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Mobilizing the Grassroots from Above: Political Engagement among AIDS Associations in Democratic Brazil

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From inside the state machine, you often cannot, do not manage to, or are not in a position to propose things. This is why it is fundamental for society to be together with us pressuring.

Artur Kalichman – Adjunct Director of the State STD/AIDS Program, São Paulo

We need to create conditions to sustain the process that we experienced in the area of AIDS. If we don't have a solid social movement, established at the local level, it is going to be very difficult to achieve this.

Pedro Chequer – Director of Brazil's National STD/AIDS Program, 1996 – 2000, 2004 – 2006¹

Introduction

A distinguishing characteristic of the newest generation of associations in Brazil is strong ties, especially financial, to the state. Only a few decades ago, in the 1960s and 1970s, grassroots associations in Brazil brought to mind images of public protest, of mass marches, and of government criticism. Now, while social movement rhetoric has regained some of its old vigor as Brazil enters a new period of leftist democratic governance, the evidence of social and political mobilization has changed dramatically. Mass protest is scarce, and public political acts are oriented as much to endorse state policy and they are to criticize it.

This paradigm shift in grassroots mobilization is a direct consequence of democratization, and of strong new linkages between associations and the state that developed as a result of that process. These linkages, however, are the subject of a controversial, polarized debate, with scholarly accounts clustering around two rival interpretations: "collaboration" and "cooptation." Within the collaboration paradigm, analysts suggest that associations and the state are working together within the framework of participatory councils to debate issues and shape priorities so that policy most effectively addresses a range of concerns. Thus, they argue, the approximation between associations and the state represents new strides in citizen participation and, more broadly, in "democratizing the decision-making process". Co-optation theorists argue, however, that the new relationship between associations and the state primarily revolves around the state providing contracts for associations to provide services, which is in essence outsourcing the implementation of public policy to volunteer groups. In this case, associations primarily function as service providers for the government, without a significant voice in setting policy priorities.

I argue, however, that both approaches to interpreting new forms of political engagement are flawed, and that the reason recent they tend toward two extremes is because scholars of Latin American politics today tend to approach grassroots mobilization as a strictly bottom-up phenomenon. In this paper, I examine democratic political engagement from the perspective of the state, an actor that has been ignored in recent literature, and I focus the analysis on grassroots mobilization around AIDS, the policy area in Brazil with arguably the most active and broadest political engagement among grassroots associations. Specifically, I use the case of AIDS to argue that state engagement of grassroots organizations in Brazil in some policy areas goes beyond that of a patron-client or contractor-provider

¹ Both quotes are from public addresses at the seminar "Social Control and AIDS in the State of São Paulo," March 2007, published in the official event synopsis.

relationship and that, for a variety of motivations, the state is strategically engaging historically marginalized communities as *new organized interests*.

Background: AIDS Policy in Brazil

[L]ook at the marvelous job done by Brazil where you had commitment from government, civil society, the church, [and] the grassroots level to turn this around (...) That's what we have to have everywhere.

Bill Clinton – President of the United States of America, 1993 – 2000²

Brazil's national AIDS program is heralded both internationally and within Brazil as a model for effective state/society collaboration in health policy. Yet surprisingly many accounts of the Brazilian response to AIDS either ignore or downplay the political role of associations in developing and sustaining Brazil's policy model—attributing Brazil's progressive response to leadership within the state, and crediting associations mainly for their technical roles in innovating new methods for HIV prevention among marginalized communities. A likely explanation for this confusion is that, at the national level, collaboration between the state and associations is now so seamless and institutionalized it is hard to distinguish between the two actors' roles. I argue, however, that political pressure leveraged by grassroots organizations is a key factor in supporting Brazil's progressive AIDS policy model, and that underlying the "seamless collaboration" is a complex and dynamic relationship between the state and AIDS associations, in which the state plays an active role in expanding and deepening ties.

The scholars of Brazil's AIDS policy who do mention the grassroots political response tend to describe a bottom-up, social movement phenomenon that developed in the 1980s according to the following narrative (Galvão 2000, Lieberman?, Nunn unpublished dissertation, Parker 2003): Activist leaders who were involved in Brazil's wave of social movements in the 1970s (most from the gay rights movement) used their social movement repertoires to fight discrimination and the homophobic discourse in addressing AIDS in the national government, but at the subnational level in *collaboration* with progressive state officials. At the subnational level, grassroots AIDS activists and state workers collaborated in launching both social and *political* campaigns, pressuring politicians to push forward progressive AIDS legislation. At the national level, however, there was an extremely weak response and little desire to work with grassroots leaders. AIDS associations thus mobilized high-profile political and media campaigns to pressure the Brazilian state into accepting their input and to change certain policies, particularly in the area of human rights. Thus, the early relationship between AIDS associations and the state was marked by both collaboration and conflict (Galvão 2000), and at the national level, political engagement was largely a bottom-up process by which concerned citizens came together and sought out policymakers.

While this general characterization of mobilizing the "AIDS movement" as bottom-up is valid for the time period from 1983 to 1994, since the early 1990s, the state has played a very active role in furthering and expanding the engagement of grassroots AIDS associations. This shift in stance, while due to a combination of factors that I will not explore in this paper (see Gomez unpublished manuscript,

² Interview for *Frontline*, May 30, 2006

Nunn dissertation), was critically facilitated by a large loan for AIDS prevention from the World Bank (cite loan document). This loan provided Brazil with US\$160 million for its AIDS program, [xx] of which was earmarked for distribution to "civil society organizations." As a consequence, Brazil's AIDS program metamorphosed nearly overnight from an underfunded area of the national healthcare bureaucracy to the "rich cousin of healthcare", characterized by a strong, collaborative relationship between the state and grassroots organizations.

Based on the AIDS policy model that emerged in the early 1990s, Brazil has become the international standard bearer for "good governance" in AIDS prevention. This governance model strongly emphasizes a close interaction between the state and civil society in shaping government policies, and based partly on the Brazilian experience in mobilizing an AIDS response, international lending institutions have developed a variety of mechanisms to increase civil society involvement in domestic AIDS policymaking (e.g. UNESCO report 2003). These include both providing direct financial assistance to grassroots associations and encouraging governments to create policymaking committees that give grassroots groups a seat at the policymaking table. Within Brazil, the national AIDS program is a model for effective state/society collaboration, the state has made recent efforts to copy the AIDS policy model of grassroots engagement and apply it to other policy areas.

At the same time, since the early years of Brazil's new AIDS policy paradigm, the state has faced two strong challenges to maintaining its reputation as an AIDS policy leader. First was the perceived need to decentralize AIDS policy management: This reform was strongly recommended by the World Bank in the terms of its second loan agreement, and national health officials generally agreed that decentralization was necessary for the long-term sustainability of the program, as well as believing in the broader decentralizing philosophy (interviews 11/26/08, 12/12/08, 12/16/08, 05/05/09; see also Gomez unpublished manuscript). Moreover, as the bureaucratic capacity of state-level healthcare systems increased over the next decade, and as the virus spread into a large number of states in the South and Northeast regions, there was growing consensus that it was inefficient and unnecessary for national bureaucrats to be setting local AIDS policy. Second was the "pauperization" of AIDS. The spread of HIV/AIDS in Brazil underwent a demographic shift in the early 1990s. Whereas AIDS arrived in Brazil as a disease of international travelers in general, and of gay men in particular, by the early 1990s infections had shifted to much poorer subpopulations—in particular, to drug users, prostitutes, convicts, and more broadly, to women and children. [Add statistics.] Moreover, as the face of AIDS in Brazil changed, so did the leadership of the grassroots associations confronting the epidemic—from experienced activists who are individually wealthy and connected to powerful social circles, to new grassroots leaders who have little political experience, wealth, or social capital to call on in effecting political change.

This dual challenge of decentralization and "pauperization" led the national AIDS program to develop two corresponding objectives with respect to grassroots associations: From a technocratic, public health perspective, it was important to mobilize leaders from newly affected communities to come up with *new prevention strategies* that work in their local context, and to convince the rest of their communities to take the threat of AIDS seriously. From a political perspective, it became important to mobilize *local social movements* to hold subnational governments to account for investing in high quality AIDS programs—particularly in the many states beyond Rio and São Paulo where politicians had little interest in a progressive AIDS policy agenda and/or in a collaborative reliationship with grassroots associations.

Thus, since 1992, the Ministry of Health has played a strong role in shaping grassroots mobilization and engagement in AIDS policy using large amounts of public funding and new

institutional opportunities to expand and deepen political engagement among grassroots associations. This account lies in contrast to previous descriptions of Brazil's AIDS response, and in contrast to new theories of participatory governance and political engagement in Brazil, which tend to take a strictly bottom-up approach.

In the following section, I situate the paper in the literature on group mobilization in Latin America. I then dedicate the rest of the paper to elaborating on three major strategies utilized by the Brazilian state to target associations for mobilization and engagement as new organized interests in the area of AIDS policy: by creating new formal "participatory" political institutions; by developing informal channels of communication between state bureaucrats and grassroots leaders; and by using large amounts of public funding to support grassroots AIDS associations.

Theories of Group Mobilization in Latin America

The Fragmentation versus Re-Organization of Civil Society

The literature on democracy in Latin America has recently turned fairly bleak—shifting away from assessing the likelihood that formal democracy will finally persist in the region (consensus: fairly likely) and toward an exploration of the underwhelming effects of democracy on the lives of ordinary citizens. This new body of literature centers on failures of democratic representation—i.e. why the formal structures of democracy have generally failed to produce greater economic and social equality via the representation of broader segments of society in the political arena)—and a common argument is that market reforms have weakened the structural bases of collective action, leading to a fragmented civil society that is unable to effectively articulate its interests politically (Kurtz 2004, Roberts 2005, Weyland 2004).

A rosier counterpoint to this so-called "atomization literature" points to the possible emergence of new forms of collective action in the face of the decline of labor unions and political parties—the traditional forms of collective mobilization in Latin America. Thus far, however, this literature is scarce and has focused mainly on "mapping the conceptual territory" (Friedman and Hochstetler 2002) of potential new forms of participation (see also Chalmers et. al. 1997, Oxhorn 1998, Garretón et. al. 2003) or on measuring the "level" of political mobilization and participation in Latin America, generally through large-scale quantitative analyses that assess voter turnout or political protest activity (Arce and Bellinger 2007). (For a new exception to the general rule, see Collier and Handlin forthcoming.)

This paper departs from both trends in the literature on democratic participation in Latin America by focusing on the *mechanisms* by which structural and institutional changes have led to a transformation in patterns of political participation, through an exploration of the dynamics behind the exemplary case of mobilization around AIDS policy in Brazil. It builds on a nascent body of work on participatory governance in Latin America, which looks at the process of political engagement within the context of policymaking councils. At the same time, this paper differs from the participatory governance literature in examining *state* initiatives to incorporate grassroots associations in governance.

Most of the participatory governance literature—and most of the literature on participation in general—conceptualizes the expansion of political engagement as a bottom-up process, achieved *despite* the opposition of political elites. Correspondingly, the literature on participation tends toward either extreme pessimism or extreme optimism. One branch explores failures to expand participation, finding either that new participatory institutions serve in practice as tools for state cooptation (Greaves 2004 on

Chile, Hawkins and Hansen 2006 on Venezuela) or that they are powerless when they oppose powerful economic or political interests (Coelho 2004, *Jornal Valor Econômico* 09/13/06). The other branch of the literature centers on one specific instance of success, known as participatory budgeting, which was driven by local-level actors in Southern Brazil.

However, participatory budgeting is only one special instance among a wide range of participatory institutions in Brazil, which has attracted a disproportionate amount of recent academic attention. In fact, most types of participatory institutions in Brazil were not built from the ground up by local-level groups. Rather, both in Brazil and across Latin America, the drive toward participatory institutions has often been pushed forward by the state, and in some instances the federal government has made cash transfers to municipal governments dependent on their implementation of participatory councils in certain policy areas (Labra 200x, [add citations]).

Moreover, the formal label "participatory" applies to only a small range of the new policymaking and monitoring bodies in Brazil that stimulate more active political involvement of citizens, encourage political consensus through deliberation, and make possible more equitable and effective public policy—what Lavalle, Acharya, and Houtzager refer to as an "institutional rainbow of policy councils (2005). While the label "participatory" seems to imply an official citizen vote over policy decisions, many new policy institutions that are merely "consultative" seem to offer similar opportunities for civic engagement and consensus building among government officials and civil society leaders. Of course, whether either "participatory" or "consultative" bodies in practice serve to further these democratic ideals will depend largely on if the government authorities involved are technocrats, dedicated to improving policy, or political appointees, dedicated primarily to furthering the political ambitions of the mayors or governors who awarded them their bureaucratic posts.

The trends described above have three implications for studies of group participation in Latin America: First, scholars interested in political participation in Latin America should expand their universe of "participatory institutions" to include all the institutions mandated by the federal government that formally incorporate "civil society representatives", including those "consultative" institutions in which community leaders do not vote on policy decisions but which nonetheless constitute a formal space for deliberation and communication between the state and organized civil society. By incorporating the *full* range of "councils", "commissions", and "working groups" that constitute a formal space for civil society input, we see that the promotion and implementation of participatory governance in Latin America is actually a much broader phenomenon than the current body of literature would suggest. With a wider empirical focus on the study of new political institutions in Latin America, scholars may observe empirically a larger variety of new forms of citizen mobilization and participation than they have thus far.

Second, within the sphere of participatory policy councils, we should not only look for new forms of individual political participation but also for new forms of *group* participation. In contrast to participatory budgeting councils—which engage individual citizen participation—many participatory councils in Brazil engage the participation of associations—representing citizen interests—to participate in the policymaking process (Lavalle, Acharya and Houtzager 2004). In other words, participatory policy councils constitute a new avenue toward *group mobilization* in Latin America, an understudied area of democratic politics in Latin America.

Third, we should reintroduce into our analyses the role of the state as an active player in shaping group mobilization and participation, at both the subnational and national levels. Given the decentralized nature of Latin American politics at the start of the 21st Century—especially in the area of social welfare

policy—the forms of interest intermediation that arise within these new formal spaces for political representation will certainly vary not only by political region but also by policy area. However, the trend I describe above suggests that it is not just local actors but rather the combination of national and local political forces that determines policy outcomes. It is now almost universally accepted in the academic literature that local political and civil society actors exert a strong force on policy outcomes. But within the literature on political participation—and especially on participatory governance—in Latin America, the pendulum seems to have swung to one extreme, either discounting or ignoring the force of national state actors in shaping political dynamics. I suggest that by sharpening our focus on the state as a potentially active player in opening new channels for participation, we may uncover a broader range of both intra- and extra-institutional forms of political participation that have so far gone unexplored in the literature on democratic participation in Latin America.

New Global Policy Trends

Interestingly, the current academic literature on group mobilization stands in direct opposition to the equivalent body of development policy literature, which centers on a top-down logic of political engagement. Specifically, the international development community, recognizing the limited capacity for socially and economically marginalized communities to mobilize independently in demand of greater citizens' rights, has come together around a new paradigm for grassroots development that centers on top-down "community engagement." The premise is that it is possible for the state, or for international agencies, to *create* new constituencies of politically engaged citizens on the ground, through a combination of incentives and opportunities. In practice, the "demand-side democracy" paradigm centers on two policy prescriptions: (1) *contracting voluntary associations to manage social service projects*—which is thought to give associations an informed personal stake in policy outcomes, thus motivating them to demand transparency and accountability within government (Graham 1994/1997, Grosh 1994, Ravallion 2003); and (2) *channeling policy decisions through participatory councils*, which are thought to constitute a new and important opportunity for grassroots organizations to communicate their policy preferences to government, to have direct input into policy design, and to monitor the implementation of policy.

Although this new trend toward "community engagement" mirrors long-held theories of democratic pluralism—namely, the assumption that associations represent the public interest and that they are needed to pressure politicians to respond to the changing needs of the community—the policy prescriptions that have resulted, and the scale of global support behind them, constitute a fundamentally new phenomenon. The concept of a "global development paradigm" is itself new, and as a corollary, this has meant that unprecedented amounts of resources are flowing from international agencies and national government bureaucracies to local associations in developing regions. In some of the developing world, exemplified by Sub-Saharan Africa, this money has been dispersed primarily by international NGOs. In other parts of the world, especially in Latin America, a large quantity of resources for local associations has been either mobilized by or dispersed by the state.

In this paper I examine the state's role in political engagement among grassroots organizations in Brazil, a country that stands at the center of the debate on political mobilization in Latin America. Brazil is the country with the most extensive rights-based legislation and with the tenants of direct democracy and decentralization enshrined in the 1998 Constitution. Yet contradictory empirical evidence about new forms of citizen participation and whether they wield a policy impact has led some scholars to label Brazil as an "arena of struggle" over deliberative versus co-optive democracy (Friedman and Hochstetler 2002). Through an exploration of political engagement among AIDS associations in Brazil, this paper provides some limited evidence for the claim in the policy literature that the new policy of

"community engagement" is playing a mobilizing role in the formation of new organized interests—and against claims in much of the recent literature on Latin American social movements that strong linkages to the state are uniformly co-opting or demobilizing organized civil society across the region.

Methodology

In this paper, I am engaging in inductive descriptive analysis—using my observations about AIDS policy to propose more general descriptive claims about mobilization, potentially applicable to a broader set of social policy areas. However, I make no claim that AIDS is *representative* of grassroots mobilization in Brazil or in Latin America, either in the characteristics of mobilization or in the state's role in promoting it. Rather, I selected AIDS policy as the focus of this study because it is well known within Brazil as an exceptional instance of participatory success. In the broader study (which analyses both the state's role in mobilization and how efforts to mobilize the grassroots translates into on-the-ground participation), I use the arena of AIDS policy as a "most-likely" scenario for observing a deepening of democratic participation through state initiative—recognizing that some aspects of mobilization around AIDS are likely to be exceptional, and recognizing that the limitations to political participation that we observe in the area of Brazilian AIDS policy are likely to appear even stronger in other policy and political contexts. In the case of this paper, I have a more modest goal: to elaborate descriptively on some of the roles played in shaping political engagement by a key actor that has been ignored in the recent literature—the state—in the hopes that future researchers will reincorporate the state as a more central in analyses of political participation.

Good description is a necessary precursor to achieving causal inference, and descriptive analysis in the area of political mobilization has been strikingly absent from recent literature. The small body of descriptive research that does exist tends to focus on local-level political dynamics, and more specifically, on the dynamics of participation within a single political arena such as a policymaking council. Admittedly, the current approach has a certain degree of merit: social policy is largely decentralized; associations in Latin America tend to be local rather than national; and new local political institutions intended to expand participation are worthy of study in their own right. However, this analysis takes a different methodological approach. I take one policy area that is known to involve a broad array of associations that engages actively in politics and policymaking (not just in service provision)—HIV/AIDS—and I investigate *all* the channels used for engaging in politics, at all three levels of government. Through this different approach, I reveal an abundance of hidden state/society, and in particular national-local, linkages—whereby the federal state engages local associations directly, bypassing regional and local political elites and, in some cases, explicitly mobilizing grassroots associations to act as a countervailing force against the discretionary authority of subnational politicians.

Formal Participatory Institutions

In contrast to local-level participatory institutions, there has been relatively little academic discussion of participatory institutions at the national level. Yet in-depth analysis of policymaking dynamics in the area of AIDS reveals that institutionalized national linkages between the state and grassroots leaders contribute largely to sustaining Brazil's AIDS policy paradigm and mirror the rainbow of formal participatory institutions at the state level. Moreover, while within the "institutional rainbow" of participatory institutions in Brazil, health management councils rank among the most important fora for direct civil society participation in politics, in the area of AIDS policy, health councils are but one of a

wide array of institutional opportunities for direct grassroots participation in policymaking. While state AIDS officials remain dedicated to strengthening Brazil's health councils, their strong dependence on direct collaboration with grassroots associations to further their policy goals, and the ineffectiveness of health councils in facilitating this strategic relationship, has led them to construct an abundance of alternative channels for associational influence in AIDS policy design.

As mentioned above, associational collaboration in AIDS policy management is important to state bureaucrats for both technical and political reasons. Technically, grassroots associations are heralded in the global health policy literature as particularly suited to AIDS prevention work for their sensitivity and adaptability to changing local conditions. Politically, they have the ability call attention to problems in the implementation of policy and, potentially, to hold politicians to account for policy performance. Moreover, the nature of HIV makes it such that it is particularly important for bureaucrats to be quickly responsive to policy failure. (In particular, a continuous supply of antiretroviral medication in local health posts is essential both for individual health and to prevent drug resistance.) Thus, from the perspective of state bureaucrats, engaging AIDS associations directly in shaping policy is important for two very different reasons: their organizational capacity to implement HIV prevention projects in hard-to-reach communities, and their *political* capacity to mobilize outside support for state programs. [Insert quote?]

Health councils constitute a particularly important avenue for direct grassroots participation in policy to the state bureaucrats within Brazil's AIDS program because they are the fruit of the *sanitarista* movement's fight for popular inclusion in the healthcare system.³ Health councils are, moreover, symbolically important to participatory governance in Brazil because they are the first of the now widely varied formal participatory institutions to be implemented in Brazil and, correspondingly, the most widely instituted. Over 5,500 health councils engage nearly 100,000 citizens and a multitude of associations in shaping policy throughout Brazil's 28 states (Coelho 2006, Labra and Figuereido 2006). Yet given the formal power of the health councils, their symbolic importance to the *sanitarista* movement, and the centrality of health policy to the AIDS movement's goals, participation by AIDS associations on state and local health councils is less active than one would imagine for a politically mobilized grassroots community.

This gap can be attributed to the fact that the power of health councils to shape policy depends highly on political context—particularly at the subnational level. Other than the general stipulations requiring the formation of councils, and an equal division of representation between civil society and state/service providers, much leeway is left for local political leaders to determine the "rules of the game", such as the selection process for council representatives and the control over debate and agenda-setting within the council. Politicians whose electoral support bases do not fit the profile of people with most propensity to participate tend to try to diminish the power of the councils, shut them down (in the case of the councils not mandated by national law), or ignore their rulings [add citations, including newspaper article].

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³ However, while the legal framework that set the stage for direct civil society participation in health policy is fruit of a collaboration between grassroots leaders and leftist politicians, the political elites *inside* the state played a significant role in expanding the formal power of the councils to shape policy. Specifically, the Ministry of Health, together with the National Health Council, constructed additional legislation giving the councils veto power over state and local health budgets—through making federal cash transfers (which constitute over 50% of municipal [and state] health budgets) conditional on budget approval by the corresponding council (Labra and Figuereido 2006).

Consequently, the national AIDS bureaucracy has largely bypasses state and local health councils, instead institutionalizing communication and deliberation between the state and local grassroots leaders through a wide array of national-level participatory institutions dedicated to various aspects of AIDS policy. While most of these participatory policymaking bodies are technically "consultative"—i.e. associations have no formal decision-making power over policy—in practice, AIDS commissions serve as a much more powerful opportunity for policy input. They are presided over by the key figures that draft AIDS policy, and they are much smaller, which fosters deeper discussion and deliberation.

The first of the participatory institutions dedicated to AIDS, the National AIDS Council (CNAIDS)⁴, was actually inaugurated in 1986, two years before Brazil's constitution established the national legal framework for participatory governance, and largely as an improvised response to a perceived national public health threat (Galvão 2000, Nunn dissertation, Spink 2003). The second wave of developing participatory AIDS institutions was in 1998, when twelve new "committees" were created to govern AIDS policies in relation to specific "vulnerable populations". This second wave of institutional development was largely in response to the spread of HIV into a new, highly diversified group of populations (unpublished government document). A third wave of institutional development was in 2003/2004, with the creation the National Council of Articulation with Social Movements (CAMS)⁵ and the restructuring of the various committees and commissions to clarify and coordinate their missions / rules of selection. This wave, I think, went hand in hand with the decentralization of AIDS policy management—maybe as a response to NGO concerns about the potential loss of policy influence, or maybe explicitly as a way for national bureaucrats to retain a certain degree of control over AIDS policy management. [JR note: I will elaborate on this paragraph after reading an unpublished government document about the creation and development of CNAIDS, which I just obtained, and after a series of telephone interviews about the formation and development of Brazil's national AIDS councils and committees scheduled for the week of May 3rd.]

In addition, in 1992, a "civil society unit" was incorporated as one of the major sectors of Brazil's national AIDS bureaucracy. It is one of the program's principal bureaucratic divisions, dedicated to engaging and keeping tabs on local associations that work with HIV/AIDS throughout the country. The sector's specific objective is to foster ties between the state and local grassroots associations, or in the words of its former director, (1) to maintain an independent and coherent civil society response to AIDS; (2) to provide civil society information so that they have the tools to do advocacy; and (3) to strengthen local AIDS movements so they can have local political influence, monitoring government and promoting progressive AIDS policies (interview, 11/18/08). In other words, the division's key goal is to mobilize a nationally organized network of AIDS interest groups that

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⁴ Conselho Nacional de AIDS

⁵ Comissão de Articulação com Movimentos Sociais

⁶ After several reformulations of its name (Galvao 2001), this sector is currently known as the "Civil Society and Human Rights Division" (*Setor de Sociedade Civil e Direitos Humanos*) of the National AIDS Program.

⁷ The formal mission of the "Civil Society and Human Right Division", echoing the description of my interviewee, is to "promote effective liaison[s] with, and participation by, civil society in the formulation, implementation and follow-up of public policies related to STD[s] and AIDS...."

(http://www.aids.gov.br/data/Pages/LUMISACED24AEITEMID7CD07142B1DB4112873A6C8B1138D019ENIE.htm)

wields strong influence over local policymaking. [JR note: I will elaborate on this section after the upcoming round of interviews as well.]

The development of this centralized bureaucratic structure dedicated to state/society intermediation is particularly interesting because it is reminiscent of the centralized structures of interest intermediation that characterized the ISI period, but with key differences that reflect the new era of decentralized governance. Like in the era of corporatist governance, the goal of this central bureaucratic unit is to mobilize and engage organized interests. Yet in stark contrast to the corporatist era, the state's broader objective behind engaging grassroots organizations is to monitor and control government at the subnational level. In more explicit terms, an accountability problem has resulted from the decentralization of AIDS policy management, with very little upward accountability by the state government to the national government. In this case, the state sees the solution as mobilizing local AIDS movements to act as watchdogs.

Informal Institutions

In practice, the national AIDS program pursues its mission of direct grassroots engagement largely through developing and nurturing *informal*, *personal connections* between state officials and grassroots leaders. This is accomplished through frequent personal contact between national bureaucrats and local associations throughout the country. The national bureaucracy flies local grassroots leaders to Brasília for an endless array of conferences, workshops, "capacity-building" training sessions, and rallies. Moreover, the bureaucrats who run the civil society division travel regularly to all twenty-six states in Brazil, arranging an impressive number of meetings with grassroots leaders and responding to a continuous flow of event invitations. Their unofficial policy, told to me by several bureaucrats on separate occasions, is to attend all events organized by local AIDS associations. The seriousness with which they adhere to this policy was evidenced during my period of fieldwork by the frequency with which I saw national bureaucrats at events involving grassroots leaders in São Paulo and Rio de Janeiro; of the X special events I attended from January to December 2009, representatives from the national AIDS program were present at Y. According to the adjunct director of Brazil's national AIDS program:

...[participating in local events] is fundamental. I try to accept almost all event invitations.... because there I get a sense of what is going on, whether it be about a patient that is not being attended well or about the relationship between government and local civil society. There, I get that signal of how the local government is viewing the actions of civil society, how civil society relates to government....

And I believe that those spaces also end up strengthening ties when you are present. You establish channels of confidence, so you end up getting information—[and] you end up acting as an advocate and a mediator for some [difficult local] situations. (author's translation)" (interview, 11/18/08)

⁸ I identified these strategies through a combination of interviews with senior national-level bureaucrats and local grassroots leaders and direct observation of a large and widely varied number of events at which both types of actors were present.

⁹ "...para mim é, é fundamental. Eu procuro atender quase todas as solicitações de eventos. É lógico que não dá para você ir em todos os eventos muito de municípios né, mas nos eventos que são estaduais ou regionais, eu procuro atender porque ali

In other words, through this strategy of personal engagement, the state is building relationships of trust and maintaining a flow of information between local grassroots leaders and the national AIDS program—thus providing a mechanism for national bureaucrats to monitor policy at the subnational level.

Congressional Caucuses

Bureaucrats in the national AIDS program pursue personal engagement with local grassroots leaders not only to help them monitor subnational government, but also to mobilize outside political pressure on state and local politicians. An illuminating example of how bureaucrats in the national AIDS program support grassroots networks strategically to build outside pressure on government at the subnational level is their current effort to create congressional AIDS caucuses (*frentes parlamentares de AIDS*) at the state level.¹⁰

The motivation among bureaucrats in the national AIDS program to develop congressional AIDS caucuses is a general worry is that there is very little interest within Congress in AIDS, especially at the state level. Historically, there has been very little contact between AIDS associations and Congress, which is largely due to the fact that AIDS was externally financed by World Bank loans. Because AIDS associations had direct contact with the National Program—whose budget was decided outside of Congress—they made little effort to build ties within parliament. Moreover, because AIDS policy management remained centralized until the mid-2000s—long after the decentralization of all other areas of health policy—there was essentially no effort at all to build AIDS awareness among politicians at the subnational level. Now that World Bank financing for AIDS has been drastically reduced and AIDS policy management has been largely decentralized to the state and local levels, congressional support has become increasingly important—especially at the sunbational level—and, in the opinion of one national bureaucrat, the national AIDS program is now lagging behind in trying to build relationships with Congress (interview, 06/21/07). The main purpose of the caucuses is thus to maintain a group of congressional deputies that pays attention to and understands the issues involved in AIDS prevention/assistance—consequently making it easier to introduce and pass legislation in Congress.

While the caucus is clearly a project that was conceived and is currently driven by the National AIDS Program, the bureaucrat in charge of the effort adamantly insists that the project is a *civil society* effort to build support in Congress. This bureaucrat was hired from the ranks of the AIDS movement in 2006 (another technique for strengthening engagement with AIDS associations), specifically to work on building congressional AIDS caucuses. He pursues this mission through pure shoeleather—[traveling around to each state, conducting awareness and instructional programs with state-level grassroots leaders and providing technical support once they agree to take on the project]. Yet the bureaucrat

que eu consigo também é ter um, um sinalizador da ponta, do que está acontecendo, seja com o usuário na ponta que está tendo um mal atendimento, seja nas relações governo/sociedade civil local. Então ali eu tenho esse sinalizador de como que o governo local está vendo essas ações da sociedade civil, como a sociedade civil se relaciona com o governo. Então para mim é, é onde eu me alimento para poder também tomar as minhas decisões e os meus caminhos. E eu acredito que esses espaços também acabam fortalecendo os laços na medida em que você está presente, você possibilita mesmo o estabelecimento mesmo de canais de confiança. Então você acaba recebendo informações, você acaba é agindo como um articulador mesmo e intermediador de algumas situações que são difíceis no contexto local."

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¹⁰ AIDS bureaucrats are also working on building a congressional AIDS caucus at the national level.

¹¹ JR note: I need to make sure I can verify this direct connection.

adamantly insists the caucuses are a grassroots project, explaining that his role is limited to *fomenting* the effort through presentations and meetings—leaving responsibility for carrying through the effort to local AIDS associations (ibid.).

The Treatment Access Campaign

The state also uses associations to mount political pressure in the international arena, evidenced by the state's strategic use of associations in the famed international Treatment Action Campaign to expand the distribution of live-saving anti-retroviral drugs to Brazilians living with HIV/AIDS. In this instance, the state mobilized associations to take part in the international campaign (through solicitations and financial support), according to the Director of Brazil's National AIDS Program at the time, to play two strategic roles: to legitimate the action of the Brazilian government in the international sphere; and to help catalyze an international movement, which in practice meant sharing their experiences with other counties and helping to organize grassroots movements in other developing countries (interview, 11/26/2008).

Teixeira gave me two specific examples of how the state deployed grassroots associations for these strategic purposes through the course of the Treatment Action Campaign. First, in 2001 when Brazil entered into action against the United States over patent law, the state used grassroots associations to win international public support. Specifically, one of Brazil's key strategies throughout this struggle was to organize a global public opinion campaign to support its cause, and to do this, the Brazilian state courted the support of the big international NGOs. Yet the government encountered difficulty in making allies of these NGOs, because, according to him, NGOs are generally cautious about acting in support of government campaigns. To overcome NGOs skepticism, the Brazilian government asked the more high-profile local associations in Brazil to provide written and oral testimonials that there were no electoral motives behind the Brazilian government's crusade.

Second, the state used grassroots groups to as "impolitic" political advocates to garner media attention during the UNGASS meeting in July of 2001. Teixeira included Brazilian activists in all of Brazil's international delegations, and he notes that the UNGASS meeting stood out because the Brazilian grassroots leaders were very vocal in their delegation. Teixeira further noted that these state strategies are interrelated. The support of grassroots associations gives direct legitimacy to the Brazilian government; and by exchanging information and strategies with grassroots groups in other countries, they further bolster the Brazilian campaign indirectly. This is all very effective, he emphasizes, *if you maintain their character of autonomy and transparency* (ibid.).

Patronage

As I mention above, strong financial linkages characterize the new relationship between grassroots associations and the state, often in the form of "project funding" for associations to provide social services in impoverished and other "hard to reach" communities. This is a widely recognized phenomenon, both in Brazil and elsewhere in Latin America.

The global trend toward "outsourcing" government-provided services to grassroots organizations has been the focus of a rather polarized debate regarding its effect on political mobilization and participation. On the one hand, international lending institutions tend to implicitly or explicitly tout this practice as broadening political engagement by creating new constituencies of informed and interested

citizens through practical experience in implementing policy—thus leading to positive outcomes both politically and economically. On the other hand, the academic literature tends to criticize this practice as a new form of corporatist style societal co-optation—whereby grassroots groups brought into the fold of state or international donor patronage are hampered in making criticism because of their dependence on this support for institutional survival (Cooley and Ron 2002, Thayer *forthcoming?*; see also Peruzzotti 2007).

I argue here that in some policy areas in Brazil, the state is actually using public funding for grassroots associations in explicit support of the mobilization and maintenance of new organized interests among marginalized communities. AIDS is the policy area in which state funding for grassroots associations is most clearly a case of strategic mobilization as well as the mostly highly institutionalized practice. Again, because this phenomenon has not been made a focus of the academic literature thus far, it is difficult to tell how far state patronage of new interest groups reaches beyond AIDS. However, targeted funding for grassroots organizations is currently a major focus of international lending institutions, and anecdotal evidence suggests that state subsidization of voluntary associations in Brazil is actually quite extensive. Thus, I will again briefly explore how the state uses public funding for mobilizing new interests around AIDS, as a starting point for future researchers to compare across policy areas and broader political contexts.

In the area of AIDS, as mentioned above, ten percent of all state cash transfers are earmarked for voluntary associations, for the implementation of AIDS prevention projects. These monies are distributed through a standardized competitive process. Four points are relevant here: First, in developing the guidelines for funding competitions, the state makes an explicit effort to target its resources toward associations that work in or are from marginalized communities. In the areas of AIDS, this often means targeting groups that work in poor neighborhoods through listing "poor communities" as a funding priority in a given year. The state-level AIDS bureaucracy in Rio de Janeiro goes even further and divides the number of grants it awards across five geographical areas, ensuring that the wealthier "South Zone" of Rio, where most professionalized NGOs are based, do not claim a disproportionate percentage of the award money. At the national level, the AIDS bureaucracy is working with a proposal to create a separate grant competition specifically for community-based organizations.

Second, grant funding competitions in the areas of AIDS solicit associations not only to implement projects but also to *design* them. (The state plays essentially no role in the project design process except for having detailed its basic funding priorities for the year—which itself is done in collaboration with grassroots associations through participatory policymaking councils.) In this way, the state is explicitly attempting to incorporate organized representatives of marginalized communities in shaping policy—or in other words, project funding competitions open a direct channel toward policy influence for associations representing marginalized communities.

Third, a significant portion of state patronage goes toward supporting explicitly political behavior. For example, one official grant category, with its own, earmarked funding is for "advocacy" work among grassroots organizations—referring judicial advocacy in defense of the rights of people with HIV/AIDS. In other words, the state is financing grassroots associations to enter into judicial action against itself.

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¹² Add the actual total amount of money, in Rio and in Sao Paulo, in both Brazilian Reals and US Dollars.

Finally, the state invests money in supporting horizontal collaboration among grassroots leaders through supporting associational networks and financing grassroots conferences and rallies at the national, regional, and local levels. In fact, x% of the national program's entire budget for AIDS prevention is set aside for "event support" and y% of the budget is earmarked for "support of networks." Moreover, the state goes far beyond financing technical workshops and conferences in which grassroots leaders take part, funding in addition a wide range of often explicitly political fora—and providing travel for lodging and travel for the members who have to travel great distances. In contrast to project funding, the state's patronage of associational networks is explicitly targeted at supporting the political mobilization of these organized interests—and, especially by bringing in groups from rural areas and poor urban communities, at broadening the spectrum of mobilized groups to include the ones otherwise facing great social and economic obstacles to engagement. Similar to the strategy of strengthening personal contact between the state and local associational leaders, the state seems in large part to be bolstering cross-regional cooperation among local AIDS associations with the explicit purpose of strengthening outside pressure on state and local-level politicians to improve AIDS policy management.

Conclusion

A tentative conclusion suggested by these case studies is that state inducements have made it such that grassroots AIDS associations are becoming important interlocutors between the state and individual voters. The state recognizes them important strategic partners for their capacity to implement government policy, to mobilize political support for policy in Congress and in the executive branch, and to represent grassroots interests—and has therefore ceded a great deal of political power to them in return for their support in legitimizing the state by endorsing its policies. Grassroots associations may thus be replacing some of the functions—such as representation of citizen interests in the AIDS policy arena—that political parties used to serve.

Moreover, whereas AIDS was once the exceptional case of state/society "partnership" involving strong financial ties and policy-making interdependence, under the Lula administration, other ministries may be reaching out to associational leaders—a PT support base—and institutionalizing opportunities for grassroots leaders to provide direct policy input. Anecdotal evidence suggests that state involvement in the direct political engagement of grassroots associations has increased significantly since 2002, when Lula, the leftist Worker's Party (PT) candidate, won the presidency—perhaps as a mechanism for passing legislation in Brazil's famously fragmented Congress. Consequently, the boundary between state and civil society may continue to blur and, though not a question addressed in this paper, the impact of state support on the political mobilization of organized interests may become an issue of central concern to activists and scholars of Latin American politics alike.

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¹³ Add quote from Mario Scheffer interview, in which he says that while the capacity of AIDS NGOs to criticize the state has diminished, their capacity to endorse the state has increased.

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