Plummer 1988: 24) conceptualizes epidemics in moral and political terms and explains their outbreaks mainly in terms of sin and evil, sometimes of race and gender. The solutions offered within this rhetoric are definitely questionable from the human-rights viewpoint and include such measures as discrimination and exclusion in order to protect the general population.

Enabling articulation of health-as-human-rights are first of all the themes and practices of public health, which regulate relations between the individual and public authorities. The public-health arsenal contains practices questionable from a human-rights viewpoint. Mandatory testing, detention of individuals, and isolation of infected persons are common in many communicable, contagious, and sexually transmitted disease programs, and figured prominently in AIDS control efforts too. Also, misuse of information obtained is widespread, as confidentiality is difficult to maintain in many situations.

The right to health is stated in the WHO constitution and in a number of paragraphs in human-rights documents. The Universal Declaration of Human Rights specifically mentions health in one paragraph (Article 25), where it is stated that it is a human right to enjoy a “standard of living adequate for the health and well-being of himself and of his family,” and the International Covenant on Economic, Social and Cultural Rights addresses states’ responsibilities in the area of health (Article 12). At the same time, public health programs sometimes infringe on other human rights. Whether a threat to society is present that justifies such measures, and whose security it is that is being threatened, are fundamentally political decisions—and questions at the heart of health-as-human-rights. Where to draw the fine line between repression and prevention may be easy enough in theory, but it is less clear in practice. Some guidance on appropriate measures can be found in the guidelines and recommendations issued both by the WHO and by the Council of Europe. The common theme in all of these recommendations is that human rights should be respected, since violating a person’s rights risks driving the problem underground, placing the very persons most important to reach outside the control and care proffered by health authorities. Personal freedom is seen as the most basic foundation for health in the discourse of health-as-human-rights.

It is quite clear that health-as-medicine is centered around medical doctors and scientists in public authorities and research institutions. It is less clear which are the main groups encompassed by health-as-human rights as well as for what these forces are able to generate support. The vocabulary used is based on le-

gal language and, hence, focuses on what can be deduced from legal documents of various sorts rather than what might be good medically or morally. The main groups encompassed by this discourse are new generations of public health doctors and human-rights groups. The activities aim at monitoring authorities, reporting on violations, and changing the law whenever conflicts arise between human-rights law and other legislation. As will be elaborated more fully later, AIDS-specific organizations in the United States and Western Europe connected AIDS, human rights, and gay rights, as they saw health authorities neglect the epidemic and attribute the causes to their sexual orientation.

Mainstream human-rights groups have had problems with the right to health—given that no one can guarantee perfect health and, hence, be held responsible for a person's ill health. The fact that the U.S. government has been reluctant to implement a right to health care, arguing that it leads to socialist medicine, may have dissuaded some lawyers and doctors from embracing the idea. The desire by WHO to “keep politics out of health,” (Siddiqi 1994) with subsequent hesitancy to strong advocacy, may also reflect this U.S. position. Nevertheless, guidelines on human-rights aspects of health programs are issued by WHO, advocating restrictive use of coercive measures. Also, the Council of Europe, notable for its human-rights work, has been highlighting risks for human rights violations in connection with health programs. Advocacy has remained somewhat weak, though, and health-as-human-rights only marginally challenges the main medical establishment in global health work.

In a global context, this unequal situation becomes even clearer—for instance, in the meeting between poverty-related disease and Western medicine. The processes of global medicine are also best characterized as patronizing. The expertise is firmly lodged in Western medicine, which further increases the financial ability to control the major institutional outcomes. Development-oriented activities form a main concern for WHO: aiding societies with vast health problems constitutes a chief task of the organization according to the publication *Health for All by the Year 2000*, the organization's main policy pronouncement.

Health-as-Development

As conditions allowing people to live healthy lives involve a wide range of issues associated with money and resources, health has clear connections to the development agenda. The ambition of health work, according to WHO, is to attain a “complete state of physical and mental well-being.” WHO, as IGO with a majority of its members being developing countries, also reflects this link between the two issues. Health as inextricably linked to, and an important goal of, social and economic politics constitutes a powerful discourse encompassing a vast set of actors.

The most coherent statement of health-as-development is the powerful doctrine, formulated at a joint UNICEF-WHO conference on Primary Health Care in Alma-Ata, U.S.S.R., in 1978, in the form of *Health for All by the Year 2000*. The document is extraordinarily broad in its ambition, attempting to cover a wide range of health-related activities (JC22/UNICEF-WHO/79.2). One of the primary objectives with immediate relevance for civil-society participation is the explicit designation of the primary-health center as the most important place for realizing the goal. Social and economic development looms large throughout the document, perhaps little surprising given the general upswing of “development” as a theme in global politics at the time of the conference. Regardless, assistance of developing countries creating the infrastructure for health remains an important element.

The main culprit behind ill health is ostensibly poverty. Resource scarcity, in terms of finances and knowledge, poor sanitary conditions, malnutrition or starvation, lack of clean water, etc., is a major obstacle on the road toward health for all. The building of national capacities and infrastructure is a priority (cf. Goodman 1971), and, in this context, the main instrument has been governmentally administered foreign assistance, both bilaterally and through intergovernmental bodies like WHO.

The main partners are national ministries of health and national development-assistance administrations. More often than not, securing national commitments for health has been hard won. The focus on primary health care, however, has opened up the possibility of circumventing national bureaucracies. In rural ar-

eas, where government control is less strict, NGOs have been able to establish health centers and clinics. Missionaries and other church-based groups have proven invaluable partners both for communities in need and for UN agencies. To create and sustain local capacity and commitment is seen as the key to health.

Integration of health and general development activities such as education and family planning has faltered considerably, however. Jacobson sees the reason for this in the inability of WHO staff to see beyond health considerations and balance them with other pressing concerns (1973: 203). WHO has favored a technical approach and has had an “obsession with mass-campaigns” (Brockington 1975: 178). The clashes between poverty-related disease and Western medicine has not always been easy to resolve. Doctors volunteering to work in developing countries continue to be trained mainly in Western universities and are geared toward clinics and hospitals, but they are often ill equipped to deal with the realities of health work in poor rural. Moreover, traditional medicine’s more holistic orientation, coupled with religious and mythological components, clashes with the rational and mono-causal explanations offered for ill health by modern medicine.

Summing up the discourses yields the following table:

Figure 2. Competing discourses

	Medicine	Human rights	Development
Keywords	Intelligence, standardization	Guidelines, regulations	Projects, tech-transfer, ODA
Activities	Research collaboration, Tech-transfer	Monitoring, Advocacy	Primary health care
Privileged group	Health authorities, doctors, Patients	Lawyers, Victims	Aid donors and recipients

As HIV/AIDS was discovered in the early 1980s, these three discourses dominated the field and set the parameters for subsequent efforts at claiming ownership of AIDS, creating space, and defining the meaning of the epidemic. In that sense, these discursive formations both enabled an understanding of the new phenomena and proffered meaningful activities in which to engage as a response. The forms global governance, and in that context partnerships between IGOs and civil society, would take as a result of this struggle will be elaborated in the next sections.

Recognition of AIDS

It is perhaps hardly surprising that communities, in moments of fear, seek familiar frames of explanation and fall back on well-established, and apparently logical, policies. AIDS was at first recognized as a medical problem of concern to patients, their doctors and public health authorities. Past success promises efficiency, and established patterns of meaning place responsibilities in particular centers of power and influence. As groups and communities started to wake up and experience the novel situation, however, discontent spread and contradictions in the prevailing order gradually were exploited by disadvantaged people. New frames of meaning were articulated among groups who were slowly noticing common interests where previously there had been none. Counterhegemonic ideas started to evolve that instead saw AIDS as a problem of stigmatization and discrimination. Public health authorities, then were seen as part of the problem, and community organizations soon developed trying to assist PWAs and lobby public authorities. Next follows an overview of the process thus set in motion. Important to note is the double movement—alternative modes of understanding AIDS as well as a move away from a focus on sovereignty-based actors.

In the early 1980s, epidemic disease was widely associated with past times. In the event that disease did break out, poverty and backwardness seemed necessary conditions for its spread; modern medicine had seen to that. As gay men fell ill in New York and California, the traditional response kicked in, and only

grudgingly did acceptance of the reality of the epidemic situation ensue, spreading from a few physicians and early activists (Shilts 1987). Well-established procedures are in place for communicating epidemiological data across the North American continent, where HIV/AIDS was first recognized, and globally. *The Morbidity and Mortality Weekly Reports*, issued by the Atlanta-based Centers for Disease Control (CDC), gather and disseminate medical information between physicians and biomedical researchers. Their activities have international importance, since CDCs status and epidemiological competence are readily accepted also outside the United States—for instance, at WHO in Geneva.

Before the CDC came to grant the phenomenon any serious consideration, activities had been undertaken to establish the presence of a “new” disease. “The disease was felt to be not only ‘strange,’ because of its singular clinical and epidemiological characteristics, but also ‘foreign,’ coming from strangers,” explains Mirkko Grmek (1990: 3). He describes a process whereby physicians treating homosexual men gradually began to discern the similarities in the patterns of sudden immunosuppression among previously healthy adults. In the course of the next months, the information from physicians mostly in California and New York was compiled and subsequently led to the establishment of a task force at the CDC. Still, however, the extent of the situation was hidden.

Many other diseases have provoked little resentment and anger with a medical discourse on behalf of the “patients.” AIDS, however, is different, in that people carrying HIV may lead perfectly healthy lives. AIDS will break out eventually, but in the meantime nothing indicates that a person is carrying a fatal infection. Among the earliest groups to become affected, homosexual men had already in the late 1960s and early 1970s begun to struggle for social acceptance and an end to discrimination. Injection drug users, the other main group of people with behavior increasing exposure to HIV, led an existence at the margins of most societies and did not, and still do not, have the same ability to articulate their concerns in concordance with other groups. The third major category of people with high risk are hemophiliacs and others who need large quantities of blood and blood products. He-

mophiliacs felt discriminated against as well, because authorities in the United States were thought to be downplaying the reality of the situation, seemingly more concerned with the profits of blood-products manufacturers than with the possibility that hemophiliacs were becoming infected with HIV through their medically examined blood transfusions. The victimization of the patient inherent in medical discourse and the sometimes repressive methods used by authorities in the name of public health were vehemently resisted by many, and alternatives began to be articulated by some, with the gay communities in New York and San Francisco at the forefront. At this time, however, their articulation did not reach out or appeal to other communities.

On the intergovernmental side, WHO certainly noted the incidence of the new disease. Responses followed the medical track, and a first meeting was arranged in 1985 by the CDC in Atlanta, where epidemiologists and biomedical researchers compared notes and coordinated a collective response. The challenge, of course, was to find a cure and a vaccine. Prior to WHO, however, another event connected with the AIDS situation deserves mentioning. As early as 1983, the Council of Europe, in a series of resolutions, cautioned against what it perceived as threats to the human rights of gay men in relation to the screening of blood donors, urging member governments to “confront and, as far as possible, resolve the wider ethical, social and medical issues raised by the screening of donors” (Council of Europe Res. 812). A series of resolutions warned against discrimination as well as cautioned against the use of unscreened blood and blood products. These early activities were also a result of gay activism. AIDS risked becoming a pretext for campaigns against homosexuals, warned the Council. According to the Dutch rapporteur J Voogd (Council of Europe Doc. 4755), the resolutions had been called for by several gay organizations, arguing for a study as early as 1981 (Council of Europe Res. 756)—which, hence, was well under way as AIDS awareness grew. AIDS-as-human-rights was thereby connected. While probably noted by WHO, the Council of Europe resolutions did not lead to immediate action, although the connection between health and human rights, as well as the safety of blood, is certainly an important issue for the organization. Gay rights and

human rights, however, are not always treated as identical—in fact, that very difference is the reason behind the resolutions. Thus, for instance, does the 1981 resolution against discrimination of homosexuals urge WHO to delete homosexuality from its *International Classification of Diseases*, where it figured under the rubric “sexual deviations and disorders.” Not until 1988 did the human-rights aspects of AIDS become a priority for WHO, as the World Health Assembly (WHA) passed a resolution on the topic (WHA 41.24).

AIDS-as-development can be said to have become articulated internationally following a CDC project in Zaire—Project SIDA—comparing epidemiological and clinical differences between HIV/AIDS in Zaire and in the United States and Europe. That project later evolved into a continuous program involving ninety persons from public health organizations from Belgium, the United States, and Zaire. The main health organization was still largely absent: WHO had still not identified AIDS as a major threat; its role was limited to that of monitoring. Nonetheless, WHO participated in a series of medical-scientific gatherings beginning in 1983, first in Atlanta, followed by Aarhus in Denmark, and, finally, a consultative meeting hosted in November 1983 by WHO in Geneva. The global implications were slowly emerging, but science still dominated. The first international AIDS conference, in Atlanta in 1985, although signaling a worldwide mobilization, was in that respect not different.

WHO could not become involved until the rapid spread of AIDS in the developing world began to become known. Project SIDA and discussions and workshops between regional committees were eye openers in this context. The first International Symposium on AIDS in Africa was convened in 1985, for instance. AIDS simply was not perceived as a WHO problem at this point. *Health for All* dominated policies, and with that came a heavy developing-country profile.

By the mid-1980s, AIDS had been claimed by all three discourses, but at this point there was little overlap. WHO was engaged in epidemiological surveillance, with increasing awareness of AIDS in Africa. Science conducted a search for the causative agent and for drugs and vaccines, and PWA groups in North

America and Western Europe set up self-help groups and lobbied national authorities for support in the attainment of the human rights for PWAs. AIDS was slowly growing into a global concern—but largely along three parallel trajectories, with inter-governmental public health attracting the widest support.

Efforts to Establish a Hegemonic AIDS Order

As the Control Programme in the years 1985–1987 managed to articulate a vision and a strategy for an AIDS program, the necessity of engaging civil society in radically new ways was not perceived by the leading groups. Resources for international activities carried out by IGOs come mainly from governments; hence, ministries of health and development authorities in the rich donor countries were the natural, and most urgent, partners. Paradoxically, the political sensitivities surrounding AIDS in many countries facilitated international action, by way of offering authorities a convenient way out of a political quandary. Funneling money through an international body need not alert domestic constituencies—money spent on multilateral assistance, although by no means totally uncontroversial, is generally more accepted than money spent on a disease thought to affect only homosexuals, or on health-education or AIDS-awareness programs that would bring up such topics as sex and drugs. Money for global activities, hence, was forthcoming from a sufficient number of governments.

NGOs already formed part of most national development strategies prior to the discovery of AIDS. Local participation had become a catchphrase in development-policy pronouncements, due in part to the general ascendance of neoliberal ideas—advocating less government and more markets—in the late 1970s, and in part to the failure of almost everything else tried by development authorities. AIDS, certainly, was to become no exception.

The Control Programme grew into a Special Programme and, later, as an additional indicator of the global reach of the epidemic, was rechristened the Global Programme on AIDS (GPA) in 1987. More and more groups were becoming engaged, including

IGOs, national governments, and NGOs. Some form of procedure for liaison was clearly needed, as the early roller-coaster years were maturing into what purported to be a truly global endeavor. The question concerned who was to be in charge.

Quite early, it became clear that WHO, once sparked into action, would assume a leading role. WHO was firmly established as the main body privileged by the discourses of both health-as-medicine and health-as-development. The UN General Assembly endorsed the *Global AIDS Strategy* with resolution 42/8 late in 1987. Hopes were still high that a cure and a vaccine would emerge and that, afterward, the usual mass campaigns directed by WHO would ensue. Although admittedly a formidable challenge, went the general line of thinking, the task would be manageable if it received enough support from others.

Hopes continued to be high for a medical solution, but, increasingly, critical voices were raised by PWA groups. With the intention to create legitimacy for the centrality of the intergovernmental public-health approach, an international meeting among ministers of health was convened in London 1988 (WHO/GPA/INF/88.6). The ensuing “Declaration on AIDS Prevention” includes references to cures and vaccines (paras. 3–4), human rights (para. 6), and development (para. 11) as well as states the necessity of involving “all relevant governmental sectors and non-governmental organizations” in the efforts to implement the Global AIDS Strategy. Further efforts to stave off potential threats and broaden support for the approach included the notion of *AIDS as Three Epidemics* (WHO Features 1987). The first is the worldwide epidemic of infection with HIV, the second is AIDS and its associated illnesses, and the third is the epidemic of reaction and response to the first two: the social, political, and cultural context within which the first two occur. Safeguarding human rights and dignity is here seen as necessary for efficient AIDS control. Only if all three epidemics are considered together can the problem be controlled and AIDS be stopped. All three discourses are brought together here, as the global nature of HIV, its virological roots, and the social consequences are combined within one package. The effort involved offering a little for everyone—a necessity for establishing a hegemonic AIDS strategy, as dis-

cussed above. That this was, in fact, the goal is clear from an interview with the director of the Special Programme. It warrants being quoted in its entirety (Mann 1987: 136).

The Special Programme, with its global leadership capabilities, is open to collaboration with every country in the world. We hope to be working with every country in the world by the end of 1988. In order to stop AIDS, a combination of committed and comprehensive national AIDS programmes is needed in every country, along with strong international leadership, cooperation and collaboration. With the combined efforts of national governments, multilateral and bilateral agencies, non-governmental organizations and millions of concerned and creative people, and with our current knowledge, political and social will, AIDS can be stopped through a worldwide effort.

The focus in the passage is clearly intergovernmental—collaboration with “every country” and “national AIDS programmes”—but it offers new elements related to civil society an important part. A first meeting with selected NGOs was convened in 1987. According to one observer, the main rationale was, on the one hand, to avoid having the NGOs turn their attention in another direction—thus depriving GPA of a necessary partner—and, on the other, to formulate a distinct role for the heterogeneous group of NGOs. Association with NGOs was deemed necessary in spite of the fact that their activities were perceived to some extent as a nuisance, disrupting traditional modes of operation (Will 1992: chap. 8).

Challenging Hegemony

Groups that were willing to compromise to some extent, although far from wholeheartedly accepting GPA leadership, met regularly during 1988 in order to work out a proposal for the terms of GPA-

NGO collaboration. Hence, the ability of these new participants to articulate a new discourse that would challenge the hegemony of the intergovernmental public health order had increased. Now on the inside, they could canvass support among people previously working according to hegemonic ideas.

Challenging activities was also under way elsewhere in the UN system, as well as in NGO circles. GPA, indeed, was not the only possible focus for AIDS prevention and control. Strong rhetorical support for NGOs in all important policy documents was certainly not enough if loyalty to GPA was to be secured from NGOs. A meeting in New York, arranged by the United Nations Department of International, Economic, and Social Affairs (DIESA), showed widespread ignorance of WHO and its activities among the U.S. NGOs. Moreover, the UN in general was being accused of treating NGOs in an exploitative way. NGOs felt they were being used only as entry points to local levels or as information providers (WHO/LUN Memorandum 7 June 1988). NGOs wanted to be treated with respect as well as to be seen as “consenting partners”—a status previously only bestowed on the governmental members of multilateral organs. Were this change to gain acceptance, it would constitute a serious threat for the continued hegemony of multilateralism.

By 1988, it seemed as though the contradictions within the current order of international health work were beginning to show. On the agenda were two interrelated paradoxes that demanded solutions. One was WHO’s mandate to lead and coordinate the global AIDS strategy. Member governments had assigned primary responsibility to WHO for taking charge of the epidemic and channeled resources for that purpose. AIDS, however, could not be handled without relaxing intergovernmentalism, in order to accommodate somehow the challenges being leveled against the center of power—WHO member governments—from NGOs.

Secondly, the competing understandings health, and consequently also of AIDS, had to be reconciled. The absence of a cure and vaccine necessitated a broad program, with many openings for a multitude of aspects. Foremost among them was human rights, articulated by progressive public-health groups, but mainly by ASO organizations demanding an end to discrimination against

PWAs. WHO was at a loss for a strategy but, eventually, came up with the idea of viewing AIDS in terms of three epidemics—catering to public health, development, and human rights concerns. Trying to bring everyone in under the global AIDS strategy involved a considerable risk, of course, since none of the groups was entirely satisfied. There was too little science for the scientists, too little foreign assistance and development for the Third Worlders, and too little advocacy for the human-rights groups. Moreover, the basis in sovereignty prevented too much involvement of NGOs because of the danger for outspoken criticism to cause embarrassment to national governments. Bureaucratic tidiness and manipulative diplomacy were called for but were vehemently rejected by NGOs. The dilemma was formulated by one staff member (Internal Memorandum 7 March 1988), who noted that

many governments are still uncertain how to do this [control AIDS] and also how to emphasize the importance of these issues [ethical, legal, social, and psychological] in public education programmes to counter pressure for discriminatory measures against those persons suffering from AIDS or infected with the virus. A number of inter-governmental and non-governmental organizations are entering this complex field of AIDS, health and social legislation, and human rights in an effort to help governments with their dilemma. However, such organizations, by and large, do not possess an overall appreciation of the AIDS pandemic and all its manifestations and, moreover, usually represent a specific interest group and hence possess only a specific or limited orientation toward the dilemma as a whole. Moreover, some of these organizations appear to believe they have the right, out of a moral imperative, to act for WHO in 'taking on' governments and others who they perceive as acting in a discriminatory fashion. Such action on their part,

even in the form of a report to WHO, would likely result in much ill will being generated towards this organization by those so singled out and compromise our ability to work with governments and others.

Consequently there is a discernible need for WHO to enter this field not only to preempt such action by asserting its rightful role to international leadership on this issue, but also to support and coordinate the relevant activities of its member states and assist any organization which needs to develop a policy regarding persons suffering from AIDS or HIV infection. This should be viewed as WHO exercising the full scope of its mandate on international health problems.

In order to establish itself as central player in the global AIDS hegemony and to preserve intergovernmentalism, WHO clearly tried to control and steer critical groups into obedience to the rules of multilateral health work, as carried out within the sovereignty-based order. In this paragraph, NGOs are reduced to information providers—for when IGOs request input—who should not assume a role of articulating critical ideas, since that might cause problems further down the line. WHO presented themselves as acting in the interest of everyone and claimed to possess knowledge of the epidemic in all its manifestations—something NGOs and other interest groups, allegedly, did not. This control orientation on the part of WHO caused much tension and friction in the evolving relationship.

Counterhegemonic Articulation

Words like “effective,” “partnership,” and “working relations” carry with them positive connotations in any discursive formation touching on HIV/AIDS. NGOs and AIDS Service Organizations (ASOs) were on the agenda, and they were there to stay for the foreseeable future: governments demanded it, NGO/ASOs them-

selves demanded it, WHO ideology demanded it, and public health demanded it. The discussion concerned in what way NGOs should be employed as well as even which NGOs. What exactly do phrases like “effective working relations” (WHA 42.34) and “increase cooperative efforts” (WHO/GPA/INF/89.9) entail? What are the concrete contents of ambitions to “[a]ctively promote the ‘constructive engagement’ of relevant international NGOs and NGO umbrella organizations”? (GPA, *Draft Strategy*: 1988). Was GPA trying to increase places and sites of control, or were these changes in discourse indicative of successful attempts at articulating counterhegemonic ideas that would facilitate gaining a foothold inside GPA?

Intergovernmentalism demands that governments remain in the driver’s seat, with inviolable rights, while a participatory process strives to engage as broad a spectrum and number of stakeholders as possible. Both aspects were important for GPA. Results required access to local communities and familiarity with the needs and wishes of people with AIDS—something only NGOs could provide—but a global strategy also needed money and endorsements from governments. Governments, furthermore, were demanding both visible and quick results. For GPA to be able to articulate a hegemonic AIDS strategy, each of these different ingredients needed to be included, at least minimally.

The challenge was to design a role for NGOs that would grant them the necessary autonomy, or perception of autonomy, to be able to perform in concordance with the global strategy, while simultaneously offering enough bureaucratic tidiness and appearance of governmental control that intergovernmentalism required. NGOs could be tolerated as long as they performed in concordance with the global strategy and played according to the rules; they were even vital in that regard. This tension could be exploited by GPA, provided they could strike a balance between control and autonomy.

In an effort to figure out the details of such a deal, a process was embarked on whereby GPA picked up the initiative of ASOs trying to influence the *Global AIDS Strategy* by calling together a meeting of a small group of international NGOs with GPA. The process led to the First International Meeting of AIDS Service Or-

ganizations, which was held in Vienna from 28 February to 3 March 1989. The meeting was arranged under the auspices of GPA but was organized by a small group of NGOs—an important move in preserving the impression that the meeting was convened at the request of NGOs and on conditions formulated by the NGO community. The objectives were to identify and define problems facing ASOs in the areas of planning, organizational structure, and communications and networking; to exchange experiences; to provide technical information; and to identify steps for improving coordination.

The document is rife with the dilemmas formulated above. For instance, official recognition of ASOs and representation on official bodies and funds are requested, while at the same time the need for preserved autonomy is recognized (WHO/GPA/INF/89.9). The main area targeted for collaboration, however, was removing “structural impediments” facing ASOs in their work: for instance, many countries offered little or no opportunities for ASOs to operate (WHO/GPA/INF/89.9). The main challenge identified by the meeting, hence, was leveled against multilateralism itself.

An additional reinforcement of the sincerity of GPA’s commitment to NGOs was the initiation of a program of “Partnership Grants for Nongovernmental Activities” (GPA/DIR/89.13). The program had a strong development orientation, necessary since the Vienna meeting only saw ten non-Western NGOs among the participants, and the resulting geographical bias risked alienating many donors and governments—even WHO. The stated objective was “to fulfill a catalytic role by supporting innovative and replicable HIV and AIDS prevention and care activities by local NGOs in developing countries through partnerships with NGOs working internationally” (GPA/DIR/89.13).

In return for the moral and financial support proffered by GPA, ASOs and NGOs needed to create a decisionmaking structure for aggregating and regimenting the unwieldy crowd and enabling them to speak with one voice. The name for this superstructure—a network of networks—was the International Council of AIDS Service Organizations (ICASO). The inauguration of the new organization was scheduled to occur in 1990. GPA also put up some modest support for an international ASO conference to be held in

Montreal prior to the Fifth International AIDS Conference, where the issue of an international council was taken up again (Opportunities for Solidarity 1989: 18ff). Support for networking went also to other aspiring global structures, such as the Global Network of People Living with AIDS (GNP+) (at that time called International Steering Committee for People Living with HIV/AIDS) (GPA/GMC(9)/93.6).

Co-optation always loomed large in these discussions, as any efforts at control from GPA's side, or any perception of control, would immediately destroy collaboration. As co-optation would render NGOs useless as innovators and inefficient as advocates, GPA was not too keen on incorporating them totally into a formal system—a historic bloc with a hegemonic strategy—as this would necessitate new NGOs operating in civil society. Friendly and forthcoming “outsiders” were a preferred solution.

The conscious efforts toward integrating the ASOs into one coherent network were supposed to come to fruition in San Francisco in 1990, at an NGO conference scheduled to precede the Sixth International AIDS Conference. The cancellation of that meeting, resulting from widespread discontent with U.S. immigration laws for HIV-positive people (Gordenker et al. 1995: chap. 7) postponed the event. The Paris NGO conference arranged the following year was instead chosen for inauguration. The San Francisco boycott was the first major political action of NGOs working with AIDS and, hence, sent the right message for an international consortium (cf. Lucas 1991).

Several NGO spokespersons, however, voiced deep reservations concerning both the general idea of an international body and the risk that ICASO would take over and, in fact, constitute the entire NGO participation. The African group, the most vociferous critic of the proposal, eventually was persuaded to ratify in what appears to have been an “if you can't beat 'em, join 'em” strategy. They felt it would be better to be part of ICASO, since, once formed, “ICASO would willy-nilly be consulted by bodies such as the WHO and other UN agencies, and that therefore it was important to ensure at least that there was some regional input” (Lucas 1991: 98). The presence of a widely held feeling that a small group

of North-American homosexuals was driving the entire operation could be sensed at the meeting.

The question one must raise in this context concerns whether GPA pushed the ICASO matter in an effort to acquire needed NGO collaboration in the eyes of the donors, while effectively controlling the process so as to make sure that those organizations that confirmed the leading role of GPA also were in charge of ICASO. Was ICASO an effort to instill in civil society a sense of legitimacy for GPA as leader of a hegemonic strategy? The weak regional base for the organization made it less useful for reaching civil societies in developing countries. But, then again, developing-country governments do not provide money for GPA. Some NGOs demanded representation directly in the GPA Management Committee (GMC), the highest decisionmaking body of GPA. ICASO was seen by some NGOs, and also by GPA, as a useful vehicle for such a selection process. The GMC-membership issue serves to some extent as a litmus test for the research problem here, since giving NGOs and states equal status in decisionmaking at least formally breaks the dominance of states.

A proposal was worked out that gave NGOs one seat in the GMC, the intention of which was to have ICASO appoint this organization for a specified time (GPA/GMC/(2)/89.5). A deeper look, however, brings up other issues that warrant consideration. Allowing one seat in a committee of thirteen to an NGO resembles a hostage situation, particularly since consensus is the preferred method for making decisions. An NGO reservation easily gets lost and suddenly civil society has become an official part of, and is seen as condoning, the wishes of the majority.

Furthermore, as discussed above, the selection of the NGO can also be steered to reflect the prevailing power structure. The floundering of ICASO in Paris cautioned GPA, who backed off from the proposal. Perhaps the perception of co-optation proved too strong for the proposed representation to boost legitimacy among the many NGOs feeling left out by ICASO. If that was the case, ICASO would not provide the disciplinary mechanism for the efficient socialization and legitimation envisioned.

International AIDS Conferences

Important opportunities to make public the results of AIDS programs to people at large and to the media, and chances to meet and make alliances for governments and civil-society organizations are offered at the large-scale AIDS conferences, drawing participants in the tens of thousands from all kinds of AIDS-relevant sectors. It is one thing to sponsor parallel NGO meetings and stimulate NGOs to network and conference among themselves; it is quite another to try to integrate governmental and nongovernmental meetings and conferences into one all-encompassing structure.

As already mentioned, medicine and science, already prior to HIV/AIDS, had a well-established system for maintaining their discourse, including loyal donors for research grants, recognized journals for dissemination of results, meetings and conferences offering opportunities to meet, and recognized criteria for establishing truth and hierarchies. The first international AIDS conferences also focused on scientific questions like classification, etiology, and epidemiology. NGOs and new ASOs did not have these same structures in place. The medical domination of the AIDS conferences was undermining the ambition to bridge science, human rights, and development—in order to deepen GPA-NGO collaboration.

The international AIDS conferences have actually all been organized by an NGO—the International AIDS Society (IAS)—in collaboration with a national host. WHO/GPA has been the co-sponsor. IAS is scientific in orientation, has been chaired by scientists and doctors, and has membership from medical circles. A look at the international AIDS conferences from the perspective of socialization and articulation is revealing. The first six were heavily dominated by science, but the Seventh International AIDS Conference, held in Florence, Italy, in 1991—although titled *Science Challenging AIDS*—included an NGO conference called *Communities Challenging AIDS*. The proportions of time and space devoted to the *Communities* conference relative the *Science* one, however, reveal that science was the main event: *Communities Challenging AIDS* was added as an afterthought and only met

for two hours on the second through the fourth days of the scientific conference. That serves as a good indicator of the relationship between science, human rights, and development.

The formal agenda reflected the views of the dominant scientific NGOs like the IAS but, judged by participation at various events, was less appreciated by most other NGOs. Separate groups, running in parallel with their own agendas and priorities, appeared at Florence, with GPA offering a bridge between the competing formations, recognizable not only by language differences but also through appearance. One observer accurately inventoried the competing groups as “White coats, gray suits, and T-shirts,” typifying scientists, bureaucrats, and activists, respectively (Gilmore 1992: n3). Although the Florence conference brought together all three discourses were and forced to them to interact, they still remained quite distinct.

The next year’s conference, however, showed signs of breaking with the past, insofar as NGOs were given an important role in planning the event. The Eighth International AIDS Conference, held in Amsterdam in July 1992, was open to diverse and wide-ranging concerns and approaches to AIDS prevention and control and was more broadly representative of the variety of groups affected and involved in AIDS. The planning committee for the conference also mirrored the goal of creating a broad coalition: the usual national host, in this case Dutch health officials, GPA, IAS, and European Community representatives, represent little surprise; but as many as nine members of the committee were drawn from the ranks of ASOs and NGOs. Local activists, large international federations, and PWAs were part of the Steering Committee. A special Community Liaison Committee had also been created to further the contacts with local Dutch groups (*The Eighth International Conference on AIDS* 1992: 5).

In addition to the standard scientific panels, reduced in number to allow space for other topics, the conference included such novelties as a mini-course series on hands-on techniques for multilateral, bilateral, and nongovernmental relations, which was chaired by NGOs. Furthermore, plenaries—global meetings—were held on the opening and closing nights, with the express motive of bringing scientists, governmental representatives, and activists

into closer contact with one another. The new positions were not without their paradoxes, however, indicating that not everyone was so pleased with the new format. Concurrently, activists from the same organization managed both to overturn a commercial booth and to deliver a speech at the opening ceremony! The coalition was uneasy and weak, but NGO representation on planning committees was also secured at the Ninth and Tenth International Conferences and, thus, may have become actually a permanent mode of operation.

Amsterdam showed a considerable movement of the borders between IGOs and NGOs, which appeared closer than ever. The next twist in the evolving process, however, showed the importance of the controllers of the purse. Indeed, WHO itself was under attack (e.g. Farrell & Le Fanu 1993). Donors were ill at ease with how the director-general conducted his work. This criticism also spilled over into the AIDS strategy, and GPA's performance also became the focus of criticism. National governments saw reasons to withdraw support from GPA, as did other UN agencies (GPA, *1991 Progress Report* 1992: 15). The momentum achieved so far therefore came to a standstill during the establishment of a new joint and co-sponsored UN program, UNAIDS. Although NGOs were greatly involved in this process, collaboration very much came to be understood as representation. Both the turbulence characterizing the almost chaotic situation and the desperation of GPA were echoed by former executive director Jonathan Mann: "[T]he course of the pandemic within and through global society is not being affected—in any serious manner—by the actions taken at the national or international level" (Mann et al. 1992: 1). Continued AIDS prevention under the global strategy demanded new and even bolder steps in civil-society integration. Legitimacy for the new program demanded intensified collaboration to regain the dwindling financial support.

Reconstructed Sovereignty or AIDS Partnerships?

Inventing novel mechanisms to reach civil society essentially had boiled down to advocating NGO and PWA participation in na-

tional AIDS programs, providing resources earmarked for NGO activities and stimulating networks and consortia with an eye to the development of joint policy formulations among the heterogeneous NGOs and, lastly, representation on decision-making fora at all levels by PWA and NGO representatives. Taken together, these measures undoubtedly constitute profound departures from intergovernmentalism. Does the newly created UNAIDS build on and take further the progress made during the GPA era, or should the new program be seen as governmentalism regaining its formerly privileged position?

In most instances the changes achieved under GPA have not been taken further; that is, UNAIDS has not been able to accomplish what GPA failed to manage: to articulate a hegemonic global AIDS strategy. The events of 1989 and the Vienna meeting articulated a vision for global governance with governments, intergovernmental organizations and civil society operating side by side on an equal level, each contributing a part of a necessary element in an historic bloc managing a global AIDS strategy. In the final instance neither of the partners held out. Governments ceased to fund, civil society was too diverse and intent on preserving their autonomy vis-à-vis both governments and IGOs as well as each other to allow for a stable base. And the different IGOs within the UN system could not agree on which discursive version of the AIDS issue was the best on which to base the approach to the disease.

Nor did a new order emerge. The three competing discourses have not changed substantially enough, still privileging largely the same actors. AIDS-as-medicine persistently treat the expertise of ASOs with caution and of secondary importance. ASOs have not replaced the professional medical associations as the primary civil society element of health management. Likewise, PWAs remain firmly lodged in patienthood, albeit patients represented on boards and in committees.

Health-as-human-rights has not been severely damaged by the challenges leveled against it by emerging civil-society ASOs. Rather weak legal bases for litigation and very few documented cases of discrimination have dissuaded established human-rights

groups from joining ASOs as part of their strategies for attaining an end to discrimination.

Also, in the development area, NGOs continue to play a role at mainly the final stages of the process, as service deliverers and contractors. ASO insistence to take part in the entire policy process on every level has had its weakest impact on the national levels (ICASO 1995 #5), where governments have been extremely reluctant to allow joint decisionmaking. Co-decisionmaking remains a distant goal.

Although too new to evaluate, UNAIDS nevertheless appears to have evolved in two important respects, which may warrant a guarded answer in the affirmative. The organization has placed NGO representatives in the highest decisionmaking body—the Programme Coordination Board—and, hence, has allowed civil society a place at the symbolic center of AIDS governance (UNAIDS *Third Meeting 1996B; A Proposed Strategy 1997*). Still, however, sovereignty holds. NGOs have been granted a seat but are not permitted a negotiating role, have no vote, and do not officially participate in decisionmaking. How to maintain a difference between making statements and participating in decisionmaking in practice, and what difference it makes not to have a vote in a body dominated by consensus decisions, remains to be seen. Representatives claim there to be an equal role. Formally, NGOs come close to the previous observer status, but a practical step has been taken toward breaking up intergovernmentalism with NGOs inclusion in the nonvoting category of membership status.

Sovereignty, if not broken, has at least been modified. A foothold has been established, possibly allowing more efficient counterhegemonic articulation: “[N]ow we have the opportunity to sit at the same table and participate in the discussions in a more proactive way,” writes ICASO (ICASO 1995 #4). IGOs also come from a broader set of understandings of AIDS. UNAIDS is co-sponsored by six UN agencies: WHO, UNICEF, UNDP, UNFPA, UNESCO, and the World Bank. This wider diversity may increase the options for a more encompassing discourse that offers better possibilities for satisfying dissenting groups than the old GMC provided. Whether sitting on the board would be better interpreted as a form of co-optation is too early to judge. The fact that

NGOs themselves appoint their representatives speaks against co-optation on one level.

Another step in this broader articulatory effort, yet to become clarified as to the exact content, is the GIPA principles from the Paris AIDS Summit of 1994 (WHO Press Release 93, 1 December 1994). The meeting, with forty-two heads of government assembled, reinforced goals first voiced in Vienna, but—more important—it carried more weight, since this time governments themselves were the signatories. The acronym GIPA stands for “Greater Involvement of People Living with HIV/AIDS,” which would perhaps be yet another empty slogan, devised to give the impression of participation, were it not for the improved ability of civil society to act together. International networks, building on regional and local chapters, such as ICASO, now are better equipped with resources to communicate globally via electronic means. Ongoing consultations through “virtual communications” have been added to the support of civil-society networking (UNAIDS/PCB(3)/96.2).

Implications for Global Governance

That full and equal participation is far from achieved stands beyond doubt. No signatories to GIPA, in addition to the forty-two participants in Paris, were added one year later (ICASO 1996 #6), and several countries have cut or are in the process of cutting development assistance (ICASO 1996 #6). Another observation, however, suggests that it is mainly governments that are the focus of criticism: “Fifteen years into the pandemic, we are still waiting for governments to mobilize” (ICASO 1996 #6). The failing connection lies with governments—first GPA and now UNAIDS had abandoned the sovereignty-based order. Obstacles for a postsovereignty global AIDS order now, in 1997, reside mainly with governments. Thus, the conclusion reached by ICASO on the effect of the intergovernmental response echoes the conclusion made by the Global AIDS Policy Coalition five years earlier. A study on the direct effects of the Paris meeting claims that “the Declaration has made no difference with respect to preventing discrimination

against people living with HIV/AIDS; has not resulted in new measures that address the vulnerability of women to HIV/AIDS; has had no impact on the ability of countries to better integrate HIV/AIDS into primary health care; and, has had no visible impact on research” (ICASO 1996). The summit, however, appears to have increased the profile of NGOs and added emphasis to the connections between IGOs and NGOs.

Thus, the executive director of UNAIDS Peter Piot’s remark at the opening session of the Eleventh International AIDS Conference—“[W]hen it comes to the danger of AIDS, no one can deny this is ‘One World’” (UNAIDS 1996)—should be understood as directed toward national governments. The theme of the conference—One World, One Hope—may remain as elusive as ever, but the process of creating partnerships between GPA/UNAIDS and NGOs has shown that intergovernmentalism can be extensively modified. The national governmental links in the chain are still holding out, though. This, to be sure, is an important evolution, since the sovereignty discourse tends to reduce IGOs to governmental tools for maintaining hegemony and points for the global regulation of civil societies. GPA and UNAIDS show that effective liaison between civil society and IGOs can and does frequently occur beyond governments, which tend to get squeezed in the middle. IGOs, then, cannot be understood simply as derivatives of governments but are also partners in challenging the privileged status of national governments. The aspired hegemonic position of the global AIDS strategy is articulated by civil society and GPA/UNAIDS together, and not by governments who try to push and legitimize it in civil society. Sovereignty still holds, but the balance seems to be shifting, as global organizations ally more with civil society than with states.

Exactly how this shift is accomplished and by whom are difficult to disentangle from this perspective; suggestions become speculative and often conspiratorial. The discursive approach is better suited for explaining continued status quo than radical change. To be sure, the trends toward a break of sovereignty could well be interpreted as yet another smokescreen produced by the current holders of power. Perhaps some of the other perspectives employed in this study can shed some additional light on this

process of change. Perhaps, for instance, the perspective of interorganizational relations is better equipped to deal with the question.

Chapter Six

Interorganizational Relations

A model that appears to be well suited for explaining phenomena in a world with matured welfare apparatuses and advanced political systems is that positing the evolution of history as a result of organized collectivities, pursuing joint and conflictual objectives in relation to other collectivities. The latter half of the twentieth century has witnessed an explosion of formal and informal associations, to the extent that we now can characterize our societies as “organizational.”

According to Benson (1982: 141), the central problematic for organization and interorganization theory concerns the effective management of complicated tasks. Theories seem to have sprung from a concern with coordination, that is, efforts to avoid duplication of tasks and overlap of services. In Benson’s words (1982: 143), the central question is how to manage and make efficient

a more smoothly operating division of labor between agencies. The task of interorganization analysis in this view is to discover the functional relations of administrative structure (differentiation and hierarchy) to effectiveness under specified conditions.

The preoccupation with service delivery has tended to push theory in the direction of organizations predominantly active in a domestic setting. Nothing per se prohibits interorganization theory to be applied to an environment spanning the international/domestic divide, but most studies so far have dealt with public administration within states. Two researchers of international organizations even concluded that “the gap between the study of in-

ternational organizations and the sociology of organizations is deep and persistent” (Ness & Brechin 1988: 245).

The existing research inspired by organization theory in the international field is akin to public-administration research, to the extent that what it frequently seeks to explain is the management of global welfare issues, where joint management of economic and social resources is both ideologically palatable and, based in the science of organization, technologically possible. Examples of such studies are Christer Jönsson’s (1987) efforts at explaining regime change in the “sphere of flying” and Roger Coate’s comparative case study of the law of the sea process and the population-assistance regime (1982). The *International Responses to AIDS* Project, whereof I was a part, studied international responses to the AIDS epidemic from an interorganizational perspective (Gordenker et al. 1995). Also, Peter Willets (1990) has advocated a form of interorganizational model—the *global politics paradigm*—that essentially views the world as comprised of various forms of collectivities bound together in resource-exchange networks surrounding a particular issue. Organizations also figure prominently in the writings of Robert Keohane and Joseph Nye (1977). Although state-centered, their *international organization model* has its roots in exchange theory, which is an important source of inspiration for the interorganizational perspective in this study as well.

A broadening of both the normative underpinnings and the type of issues studied is necessary, given the epistemological position taken here. A critical posture implies a questioning of the current multilateralism, seeing beyond UN-style practice. This step can be taken within interorganization theory itself, since, taken to its logical conclusion, interorganization theory provides a solution to the problem of how to conceptualize states in analysis: states can be understood well as conglomerates of organizations with different preferences, interests, and goals. In order to do so, then, I will go back to a generic version of interorganization theory and build from basic notions of actors, structures and processes.

Organizations as Open Systems

Most current interorganization theory springs from the fundamental insights of James Thompson. He argued, contrary to the received wisdom of the time, that organizations do not exist as self-contained units but have to be perceived in relation both to an external environment and to other organizations (Thompson 1967: 3–38). Organizations are *open systems*, in constant interaction with their environment and other organizations. The global environment, with its absence of well-defined and undisputed hierarchies, provides an excellent context for interorganizational analysis. Furthermore, the focus is on relations between organizations rather than within single organizations (Emerson 1976). The perspective is dynamic and depicts organizational life as a series of interactions—bargaining and exchanges—between collectivities. Interorganizational analysis is the study of “the reciprocal flow of valued behavior between the participants” (Emerson 1976: 347).

Because organizations are open systems, if there is consensus on the permeability and contextual character of organizational boundaries, conflict abounds on how concretely to understand these implications. How is this environment to be conceptualized, and what is an organization in the first place?

Interorganizational theory has evolved in two parallel trajectories: resource-exchange theory, emphasizing control over scarce resources; and institutional theory, focusing on rules and conventions. Both theories are insufficient on their own. In a recent paper, institutionalists March and Olsen (1993) actually pose the relation in a somewhat softer tone, indicating a breaking of the ice between the two traditions. Institutional theories, they say, could be seen as qualifying as pure exchange theories. Rationality is embedded in an institutional context that enables and restrains the value of resources organizations control as well as the preferences and strategic options considered by different organizations. For interorganizational theory to be useful, these approaches have to be reconciled.

Interorganizational relations involve both the exchange of valued resources in order to achieve a desired goal and the

recognition of the institutional constitution of the value of various resources, goals and ways of attaining them in the form of rules and norms of appropriateness.

Organizations are routinized exchange processes providing meaning beyond the requirements of the tasks. Relations, then, evolve in order both to facilitate exchange and to provide a sense of meaning and order.

Both traditions suffer from oversimplification. Perrow, for instance, although generally appraisive of institutional research, is highly critical of its failure to note that organizations are not simply stuck in an institutional context: they also try to change that environment. That is, they engage in deliberate efforts to construct reality in such a way as to place the organization in a privileged position relative to other organizations (Perrow 1979). Power and influence have been curiously absent from institutionally inspired research. To some extent, resource exchange cures that failure, as power and control are central elements of that theory. The problem is how practically to go about combining the two elements, and the next step will be to develop the structural side. Here, too, the two traditions offer only partial understandings, although both depart from a notion of a system of interrelated organizations comprising a field. Resource-exchange theory suffers from an unbalanced emphasis on material resources, the lack of which inhibits goal fulfillment and, hence, fails to see the institutional processes as rendering some resources valuable and others not. It also neglects the importance of historically derived and agreed-on norms and rules of procedure.

As previously with the Gramscian approach, the construction of theory uses as building blocks actors, structures, and processes.

Organizations: Goal-Directed, or Creatures of Habit?

Howard Aldrich in a typical exchange manner defines organizations as goal-directed, boundary-maintaining, activity systems (1979: 4–18). Organizations are perceived as striving toward some organizational goal. This goal, of course, may shift and be ambiguous but, on the whole, organizations have a purpose with

their activities. It should be noted that goals may or may not correspond to the official goals expressed in statements and official declarations. Boundary maintenance refers to the distinction between an organization and the environment. Somehow it has to be established who and what belong to an organization and who and what do not. Organizational boundaries are not fixed but, rather, shift depending on the task at hand. Large organizations, in particular, with complex divisions of labor and many different units, display different boundaries depending on which activity one studies. Formal boundaries of an organization, moreover, may differ from informal ones. The term *activity systems* denotes the fact that organizations possess a certain technology with which tasks are accomplished. It may be a particular division of labor, with roles and functions assigned to particular members, or a prescribed procedure for handling organizational tasks.

It is important to bear in mind that these definitional parameters should not be seen as absolutes in the sense that either they are present, in which case there is an organization, or they are absent, indicating that there is something else. All social collectivities show more or fewer of the criteria suggested by Aldrich. Participation in global governance is not restricted to highly organized entities like governmental departments or structured activity systems like secretariats of IGOs. Also less rigid formations can, and do, play active roles. Completely random groupings, with goals changing constantly at the whim of members, with virtually no boundary maintenance and no prescribed technology, clearly do not qualify, but the relevant parameters should be perceived as continua with relatively unstructured associations at one end and rigid hierarchies at the other.

The rationalist conceptualization of organizations, proffered by exchange theory, should be contrasted to that of institutionalists. If the roots of resource dependence can be traced to social exchange and microeconomic theory, the institutional perspective owes intellectually more to the theory of Max Weber. His writings on the evolution of the bureaucratic organizational model as a consequence of capitalist requirements, with capitalism itself sprung out of a peculiar religious/moral order, has led to an ap-

preciation of the importance of social institutions for the form taken by organizations and interorganizational relations.

Institutional theory rejects simple assumptions of goal maximization or satisfaction, and inquires into the processes of preference and goal formation themselves. Where organizational goals come from in the first place is here a highly relevant question. Also efficiency calculations that govern relations in an organizational landscape are problematized. Why do organizations simply keep on engaging in practices that clearly do not fit the current situation and do not maximize the stated objectives? If the rationality component was to be preserved, scholars clearly had to find out what it was that was being maximized. But if organizations are not goal-maximizing systems, what are they?

Institutional theory rests on totally different assumptions about human existence. Rather than being based on calculi of utility, actions are embedded in institutions, that is, structurally governed. Processes such as internalization—the extent to which individuals have become so ingrained within the norms as to take them for granted and as appropriate—are central. Selznick explains that “[b]y long habituation . . . the individual absorbs a way of perceiving and evaluating his experience” (Selznick 1984a: 17).

Organizations are constituted by habits—or, standard operating procedures (SOPs). SOPs define what in the environment will be selected for response as well as provide organizations with an arsenal of responses with varying degrees of appropriateness. When a definition of the problem has been made—a common construction of what a phenomenon signifies—a standard response follows. Habits, in this way, select some aspects for action, while hiding others. Organization becomes a particular way of defining the surrounding world, with shared meanings and shared values. Organizations are particular ways of “making-sense-of-the-world.” (Morgan 1986: 131). Shared meanings, with associated routines and habits, establish organizational agendas and, subsequently, goals. Activities, hence, are directly related not to goal satisfaction but to prior activities. Organizations are the result of people’s ways of coping with their daily life. Institutions provide alternatives, scripts, rules, and classifications that both enable and constrain action (DiMaggio & Powell 1991b: 15).

The familiar is frequently chosen by organizations, since it reduces anxiety and uncertainty. Common-sense knowledge about means and ends, shared routines, a common construction of reality, and established norms of appropriateness regarding both means and ends are the stuff organizations are made of.

The different traditions have been contrasted by James March and Johan P. Olsen. Utility maximization follows a logic of anticipation, and action is the result of a choice between alternatives whereby the alternative that yields the highest pay-off will be pursued; in institutionalism, an act is the result of matching a situation to a behavior that fits it. March and Olsen have proposed an illustrative list of questions by which each perspective is guided (1989: 23):

Economic action	Social action
1. What are my alternatives?	1. What kind of a situation is this?
2. What are my values?	2. Who am I?
3. What are the consequences?	3. How appropriate are different alternatives?
4. Choose the alternative that has best consequences.	4. Do what is most appropriate.

In the table above, the logics appear as mutually exclusive. When structuration ideas are taken into account, however, the false dichotomy between rational agency, on the one hand, and institutional embeddedness, on the other, is immediately revealed. Organizations do try to satisfy goals, but under conditions created by previous activities, and, hence, analysis needs to include both structure—the institutional fabric—and agency—the strategic interaction. Goal satisfaction does not preclude the enabling and restraining institutions—they are two sides of the same coin. Without an understanding of the historical reasons for goals and preferences, these hang in mid-air and make no sense. Similarly, without the acknowledgment that organizations strive to satisfy

goals and fulfill tasks, manipulation of meaning and symbolic rituals are simply not furthering understanding and explanation.

Organizations are dependent on other organizations for needed resources and are also linked to each other in complicated patterns of division of labor. The term *organizational field* has been proposed for this structural component of interorganization theory.

The Organizational Field

A starting point for a structural discussion in interorganizational theory is the notion of the *interorganizational field*. This field is comprised of “the totality of relevant actors” (DiMaggio & Powell 1991a: 63–82). Richard Scott and John Meyer seem also to have this in mind, but they refer to this totality as a “societal sector” (1991: 108–140). What they argue is the necessity of including in the analysis all organizations operating in the same domain that critically influence the performance of each other. Other concepts used in this context include the “organizational set,” typically denoting relations around a particular focal organization (Evans, 1966), and “organizational population” (Aldrich 1979), meaning all organizations of a particular type. To some extent, it appears as though all these different concepts are trying to come to grips with the same phenomenon. The reason for this conceptual abundance probably lies more in the peculiarities of academia than in any crucial differences between these scholars. In this presentation, organizational field and sector will be used interchangeably.

The fundamental starting point in resource-dependence theory is that the organizations forming an organizational field are related to each other according to the relative distribution of valued resources each controls. The perspective sees organizations as arenas, where “differentially valued resources are competed for by differentially powerful agencies, exercising differential control of these resources, in complex games with indeterminate rules which each agency seeks to exploit to its advantage” (Clegg 1990: 85). In its simplest form, dependence theory assumes that the organization controlling resources also controls the field. Control implies

controlling access to other organizations, an ability to regulate the flow of resources within a sector. Organizations, which have established links with many other parts of the field and, hence, occupy a central position have been called *linking-pins*. These are the nodes through which resources flow between the different organizations (Aldrich & Whetten 1981: 390).

Many resources are scarce and frequently under the control of other organizations. Rather than trying to secure the needed resources in an open marketplace on a case-by-case basis—shopping around for the cheapest alternative—organizations try to control this uncertain situation by establishing stable relations with other organizations. As many organizational tasks are highly specialized, quite complicated interorganizational fields may evolve. An AIDS-control program is an illustrative example, as it requires the coordinated efforts of global health organizations, medical expertise, national health and development authorities, and local community organizations.

Also institutional approaches emphasize uncertainty reduction— not to secure a steady flow of needed resources, however, but to reduce anxiety and stress. The difference lies in the dependency model's tendency to treat the field as consciously designed to deliver a task that each organization recognizes it cannot deliver alone. In this sense, interorganizational fields are seen as having been created in order to reduce transaction costs and facilitate a steady flow of resources between the participants. They can consequently also be changed and improved, should participants find this called for. Interorganizational relations are simply seen as a convenient solution.

Failures to identify bottlenecks and vested interests hardly suffice as explanation for the current malfunctioning of much interorganizational action, according to institutional ideas. Institutional theorists emphasize that institutions are the result of human activity, past and present, and that these results may be unintended and accidental. Past ideas and practices assume a life of their own and continue to dominate. Organizational fields penetrate single organizations and create “the lenses through which actors view the world” (DiMaggio & Powell 1991a: 13). Partnerships between IGOs and NGOs, for instance, may be constrained

by ingrained ideas regarding NGOs and mental hierarchies that consider IGOs as above NGOs or even relegating them to different institutional orders. Institutional change is as much a process of manipulating meanings and symbols as it is about redirecting resource flows. Rather than different resources linking organizations, institutionalism views the mutual recognition between organizations as determining the boundaries of a field.

Processes of Institutional Bargaining

Interdependencies are managed through formal and informal bargaining, in which leverage both resides in control over scarce resources, following resource-dependence ideas, and is embedded in shared ideas concerning status, norms, and rules of appropriateness concerning goals and procedures, following institutionalist ideas. Typically, organizations are concerned with either securing or achieving a steady flow of needed resources and preserving or attaining a privileged position vis-à-vis other parts of the field. The ability to control what others value is, in a very straightforward formulation, power in an interorganizational network. In Benson's (1975: 234) words, "[T]he primary effects of interorganizational power lie in the control of network resources, including the flow of resources to other agencies." In addition, power resides in the ability to manipulate organizational symbols and to affect institutionally embedded value systems.

Not only the availability of a given resource in a sector is important, however. Anticipating a situation where a given resource is absolutely necessary for the survival of an organization shows that the criticality of resources warrants attention as well. Those who control vital resources have a great advantage. What seems to be a conclusive finding in this body of literature is that the amount of influence and control these resources can represent hinges on both the alternative availability and the criticality of resources (Emerson 1976: 335–363; Blau 1964; Pfeffer & Salancik 1978).

The last important aspect in the context of bargaining concerns the centrality of linking-pins. It is assumed that the organization

that is able both to reach and to be within reach from most other parts controls the field. However, researchers have found that a raw counting of ties to other organizations is an unsatisfactory indicator (Mizruchi & Galaskiewicz 1994: 230–253). What these scholars convincingly argue is that it matters to which other organizations these links go: that is, it may be more important to be linked to only a few resourceful organizations than to many weak ones.

Summary of the Interorganizational Framework

By way of summing up the discussion here, one can say that an interorganizational analysis starts with the structural component and a mapping of the interorganizational field from the perspective of both shared constructions of reality and resource interdependence and exchange. An assumption in this regard is that the relevant actors are indeed organizations with various degrees of coherence. The fields are constituted through repeated interactions, giving rise to institutionalized norms and rules that govern interaction between the participants. These conventions and standard operating procedures pertain both to goals pursued and to the means of achieving them. Moreover, these institutionalized patterns establish the realm of the possible as well as enable or constrain activities.

The various organizations possess different resources and have different ideas as to what goals to further and what means are appropriate for doing so. Normally, a process of mutual adjustment and bargaining ensues. The dynamic nature of historical evolution creates tensions, as activities with which to cope with daily routines involve anticipated as well as unanticipated consequences. Also, support structures and institutionalized positions of authority are never permanent. Assumptions taken for granted are challenged by new organizations and by resource-distribution changes, bringing forth contradictions in current arrangements. These processes occur simultaneously. New ways of thinking and acting bring unanticipated consequences that necessitate further

adaptation, manipulation, and so forth. Thus, the entire field is continuously pushed in various directions.

In his study of the Tennessee Valley Authority, for instance, Selznick describes how the central organizations co-opted elements in the external environment in order to go about their tasks more efficiently. The consequences of this accommodation, however, were a clash between two different institutions, opening up new “avenues of activity and lines of policy enforced by the character of the co-opted elements” (Selznick 1984b: 217). The underlying assumption must be that, although organizations are shaped by institutions, their ways of operating, of “making-sense-of-the-world,” can be altered but that the consequences of the changes may not be fully understood. The new situation triggers further efforts to reduce uncertainty and establish a secure flow of resources, in order to create a favorable external environment through new processes of institutional bargaining, and so forth, in a never-ending process.

A Note on Method

The basic methodological problem with this approach is the assessments of what should count as having an impact. Who is in and who is out of a particular interorganizational field? “The inclusion of all organizations and each of their major contacts would result in ever-increasing circles of organizations which would not stop until *all* organizations are included” (Hall & Clark 1969: 117). There has to be a limit to how inclusive the researcher can be. Some research techniques of network analysis, such as counting telephone calls and tracing messages and mail, could be misleading. Everything may be linked to everything else in some way, but everything does not necessarily *affect* everything else. Some links simply do not mean much. Quantitative data must be coupled with qualitative materials (cf. Perrow 1979: 224–225).

In the following, the field of AIDS governance will be pictured as hanging together through financial and information flows. Prevailing patterns of multilateral health activities will be taken as a starting point for the analysis. The primary objective is to trace a

gradual change away from multilateralism toward global governance. Indicators of this process are, hence, changes in resource flows and mutual recognition of competence between IGOs and NGOs involved in AIDS work.

Next follows an analysis of the process of creating a stable and efficient interorganizational field for the control and prevention of the AIDS pandemic.

Chapter Seven

The Organization of AIDS

AIDS offers many possibilities for interorganizational relations to develop. As the global nature of the epidemic gradually became part of organizational environments, some form of interorganizational cooperation was recognized as desirable by a few. No current organization alone has the recognized authority, financial resources, or other capacity to envision, plan, and execute global policy in this area. Therefore, the new phenomenon could be either an opportunity to expand an organizational task environment or a novelty for which no organizational standard operating procedure (SOP) existed. Total avoidance, however, was difficult, as AIDS gradually made the headlines.

The Interorganizational Field of Health

One set of organizations in which the occurrence of disease is part of daily routines and practical consciousnesses is the medical interorganizational field. Organizations embedded in the institution of medicine were also the first to be confronted with people suffering from a rare form of skin cancer and other unusual malignancies and infections that tend only to develop in adults who are immunodeficient. Only slowly did SOPs for reporting irregular diseases and for epidemic control become activated. "By the Spring of 1981, with more and more men found to have these unusual diseases, it became clear that a distinctive but nameless disease had erupted out of the gay community in North America" (Gilmore 1991: 3).

The CDC in Atlanta, the linking-pin of American public-health organizations, has the routine task of surveying and controlling

epidemics and, if necessary, alerting public-health authorities. Many other organizations depend on CDC to furnish epidemiological information, just as CDC, to function well, has to receive input from health centers and hospitals. Among the former, WHO can be included. The *Morbidity and Mortality Weekly Report*, issued by CDC, constitutes an important element in WHO's interorganizational environment, since CDC has a recognized authority in the area of epidemiological information.

With the medical organizations cranked into action, research, verification, and publication of results gradually revealed the global character of the epidemic. Had AIDS proceeded like most other diseases, the standard response to epidemics most likely would have kicked in as well. Warning, inspection, isolation, and immunization have long been part of the public-health arsenal and are embedded in international regulation. The ten years or so of healthy life preceding the visible markers posed a novelty for traditional disease control. Although an AIDS test was produced relatively quickly, large-scale testing of everyone crossing borders was rightly perceived as cumbersome and disruptive. Hence, there was widespread uncertainty as to appropriate procedure.

The predominantly sexual routes of transmission further increased uncertainty, as most organizations in most societies approach sex and sexuality with considerable caution, even in emergency situations. Further complicating AIDS control was the absence of a cure or vaccine—which pushed control efforts away from public health toward behavior change. This expanded the number of potential organizational participants considerably. The broadening of the organizational field further aggravated the uncertainty facing organizations.

The main organizations in the pre-AIDS interorganizational field rotated around the World Health Organization (WHO), located in Geneva. Their main financial resources were drawn from national governments. The work of WHO, since the breakthrough of the *Health For All by the Year 2000* strategy in the early 1980s, is geared toward aiding governments in providing basic health care to their citizens. The local grounding, thus, is crucial, and an important reason for the attention given to WHO from development organizations. Still, it remains somewhat of a weak spot for

the organization. Absence in the system of an actor with the same technical capacity in the health area, however, provides WHO with a relatively stable position in multilateral health affairs.

Within states, it is customary to assign health to a specific ministry or department, and usually WHO is brought into national politics via health bureaucracies and, in the case of the major donors, via national-development authorities responsible for multilateral development assistance and cooperation. In this vein, international health work is dominated by medical organizations. The membership of WHO is biased toward developing countries, but these provide only a small amount of the financial and technical resources of the regime. So, although formally able to control the World Health Assembly by virtue of their combined voting power, developing-country influence over policy is scant: control over scarce resources resides firmly with Western governments.

Most development organizations, WHO not excepted, recognize that the limited financial resources they have at their disposal hardly suffice to aid the needy of the world. An important element of the global health activities is the vast number of NGOs performing indispensable delivery functions in the field. Development organizations like the different CAREs around the world, the Oxfam, church based organizations like Caritas Internationalis, emergency relief organizations like *Médecins sans Frontières*, and the Red Cross and Red Crescent associations of the world work together with governmental organizations. A complicated division of labor is in place. Seldom do organizations engage in joint decisionmaking; most organizations recognize each other's turfs and competence and fulfill tasks that are taken for granted and seldom questioned. NGOs, to the extent that they participate in governmental programs, tend to be located at the rear end of the global policy process, as service contractors in the field. They deliver the goods.

AIDS Enters Organizational Agendas

It is fair to assume that the "strangeness" of AIDS, and the marginalized groups originally thought to be the only victims, slowed

the organizational response. Widespread discontent with the fact that AIDS apparently fell between organizational agendas spurned collective action among people affected, and these activities were gradually structured enough to qualify as organizations as defined above. Communities had to come together and organize themselves. The early history of AIDS concerns medicine, research, and public health, on the one hand, and the establishment of ASOs, on the other, struggling for scarce resources in order to establish themselves as organizations, with budgets, staff, programs, and recognition from other established organs—while at the same time maintaining the differences between them.

Of all the newcomers on the scene, the homosexual communities in California and New York were best organized. Created during the civil-rights era in the early 1970s, gays had campaign organizations for civil-rights rallies, political representatives on local and national bodies, and, also, newspapers and magazines. They were used to fighting for their rights and freedom of expression. Moreover, gay neighborhoods had grown up around Castro Street in San Francisco and New York's Greenwich Village—tightly knit communities with close ties between their members. This facilitated organization, as did the relatively high level of resources and skills among homosexual men. "The epidemic AIDS had, miraculously and ironically, brought us together like the English at Dunkirk," comments Larry Kramer (1989: 68) retrospectively. Most of these organizations were community-based and had a community agenda: care, counseling, and the like. Very few were national, and even fewer had a global outlook (cf. Kramer 1989: 63; 78–91). Even so, ASOs were forerunners in responding to AIDS as well as the first to experience firsthand how complicated a task AIDS care and prevention were. As always seems to be the case, however, resources never seemed to cover expenses. Ability to grow and scale up was severely limited.

Global Implications

At first, AIDS appeared to be restricted to specific groups in wealthy countries—a disease of affluence and lifestyle. WHO was

primed for the eradication of preventable disease and primary health care in poverty-stricken parts of the world. The eradication of smallpox had been declared successful just a couple of years earlier, and a slow but steady decrease in child-mortality rates and other indicators showed that international efforts for health were on track. As one element of the health institution concerned epidemiological intelligence and surveillance—inherited from previous health organizations like the Health Organization of the League of Nations—WHO did send staff to a CDC-sponsored meeting on AIDS in Atlanta and to the European equivalent in Copenhagen, both held in 1983. There was no felt threat to the organization from the new disease, however, nor did WHO feel any immediate need to address it. AIDS was a problem for affluent countries—the United States, of course, and a few European countries—and very well able to be taken care of by these governments (Mann et al. 1992: 567). Besides, what could WHO do in such a context—assist the United States in the construction of a basic infrastructure for health? It would amount to nothing less than publicly embarrassing its largest donors, to suggest that U.S. authorities were not able to take care of their own health problems. A further explanation of WHO's passivity at this stage is the absence of any governmental requests for assistance. As an inter-governmental organization, WHO has no right constitutionally to intervene in the domestic affairs of a member.

GPA as Linking-Pin

Gradually, however, the extent of the epidemic was revealed, as the total number of cases rose and reports came in from almost every corner of the world. AIDS was definitely not confined to homosexuals, hemophiliacs, heroin addicts, and Haitians, as the derogatory nickname “Four-H disease” suggested (Grmek: 1990: 31). WHO responded with a two-person unit in 1986 sent to track the virus and compile information about its transmission. Within the next year, it was transformed to the Global Programme on AIDS (GPA). When the General Assembly in 1987 urged other organizations to submit to the control and guidance emanating from

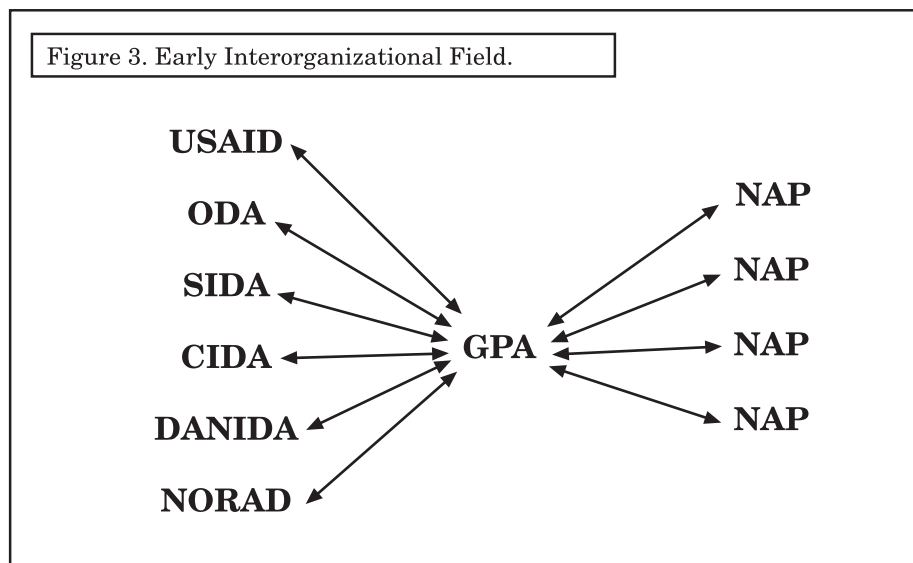
WHO, that signaled the UN's ambition to assign GPA a leadership role for AIDS (Res. 42/8). Exactly how this task was to be accomplished, however, was left out of the resolution. No effective means to coordinate were given to WHO, which consequently found itself unable to coordinate the UN system effectively.

Once in motion, GPA grew exponentially, as more and more governments chose to utilize it for multilateral assistance programs. Staff grew from two persons in November 1986 to twenty-nine in March 1987, and resources were made available from member governments. For various reasons, AIDS was difficult to handle for national government organs. Going multilateral hid AIDS as one among many issues for which development-assistance money was provided (GPA/GMC(8)/92.4: 4). Financial contributions also increased: \$6.5 million in 1986 grew to \$29.8 million in 1987. Foremost among donors was the U.S. government, which, through the United States Agency for International Development (USAID), provided \$6.4 million, followed by the United Kingdom and Sweden, each providing roughly \$5 million through their aid agencies Overseas Development Authorities (ODA) and Swedish International Development Authorities (SIDA). Also, the Netherlands, through the Netherlands Development Agency, and Canada, through Canadian Aid Agency (CIDA), contributed large sums—about \$4 million each. Denmark, through The Danish International Development Agency (DANIDA), and Norway, through the Norwegian Agency for Development Cooperation (NORAD), donated \$2.2 and \$1.8, respectively (WHO/GPA 1992: Annex 8). These are easily recognizable as the major donors for development assistance in other areas as well—which shows that the multilateral approach was by no means an unusual way of proceeding for the donors.

An interorganizational field around AIDS began to take shape, with the participating organizations connected through resource flows. On the supply side were the main donors, and on the recipient side were various National AIDS Programmes (NAPs) stimulated by GPA in recipient countries. As of 15 April 1987, sixteen countries had, with the assistance of GPA, developed short-term plans (WHO/SPA/GEN/87.2). GPA was situated in-between as linking-pin. From a pure resource-exchange perspective, GPA

appears highly influential, with links to all other organizations in the system. Naturally, donors are the main players, since they effectively control the amount of money made available to GPA. Once money leaves donors, however—or when donors have few alternative organizations to engage in projects and the like—intermediaries like GPA and NAPs may have some leverage. So if GPA was not able to use the money on NAPs or some other recognized organization, the reason for moving money through them would disappear for donors. NAPs, hence, needed to work smoothly—that is the reason for GPAs’ efforts to make them work.

The number of links is not very important per se; more important is to which other organizations the links go. GPA is vulnerable both to NAP failure, since that would leave it without meaningful activities, and to donors. If it can get NAPs off the ground and persuade donors of the added value of multilateral approaches, its linking-pin position is an advantage; otherwise, it is more of a threat.



The emerging interorganizational field was centered around GPA mainly by virtue of the recognized capacity of WHO to run medical programs and to collect and disseminate epidemiological information. Biomedical-research exchange between WHO Collaborating Centers also formed an important part of WHO's standard activities. Absence of a cure and a vaccine rendered WHO's standard response, vertical mass campaigns, useless, however. Already under fire from within the organization, vertical programming had started to give way to horizontal approaches, emphasizing integration of health and other social and economic issues with the primary-health-care focus advocated by the *Health for All* strategy. This points in the direction of other organizations in the UN family and elsewhere that are better equipped to deal with the particulars and cultural differences encountered in the field.

The WHO-UNDP Alliance to Combat AIDS

If the interorganizational field of health has its geographical center in Geneva, where both WHO and the Federation of Red Cross and Red Crescent Societies have their headquarters, the epicenter for multilateral development activities is New York City and the UN headquarters. ECOSOC, which formally coordinates development activities in the UN system, and the United Nations Development Programme (UNDP) are located in New York, and so are a vast number of international-development NGOs. Moreover, those with no presence in New York have gotten used to the fact that debates and deliberations with a direct impact on development agendas take place in the General Assembly as well as in the aforementioned ECOSOC, UNDP, and a host of other programs and funds with development interests and activities.

The poverty profile of AIDS gradually emerged during the years 1986–1987. The emerging picture was that of “a virus which behaves like a misery-seeking missile, seeking out populations made doubly vulnerable by their lack of information, and by their health, behavioral and socio-economic status” (Panos Institute 1988: ii). Development organizations began to question the competence of WHO in this area as well as to sense possibilities to

expand organizational agendas. As coordinator of the Global AIDS Strategy, WHO naturally perceived this as a threat.

Effective development programs were dependent on a strong field presence for delivery. If GPA were not able to connect to these groups, the multilateral approach might well be abandoned for more bilateral programs—or donors might decide to move resources elsewhere in the UN system, for instance to UNDP. On both accounts, WHO needed to ascertain that GPA became a partners in that bargain. One tactic, hence, focused on allying with UNDP, and “The Alliance to Combat AIDS” was created in March 1988. Three motives were given for this move, but this local connection is pronounced in all three (GPA/GMC(1)/90.7: 2).

This unique undertaking seeks to ensure coordinated, complementary, and harmonious actions to combat HIV/AIDS by combining the strength of WHO as the international leader in health, UNDP as the leader in socioeconomic development, and UNDP resident representatives as resident coordinators of the United Nations system’s Operational Activities for Development in supporting coordinated action as the country level.

The alliance with UNDP falls slightly outside the immediate scope of this study, but it is interesting in that GPA tried to utilize the good relation between NGOs and UNDP to get closer to the NGOs. However, recruiting NGOs in order to carry out AIDS-prevention and -control programs designed by GPA was not as easy a task as perhaps envisioned. It was clear to GPA that it was crucial to engage NGOs in the global strategy. As an IGO, WHO lacks substantial credibility among, and access to, communities, as a strategy paper explains (GPA 1988:1). But, on the other hand, one incentive for NGOs to seek GPA liaison grows out of the fact that “NGOs lack national authority and the ability, individually, to raise considerable resources (although their cumulative command of resources is substantial)” (GPA 1988: 1). Possibilities for cooperation were thus present, as the mutual dependencies could be

explored. Access to local communities could be exchanged for financial resources. Since GPA itself did not command these, the connection with governments through the multi/bilateral approach needed to be secured. Further adding to the attractiveness of GPA in the eyes of NGOs was the increased bargaining leverage vis-à-vis governments that liaison with an IGO might offer. Although GPA's primary motive may have been the necessity to build capacity on local levels, the additional resources commanded by NGOs could conceivably be put to work for the global strategy. The problem was, of course, that other actors, too, saw NGOs as attractive partners.

Expanding the Interorganizational Field

WHO's designation as the systemwide leader and coordinator of the entire UN system intruded on the turf of the Department of International Economic and Social Affairs (DIESA). In an effort "to examine how the United Nations system could contribute to a better understanding of the socio-economic implications of AIDS"—in practice to coordinate the activities of the UN system—a UN Steering Committee was created, which in turn created a UN Standing Committee on AIDS—the Inter-agency Advisory Group on AIDS (IAAG). The committee consisted of several specialized agencies and programs: the Food and Agriculture Organization (FAO), the World Bank, the International Labor Organization (ILO), UNDP, UNICEF, UNFPA, the United Nations Office in Vienna, and WHO (IAAG: 1989). All of these organizations had an interest in participating in AIDS activities in the larger context and perceived the designation of WHO as focal point for these activities as premature and misdirected, given the social and economic aspects of AIDS. On a general level, the entire situation was surrounded with uncertainty about what was going on in various parts of the UN system and among international NGOs. Getting on top of the situation was a primary .

DIESA took on the task of achieving better coordination among NGOs as well. For that purpose, a meeting with NGOs was arranged in May 1988. Participants were all the NGO committees

established in New York for various topics, such as the Committee on Development, the Committee on Youth, and the Committee on Population (DIESA 1988). Although claiming to be assisting GPA and urging everyone to act in conformity with WHO's global strategy, DIESA had the ambition to establish some kind of more permanent structure for UN-NGO coordination on AIDS (DIESA 1988: para. 15). To be sure, DIESA already had an NGO Unit, and several so-called liaison bodies were in existence in New York. One of these was the *Conference of NGOs in Consultative Status* (CONGO).

The DIESA meeting was perceived with hostility by WHO—as an effort to hijack AIDS from GPA. At the meeting, such issues as appropriate organizational structures for NGO participation were discussed, as was the general ignorance in New York of what WHO was doing in relation to NGOs. With little knowledge of GPA among NGOs, and with other UN organizations responding to a heightened interest in AIDS from the media and the general population, there was a risk of NGOs directing their attention in some other direction than toward GPA. WHO's New York officer concluded after the meeting (WHO/LUN memorandum 1988: 5):

It appears to this observer that if WHO is to maintain for AIDS a *de facto* leadership role in the UN, it would be appropriate to strengthen its AIDS presence at the seat of UN power—in New York.

Thus, NGOs became part of the struggle for the linking-pin position within the UN for AIDS. Some kind of liaison arrangement was needed—that was clear—but what? Moreover, although GPA generally acknowledged that NGOs were vital partners, it was not totally convinced of the need for going beyond the procedures already established in WHO for NGO relations—those leading up to “Official Relations” status. The practice already in place, it was thought, might suffice also for this program. Moreover, the newly created ASOs were frequently perceived as arrogant and too outspoken for GPA's taste, even detrimental to the ability of GPA to work with their natural counterparts—governments (Internal

memorandum, 7 March 1988). Perhaps GPA had in mind the AIDS Coalition To Unleash Power (ACT UP), founded in 1987 with the intention of publicly embarrassing decisionmakers' slow responses. These "angry young men" were definitely not polite but, rather, were outspoken on every conceivable issue of relevance to the AIDS epidemic and intent on publicly disclosing slow and bureaucratic responses to AIDS wherever they were encountered (Kramer 1989: 137). Problems were foreseen in the prospects of integrating a new, almost militant, way of doing business with the established intergovernmental procedures and modes of operation.

On the other hand, the risk of losing initiative to some other putative linking-pin was apparent. Facing the upcoming CONGO triennial meeting in September, GPA felt pressured to act (Internal memorandum, 13 July 1988):

Given the likelihood of independent moves to organize NGO action at the international level, it appears urgent that we take this opportunity to assert WHO's coordinating role.

A proposal had therefore been sent to the Non-Governmental Liaison Service (NGLS) in Geneva to work out a liaison procedure that could be operated jointly and that could start in August 1988 (NGLS/Geneva 1988). As noted in the proposal, "[C]omparatively little specific activity has taken place since the launch of GPA to develop a strategy for the involvement of voluntary agencies in the overall AIDS effort" (NGLS/Geneva 1988: 3). The NGLS proposal had a distinct development slant—NGLS's mother organ is the United Nations Conference on Trade and Development (UNCTAD)—and should, of course, be interpreted in the context of competition over NGO control. The CONGO meeting provided competitors with a good opportunity to create some UN-NGO committee on AIDS. If a more concrete proposal could be presented by GPA, with itself as linking-pin, the CONGO meeting would also provide an opportune moment to distribute materials advertising GPA's work to a wider NGO audience.

The situation began to clear for GPA, and the need to incorporate NGOs more fully was now obvious. Still, however, no efficient system had been devised to further GPA-NGO collaboration. Yet financial resources kept coming in from development agencies to GPA in unprecedented amounts. For unspecified global activities, \$29.8 million in 1987 increased to \$59.3 million in 1988 and to \$63.3 million in 1989 (WHO/GPA *Progress Report* 1992). Most of the resources went to NAP support, due to institutional constraints, but ministries of health—GPA’s normal partners in health cooperation and assistance efforts—were not ideal for several reasons, as previously discussed. NGOs were seen as capable of strengthening the capacity of GPA to reach those outside or marginalized by present health-systems (Panos 1988: 79–85; 95–98). These NGOs, however, were largely still unaware of GPA. Three strategies were devised to remedy this situation: the Global Partnership Programme, financial and moral support for NGO meetings, and networking activities and information campaigns making GPA and the Global Strategy known in wider circles (*WHO/GPA Support to NGOs*, Draft November 1990).

The Partnership Programme

Under the Partnership Programme, seed money could be transferred directly to local NGOs working with international counterparts (GPA/DIR/89.13). Projects still had to be authorized by national authorities (GPA remained an IGO), but, once a project was approved, money could be transferred to NGOs without interference from authorities. Each individual project was to be funded with fifty thousand dollars, and a total of \$1 million was initially allocated. Thus, catalyst effects were hoped for, whereby other donors would come in and add resources. The main program areas envisioned for this initiative were prevention and care for “hard-to-reach” groups, collaboration between NGOs and IGOs or governments, and the establishment of NGO networks. The ambition to create a deep interorganizational field for AIDS prevention and control, going all the way down to local communities, is easily

recognizable. WHO explained in a press release (WHO, note for the press, 12 January 1990):

With the non-governmental movement growing in parallel with the actions of governments around the world, and in accordance with the Global AIDS Strategy, the impact of such a development should not be underestimated.

With money going through international NGOs, working in tandem with local NGOs, two birds could be killed with one stone, so to speak. Through the engagement of both international and local NGOs, GPA could engage a major competitor for government funds to work for itself and, simultaneously could achieve recognition as an important and beneficial agency for local NGOs. A look at the organizations that received awards provides some reasons for such an interpretation. Among the successful applicants were the American Red Cross, CARE Canada and CARE USA, World Vision, Marie Stopes International, and the British Catholic Fund for Overseas Development—all large-scale renowned development organizations that were already well entrenched in global development activities (WHO/GPA 1990, *Partnership Grants for Nongovernmental Activities on AIDS, informal discussion paper #1*, November 1990). During the period 1990–1992, a wide variety of organizations of increasing geographical scope was funded.

As a complement to the Partnership Programme, GPA issued a recommendation that 15 percent of all money received from the GPA Trust Fund be devoted to NGOs.

Support for Networking Activities

The multiplicity of NGOs needed to be addressed. Too many demands and wishes were directed toward GPA, who had no possibility of attending to NGOs on a case-by-case basis. GPA needed stability and certainty, not chaos. Early on, GPA had sought to stimulate the creation of consortia and umbrella organizations, but there was clearly a need for networks of networks.

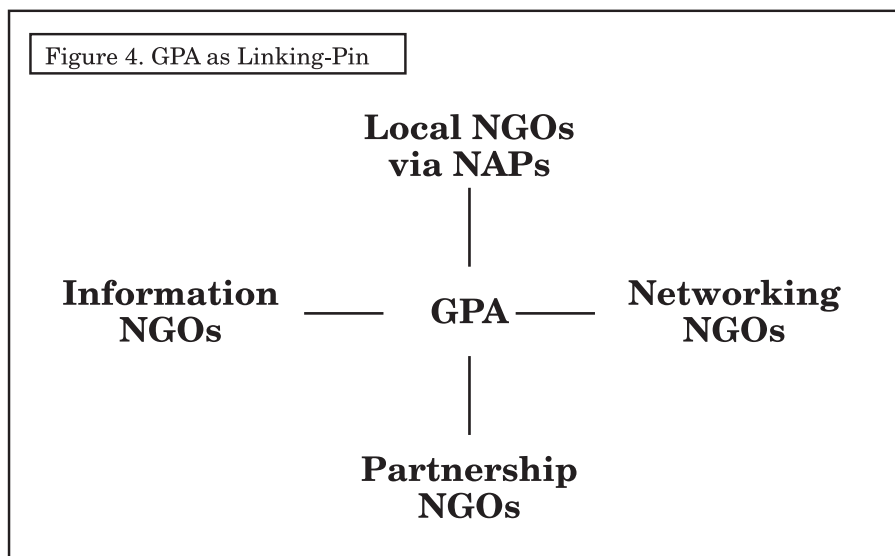
Support was given to networking activities among organizations and to meetings and conferences for regional gatherings as well as those with global ambitions—but also to key groups like women and PWAs (GPA/GMC(2)/89.5).

ASOs, which previously had struggled to become established, had now matured, had acquired the skills to attract attention from politicians and the media, and were ready to take a more active part in policy formulation. An international consortium of ASOs could help establish GPA among the myriad of ASOs constituting the base of AIDS service, prevention, and control efforts in different societies. With the assistance of GPA, they might be able to unite and become efficient partners in a joint policy endeavor. During the first years, support was directed toward establishing an International Consortium of AIDS Service Organizations (ICASO) and the Global Network of People with AIDS (GNP+), but at least six fledgling networks received support in the form of money and recognition in the form of GPA attendance (GPA/GMC(9)/93.6).

Advertising GPA and the Global Strategy

In addition to financial-resource flows, information constitutes an important resource, control over which enhances an organization's ability to steer. Simply knowing who does what is important for organizational activity. In addition to channeling resources, the Partnership Programme automatically increased mutual awareness between NGOs and GPA, input with implications beyond the immediate projects in question (WHO/GPA 1990, *Partnership Grants for Nongovernmental Activities*, November 1990). In addition, GPA sought to stimulate the production and circulation of several newsletters among NGOs. For instance, the British organization Appropriate Health Resources & Technology Action Group (AHRTAG) was funded to distribute a newsletter titled *AIDS Action* (GPA/GMC(2)/89.5: 18). The newsletter, which was distributed to more than seventy-five thousand addresses, also contained a small insert from GPA—"WHO News." The newsletter was also translated into Spanish and Portuguese. In

this manner, GPA tried to advertise itself as a useful partner in AIDS work for NGOs, to build a wider constituency, and to increase awareness of the Global Strategy. A simple diagram well illustrates GPA's position:



Breaking Out of Intergovernmentalism?

An external review of GPA had disclosed that NGOs frequently interpreted coordination efforts as control-oriented, intended to discipline rather than to assist local organizations (GPA/GMC(8)/92.4: 35). The ability of NGOs to attract resources had also increased, as their activities had become more focused and specialized. Donors, hence, recognized the competence of ASOs and found less need to move money through GPA. Moreover, donors had begun to channel assistance money bilaterally both to NAPs and to indigenous NGOs.

The Global Network of People Living with AIDS (GNP+)—formed by and for HIV-positive people, and perhaps the most sought after partner for AIDS prevention and control programs—

and ICASO were organizations with a solid grounding in communities. ICASO was gradually evolving into a regionalized structure with five regions and a central secretariat, the latter located at the Canadian AIDS Society, a pioneering AIDS activist organization with extensive links to GPA (ICASO 1995: #5). The International Community of Women living with HIV/AIDS (ICW), founded in 1992, is the only international network run for and by HIV-positive women, who are recognized as doubly vulnerable to HIV because of gender oppression in many societies. Once the connections with GPA gave these organizations both recognition among donors for health activities and resources to become established in the form of support for newsletters and conferences, their dependence on GPA gradually waned.

For the first time, contributions to GPA for unspecified global activities decreased in 1991 (*1991 Progress Report: Annex 8*). GPA's linking-pin position was again threatened. The efforts to generate and coordinate UN systemwide activities did not yield the intended results either, giving an impetus to independent programs from different UN agencies. The reviewers suggested that an entirely new structure be created (GPA/GMC(8)/92.4: 41). All major bodies with AIDS activities were suggested as members of this multi-agency alliance, which came into being on January 1 1996, but little was envisioned for NGOs.

UNAIDS and NGOs

The new joint program is a strong indicator of the interdependence among IGOs, NGOs, and governments. A bargaining process involving all three kinds of organizations had made it clear that observer status for NGOs—the rule previously—would not suffice for the NGOs this time. And, indeed, the UNAIDS structure places five NGOs next to governments and IGOs as nonvoting members on the Programme Coordination Board (PCB), the highest decisionmaking body. In addition, a NGO/PWA Liaison Committee (NLC), consisting of the five members and alternates from each region, has been formed. Funds for PCB and NLC meetings are provided by UNAIDS. The selection process included

a “call for nominations” and a selection committee “tasked with ensuring an appropriate mix of qualified individuals” (ICASO 1995: #3). Hence, NGO participation in UNAIDS is ensured, and resources for that purpose are made available from the general UNAIDS budget. Governments, then, sponsor NGOs to the same degree that they sponsor other governments.

In terms of representation, it seems as though the interdependence between UN agencies and NGOs has been acknowledged in the form of joint decisionmaking. Of course, if they wanted, governments—there are twenty-two government members—could simply run over the NGOs, but, again, the necessary involvement of these NGOs later in the process would be enormously complicated, should this become the pattern.

Following the Paris Summit (WHO Press Realease #93), where forty-two governments confirmed their continued support of multilateral AIDS activities, the vital role of NGOs was confirmed. NGOs and PWA are seen as “vital partners of UNAIDS” and “their comparative advantage of proximity to, and understanding of, communities,” as well as their important role in “shaping world opinion and policy,” are necessary ingredients if UNAIDS is to convince governments to pay their dues and come up with extra-budgetary funds to cover the program. Estimated expenses for 1996–97 are \$120 million—that is, considerably less than for GPA, at least in its good old days (*UNAIDS 1996–97 Proposed Budget*: 7; 33–34). Donors have obviously not been convinced of the necessary inclusion of UNAIDS in their development and AIDS activities.

UNAIDS suffers from their lack of funds for NGOs. Unlike GPA, it is not a funding agency and, consequently, cannot offer NGOs financial resources. What they do have to offer beyond a convenient place for contacts with donors and other UN agencies is limited. A proposed “Advisory Committee” tries at least to offer an opportunity for large networks to be present as advisers in UNAIDS efforts to come up with “best practice” of AIDS control and prevention (*UNAIDS, A Proposed Strategy for UNAIDS to Work with Nongovernmental Organizations*, February 1997). The arrangement seems very similar to the old order. The members of the committee, it is proposed, would serve as a “sounding board

for UNAIDS,” “a source of information.” What UNAIDS has to offer in return is more difficult to see. From an interorganizational perspective, the chances that this committee will function as intended are small. Instead, NGOs’ needs have to met by National AIDS Programmes.

The problem of placing the major burden of responsibility on NAPs remains a consideration, since governments have frequently chosen to marginalize community-based organizations at that level (UNAIDS, *A Proposed Strategy*: 3). What UNAIDS can do to push NAPs to include NGOs remains obscure. The Partnership Programme of GPA was not extended beyond its three-year mandate, but one element in the otherwise mysterious GIPA (Greater Involvement of People living with HIV/AIDS) package is a small-grants program—very limited funds for “catalytic and cutting-edge opportunities” (UNAIDS, *A Proposed Strategy*: 13), which can pick up where the Partnership Programme left off. At present, however, no money has been contributed to this end. France has announced a one-time contribution, but has so far not delivered (ICASO 1995: # 4). Perhaps UNAIDS can serve as door openers for NGOs, assisting their contacts with national authorities and other donors.

One meeting has been held under the new program, in Paris, on 10–13 January 1996. Present were the five PCB members and their alternates, the networks GNP+, ICASO, and ICW, and a few other organizations—the same organizations that were part of the interorganizational field during the GPA era. The meeting was the first arranged under the new structure. It appears as though GPA was moving ahead a little too quickly: the innovations of 1988–1989 did not materialize until 1996 at the expense of—and herein lies the paradox—GPA itself.

Implications for Global Governance

From an interorganizational perspective, partnerships between IGOs and NGOs grow out of resource interdependencies and mutual recognition of competence. AIDS was pushed in WHO’s direction because of its reputation in multilateral health activi-

ties—not because of a recognized capacity as a development organization or after a thorough analysis of their capacity to solve the AIDS crisis. NGOs were approached since GPA was at a loss regarding appropriate interventions of AIDS control and prevention efforts. NGOs were forerunners and possessed expertise badly needed by GPA. Furthermore, WHO's weak delivery capacity in the field necessitated a strengthening of local presence that only NGOs could muster. NGOs had to be controlled, too, since their nuisance potential was dangerously high for GPA and risked damaging its possibility to work with IGOs' traditional governmental partners—who also provided the funds.

For fulfilling these functions, NGOs wanted something in return. NGOs' relatively limited ability to generate financial resources offered one possibility. GPA had substantial discretion of funds that could be used to attract NGOs. It could also add a sense of competence and seriousness, given their intergovernmental status—which was something NGOs wanted in their bargaining with other donors and national governments. That is, this partnership worked fine as long as both sides had something to gain. Gradually, however, NGOs increased their ability to generate funds from other sources and even started to compete with GPA for bilateral funding. The necessary interdependencies became less and less pronounced.

As UNAIDS has increasingly pushed responsibility for AIDS programs down to national levels, it is unclear on what its attraction can be based. No money and scant possibilities of directly influencing programs—as well as increasing abilities of NGOs to generate sources from—make UNAIDS a less attractive partner.

To be sure, NGOs have been offered a seat at the center of global governance with their five representatives at the PCB; and the above-mentioned Advisory Committee has also been set up. However, the PCB appears to have relatively minor opportunity to influence the oftentimes radically autonomous specialized agencies of the UN system, and advisory committees as such frequently have rather nebulous mandates. From an interorganizational perspective, the global governance of AIDS seems to have moved back to a situation dominated by governmental organizations by virtue of their strong grip on the purse. Although GPA

managed to loosen that grip for a brief period in time, it remains an open question whether it can be loosened again by UNAIDS.

UNAIDS' strength lies in offering a place where open debates can be held on equal terms with all the major stakeholders simultaneously. To the extent that NGOs feel they can influence policy at those occasions, they will probably find the participation worthwhile and assist UNAIDS with vital expertise that only people with HIV/AIDS have.

An issue that any curious observer of this process wishes to see discussed is the ways in which NGOs and GPA were consciously developing relationships with each other. Lack of existing NGOs ready to work with GPA, or ignorance of those that did, pushed GPA to advertise itself and to seek partners who could mobilize community-based NGOs useful in the strategy. But how were these potential partners selected? What was the basis for approaching specific NGOs? Furthermore, one of the defining elements of the respective IGO and NGO spheres has been to remain distant partners and only reluctantly work together. How were these mutual animosities avoided, and prejudices, overcome? What were the processes behind the common formula? These and related questions need to be addressed from a different perspective, breaking up the perception of organizations as unitary actors related to each other through common histories and resource scarcities. The next section takes us through the process of establishing relations between IGOs and NGOs from the perspective of networks and leadership.

Chapter Eight

Networks and Leadership

The previous section presented AIDS governance as interorganizational dependencies managed through a process of institutional bargaining, whereby “organizations seek to reduce environmental uncertainty by creating ‘negotiated’ environments” (Cook 1977: 67). Two of the principal architects of resource-dependence theory, Pfeffer and Salancik, in their seminal work *The External Control of Organizations* (1978), devoted extensive space to how the organizational environment could be known and understood by an organization. They looked to constructivism for guidance, adopting the concept of *enactment*, which they used to denote the process by which organizations become aware of their external environment. The problems they ran into become clear from the following passage (1978: 73):

The question of what the environment is, is meaningless without regard to the focal organization which enacts, *or more precisely, the individuals who enact it* in planning the activities of the organization.

The limits of the interorganizational relations model are clear in this quotation, since what are constraints and/or possibilities becomes a result of interpretation—rather than some objective resource-dependence situation or a particular configuration of norms and rules. In an ambiguous technical and institutional context such as AIDS, several interpretative possibilities may be open for the individual at any point in time. The structural configuration may allow different equilibriums, but an interorganizational framework has reached its analytical boundary when it comes to

explaining why a particular way of acting or thinking was chosen rather than another.

It is obvious that organizations consist of people. People engaged in certain activities and performing certain tasks are, quite literally, the flesh and blood of organizations. The importance of these people is the logical inference from this observation and the foundation of the network perspective. Individuals in organizations may or may not act in concordance with dominant discursive practices or interorganizational power relations. Nor need they at all times follow norms of appropriateness. The space open for human discretion is the subject to be considered theoretically in this section.

The fact that the actual acts of governance are carried out by individual human beings has led one scholar to claim that the very framework for global governance is constituted by “networks of bureaucrats, coordinating their decisions . . .” (Hopkins 1978: 31). Hopkins claims that, in the issue he studied, “management has resided to a large extent in the hands of informal international management networks comprised of officials in government and private industries” (Hopkins 1978: 31). The network perspective posits that this type of informal group, by way of off-the-record meetings, informal coordination, and the like, manage to break down prejudices and establish a shared vision that enables them to steer international policy processes. The central issue, hence, is the relation between these networks and their respective constituencies—as well as the dominating ideas of these.

The following is an attempt to draw on two bodies of literature that I have found valuable in this regard. The first is that of network theory, which emphasizes the role of individuals operating either in their own capacity or as boundary-role occupants. The second is the literature of leadership studies, employing an even narrower focus on individual performance and ability to influence other people and generate followers. Both variants essentially imply that creativity and persuasive skills determine the interpretation of events and steer processes in desired directions or, alternatively, manage to block or stall events and processes that might otherwise have happened.

A few general points, common to both ideas, are in order. A distinction frequently employed in both strands of theory is between individual and collective usage of the terms. Whether it is the organizations in their entirety or the boundary-role occupants that should be viewed as the basic unit of analysis is a dividing line between network theorists. Here, the term *network* has been reserved for the interpersonal network, thus implying a focus on the individual participants. The same distinction applies to the concept of leadership. Here, *leadership* stands for individual, not collective or organizational, leadership (cf. Marsh & Rhodes 1992). The extensive IR literature dealing with leadership on behalf of nation states for the solution of various global scourges, hence, does not apply. In fact, the primary questions raised by both network and leadership theory concern the relation between individuals and the different collectivities for which they act. This link would disappear if the terms were used in their collective variations.

Methodologically, in order to understand why something happened, it becomes necessary to put oneself in the shoes of the individual actor. One needs to re-create the situation and, based on that information, try to comprehend the individual reasons and considerations behind particular choices and the constraints and possibilities available to the actor. There is a latent risk with this perspective in that it emphasizes the role of the individual and downplays the structural conditions enabling and constraining individual choice. It sees history as driven by individual choices and gives a presentation of organizational choice as essentially the result of individual decisions. On the other hand, the role of the individual actor is, in fact, what constitutes the focus of this theory. The individual actor is an important factor that has frequently been neglected within political science in general and IR in particular. Many traditional fields of inquiry within political science would benefit from a more explicit analysis of network and leadership processes (cf. Lundquist 1989).

It is unusual for informal processes to leave much in terms of written materials. Once written down, informality transforms into formality. For a researcher to document informal processes, it becomes necessary to rely on interviews. Consequently, much of the

account of global governance offered below lacks explicit references, since many do not wish to be connected to specific statements. I refer to the list of interviews provided at the end of the book.

Interpersonal Networks

Several academic usages of the term *network* can be found, each denoting somewhat different phenomena. Here, the term denotes a loosely formed group of individuals who recognize their togetherness. Typically, they share basic constructions of problems and how they may be solved, and try to change or preserve a situation accordingly. Surrounding individuals, it is further posited, act and think differently from those inside the network. The concept of “epistemic communities” has gained some notoriety in the field of IR and, therefore, warrants some attention. This Foucauldian concept denotes a kind of network, bound together by a common view of means/ends relations and shared principled beliefs (Haas 1992). It has been popularized in governance studies, particularly those on the creation of international regimes for the protection of natural resources and the environment, but also for security (Adler 1992). The principal advocate of the presence of epistemic communities in successful regime creation is Peter Haas, who proposes the presence of epistemic communities behind successful regime creation. Epistemic communities could be accommodated usefully within my framework, since networks necessarily have something in common that is recognized by the participants.

The existence of communities and networks has to be inferred not from the presence or absence of change, but from the presence of groups with shared views of the world and common agendas. Whether they are successful or not cannot be part of their existence. Regardless of whether the network rests on epistemic factors or on something else, such as a common history or mutual interests, this perspective grows out of a realization that organizational members may follow organizational scripts and standard operating procedures more or less strictly. The possibility that individuals’ interests, ambitions, and senses of being somehow

divert from those of their home organization or constituency is not hard to grasp, once the treatment of organizations as unitary is relaxed. People are engaged in various activities outside their formal organizational position that give rise to impulses and habits other than those that organization rules prescribe. Moreover, when persons engage in interaction with other individuals representing other organizations, the possibility that there may gradually evolve a shared sense of meaning surpassing organizational boundaries seems natural. Giddens, for instance, suggests that face-to-face encounters are crucial bearers of change (Giddens 1990: part 3).

Sociological scholars have elaborated advanced research techniques for verifying the existence of network boundaries and participation—in many respects the same techniques discussed in relation to interorganizational fields. Here, however, the term is used in a more metaphorical manner, without the rigorous methodology advocated by orthodox scholars of social networks (e.g. J. Scott 1991). The method used here to investigate the presence of networks has been participant observation at meetings and conferences, interviews, and process tracing. A snowballing procedure—whereby interviewees have been asked to identify salient persons with whom they work together—has been an important aspect of this approach. As a complement, following the paper trail has proven useful for tracking input in stages preceding formal negotiations. My use of the term network, hence, is the same as Dowding’s “metaphorical usage” (Dowding 1995: 136).

A interpersonal network, then, signifies relations between organizationally different participants who nevertheless display a common view of the world and a sense of shared commitment to norms and rules. The boundaries of this kind of network are determined by mutual recognition and shared meaning, and do not follow organizational lines (Jordan & Schubert 1992: 7–27).

Boundary-Role Occupants

As has been stated at the outset, interaction from this perspective has to be performed by individuals. The individuals forming in-

formal interpersonal networks that cut across formal organizational boundaries have been called “boundary-role occupants” (Jönsson 1994: 466; referring to Organ 1971: 80). As brokers between their organizations and the external environment, these individuals in a sense create the environment to which the entire organization subsequently relates. The interpretations of the outside are relayed to managers and others on the inside and, consequently, to some extent reflect the ideas and values of the person performing a boundary role. This individual establishes what will be considered important and extraordinary, what warrants attention, and what is normal. The boundary-role occupant must balance and weigh the competing interests of the constituency. As both bargainer and representative, the boundary-role occupant attempts to build a package acceptable to both the other side and to his or her own constituency.

Organizational members in other positions have to cope only with their relation to peers and executives. Although this task may be highly difficult, boundary positions are subjected to even further pressures and demands. In the sort of issue analyzed in this study, the number of organizations involved far exceeds the number of members in an interpersonal network. Boundary-role occupants forming networks here typically represent not only their own organization but several others as well. This may be the case formally, with various nongovernmental umbrella organizations and secretariats of IGOs, but also informally, where costs of participation in conferences and meetings far exceed the ability of many organizations. What we have is a multidimensional situation, where the complexity of the bargaining process both restrains and opens possibilities for individual actors.

A particular kind of boundary-role occupant is the “in-and-outer,” who appears to have better possibilities of handling such complex and dynamic situations than individuals with only limited organizational experience. A prominent in-and-outer himself, Maurice Strong (1978) maintains that an in-and-outer “provides a key-element in the functioning of these networks and systems.” What he refers to are civil servants who over the years come to serve on secretariats of various different organizations, including national governmental agencies, IGOs, and NGOs as well as even

business enterprises. Personal contacts from a large number of concerned and involved organizations greatly facilitate connections and communication. Moreover, in-and-outers become familiar with the particularities within single organizations.

Christer Jönsson (1991) has tried to break down the activities of personal networks and leaders into three elements. Each focuses on cognitive process and the role of knowledge, and particular ways of presenting and framing problems. He argues, first, that in complex institutional bargaining situations, the use of knowledge and information is crucial. Hence, cognitive processes form an important dynamic in such processes. Second, informal interpersonal networks may aid bargaining parties to overcome negative images and prejudices frequently plaguing institutional bargaining. Oftentimes, individuals in bargaining-situations have based their position on stereotypes of adversaries and on ill-grounded assumptions. Third, repeated interactions and face-to-face contacts have been shown to increase trust and confidence in other contexts, and Jönsson's studies seem to corroborate those findings in issues of international cooperation as well. Boundary-role occupants are instrumental in introducing at least mutual respect and perhaps even trust (Giddens 1990: part 3).

Boundary-role occupants in a network may jointly further understandings of the parties in a more positive light. In the longer run, negative images may be broken down and replaced with trust and good faith. Giddens (1990: 90–91) further suggests that “attitudes of trust, or lack of trust, toward specific abstract systems are liable to be strongly influenced by experiences at access points. . . .” The boundary-role occupant together with others in similar positions can be seen as gatekeepers for organizations. Their understanding of what is important and valuable greatly affects the bargaining process.

The conclusion that networks of this kind always aid cooperation or contribute to mutual problem solving cannot be drawn, however. Several issues arise in this context. For instance, boundary personnel may be presenting erroneous information, or several different and conflicting interpretations may enter organizations from various monitoring points. In a highly complex environment, the risks of this occurrence should not be underes-

timated. Moreover, boundary staff select and screen, thus being able to weed out anything that appears threatening or that may undermine the position of the person or the network. Iron triangles and “old boys” networks are terms that try to capture this conserving capacity of networks of centrally located individuals.

Moving the logic of network or group theory one step further leads to a focus on the single individual. Networks consist of people and, thus, can be broken down further. Since what is agreed cannot be understood in objective terms but is socially negotiated, personal bargaining skills of boundary-maintaining staff come to the forefront. Whether active as parts of networks or on their own, individuals sometimes manage to influence the course of events in extraordinary ways. This phenomenon, as dryly pointed out by Burns, “is one of the most observed and least understood phenomena on earth” (1978: 2). Nevertheless, an effort will be made to draw some inferences from this vast and unwieldy body of literature, since leadership bears directly on the relevance of networks.

Leadership and Followership

Individual accomplishment may lead other people to change their views and follow those of a leader. Within organizations as well as outside, extraordinary performances sometimes gain the attention of others who, for some reason, decide to forgo established ideas and practices and instead follow new paths.

A major research project, directed by Oran Young, on regime formation in the Arctic region concluded that “leadership on the part of individuals—not amorphous leadership exercised by governments on behalf of states—plays a key role in regime formation” (Young & Osherenko 1993: 234). There is no reason to believe that this would not be the case for bargaining processes regarding other types of issues as well. Much bargaining involves highly technical and complicated issues not easily comprehensible without profound knowledge. The amount of available information is usually enormous. This situation appears ideal for persons with an ability to “create a structure out of a large mass of information wherein it is possible to apply human wit” (Winham 1977: 89).

Leadership theorists seem to share that conclusion but diverge into two separate traditions. One tradition focuses on leaders, *per se*, and develops the psychological traits giving the skills that serve to develop a leadership capacity. How leaders are mentally equipped seems to be the guiding question for this line of research, and many suggestions have been offered. Deserving of mention for their explicit political focus are Harold Lasswell's (1960) Freudian analysis in "Political Man" and Alexander George's (1986) application of the Lasswellian framework in his study of Woodrow Wilson. The quest for power is here typically seen as compensation for deprivation in other areas. The goal appears to be to come up with formulas for effective leadership.

Another way of proceeding is to focus less on what leaders are and more on what they *do*. In what kinds of activities are they engaged? This is the line followed here, as the purpose is not to dwell on the psychological characteristics of leaders. A focus on activities directs attention instead to the functions of leadership. What leaders do that give them followers is the focus, regardless of how they may be categorized psychologically.

Raino Malnes (1996) has suggested that leaders always act to satisfy collective goals rather than strictly egoistic ones. This tendency is supported by psychological tests, showing that individuals able to exercise effective leadership have scored high both on "power need" and "social orientation," which implies that leaders, when efficient, use their resources to satisfy collective rather than purely personal goals (House, Spangler & Woycke 1991: 367). Realizing common goals is one element of leadership. The methods for attaining these goals, in Malnes's understanding, lie in problem-solving capabilities. Leaders have an ability to see solutions to intractable bargaining situations where others only see conflict. And, most important, they manage to present solutions in such a way as to convince other parties of the virtues of the proposed solution and persuade them to follow voluntarily.

The consensual element constitutes the second criterion for distinguishing leaders from others. Without followers' decision to follow freely, leadership is not present—coercion is not leadership. This understanding of leadership is by no means unique for Malnes. Several scholars adhere to such an understanding (e.g. Burns

1978). Lundquist (1989: 152), too, in a minimalist fashion, defines leaders as “someone who has followers . . . not motivated exclusively by violence, force, or threats from the leader.” Collective goals and consensual means are central elements of leadership.

Selznick (1984a) sees a leader as someone who defines the ends of group existence—a person who devises an enterprise suited for this existence and, more important perhaps, sees to it that this enterprise becomes a reality. Leaders are persons who intervene in the course of events, who reinterpret these events in a manner concordant with the values and aspirations of others, and who decide to forgo their previous ways of seeing their existence and become followers. The leader, then, chooses key values of a social group and attempts to build or construct a different reality around them. Leadership, hence, is not always present; rather, it is an extraordinary event and highly dispensable. All situations do not exhibit leadership (Selznick 1984a: 22). Not every bargaining situation that ends with agreement, then, is the result of the activities of a leader. After all, it is a standard requirement that people in bargaining situations try to realize the potential for agreement. Only when an agreement is reached contrary to most participants' prior expectations can one speak of leadership.

Selznick seems to argue that what a potential leader does is to argue persuasively the virtues of a different understanding of reality, allowing and enabling other participants to arrive at a shared understanding of the problem at hand. What leadership entails, then, is a capacity to change preferences and create an environment in which new goals stand a chance of being realized. How, then, is this accomplished?

Means of Leadership

Intellectual capacity has been suggested as a key to leadership, and, from the discussion above, superior intellectual ability appears important for creating an acceptable definition of the problem and a solution with wide support. The most comprehensive attempt to come up with a theory of leadership in international cooperation processes is Oran Young's (1991) three-

fold categorization of leadership, based on the basis for the ability to lead. He distinguishes between intellectual, entrepreneurial, and structural leadership. Entrepreneurial leadership implies leaders with a capacity to discover commonalities and devise packages in negotiations. In some respects, however, this is expected by negotiators, and it is not clear that this ability constitutes leadership in the sense discussed here. To the extent that it does, it seems difficult to distinguish from intellectual leadership. Entrepreneurs, furthermore, at least in economic theory, do not have to realize common goals. They have the ability to see business opportunities and come up with clever ideas to make money, regardless of any more general ambition to realize common goals. This is also consonant with Malnes's (1996) distinction between entrepreneurs and leaders. Young's structural-leadership category seems all but refuted by his later production, where the personal qualities are emphasized regardless of institutional affiliation. That leaves us with leadership essentially based on intellectual abilities.

Networks and leadership dynamics are very similar, as considered in this study. Both are based on individuals and emphasize individual choices and accomplishments. Also, networks and leaders alike base their strength on intellectual persuasion and mutual problem-solving; coercion and conflict are downplayed. Hence, the establishment of trust between participants and the creation of a climate with shared assumptions of crucial factors and joint definitions of problems are central. Moreover, leaders and networks rely to a great extent on informal strategies and tend to bypass prescribed routines and standard operating procedures.

Summary of the Interpersonal Networks Framework

The understanding developed here sees leadership and networks as belonging to the same type of explanation. In essence, the model interprets global governance as founded on shared understandings of meaning between individuals in informal networks. By way of frequent interactions, these individuals develop consen-

sus on central aspects of the policy project. The relationship between the members is based on trust and mutual recognition.

Boundary-role occupants are central in the network approach. These roles give unique opportunities to interpret the external environment to the home constituency. Informal networks of boundary-role occupants, then, can introduce new ideas and practices into organizations, thereby stimulating change. The intellectual skills of individuals may lead others to change their minds and adopt their views. Individual leadership entails devising novel approaches to common problems in such a way as to satisfy common goals. The possibility that what starts out as an individual effort grows into a network and later becomes appropriated by organizations and formally accepted as policy, is close at hand. What does the networks perspective contribute to the AIDS process?

Chapter Nine

AIDS Networks

Tell us what needs to be done—not the way things are usually done. It is not ‘business as usual’ at the Global Programme on AIDS, and has not been since the program was founded (Mann, 1988. Quoted in Panos Institute 1988: 92).

These words by the then executive director of WHO’s Global Programme on AIDS (GPA), Jonathan Mann, clearly indicate an ambition of breaking out of organizational routines and established practices—a goal typical of persons with leadership potential. In his mammoth history (1988) of the emergence of the epidemic, Randy Shilts in the epilogue argued: “The international mobilization against the epidemic was the most significant single development in the AIDS story” (Shilts 1988: 613). According to Shilts, Mann was a charismatic leader inspiring visionaries to fight for a united humankind, laying aside race and political ideology (Shilts 1988: 613).

A study of the global governance of AIDS from the perspective of networks and leadership has to conclude that without Jonathan Mann, the strategy would have followed other routes. During his tenure, he challenged public-health orthodoxy by insisting on including considerations of human rights, he challenged intergovernmentalism through his emphasis of NGOs, and he challenged the hierarchical bureaucracy of WHO. Seeing AIDS through an individualist perspective very much becomes the story of Jonathan Mann. Now, in 1997, although he himself has taken a much less visible position, the ideas emphasized in UNAIDS reflect the priorities once set by Mann and his colleagues. But let us

take it from the beginning, and see how it all started in 1985–1986.

AIDS on the Global Agenda

AIDS was first diagnosed by physicians in New York, Los Angeles and San Francisco. AIDS as such has probably been around for considerable length of time; no one knows for sure when, where and how the particular virus today known as HIV came into existence. Physicians in the above-mentioned cities became the first to note to concurrence of similar symptoms in previously healthy adults, and reported to the Center for Disease Control (CDC) in Atlanta. CDC published a study on the cases on June 5, 1981 in their *Morbidity and Mortality Weekly Report*—the first report on the AIDS epidemic. A Task Force was established, headed by James Curran (Grmek 1990: 17), who, a couple of days later, went to New York to see his first case of AIDS (Shilts: 70). Further scientific articles appeared in the prestigious medical journal *The New England Journal of Medicine* in the last month of 1981. As Curran’s investigations continued, the Task Force gradually brought bits and pieces together, and the picture of a new and infectious disease emerged among physicians. Those of us who do not normally read *MMWR*, *The Lancet*, or *The New England Journal of Medicine*, had yet to learn that this rare cancer “would represent the malady of the late twentieth century or that this esoteric subject would come to occupy millions of pages in the newspapers of the world” (Grmek 1990: 8). The *New York Times* ran a small piece written by medical correspondent Larry Altman on 3 July 1981—the first opportunity for the general public to inform itself.

People in the gay communities of the United States were beginning to act on this new and frightening information. Randy Shilts, a journalist of the *San Francisco Chronicle*, spent more or less full time covering the epidemic starting in 1982 (Shilts 1988), and Larry Kramer, gay novelist in New York, wrote angry articles in New York newspapers as the “New York Native” (Kramer 1989). Both fought battles to alert and activate “their people” and

tried to push action on behalf of city and national authorities. In 1981, Kramer was instrumental in starting the fund-raising activities that later would grow globally and become the Gay Men's Health Crisis (GMHC). Kramer's message to the gay community that something was probably being transmitted through their sexual practices had ironically made Kramer persona non grata at the very time AIDS was showing up in his community, due in large part to the not well received novel, *Faggots*, which depicted gay liberation as sexually fixated (Shilts, 1988: 27; Kramer 1989: 6–7). Kramer's activities at this time did not compare well with the gay civil-rights movement and its leitmotif of sexual liberation. To break through the refusal to see AIDS as threatening and dangerous, and to convince the gay movement of the seriousness of the situation, became his first priority. With the gay organizations so divided, political action higher up in the city and national hierarchies was difficult to accomplish. The sexual-abstinence—or at least safe-sex—advocacy suggested by Kramer and Shilts as well as by Curran and his fellow public-health officials was by many decried as “alarmist” and homophobic.

As AIDS did not go away, GMHC grew, and one year later a three-hundred-person volunteer core assisted ailing people with practical matters (Shilts 1988: 179). This kind of “buddy program” later became something of a model for an entirely new kind of social organization—the AIDS Service Organization (ASO). Most of these early activists came from the communities themselves; they had seen close friends die and, naturally, were afraid. As explained by Kramer himself, “[T]his was long before any causative virus had been posited. What if it was discovered that nothing infectious was going around?” (Kramer 1989: 31).

Kramer's insistence on public appearances, civil-disobedience campaigns, and embarrassments of persons in political positions he felt were not doing their best to prevent further spread, along with promotion of research into causes and transmission modes and drug development, proved too strong for the rest of the organization, and he was ousted from the board and the entire organization in 1983 (Kramer 1989: 51). By then, however, he was already in the process of setting up another type of organization—an activist organization for AIDS that employed aggressive tactics

of confrontation. Several years would pass, however, before the AIDS Coalition to Unleash Power—ACT UP—would become a reality, in 1987. “I try to take a smidgen of satisfaction knowing that the two main AIDS organizations in the world are there because they were my idea,” Kramer later commented (1989: 291). The realization of common goals in addition to personal satisfaction, as discussed above, seems to have been relevant for Larry Kramer.

The two organizations GMHC and ACT UP transformed the very climate in which AIDS politics was played out. The GMHC showed that a community actually can begin to do what in most societies is done by public authorities. ACT UP departed from these kinds of activities and converted them into a much more overtly political level, not confining itself to local or even national arenas. ACT UP now has chapters in several cities of the world. Interestingly enough, Kramer also left ACT UP early. Persons useful in one stage of a process may become an obstacle later, or be perceived by other members of the organization as more of a hindrance than as an asset. I will come back to the phenomenon later in relation to Jonathan Mann, who experienced the same evolution. From the perspective employed here, Kramer was a leader, offering direction and a practical outlet for fear and frustration among PWAs also outside his immediate constituency of North American homosexuals.

A similar situation occurred in Uganda, where Noerine Kaleeba saw her husband die from AIDS in 1986. She, together with sixteen others, twelve of whom were living with AIDS, set up The AIDS Support Organization (TASO) in 1987 (Kaleeba 1991: 45), with the support of Terrence Higgins Trust and Action Aid. She also had the support of the AIDS Control Programme in Uganda, established with the support of GPA. Before setting up TASO, Kaleeba, after hearing about GPA, had traveled to Geneva and been given a four-hour talk with Mann. He had convinced her about the need of organizing her community herself. Like Kramer, Kaleeba persisted in her activities to spread information about HIV/AIDS, to put an end to discrimination of people with AIDS, and to provide basic support for infected people. She, too, gained many followers.

“The Epicenter”—The Office of the Director of GPA

Jonathan Mann was a former CDC epidemiologist who had also been a public-health officer in New Mexico. He had come to the Control Programme on AIDS from Zaire and “Project SIDA,” which was run by CDC together with Belgian public-health officials and Zairian authorities. From a Zairian vantage point, it was obvious that AIDS was an epidemic of global proportion, by no means restricted to American and Western European homosexuals. In a 1987 article, one among many instances of his persistent efforts to raise awareness of AIDS, Mann lamented the ignorance of the global character of the epidemic and the fact that many were unaware of the risk factors associated with HIV infection (Mann 1987: 136).

In spite of Mann’s opinion on slow responses and widespread denial in the face of overwhelming evidence, he simultaneously managed, within the course of a few years, to gain the trust of donors, enabling him to run a unit that employed four hundred persons and that had a budget of \$100 million, to discuss the virus both in the ECOSOC and in the UN General Assembly—the first time ever a specific disease had been brought up in that forum—and to persuade governments to sign a declaration on AIDS prevention in London (WHO/GPA/INF/88.6). Furthermore, he had made GPA a household word in many countries of the world—among people in general but particularly among PWAs and ASOs.

By October 1988, visits had been made to 145 countries and more than one hundred AIDS-control plans had been established. The Trust Fund for GPA had increased to \$60 million in the same period (GPA/GMC(8)/92.4: 5–6). Equally surprising was the swiftness with which the WHO bureaucracy had been bypassed. Rather than moving the money through the general budgetary process and have the World Health Assembly debate the fate of the contributions, Mann managed to channel GPA funds through an extrabudgetary procedure and money was placed in the “WHO Trust Fund for GPA.” Thus, he maintained considerable discretion and control over funds. There is no question that Mann was instrumental in getting GPA off the ground. His persuasive skills had been employed directly on individuals in governmental donor

authorities and vis-à-vis WHO bureaucrats. In both instances, he was successful—aid administrators had been swayed by his rhetoric, and Mahler, perhaps in an effort to make up for the slow start, allowed Mann considerable autonomy to come up with novel administrative routines.

Now, in 1997, the level of involvement of NGOs in formal decisionmaking is remarkable. UNAIDS, with NGOs as nonvoting members on the PCB, comes very close to breaking with intergovernmentalism. These changes are the result both of conscious efforts to invite ASOs, NGOs, and PWAs by Mann and a handful of people around him ten years earlier, and, equally important, these organizations' insistence on participation. How did the network around Mann evolve?

Integrating GPA—NGO Networks

Initiatives to develop close working relationships between ASOs and GPA came from Ken Morrison of the Canadian AIDS Society, who requested GPA assistance to set up an international forum. This request appears to have originated from NGO networking at the Fourth International AIDS Conference in Stockholm in 1988. Morrison remembers the subsequent activities explicitly targeting GPA in the following way (*Opportunities for Solidarity* 1989: 6):

Richard Rector, Wandering American, was working hard in and out of WHO lobbying for such a forum. In Brazil, Walter Almeida behind his computer, his telephone and his fax machine, churned out ideas and proposals. The Canadian Council for International Co-operation . . . also put together a proposal for an international AIDS project.

Another concrete outcome of the lobbying efforts by the Canadian Council for International Co-operation was the hiring by GPA of the council's employee Jeffrey O'Malley as a two-year consultant in order "to build a process of collaboration between GPA and

NGOs involved in economic and social development in the North and the South, to foster prevention and care in relation to AIDS” (*Terms of Reference: Consultancy on Building Cooperation among GPA, NGOs and Governments*, no date; Mann et al., 1992: 779).

An important step in the NGO liaison process had been taken by GPA with the hiring of Robert Grose, seconded by the British ODA as NGO liaison officer in 1989. Prior to Grose, NGOs had a much harder time getting across to GPA. Toward the end of 1988, Grose convened a small and largely informal planning group comprised of GPA and NGO/ASO representatives in Geneva. The meeting of the group was preceded by considerable maneuvering on behalf of GPA staff. They were not all seeing NGOs as “equal partners.” There were also legal matters to sort out, as GPA would be expected to pay for these meetings and reimburse travel costs for participants (Internal memorandum, 20 January 1989), and representation, even as observer at decisionmaking bodies like the GMC, required due consideration of format and procedure. Such practical matters as finding a room large enough to host all different organizations wanting to send representatives, establishing priorities between organizations, and so forth had to be attended to (Internal memorandum, 3 October 1988).

Gradually, a small network began to form around Grose, O’Malley, and Mann. Included were Bruce Dick and Barbara Wallace of the International Committee of the Red Cross and Red Crescent Societies (ICRC). Dick was the external-relations officer at ICRC, with headquarters just a short distance down the hill in Geneva. Wallace was recruited by ICRC to head their AIDS unit, encouraged to apply for the position by Grose. While looking for a place to live in Geneva, she stayed with the Groses, with whom she was good friends. Another contact Grose had brought with him from the United Kingdom was Sue Lucas, coordinator of the U.K. NGO AIDS Consortium for the Third World, a British umbrella of development NGOs with AIDS activities. Also in the group of British charities was Christopher Castle and Hilary Hughes from the Appropriate Health Technologies and Resources Group. Chris Castle provided a useful connection with gay organizations, as did Calle Almedal, head of the AIDS unit at the Norwegian Red Cross. Almedal had been instrumental in getting

the Norwegian Red Cross and NORAD committed to AIDS work. The final components in the network was Norbert Gilmore and Katarina Tomasevski from the McGill Center for Medicine and Ethics, who provided an intellectual foundation for the connection between AIDS and human rights.

The network shared the opinion that NGOs in many respects were forerunners in AIDS-prevention and -control efforts and that deepened collaboration between IGOs and NGOs was crucial if the epidemic was to be stopped. The normal sentiments of bad faith between NGOs and governmental organizations was absent in the network, and mutual respect characterized discussions—the problems concerned how, not if, ASOs could be identified and engaged. Secondly, their attitudes toward interventions were in common and included concerns about discrimination and human-rights violations of PWAs and “high-risk groups.” Advocacy was part of the strategy, as was a focus on developing countries’ capacity to deal with the growing problem. Assistance was needed. Consensus was present on both a new process downplaying differences between IGOs and NGOs and emphasizing participation instead and an orientation considerably broader than the standard public-health approach. This set the network apart from other elements of the intergovernmental health order.

Discussions in the network formed the inner circle of global governance of AIDS and prepared the ground for the First International Meeting of ASOs in Vienna in February–March 1989. The first attempts at finding a common understanding beyond the core participants were abortive, however, since the rest of GPA felt ASOs were too demanding in their approach and lacking in understanding of GPA’s awkward situation—formally only responsible to governments and without formal possibilities to break bureaucratic rules of procedure at WHO. After the Vienna meeting, however, a workable consensus on the basics was secured within GPA and between GPA and large-scale, primarily Western NGOs. The consensus statement established a basis for subsequent deliberations at GPA and formed the baseline for a World Health Assembly resolution on NGO involvement (WHA 42/34). NGO participation in the global AIDS strategy had been brought

to the highest level with the WHA resolution, and governments now officially endorsed the new procedure.

Within the ASO movement, consensus was more difficult to achieve. Discussions were carried forward at the *Opportunities for Solidarity* ASO conference in Montreal in 1989. The most difficult problem concerned the necessity of forming a reasonably coherent NGO voice. The target of the AIDS network was some kind of umbrella structure, capable of channeling NGO input into GPA in a structured and coherent manner. In Montreal, the concrete organizational design, first envisioned in the small informal network that met in Geneva in 1988, matured into a “One Year Task Force for ICASO” (*Opportunities for Solidarity* 1989: 21). The task force was charged with the responsibility of streamlining the NGO movement—an almost hopeless task, since the very essence of NGOs seems to be autonomy.

At the time of ratification, the small and informal nature of the network backfired, however. Ignorance of ICASO was widespread among many delegates, and fears were voiced by many smaller ASOs from developing countries, which felt left out of the entire process (Lucas 1991: 98). The African contingent, although part of the Task Force for ICASO, claimed at the time of ratification to have been largely ignored by the committee until the time of ratification and to have been virtually without opportunities to present their views. Jim Holm, the American in charge, was a poor listener, who rushed things through, rather than a networker intent on collecting a wide and varied input prior to decisions. The time made available for the establishment of trust among the extremely varied and heterogeneous ASO family was very short, and no shared understanding had evolved. The lack of leadership was apparent.

Moreover, many were unhappy with the apparently haphazard collection of individuals in small and informal groups and in task forces of various kinds (Lucas 1991). Presence at GPA headquarters in Geneva and participation in the Vienna and Montreal meetings appeared to be the only chances to develop enough acquaintances to warrant a seat on a committee. Task forces and steering committees were formed in informal network processes—of individuals, who knew of other persons, who in turn had heard

of yet others, and so forth. ASOs in many cases were being started as the liaison process proceeded, making comprehensive surveys of existing organizations very cumbersome. Moreover, development-oriented NGOs were much better organized than AIDS-specific organizations. The dominance of gay men in the networks served to hide these broader and already established structures. The ICASO people were looking for ASOs in vain, since frequently those organizations in the developing world that provided health services were not AIDS-specific. Rather, they tended to be churches, Red Cross Societies, and family-planning groups. Representatives of these were not included in the initial informal group, with the exception of Calle Almedal, a person with overlapping membership in gay networks as an outspoken activist on gay-rights issues and in development groups via the Red Cross networks (cf. Mann et al. 1992: 806). That combination was unusual, however, and it has taken a long time for ICASO to set up the regional structure in place today.

While the ICASO story was unfolding, the position of Mann was becoming increasingly untenable within WHO. The incoming director-general was not content with Mann's vitalization of the organization. The somewhat special relation Mann had developed with Mahler, which allowed considerable autonomy for himself and GPA, quickly eroded and led to the resignation of Mann in 1989. Mann's situation resembled that of Larry Kramer. Relating to two organizational contexts simultaneously appears to be quite difficult. The continued violation by Mann of WHO administrative routines—which were necessary for Mann to commit in order to establish good relations with impatient ASOs—jeopardized his relations with other officials within WHO.

Exit Mann—Enter “Business as Usual”

With Michael Merson, the incoming executive director, GPA on the whole took on a more reactive role. Although verbally committed to expanding the role and influence of NGOs beyond official relations and service delivery, Merson's GPA did not evolve beyond what was achieved under Mann. What was worse, Mann

brought with him several of his aides—experienced hands in WHO—to his new home at Harvard University. Several years ensued without any visible changes in either program orientation or process. Mann himself comments: “As the winds of change within WHO moved the organization back to status-quo ante thinking, the GPA–non-governmental organization relationship suffered” (Mann & Kay 1991: 227). And, although Grose continued to work for GPA, the frank and outspoken discussions between GPA and ASOs suffered. Many also left. Both O’Malley and Almedal, for different reasons, chose to leave discussions. Also, Lucas participated less and less in informal consultations. Grose finished his work for GPA in 1993. The network had been dissolved.

A New Network Structure

Merson was hired to bring GPA in line with protocol. Implied in that task was an emphasis on working with the traditional partners of WHO, the Regional Offices and national ministries. The change in focus was immediately felt, for instance, at the Paris NGO conference, where both Mann, now in his new role as Harvard professor, and Merson, in his new role as director of GPA, delivered statements. Mann’s words are indicative of the almost revolutionary task he had taken on (*Second International Conference of AIDS-Related Non-Governmental and Community Organizations*, Final Program, 1992: 39):

The activity and activism of the community response to AIDS has shaken the pre-existing balance between community and national roles in health. The primacy of the national government in health has receded before the initiatives taken at the community level. Curiously, in health as in economies and perhaps also in political life, what happens in the community and what happens at the international and global level seems more relevant to the real concerns of people than what happens at a national level.

Mann's comments included references to a common good, shared conceptualizations of the problems at hand, and were based on an intellectual idea regarding relations between levels in global politics. Merson's response, on the other hand, was to bring to the fore precisely the national-governmental level. "WHO's first and foremost priority is to strengthen national AIDS control programs" and to "strengthen the technical basis of AIDS prevention"—traditional WHO procedure indeed (*Second International Conference*, Final Program, 1992: 42–43).

To be sure, not only lack of leadership capacity eroded Merson's ability to accomplish his task of leading and coordinating the global strategy. Hesitancy among ASOs and NGOs toward the "new order," as well as increasing difficulty in getting the needed resources from donors due to uncertainties concerning the efficacy of GPA's prevention efforts, also contributed to that end. GPA's downfall appeared inevitable when criticism from other UN agencies on the bossy attitude of GPA concerning systemwide coordination mounted.

As criticism grew and GPA was faltering, a different kind of leadership emerged. During an external-review process of GPA and the global strategy, initiated in 1992, a desire emerged on the part of donors to streamline AIDS activities and create an overarching systemwide body that could more effectively coordinate the various arms of the UN system. GPA, it was felt, had largely failed in that respect. Those instances of successful collaboration in the field were due to personal qualities of the field personnel rather than any built-in capacity to secure a coordinated response (GPA/GMC(8)/92.4).

With the intention of facilitating the negotiation process, a radically new method was devised—a GMC task force with the equal participation of donor governments, recipient governments, participating IGOs, and NGO representatives. On the task force, NGOs could provide input to the same extent that governments could, thus breaking out of sovereignty-bound practice. At the Special Session of the GMC in November 1992, the attending NGOs, after a rather short nominations procedure, selected three NGOs to represent the NGO/ASO constituency. The representa-

tives were Donald de Gagné from the Global Network of People Living with AIDS (GNP+), El Hadj As Sy from the ENDA Tiers Monde, and Maria de Bruyn from the Royal Tropical Institute in Amsterdam. The three ASO representatives reflected a broadening of the network and signaled a new emergent structure. The chairman of the GMC Task Force, the Swede Nils-Arne Kastberg, was an experienced UN staff member. Although he had not previously been involved with AIDS, his knowledge of the particularities of UN affairs no doubt came in handy, as participating agencies were brought to a consensus.

Prior experience with emergency-relief operations had convinced Kastberg of the vital energy and knowledge of NGOs (GMC/TFC/(4)94.9). Well aware of the time needed for trust, mutual respect, and understanding to evolve between IGOs and NGOs, he maintained a firm belief in the achievements of partnerships. "The sky is the limit where dialogue and understanding can be nurtured and developed, and the mechanisms for this to take place are fully developed," he assured the rest of the task-force participants (GMC/TFC/(4)94.9: 8).

Did the chosen NGOs have enough support among the rest of the NGO constituency to allow them to negotiate? Much indicates that they did. First of all, the people chosen were long-standing participants in global AIDS activities. As Sy, for instance, was heavily involved in the Amsterdam Conference and had good personal contacts with the African organizations, Maria de Bruyn had already taken on an important role in Paris, and Don de Gagné, lastly, had been representing PWAs as early as at the Montreal ASO conference in 1989. Following Montreal, Gagné led the planning of the PWA conference in London, in 1991.

As the negotiations continued and took on more concrete form in targeting NGO representation in the Programme Coordination Board (PCB) of UNAIDS, a more thorough canvassing took place, involving also the by now entirely regionalized and organizationally matured ICASO. At the official takeover on 1 January 1996, five NGOs had been elected, representing regions rather than specific organizations. Currently, however, four of the five seats have been vacated. It seems that, still, formal representation is hard to accomplish.

Informally, it appears as though the currently largest international networks have a somewhat privileged position vis-à-vis UNAIDS. Burzinski of ICASO, de Gagné of GNP+, and the International Community of Women Living with HIV/AIDS (ICW) appear to have access to the UNAIDS secretariat, and particularly to Martina Clark, the NGO-liaison Officer. Additionally, Sue Lucas, Jeffrey O'Malley—who has established a new organization called International HIV/AIDS Alliance—and Kaleeba, Community Liaison Officer at UNAIDS are also part of this new network. Incidentally, it is interesting to note that Burzinsky, de Gagné, and O'Malley went to the same high school in Canada.

ICASO, GNP+, and ICW represent communities forming the backbone of the ideas promoted by Peter Piot, the executive director of UNAIDS. It is a guess that the incipient Advisory Committee, once established, will be dominated by these individuals.

Implications for Global Governance

Partnerships between IGOs and NGOs form the perspective of networks, and leadership is a result of a few persons' abilities to see beyond prejudices and stereotypes, establish a common formula, and introduce these new ideas into the respective constituencies of the network members. Vision, persuasive skills, and perseverance appear necessary ingredients in the repertoire of leaders. The tension arises from the multiple pressures network participants suffer given their boundary-role positions. They must both represent their constituency in liaisons with other organizations and bargain in order to find a workable agreement among the wider set of concerned parties. It is not uncommon for leaders to face insurmountable obstacles that force them out of business. The AIDS case has seen numerous examples of this kind of burn-out. Here, I have only mentioned two very visible examples—Jonathan Mann and Larry Kramer. To be sure, there are many other “unsung heroes” in the global governance of AIDS.

The perspective is useful mainly in that it offers hope for change. With its explicit focus on individuals and networks of like-

minded individuals, it highlights the possibilities of applying human wit and ingenuity and actually swaying large bureaucracies like WHO, and even social institutions like that of intergovernmental public health. When one sees global governance from the perspective of daily activities, it is an imperative for action. As with the previous two analytical cuts, there are, of course, limits. Chapter ten, next, will compare the three perspectives.

Chapter Ten

Comparing the Perspectives

This chapter is guided by two overarching concerns. I wish to condense the three perspectives and compare the different realities made visible by them. In doing so, I will bring up two aspects. First, how do the perspectives interpret the reasons for partnerships and, more specifically, what events did they each highlight in the process toward those between GPA/UNAIDS and NGOs? What appears self-evident and normal from one vantage point stands out as strange and in demand of explanation from others. Second, with the different understandings of the reasons for partnerships comes a diverging view also on what the central problems in this process are and how they can be approached. Problems and solutions of the global governance of AIDS differ, depending on which perspective the analyst takes.

The other main concern stems from the first. It may be significant which particular perspective actors have used to guide their interventions. In this context, one notices that the time frame of each perspective differs considerably—which may have implications for the usefulness of each theory in terms of political action. A Gramscian perspective places much of the understanding on historical conditions beyond the immediate control of the actors and, thus, may contribute comparably more toward understanding the earlier phases of the studied process, whereas the leadership perspective seems to lean more on events taking place after the wider parameters are already set. Different phases of AIDS governance seem to benefit relatively more from different perspectives.

Why Closer NGO-IGO Links?

From a discursive perspective, linking up to NGOs seems almost a foregone conclusion now that AIDS has become part of the daily activities and ideas of individuals as well as an item on organizational agendas. Globalization and internationalization imply sovereignty-free thinking and activities disregarding national borders. NGOs were already recognized as skillful and competent, even vital, partners of UN affairs, although secondary in importance to national governments.

Moreover, competing health discourses were constituted as a playing field for IGOs and NGOs alike, although their roles were distinct and a division of labor was established, placing NGOs as secondary to and dominated by IGOs. Civil society, as posited by Gramsci, was penetrated and instilled a sense of legitimacy and inevitability of the intergovernmental public-health order. NGOs were indeed vital. There is an inherent tendency in a Gramscian approach to understand collaboration chiefly as domination with the intention of securing a broad support and legitimacy for the current order, of which GPA was a dominant player as the primary tool for governments' ambition to steer the global AIDS strategy in the desired sovereignty-based direction. GPA, hence, had been set up as an international organization to facilitate control and should be seen primarily as a site of regulation.

The inability by GPA to function as intended spurred expanding elements of "partnerships" with civil society, essentially to increase and diversify sites of regulation. Other civil-society organizations than those already incorporated, it was thought, could muster the necessary compliance to the strategy. Foremost among them were the many ASOs emphasizing respect for human rights as well as popular participation. In exchange, the co-opted organizations were offered a seat at the intergovernmental table, recognition in public statements, and modest financial resources—not so much as to threaten the multilateral structure, but enough to entice collaboration. In this manner, civil society essentially would police itself, and hegemony would stand a chance of becoming realized. No brute coercive measures would become

necessary, since the strategy would be promoted by selected NGOs “representing” civil society.

The primary dynamic has been a desire on behalf of the ruling groups to co-opt NGOs and ASOs with important roles in civil society. This ambition has stood in a dialectical relation to these aspiring new elites’ desires to establish a different order for AIDS prevention and control. AIDS questioned the competent handling of epidemic disease by governments. Inability to find a cure was followed by inadequate capacity to deal with discrimination and care. New elements of civil society, poorly socialized in the virtues of intergovernmental public health, reacted with articulation of alternative discourses for AIDS prevention and control. As these efforts met with initial success also among previous advocates of intergovernmental public health within WHO, these ASOs were targeted for co-optation. From a Gramscian perspective, the magnitude of trying to articulate a counterhegemonic discourse is obvious. The perspective also highlights the structural inequality between state organizations and civil-society organizations.

From the perspective of more general global governance, the importance of the AIDS epidemic lies with the precedent of new participatory mechanisms that may gain both notoriety and legitimacy. Had sovereignty been broken with AIDS, the spell of intergovernmental multilateralism would have vanished, opening up opportunities for more efficient attacks on sovereignty regarding other issues as well.

The reason for approaching NGOs from an interorganizational perspective is instead interpreted as a need for a more efficient implementation structure of the global AIDS strategy. WHO appeared the logical linking-pin for international health activities, a position established long before the advent of AIDS, and consequently was charged with setting up such a structure. Failure to operate according to standard procedure—absence of cure or vaccine and reluctance of public-health authorities to deal with the sensitivities of AIDS—necessitated innovation. As GPA was poorly equipped for the local connection—deemed necessary for prevention and control of the epidemic—this was an early target for improvement. A first step was to remain inside the multilateral family and ally with UNDP, a standard operating procedure

of the UN. This served two purposes, as UNDP also was a rival of GPA for coordinating the strategy, thus allowing GPA to protect its turf. To remain in the center provided certain benefits, as AIDS gradually became a high-visibility issue with potentially much money and prestige involved. UNDP could be brought under GPA control with such an alliance.

Secondly, UNDP's strong field presence gave GPA needed access to communities. The New York jockeying for coordinating NGOs served to push the process further along. When NGOs seemed on the verge of becoming tied to another UN unit, GPA risked losing its linking-pin position and acted to counter that threat. When extant procedure proved insufficient for connecting the NGOs, they were then included directly in the creation of the formal structure intended for this purpose. The primary means invented to serve the purpose of organizing NGOs and ASOs were, on the one hand, the channeling of resources—mainly financial, in the form of partnership grants—and, on the other, advocacy on behalf of the ASOs' respective national governments. In this way, interdependencies could be exploited from both sides: NGOs needed money and recognition as being competent and responsible, and GPA needed field presence.

Conflicts within this perspective tend to be understood as rivalry between competing linking-pins. Once GPA had managed to establish itself as linking-pin in 1989, primarily due to its ability to attract vast amounts of financial resources, conflicts vanished from this vantage point. Not until donors started around 1992 to become unhappy with WHO's inability to involve other organizations within the UN system did conflict arise anew, once again between competing potential linking-pins. In this sense, the struggle is conceived of in much more limited terms than from a Gramscian framework. GPA is here seen as fighting not for sovereignty as guiding principle but simply for the ability to maintain a dominating position for WHO in the interorganizational field of global health.

The networks approach, finally, understands the process mainly as driven by growing consensus among a small group of people deeply engaged in AIDS politics from previously different standpoints. As these people—centered around Mann's office at

GPA—continued to meet, they were gradually convinced of the necessity of a joint approach and coined the notion of the “three epidemics” to advertise it among their respective constituencies.

Different Problems and Different Solutions

The interorganizational approach singles out a host of practical problems related to constitutional obstacles, established routines, or lack of routines—a general lack of familiarity related to this new type of organization, the AIDS service organization—as its main area of concern. The threat to sovereignty as the basis for the entire intergovernmental order—central from a Gramscian approach—is here interpreted as potential problems related to WHO’s ability to preserve its status and autonomy relative other elements of the UN family and its governmental contributors. The interdependencies of the interorganizational field—control over financial resources and historically derived central functions—largely determined the outcome of conflict. Excellence in delivering AIDS-prevention and -control programs is singled out as the solution to the problem, from this perspective. From a resource-exchange perspective, the structural inequality between IGOs and NGOs—central from a discursive point of view—does not loom large in the analysis.

The global AIDS strategy aimed for consensus among principal stakeholders. Structural differences regarding the opportunities to participate in these problem-solving exercises are poorly understood from an interorganizational vantage point. The political dynamic seems instead to propel actors toward fragmentation—they have to devise their own solutions and be capable of autonomous action, but they are compelled to cooperate since they cannot solve their tasks without established cooperative relations with other actors.

The primary means in this joint policy endeavor is organizational bargaining among the principal stakeholders. An interorganizational perspective loses the structural differences among actors, which might prohibit consensus from emerging. Sometimes, no basis exists for negotiations to take place—there is

not enough agreement even to start discussions. The most urgent concern of AIDS NGOs was to have the structural impediments preventing NGOs to work effectively removed. To this end, they asked for GPA assistance. One has to go beyond resource dependence to understand this facet of the issue, since it is not primarily a resource problem in terms of lack of money, computers, office space, trained staff, and the like. NGOs, to put it simply, had no space in the multilateral management of AIDS. The resource-exchange perspective fails to grasp the discursively constituted relegation of NGOs to a different order and instead interprets the dilemma as one of resource asymmetry, curable by resource transfers. The events and processes highlighted in a discursive analysis are not so much changes in resource flows or efforts at efficient implementation as they are points at which the articulation of new discursive formations—eradicating domination and subordination patterns between social groups—has occurred.

The discursive perspective also brings out the competing understandings of AIDS, which the dominant groups—gray suits, white coats, and T-shirts—are trying to promote in universalistic terms. The basic problem is that the perspective leaves little room for realizing that, in spite of being constituted through different discursive formations, sufficient overlap between them may be present to allow a process of accommodation to begin. Participation, hence, may evolve and over time become instituted as normal and legitimate. The discursive perspective tends to interpret attempts at participation as co-optation by current privileged groups or as efforts to restore legitimacy for the current order through incorporating naive elements of civil society as hostages. Counterhegemonic articulation from the inside remains rather superficial, in spite of efforts to move beyond structuralism. Granted that discourses are never fully fixed, that absolute closure is impossible, and that the possibility of breaks with “normal development” is present, the theory fails to include a conceptualization of the creative articulator. Who manages to articulate effectively and form alliances? There seems to be a risk of underestimating forces for change and, consequently, of overestimating stability and status quo in a discursive approach.

Neither a Gramscian nor an interorganizational comes to grips with bargaining, however, since they do not show individuals in actual bargaining situations. The basis for agreement in this particular case was a shared understanding of AIDS prevention and control as hinging on equal partnerships between GPA, national governments, and NGOs that was considerably broader than public health. To be sure, the extent to which this cooperation should be allowed to threaten prevailing power structures varied. The distinction between intergovernmental and nongovernmental was almost immediately paralleled by other equally divisive differences concerning appropriate focus for prevention and control strategies. Had the fault lines reinforced each other so that intergovernmentalism also implied a specific ideology regarding proper AIDS-prevention methods, the establishment of an alternative bloc might have been easier to accomplish. This was not the case, however, since donor governments entrusted GPA with designing the strategy, resting assured that they would never be threatened by the results—GPA is intergovernmental after all. The chances that GPA recommendations would be turned against the dominating governments' practices were assumed to be low.

This does not mean that everyone conformed totally. The health sector is normally not treated as central, either intergovernmentally or governmentally, and this has led everybody concerned—regardless of governmental or nongovernmental status—to press for additional resources, irrespective of different ideas on how to spend them. Hence, differences in detail tend to be overcome, and a “metadiscourse” of research/health/development operates in instances of vying for the attention of the current holders of status and resources.

As pointed out by Rosenau (1990: 272–273),

[B]oth sovereignty-bound and sovereignty-free actors know that the complexities of post international politics are more than states can handle, even as both also accept that history's legacy is a state-system with deep roots and durable institutions. Hence, a mutual acceptance has developed between them, and, with it, insti-

tutions and procedures for conducting the interactions through which the acceptance is continuously reinforced.

Those segments within states that deal with health matters, including AIDS, frequently see NGOs as legitimate and equal. Together, they fight for more resources and status. Civil-society groups are not merely pawns in the sovereignty game. Their skills and high ability “to employ, articulate, direct, and implement” ideas and interests (Rosenau 1990: 334) are frequently utilized by IGOs in their efforts to circumvent the constraints of sovereignty. The fear of co-optation is perhaps more widespread than the ambition to co-opt, although co-optation remains a latent risk. Discursive theory furthers such an almost conspiratorial understanding of partnerships.

Although different conceptualizations of global health are present, no groups with radically opposing views emerged in AIDS. ASOs, for instance, were unsuccessful in including human-rights groups in their articulatory practices. They did try, and were aided by GPA in these attempts, but none of the large human-rights organizations was ready to join them. Reasons for this, of course, have to do with opposing views in the relation between gay rights and human rights from a discursive angle, as well as lack of interorganizational dependencies on the other.

A Gramscian framework, by default, treats IGO-NGO partnerships as efforts to co-opt, an interorganizational framework assumes efficiency gains, but neither of the two actually problematizes the reasons for evolving participation; instead they assume intentions and, alternatively, downplay radical breaks with the past. A networks perspective raises questions of which NGOs to connect to as well as brings out individual reasons and intentions. GPA was first approached by Canadian and American persons asking for support. These individuals’ sexual orientation steered GPA toward a human-rights perspective in the beginning. The lack of support from established human-rights NGOs and the awakening of southern NGOs gradually changed the composition of the network. As communities and groups created the capacity to organize and structure their needs and aspirations, they wanted a

voice in the debate. Jonathan Mann, for his part, deliberately sought to include new people when traveling and speaking at various places around the world.

Mann was recruited to head the GPA mainly because he had the backing of the CDC and the U.S. government, the primary player in early AIDS activities. He had both epidemiological and public-health training and also had participated in the first international AIDS project—*Project SIDA*. He had the full support of Mahler, who gave him wide latitude to design GPA. His outspokenness and willingness to travel gave him opportunities to speak directly to those in control of money. Frequent trips to Stockholm, Oslo, Washington, D.C., and so forth, gave results in the form of extrabudgetary resources of notable proportions.

Furthermore, he did not hesitate to bend rules, and soon the reputation spread among NGOs that the normal bureaucratic process could be avoided through GPA. Discussions with NGO representatives convinced Mann of the necessity to invite and involve the new type of NGOs being formed around the world, and staff were hired for that purpose. Mann's readiness to break out of multilateral discourse and WHO's standard operating procedures cannot be comprehended unless an individualist approach such as the network perspective is used. Both Gramscian and interorganizational approaches are at too aggregated a level to capture such processes. Change, therefore, becomes sudden and unexpected. A leadership or network model picks up change earlier, in its gradualness and as a result of conscious human efforts to do otherwise.

The network perspective highlights the informal process—the initial contacts and small-group negotiations—that always precede official meetings and conferences. That process, which from a discursive perspective is seen as manipulation and from interorganizational ideas is interpreted as efforts to create efficiency, is here seen instead as problem-solving and trial-and-error processes. Ideas are generated, tested informally, and, then, either discarded or introduced in a formal manner. The analysis finds a relatively small number of people intent on realizing a common agenda in whatever way possible.

It is somewhat surprising, perhaps, that so little appears to have happened since 1989. The ideas had already been articulated

and principal resolutions, already signed. From the networks perspective, one notices that Mann's disappearance somehow halted the process. He was the natural center. His followers carried on for another two years, and his network reached a high point at the Amsterdam conference in 1992. Since then, however, most have decided to go on to other activities.

As Sy, Burzinsky, Clark, de Gagné, and O'Malley, however, all were playing roles at Amsterdam but rose from then on to dominate the NGO networks ENDA, ICASO, ICW, GNP+, and International HIV/AIDS Alliance, respectively. What stands out here is that it takes time to establish trust and confidence—much time. ICASO started in 1989 but did not achieve its current status until several years later. It appears to be crucial not to give up early, to carry on in spite of little or no response in the beginning. Perseverance and dedication are crucial assets of leaders. Secondly, people who break habits and challenge hierarchies seem vulnerable. Larry Kramer, founder of the first ASO in New York, was more or less forced out of both of his creations, GMHC and ACT UP. Similarly, Mann could not continue his tenure at GPA. Both became the victims of internal strife and aspirations. Leaders, hence, cannot operate in isolation but need strong backing from others. The networks they establish need to include people from the home organization and the major donors. Likewise, domination and control do not appear to drive the networks or the leaders, and organizational growth and survival seem remote targets for their actions, just as do aspirations for power or personal fortune.

The obvious weakness of this type of individualist explanation is the tendency to glorify individual persons. What would have happened if Kramer, Mann, Grose, Kaleeba, and others had not been around? Would cooperation between GPA and NGOs not have happened? There is a tendency to overestimate the impact of one person. When Mann left GPA in 1989, the process was considerably slowed down, but it by no means changed radically. Merson carried on much in the same way as Mann had. Other events can also account for the lost momentum. Money ceased to come into GPA in the same way, for instance, making the extensive traveling Mann and his colleagues had undertaken more difficult.

Networking, hence, became more difficult. Leadership has to be posited against a structural backdrop, invisible from within a network vantage point. All three approaches, hence, are useful—and, indeed, necessary—for a varied and nuanced explanation and understanding of this process.

Time Frames and Strategic Action

When analyzing the efforts to create partnerships for the struggle against AIDS, different events, problems, and solutions are made visible depending on theoretical assumptions and perspectives. Naturally, when using different perspectives as foundation for political action, this also leads to different strategies. Ultimately, people, whether understood as social forces, organizations, or individuals and networks, will have to come up with their own strategies adapted to their specific contextual situation. However, a few general remarks will be offered here on the issue, from my own perspective.

The different perspectives highlight different tensions and forces at play in the global governance of AIDS. These forces and tensions are present at all times—it is only the perspectives that give the impression that some are more important than others or that some exist and others do not.

Although these contradictions always play out to some extent, processes at some points in time appear relatively more influenced by some tensions and forces than by others. So, for instance, does a discursive framework shed comparably more light on processes early in the efforts at creating partnerships with civil society against AIDS. A discursive analysis revealed that intergovernmental public health dominated policies and programs for “medical issues,” and showed that this particular social construction of health was competing with other approaches—seeing health as depending more on social and economic levels in communities, such as clean water, sanitation, and the like, than on doctors and clinics. Once AIDS became understood as a medical issue, the ensuing designation of WHO was unavoidable, given the

privileged position of WHO in the intergovernmental health discourse.

Hence, dissent regarding whether AIDS should rightfully be understood in medical terms would have to be expressed prior to when WHO and GPA became established—for instance, through involving the Council of Europe (which was done) or some other center within the intergovernmental system of organizations. It appears difficult to articulate a different understanding of health with which WHO would feel comfortable, although to some extent that did work out. The medical discourse, however, offered little hospitality for competing understandings, and few, if any, competing discourses could take on the consolidated resistance of WHO. Only the combined action by ASOs, national governments, and other IGOs managed to wrest AIDS away from WHO. Earlier intervention, hence, based on a discursive analysis, was lacking at that point. A discursive approach ushers strategic action in the direction of actors with ability to influence categories of thinking, such as media and television. The early designation of HIV/AIDS as a gay issue was much driven by the press—and an important reason for discrimination and stigmatization as well as slower response than if HIV/AIDS had been approached as an epidemic with severe consequences for everyone.

Accepting momentarily that HIV/AIDS “belongs” to WHO/GPA—that it can be approached as an intergovernmental public health problem—presents actors with different points for intervention. It may be too costly or too late to change the perception of influential actors of how AIDS should be understood. An organizational field may be easier to influence than the much more pervasive discursive formation governing understandings of AIDS. Organizations need resources from their external environments in order to function. Intergovernmental public health, to be sure, is a well-established field of activity with a division of labor long ago established. Gaining control over a scarce and vital resource seems to be the key to influencing global governance once issues have been established as particular problems.

AIDS prevention placed governments in a situation where they can be pressured both from below and from above. Community-based NGOs, reacting against recalcitrance and discrimination,

challenged the position of governments as arbiters of who gets what within states. Increasing skills in articulating visions touched a chord with oftentimes global appeal and established alliances across previously disparate communities. Governments have tried through various means to limit the opportunities for NGOs to operate, but somehow new avenues for action seem to open up quicker than governments manage to close them—even when incarceration, harassment, and execution are included in these governmental methods.

Noerine Kaleeba is instructive in this regard, as her methods involved contacting directly those donors who she saw supported ideas similar to those she wanted to promote. What she did, then, was to identify those organizations in the field that controlled the scarce resources, and bargained directly with them—disregarding the standard operating procedure in intergovernmentalism of working via home governments. The governmental control over funds requires hooking up to governments—but not necessarily to one's own.

Also, Jonathan Mann used a resource-dependence analysis as he tried to get GPA off the ground. He identified those with control over resources and tried to influence their resource allocations. It seems that interventions of that sort will have to be made when an issue has been established among a number of organizations, and the main problem concerns implementing a policy. If one disagrees more fundamentally, it seems from this analysis that the best option is to take the issue to a different field, constituted by a different discursive understanding, and to try to articulate a competing understanding and subsequently introduce the problem in this alternative organizational field. Some development-oriented ASOs tried to change the understanding of AIDS as public health and assign a leading role to UNDP, but, as we have seen, that move was pre-empted by GPA with the GPA-UNDP Alliance to Combat AIDS. All in all, it appears as though an interorganizational analysis is especially useful when a policy has been established among a set of organizations entrusted with execution, at least in broad contours. The implementation seems to large extent to follow resource-exchange patterns and standard

operating procedures. Strategic action needs to pay heed to existing structural elements of this field and to target the linking pins.

Some scope for influencing more in detail what is to be done and how, opens up in a network approach. Discursive formations only broadly designate key actors and specific methods, such as UN organizations and multilateralism. Within those limits, some latitude may be present for creativity and broadly defined negotiations—at least it was with AIDS. After AIDS had been assigned to WHO, and GPA was in the process of being created, staff talked about a “roller-coaster” period. During this time, perhaps a rather short one, both content and process of the global strategy seemed relatively open. An analysis of which individuals take part in these brainstorming sessions can lead to an identification of key persons to engage in mutual problem-solving exercises. In this manner, trust can gradually replace negative images and prejudices. In the longer run, it may even change entire understandings of what a problem is. The notion of the “three epidemics” erupted from such informal sessions and, today, is the foundation of UNAIDS activities. Trust between ASOs and IGOs also was established during this period. Individuals very much based their strategies on networking and frank exchange, something that changed the entire climate for AIDS control and prevention. It may even have dealt intergovernmentalism a hard blow. The decisionmaking phase appears comparatively easier to understand from a networks perspective than from either of the other two.

A warning must be raised as an endnote to this discussion. Any decisive conclusions on the relative merits on the perspectives has to be very cautious. The idea of issue cycles itself can be validly questioned, since issues do not in reality progress in a neat and ordered manner. Initiation, decisions, and implementation to some extent occur simultaneously, and processes move back and forth between the stages. A qualified answer nevertheless seems to be that a discursive approach carries more weight in the agenda-setting phase since it sheds light on the very categories of thinking and processes that underlie perceptions among people of what warrants attention and who has responsibilities for tackling societal problems.

A networks and leadership framework seems to be especially useful when the broad parameters of a policy project have been defined. In this phase, both organizations and people within them with boundary-role functions were selected and started to interact. The discursively given parameters will have to be concretized and converted into policy action. Leadership has a chance of being realized here, as policies and programs need to be firmly established, resources allocated, and a division of labor negotiated. Boundary-role occupants may in this phase develop joint understandings that differ considerably from structurally prescribed patterns, as new preferences are created in informal negotiations in networks.

As a concrete policy was agreed on in the network, the focus again seems to have moved, and now an interorganizational approach offers a comparatively better view. Carrying out a policy involves a complex division of labor between formally autonomous organizations linked together in resource-exchange fields and mutually agreed on turfs of competence and mandates. In the organizations, decisions may be stalled or neglected or adapted to conform with standard operating procedure. This aspect is best captured from the interorganizational perspective.

Does this discussion regarding AIDS have any bearing on global governance more generally? To this, we now turn.

Chapter Eleven

Foundations of Global Governance

Have multilateral arrangements changed into governance arrangements involving several types of actors, rendering the inside/outside distinction meaningless? Has sovereignty no longer any value for understanding international relations? After having reported on the findings of the research project through the lenses of a discursive approach, an interorganizational resource-exchange framework, and a social network model, this book could have ended. The goal of the long-term project, however, is to use these findings to shed some light on the current contradictions and confusions in the theory and practice of global governance. So, in addition to the questions of what happened, and why, in the efforts to create productive partnerships between IGOs and NGOs involved in HIV/AIDS activities, the issue remains as to what trends one can sketch, if any, for global governance more generally from this case. Perhaps AIDS is a deviant case—unique and particular, with no implications for world order. Some attempts at critically evaluating the discussion on the faltering hegemony of sovereignty in AIDS politics appears needed. The question, then, concerns the reach of this case study.

The Significance of AIDS

The global governance of AIDS certainly shows a diverse set of actors engaged in a vast number of activities. Moreover, AIDS proves the old saying that politics is about unexpected alliances—civil servants working together with NGO representatives to pressure recalcitrant governments, outspoken gay activists from the global cities cooperating with rural poor women for more resources

for AIDS prevention, and human-rights lawyers working together with biomedical researchers in efforts to increase accessibility for yet to be acknowledged AIDS drugs, to mention just a few examples. Complexity is the rule. Still, governance does somehow occur, and a global strategy has indeed been developing, with an ideology (although contested), with resources (although limited), and activities (although sometimes uncoordinated). The inevitable question, of course, is whether this is an anomaly: something new, strange, or simply the way global governance has always worked—social science seems unusually prone to “exaggerate the novelty of novelty,” as pointed out by Walker (1993: 2). And, to be sure, global governance has never been static and repetitive but, rather, a continuously evolving set of practices.

Sovereignty took over as the dominant ideology after the turmoil of the Thirty Years War in the mid-seventeenth century, as a result of fledgling states challenging Christendom during the reformation starting in the fourteenth century (Held 1995: 34). Diplomacy and international organization provided the mechanisms for creating and re-creating sovereignty as the guiding principle. The growing importance of states, hence, is concomitant with the development of formalized ways of managing relations between them. “The gradual consolidation of the independent sovereignty of each state was at the same time part of a process of the development of the inter-state system” (Held 1995: 36). Sovereignty, thus, is essentially a process whereby states grant each other certain rights and responsibilities—agreeing as to what is inside and what is outside, to speak in Walker’s terms.

Thus, international organizations should not be seen as efforts to control yet to be born national states. Rather, this early form of international organization is inextricably linked to the consolidation of the state system (Giddens 1985: 261). The modes of reflexive regulation initiated with several different IOs, with the League of Nations as an apex and information control center, were essential for the system to function as a system. Murphy contributes further to this understanding, as he shows how IOs provided private enterprise with control opportunities for communication and trade (1994). Private enterprise—essential to states for revenue—was tied to the state, and the international state system was

thus further strengthened. Subsequently, sovereignty was spread from the initial capitalist core countries to the rest of the world (Murphy 1994). The universalism of sovereignty, then, goes hand in hand with international organization.

Is the UN only to be understood as the monitoring mechanism of the sovereign-state system? This study seeks to argue differently, but Giddens, for example, leaves little hope for those seeing future participatory governance centered at the UN: “[T]he UN has not and is not making substantial inroads into the sovereignty of states” (Giddens 1985: 283). Even more pessimistically, he sees the UN as strengthening state sovereignty rather than weakening it. Legally, the UN Charter is but a continuance of the Westphalian system. Held concludes (1995: 88):

In sum, the UN charter model, despite its good intentions, failed effectively to generate a new principle of organization in the international order—a principle which might break fundamentally with the logic of Westphalia and generate new democratic mechanisms for political coordination and change.

In a globalized economy, providing welfare and well-being to citizens has proven a daunting challenge. As the currently dominating politico-economic doctrine emphasizes export-led economic development, free trade, and minimal state intervention, little room is left for autonomous governmental activity. Indeed, proponents of a more efficient global division of labor strive to create an economic system without the disruptions of geographical bottlenecks. Globalization of financial markets, claims this doctrine, forces governments to accommodate; and today the governments’ primary task becomes one of creating favorable economic and political conditions for highly mobile capital to settle inside their territories for longer periods of time.

In the context of global political economy, NGOs in social areas like AIDS may not be a main concern—and neither are the UN organizations dealing with various aspects of welfare and development. Important instead are financial institutions and banks.

Here, NGO participation is still quite restricted, although NGOs are active on the outside looking at G-7 and Basel-group meetings (cf. Nelson 1996). Participation by ASOs in the workings of IGOs like UNAIDS becomes less of a problem for maintaining sovereignty, since intergovernmental agencies and NGOs are equally unimportant for public policy relative to finance capital: and thus are governmental bureaucracies dealing with social and welfare issues. The core caretakers of sovereignty need not bother with welfare, since finance capital is all that matters from that view. It could very well be argued, then, that a study of sovereignty would have to focus there rather than on an issue like AIDS. What we now witness is not at all the end of sovereignty, but simply another twist in the ideas and practices of its maintenance, excluding not only the historically unimportant NGOs but the majority of the UN organizations as well—most notably those dealing with health, environment, and other welfare issues. The increased participation by previously marginalized groups in issues like AIDS, hence, is not necessarily indicative of power sharing or a recognition of the competence and skills of NGOs. It may simply not matter to the major players what goes on in the UN institutions any longer. What matters, according to this view, is capital and institutions and actors central in global financial capitalism.

Is there reason to believe that Giddens and Held, although correct from a 1945 perspective, are too pessimistic in 1997? Judging from this study, they are both right and wrong. A participatory principle for global governance is certainly not practiced on a general level, but on the other hand, new principles have been evolving that question the relevance of the Westphalian fiction of state supremacy.

Frequently, highly relevant problems for a majority of people are governed outside sovereignty-based structures and have proven possible to influence through collective action. The case of AIDS supports this view, as does, for instance, the Agenda 21 process concerning sustainable development. The agenda itself, according to several participants, would hardly exist were it not for the NGOs pressing, cajoling, embarrassing, and aiding negotiators at the various Preparatory Meetings for the Rio

Conference. Also, the Commission for Sustainable Development has managed to create new mechanisms for inclusion of NGOs not in consultative status with ECOSOC. Equipped with Agenda 21, grassroots organizations, too, have exerted considerable impact on national environment and development plans and policies. The World Bank also seems gradually to include environmental concerns voiced by local and international NGOs (Nelson 1996).

Evidence suggests that a more open interpretation such as this is warranted. Outside the limelight and the major headlines, issue-based networks comprising intergovernmental, governmental, and nongovernmental members alike articulate more equal principles as basis for action, renegotiate resource flows, and manage to change global-governance patterns. All three perspectives applied in this study agree on that score.

There are also legal changes that indicate a crack in the hegemony of sovereignty. International law is increasingly concerned with the well-being and welfare of people, and less with states' rights (Held 1995: 84). The Bosnia wartime tribunal points toward the possibility of a wider global community. So, even if the world appears to be "fated to remain fragmented while longing for reconciliation and integration" (Walker 1993: 17), one has to remember that change takes time.

Democratizing the international—creating a truly "global neighborhood"—would render void the distinction between anarchy and order, between inside and outside. Creating rules and policies with global reach through a democratic process would give these rules and policies legitimacy and justification. As pointed out by Held, "[D]emocracy bestows an aura of legitimacy on modern political life: laws, rules and policies appear justified when they are democratic" (Held 1995:3). Former UN secretary-general Boutros-Ghali's insistence (1996) on democratizing governance in the context of the UN should be interpreted in this context. To be sure, Boutros-Ghali has kept within intergovernmental discourse—his version of democracy is the established UN rule of one member—one vote—but, nevertheless, by invoking democracy, he seeks to give to the UN badly needed legitimacy. Simply by invoking the concept of democracy in a global context, groups intent on change can seize the day and use Boutros-Ghali's remarks in a

more radically interpreted way. Sovereignty, as do other social institutions, will wither away if enough people start acting as if it does not exist.

A Global Community?

Reform of political decisionmaking has traditionally strived to make the system work better in terms of serving the bounded group of people within the confines of the state. With the interconnectedness of people across taken-for-granted national borders, “national” and “international,” inside and outside, become nonsensical. The spatial demarcation of the world into geographical entities within which “community”—and thus ethical standards—can exist is treated skeptically by IR scholars. A global community with a universal ethics is rendered impossible. In the context of sovereignty, the struggle of the UN and international NGOs for global standards and ethics is displayed in its full despair.

Viewing global governance in terms of this case study, one finds that global communities *have* arisen, although in a more limited sense. Those engaged in AIDS have in various respects joined each other and established a community of people living with AIDS. The governance taking place is issue-based rather than territorially based, frequently following historical patterns but adapting and modifying SOPs according to new demands—which are articulated by civil-society organizations together with secretariats of IGOs and issue-specific segments of governments. Frequently, these networks challenge dominant systems of power, but they normally operate on very limited resources prohibiting revolutionary changes. The motives need not be to change or govern the entire world, but more limited—for instance, to stop the AIDS epidemic and ease the burden of those suffering from it.

From a theoretical standpoint such as Walker’s, a global community is an impossibility. And, even though the forms global governance takes today are different from yesterday’s in the number and scope of participants, those who actually take part form a rather small group. International conferences on AIDS may enlist participation over and above ten thousand, but most NGOs in the

world still never attempt to influence intergovernmental organizations like the UN or WHO (cf. Nelson, 1996). The actual participants are a few apex NGOs, often located at or near IGO headquarters and with budgets allowing extensive traveling. Relatively few individuals have any direct contact with IGO staff. Nevertheless, AIDS shows that, given time, these organizations may evolve into more participatory structures, which can develop relations with communities other their own immediate ones. They need not hi-jack issues and monopolize dialogue with IGOs. The impossibility of a truly universal discourse cannot be taken as a disqualification of the entire struggle.

The UN continues to be the only place where global dialogue can, and does, take place concerning global issues. Reform of the UN, hence, should focus on this articulatory aspect of global governance. Operational activities centrally managed—how ever effectively—will always, I am afraid, malfunction. IGOs and NGOs have different capabilities, and field activities appear to be a strength of local actors. In the context of AIDS, this trend showed as well. GPA tried to set itself up as leader of a global strategy—including all phases from initiation to implementation—but was unable to deliver in the end. NGOs let themselves be fooled by this, leading to totally unrealistic demands in the beginning.

If the UN wants to remain a central actor in global governance, the role of facilitating articulation of values appears to be its primary strength. AIDS, or any other highly complex issue, can never be the responsibility of an IGO: it has to lie with communities. In the creation and execution of global policy in transparent networks of NGOs and other elements of civil society, governments, and secretariats of IGOs may constitute viable partners. Such coalitions may act with legitimacy, may have the capacity to muster required resources, may have access to needed technical expertise, and may be sensitive to local variation. Of course, issue-based participatory networks offer no guarantee for good governance. Guarantees are impossible to give: *Good governance is a constant struggle.*

Epilogue

At the outset, this presentation was guided by two broad research questions. The main purpose was to explain how and why the governance practices of the AIDS epidemic have changed regarding the involvement of NGOs during the last decade. Related to that empirical ambition was the second, theoretical goal. Three different analytical “cuts” into the same case were put to work in order, first, to present a broader understanding of the processes of creating partnerships between GPA, UNAIDS and ASOs, and NGOs and, second, to demonstrate the usefulness of a multitheoretical approach for understanding and explaining global governance. To what extent were these goals fulfilled through the pages of this book? And what directions for future research can be pointed out?

The questions of what, how, and why regarding AIDS partnerships were explained differently depending on the perspective chosen. The Gramscian approach understood the process as one of competition between discursively constituted forces. Intergovernmental public health was challenged by groups who felt AIDS necessitated both broader understandings of health, including considerations of human rights and poverty, and an approach encompassing governmental as well as nongovernmental actors. AIDS made visible contradictions in the sovereignty-based handling of health, providing counterhegemonic groups with an opportunity to articulate new frames of meaning for AIDS governance.

The interorganizational framework offered another interpretation. The interorganizational field of health was disrupted as AIDS—commonly understood as a medical issue—was too difficult to handle with the standard public-health measures. The GPA was entrusted with the global strategy but was compelled to seek new routes as AIDS threatened its linking-pin position in global health governance. GPA focused on the ASOs, which commanded resources needed by GPA by means of their local grounding.

Lastly, the leadership and networks perspective enabled a problematization of the details of decisions to involve NGOs. In informal discussions with participants from different organizations—governmental as well as nongovernmental—consensus emerged around the role of NGOs in the global strategy. In the network, prevailing prejudices between the two different types of organization could be overcome. A common agenda and a joint policy could be established.

All three perspectives contribute a different piece to the understanding of the studied process. Admittedly, it has been very tempting throughout this book to put everything together into one neat package in the end. A small and guarded effort was made to speculate on the relative merits of the three approaches as a basis for action, which centered on stages in the policy process. It was argued that a Gramscian approach may be relatively better for understanding agenda setting, whereas a networks perspective sheds comparably more light on decisionmaking. The interorganizational framework, lastly, was most useful in an implementation phase. Ultimately, the choice of perspective will have to be guided by the analysts' ambitions and tasks. No general conclusion can be drawn.

It is so easy to believe that one "knows": all one's questions have been answered, have they not? To admit that one does not have the capacity even to ask all of the right questions is difficult indeed. Frequently, completely different explanations are offered to the same phenomenon—but that goes with the territory, so to speak. One has to learn to cope with this reality, however uncomfortable it may seem. Social science is particularly vulnerable to antagonisms ensuing from this multitude of explanations and understandings. Dialogue between scholars from different origins, working from competing assumptions, and researching different fields appears to be confounded by antagonism. If overcome, in the sense of an agreement to disagree, an arrival at a "working consensus" founded on compatibilities and incompatibilities, the field of global-governance studies would have much to gain (cf. Bourdieu 1991: 384). This book has been one effort to show that although based in different assumptions about global governance and how that works, explanations do have similarities as well as

differences. It appears to be important for the legitimacy of social science that dialogue and communication be resurrected as a virtue—the perceived vested interest in this endeavor of everybody engaged in it. This would necessitate recognition of the variety of types of work, fields of study, and origins of scholars that is currently lacking. It would imply the kind of dialogue suggested by Sylvester’s notion of “empathetic cooperations across odd and seemingly incommensurable positions and statuses” (Sylvester 1994: 2). I feel there would be much to gain from such an evolution.

Future Uncertain

What appear to be interesting avenues for research judged from this study? Hopefully, the preceding pages have provoked a few questions. For myself, the gaining momentum of the debate on reforming the UN—possibly as a result of the heightened interest in the organization following the fiftieth anniversary—has stimulated a continuation of the ideas basing this study. AIDS in many respects is indicative of the larger UN debate; perhaps UNAIDS even signals the advent of a new programmatic focus in reform efforts. Current suggestions regarding what to do with the UN, however, seem curiously similar to those voiced twenty or even thirty years ago. Maurice Bertrand’s testimony on leaving the organization (1985), the UNA-USA series of reports (e.g. Fromuth 1986), Childers and Urquhart’s studies (e.g. 1997), and even the latest commission, that of global governance (1995), seem to come up with a relatively limited set of proposals for reform (cf. Gordenker 1996).

Why is this so? One interpretation that seems worthwhile exploring is that organizations lack memory (cf. Lundquist 1996: 377). The same ideas can be voiced again and again with ten years intervals or every incoming generation. Learning does not seem to happen in organizations. Learning to learn, as suggested by the Haases (1995), can not occur, since organizations per se cannot learn: only individuals can. From a perspective of social change, then, networks of individuals seem more interesting foci of re-

search than do formal organizations. The network surrounding Mann, Grose, O'Malley, and others managed to create a vision of AIDS governance transgressing IGOs and NGOs and earlier ideas about public health. Of course, formal organizations are important as well, since they command resources and have legal functions that networks will have to confront at one point or another.

For global governance, the articulatory efforts by networks with the possible discursive changes those endeavors may generate offer intriguing research prospects, and may inject much-needed vitamins into the tired global bodies of the UN. Beginning to understand the process from articulation of new ideas emanating in issue-specific and boundary-spanning networks, their introduction into broader discursive formations with ensuing struggles with established interests leading to rejection, adaptation or revolution of global governance, will be my challenge for the twenty-first century.

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