The transition to democracy in South Africa was marked by discourses on ruptures with the colonial, apartheid past and the establishment of a new democratic, socially responsible, and responsive order. Indeed, the new South African constitution promised freedoms and rights that had seemed unimaginable in the old apartheid state—the protection of people’s rights regardless of their race, class, religion, culture, gender, or sexual orientation. In the changing landscape of nascent democracy, the social, economic, and political organization of everyday life was being renegotiated. Discourses on the democratization of South African society focused attention on meeting the needs of “the people.” Public forums of various kinds organized by national, provincial, and local government structures, nongovernmental organizations (NGOs), community-based organizations (CBOs), and a varied array of civic, religious, and women’s organizations were engaged in debates examining what it meant to be a democracy, what kinds of transformations should take place, and how changes should be implemented to meet the diverse concerns and interests of the peoples of South Africa. These discussions were beginning to address the histories of dispossession, disenfranchisement, displacement, poverty, and violence that so profoundly shaped people’s everyday lives, their relationships to each other, and their places in the racist order that was the legacy of the apartheid state.

These exciting and promising beginnings were very quickly eclipsed by, on the one hand, a transition to neoliberalism and, on the other, the...
HIV/AIDS crisis. The rise of neoliberal governmentality in South Africa has come under increasing critique in almost every sector of society. A closer examination of the ways in which people have been addressing the HIV crisis provides a window into how responses to the disease are situated within the landscape of neoliberal discourses and policies. In this essay, I use the HIV crisis to reveal the fissures and inconsistencies, the spaces activists and communities have found to reshape the political sphere. I examine the ways in which activists have been able to use existing structures and discourses to their advantage. Apartheid-era civic struggles, as well as women’s modes of organizing, have informed alternate models of mobilization and engagement with local and state government.

Scholars and activists in (and of) South Africa have been writing and railing against the neoliberal governance strategies that became more apparent in 1996 with the abandonment of the Reconstruction and Development White Paper (RDP) and the adoption of the Growth, Employment, and Redistribution Program (GEAR). Patrick Bond, Hein Marais, and Fantu Cheru (among others) have been documenting this neoliberal shift and trying to make sense of its causes and consequences. Ashwin Desai has been documenting the responses of “the poors” to neoliberal economic policies. South Africa’s GEAR program has been referred to as a self-imposed structural adjustment program. But as social scientists have pointed out, neoliberalism is not just about economics.

The global cultural spread of neoliberalism must be understood in terms of processes of empire and of the “global cultural economy.” Appadurai’s analysis of global cultural and economic flows is critical to understanding the complex articulations of economic and cultural processes that draw on the local and the global, that bring about new intersections and reinscribe old orders in ways that result in inconsistencies and incongruities. As Catherine Kingfisher has insisted, neoliberalism is not an all-encompassing homogenous set of ideologies and practices. Rather, she argues, “neoliberalism’s globalization . . . is a series of stories characterized by disjointed, disjunctured articulations.” It is also not simply particularist (that is, taking on different forms in different local cultural settings); rather, it is a hybridizing process, meshing with existing ideologies and taking on varied forms, intersecting, for example, with ideologies of racism, with patriarchy and colonialism, and, as in the case of South Africa, rearticulated via discourses on freedom and rights in the context of liberation struggles.

In the African context, liberalism and, more recently, neoliberalism have emerged in articulation with varied African formations of governance and community that have existed alongside, intersected with, challenged, and transformed one another. Scholars of African societies consistently point to the multifarious connections between the rural and the urban and...
the ways in which African engagements in civic life straddle these rural/urban spaces. As Deborah James asserts, “In South Africa’s present and future, just as much as in its past, civil society will have its sources in the intertwining of its citizens’ multiple sources of identification and experience. As much as it cannot be sought wholly within the political realm, it cannot lie wholly beyond it.”

South Africans are adept at borrowing from the past to make sense of their present, at drawing on “traditionalist” and “modernist” frames of reference, and at navigating the complex intersections of state, civil society, and self. As John and Jean Comaroff have argued, in the complex conjunctures of European and African conceptions of civil society Africans have forged a world that defies civility. During the apartheid era, Africans (and blacks more broadly) sought to render the state ungovernable—they challenged the oppressive policies and processes of subjectification, demanding their rights as citizens. Women challenged racialized and gendered forms of discrimination inconsistently, and at the moment of democratization insisted on taking their places at the table. South Africans have drawn on their differences, on alternate frames of reference, to (re)define the relationship between self, community, and structures of governance. At times, this has opened up spaces of what Comaroff and Comaroff have referred to as “democratizing aspirations,” while at other times it has narrowed the scope for democratic possibilities.

In this essay, I tease out the opportunities and possibilities offered by communities living with HIV/AIDS and activists challenging existing structures, and by people refusing to be subjected, active agents in shaping the discourses, policies, and practices relating to communal struggles with the disease. As communities and activists mobilize varied local, national, and international networks of support to reshape the fields of power, they draw on old and new modes of organizing. These struggles have yet to result in widespread transformations of neoliberal structures of governance, but they certainly are part of the process of transforming and of reconstituting subjectivity—individual and communal—and of finding ways to work within and against existing structures of governance. Activists and academics who seek to shift policy and public health practice, in particular, would do well to examine more closely the ways in which activism and discourse concerning HIV/AIDS in South Africa potentially challenge the neoliberal biomedical framing of the disease and offer alternate frameworks for understanding the epidemic.

**NGOs, Postapartheid Economic Policies, and the Neoliberal Shift**

As I was conducting research with women in Durban, South Africa, during the transition to democracy in 1993–94, it was evident that the transi-
tion was being framed in neoliberal terms. Even the RDP, which has frequently been referenced as a revolutionary economic program, was being shaped by neoliberal efforts to establish the state in the role of monitoring service delivery rather than implementing services. In the new South Africa, the RDP purportedly made NGOs partners of the state in planning and development. This was a significant change. Historically, NGOs were arenas of social and political protest acting in opposition to the white apartheid state. They were frequently channels for international aid since most foreign donors were, at the least, reluctant to provide open support to the apartheid regime. In the 1970s, civic organizations emerged as an important arena of struggle. These were black organizations that emerged in the course of local community struggles such as rental, bus, and school boycotts. As Mzwanele Mayekiso in his account of civic struggles notes, from the perspective of the civic movement NGOs were generally viewed as middle-class white liberal organizations.8 During apartheid, the move to NGO status was seen as a move away from politics.

The racialized politics of claiming NGO status was further complicated by state support of development. Development had for a long time been associated with the 1960s and 1970s apartheid rhetoric and policies of “separate development” and “betterment” schemes for different racial/ethnic groups in South Africa. Development discourses of the 1980s depoliticized and neutralized state policies toward “blacks.” “While official terminology renamed ‘Bantu’ as ‘Blacks,’ developmentalists tended to shun the use of such an explicitly racial term, speaking instead of the ‘underdeveloped population,’ ‘the rural poor,’ ‘the inhabitants of the National States,’ and so forth.”9 The depoliticization of development in part explains the reluctance by antiapartheid activists to adopt the label “NGO.” Thus, NGOs were considered highly suspect and not necessarily as agents of change during the apartheid era.

In the new democratic state, many civic and NGO leaders were drawn into powerful leadership positions at the level of regional and national government. Ironically, in the 1990s NGOs and civics, which had been oppositional forces in the 1970s and 1980s, were now beginning to align themselves with the state. Catherine Laburn-Peart noted that new tensions arose in NGOs’ relationships to the state: “NGOs are having to examine their position with respect to the new government, whose policies in favour of democratic change they now largely support, and through whom some are now partly funded.”10 She cautioned that NGOs needed to ensure that they play a monitoring role with regard to the position of poor people and the implementation of democratic planning practices. Robert Cameron, too, noted the tensions inherent in the contradictory aims of the RDP as a program that prioritized bottom-up transformation and simultaneously demanded that the state act in a top-down fashion to monitor the
implementation of the RDP and force agencies to reprioritize and comply with the RDP.\textsuperscript{12} The danger was that as NGOs became more closely aligned with the state, through whom a great deal of funding was being channeled, they would (and in many cases have) become less inclined to take note of the diversity and the complexity of the issues local communities were facing.

The tensions between people-driven transformation and the position of national and international agents who were providing the funding and other resources have been at the heart of efforts to implement development programs. In South Africa these tensions were heightened by the slippage between neoliberal discourses on privatization and individualism, and liberation discourses on self-empowerment. The alignment of the new state with NGOs was being articulated in terms of empowering local communities. This was nowhere more apparent than in discourses on women’s empowerment, particularly through microenterprise development.\textsuperscript{13} As Donna Goldstein observes, discourses on empowerment shift the focus away from social problems toward a neoliberal emphasis on individual actualization through self-management.\textsuperscript{14}

Politically, the alignment of antiapartheid forces in support of the African National Congress (ANC) negotiations with the National Party (NP) threatened to silence differences as it empowered the ANC. In 1992 Grant Farred warned against the political alignment of COSATU (Congress of South African Trade Unions) and the ANC. He argues:

\begin{quote}
The cause of liberation and freedom from exploitation that the workers championed has been usurped by the black middle class leadership of the ANC. In order to regain the political initiative the workers will have to question publicly their links to the ANC and mount a campaign that establishes their struggle as separate from that of the Congress movement. The workers will have to reclaim their agency by contesting the ANC’s right to invoke them, to speak so freely in their name, to claim them as its constituent base.\textsuperscript{15}
\end{quote}

Krista Johnson has noted that the transition to democracy resulted in a significant drain of leadership from the civil society sector into the new government and the redirection of foreign funding away from NGOs directly to the new government.\textsuperscript{16} Thus, despite an apparently thriving civil society sector, the drain of expertise and leadership resulted in a significantly reduced capacity to influence policy. This did not bode well for the new state. Instead the neoliberal discourses that had begun to take hold during the 1980s began to shape policy in the postapartheid state. As William Fisher notes in his review of NGO practices, NGOs have frequently become partners with the state in implementing neoliberal policies.\textsuperscript{17}
“The Poors”: Challenging Neoliberal State Practices

The government’s GEAR program adopted in 1996 focused on macroeconomic stability, moving away from a statist, service delivery model toward a neoliberal service delivery model emphasizing privatization of services and significantly shifting the government’s role toward ensurer rather than provider of services. In this model, municipal services are run more like a business with the emphasis being on financial cost recovery. Privatization has resulted in escalating costs of such basic services as water and electricity. Cost recovery measures have resulted in an increased focus by local and national government on the disconnection of water and electricity services, accompanying cholera outbreaks, and civic mobilization to resist these practices rather than a focus on the delivery of affordable services to all members of society.

Ashwin Desai’s detailed account of the experiences of the urban poor in Durban, Cape Town, and Soweto has drawn attention to the everyday experiences of, and responses to, these neoliberal policies. Desai notes:

> Between 1999 and 2000, for example, there were 75,400 water cut-offs in the Greater Cape Town area. In Soweto after the 1999 general election, some 20,000 houses had their electricity supplies disconnected every month. . . . Since 1994, some ten million South Africans have had their water and electricity cut-off for nonpayment, while two million have been evicted from their homes for the same reason.

He notes that, although government policy established a system in which the first six kiloliters of water were to be provided free of charge to every household, local municipalities have been cutting off the water supply of people who cannot pay their bills when their consumption exceeds the 6 kl. Effectively, wealthier households are benefiting from the social policy and using the 6 kl to fill their swimming pools. Thus, for example, in the rural community of Mpendle, KwaZulu-Natal, water provided by the apartheid government free of charge to people from the early 1980s following a severe drought was cut off in 2000 by the local municipality in its efforts to institute cost recovery. In the second half of 2000, such water cutoffs in KwaZulu-Natal resulted in a cholera epidemic in which 83,624 people were infected and 176 people died.

In his account of the mobilization of “the poors,” Desai has documented how the “neoliberal transition has squeezed and spewed out the poor but galvanized them at the same time.” Community movements have arisen to challenge water and electricity cutoffs, evictions, and the lack of land redistribution in response to the local and national government’s unwillingness to provide necessary social services and to ensure equitable distribution of resources and wealth. His account of the mobilization of
communities focuses attention on the ways in which they drew on the anti-apartheid models of civic struggle to challenge local representatives of the new state. In Chatsworth, local ANC officials cast community responses to cutoffs and evictions in terms of racism (given that the larger proportion of the population was of Indian descent). The communities were very quick to respond with an invocation of their status as “the poors.” “The poors” have mobilized in direct challenge to racist discourses: they have insisted on foregrounding the issues of class and the failure of local and national leaders to deliver services, ensure equity, and the redistribution of wealth and services to all the people of South Africa. The still memorable civic struggles against apartheid inspire current civic struggles, redefining them in terms of class and establishing new alliances often across presumed racial divides. University students and intellectuals work alongside “the poors” in their efforts to reconnect water and electricity supplies and to protest local and national policies and practices.

In his account of the many local responses to these practices, Desai notes that the critical issue is whether or not they can become part of a larger, more concerted effort to challenge and transform neoliberal state policies. This locally vital movement would more successfully disrupt statist neoliberal policies and practices were it broadened. It is critical that poor communities forge new alliances not only with city dwellers in other parts of the country but, more important, with rural communities struggling over access to resources and services, with landless people (the Landless People’s Movement), and even internationally with people engaged in similar struggles elsewhere. In so doing, they shift the field of power, opening up new democratic possibilities.

Neoliberalism and the AIDS Crisis

In her Neoliberalism and AIDS Crisis in Sub-Saharan Africa, Colleen O’Manique notes that “Neoliberalism is largely consistent with the biomedical construction of AIDS, which reduces the AIDS pandemic to its individual clinical and behavioral dimensions. In effect, what is erased or obscured are the material conditions which allow the virus to thrive, the broader factors that condition access to treatment, and the day-to-day realities of affected households where the tangible impacts are felt.”\(^{20}\) She further argues that the hegemony of the biomedical framework depoliticizes disease, “removing the understanding of disease from its social context and placing it back onto the individual body.”\(^{21}\) In large measure, this is an accurate account of the hegemonic politics of AIDS in South Africa. However, in the South African context there has been a struggle over interpretive frameworks—both from the government leadership, in particular President Thabo Mbeki and Health Minister Dr. Manto
Tshabalala-Msimang, who have questioned the science of AIDS, and from AIDS activists and medical and legal experts who have sought to invoke biomedical science to insist on the delivery of services and treatments, as well as from people invoking alternate illness, health, and healing frameworks. As has been well publicized, Mbeki and Tshabalala-Msimang drew on dissident AIDS theories that claim that HIV is a “harmless passenger virus and that the symptoms associated with AIDS are the result of poverty and lifestyle choices” as well as that antiretrovirals are toxic medications that can also result in AIDS. This alternate framing of the disease provided the rationale for the South African government’s reluctance to provide treatments and services to people with HIV and AIDS, but as Cohen (in this issue) discusses, it also called into question the liberal biomedical emphasis on individual bodies in treatment and prevention, offering a more complex understanding of disease.

Despite Mbeki’s insistence on a broader social frame of reference for understanding the connections between poverty and the HIV/AIDS epidemic, ineffective policies and practices have been further exacerbated by the relegation of AIDS policy management to the health department rather than following a coordinated multisectoral approach that was recommended by the National AIDS Committee of South Africa (NACOSA) and embodied in the AIDS Plan developed in September 1993. The multisectoral structure recommended that key ministries (health, welfare, education, defense) implement the policies that were to be coordinated by the national president’s office. At the time these recommendations were being made, South Africa was undergoing the transition to democracy. Political activists and trade unionists largely ignored the plan and marginalized the AIDS agenda. The ANC-led government of national unity adopted the AIDS Plan, and a national AIDS program director was appointed and placed in the department of health rather than in the president’s office. Provincial governments followed suit, thus limiting the possibilities for a coordinated multisectoral response. Furthermore, “the provincial-level AIDS managers were drawn at fairly low levels of seniority from the ranks of the old civil service and were given the task of implementing a programme through weak district structures over which they had no direct line of authority.” The national government placed emphasis on prevention over treatment, rationalizing their approach on the basis of arguments about affordability. This has resulted in what Nicoli Nattrass refers to as a “moral economy of triage.”

The dismal government response to the AIDS crisis has resulted in the alignment of medical experts with AIDS activists as both sought to ensure the establishment of treatment and services. As a consequence, the struggle has been framed in large part as a discourse on rights, through which activists have used the Constitutional Court to challenge the legiti-
macy of the national government’s actions. This approach is problematic, since it runs the risk of inscribing the discourse in individualized terms and validating the biomedical emphasis on individual bodies. It focuses attention on diseased bodies rather than on the wider interconnected social issues that have fueled the epidemic in South Africa. However, a closer examination of the efforts to address HIV/AIDS reveals a more complex process.

The Treatment Action Campaign (TAC) has played a central role in pressuring the South African government to provide affordable treatments for people living with HIV/AIDS. Nattrass examines the struggle over mother-to-child HIV transmission prevention (MTCTP), noting that it was waged at multiple levels. The South African government’s decision in October 1998 not to provide MTCTP was justified on the basis of cost effectiveness (despite economic and medical research to the contrary). The health ministry’s intransigence regarding MTCTP was met by protest and action taken by researchers, activists (in particular, the TAC), church leaders, and at times by some local government initiatives. The government’s refusal was challenged at local government levels as well as at the national level. Nattrass reports, “In January 1999, the Western Cape provincial government (which was not controlled by the ANC at the time) decided to ignore the national policy and went ahead with MTCTP pilot projects in poor communities with high levels of HIV-infection.”

Their efforts were supported by Médecins sans Frontières (MSF). In July 2001, the TAC filed legal proceedings against the national government. “The government eventually started rolling out a national MTCTP programme, but only after being obliged to do so by the Constitutional Court ruling” in favor of the TAC, explains Nattrass. The successful challenges of local and national government were dependent on multilayered levels of alliances forged horizontally among HIV/AIDS civic organizations, and vertically with prominent local government leaders, with medical and legal professionals as well as researchers and activists in the global community who were mobilized in support of the TAC.

Similarly, the struggle to obtain affordable antiretrovirals (ARVs) was dependent on complex alliances. Cameron describes some of the many challenges to major pharmaceutical companies for the extortionist pricing of ARVs. In 1997, the South African government enacted legislation to reduce prices of medications “by allowing parallel imports and by removing counterproductive incentives in the drug supply chain.” The United States threatened trade penalties for four years. The TAC was able to shift the process when it entered the action lodging evidence and arguments in a court case held in the Pretoria High Court. Protest actions, locally and internationally, drew world media attention to the moral questions attenuating affordability, challenging the dominance of American and
European pharmaceutical corporations. The international attention and moral outrage regarding corporate ethics and the provision of health care services and drugs to poor people and economically strapped nations resulted in settlements being made in Brazil, South Africa, and Thailand with major pharmaceutical companies who agreed on concessions to providing ARVs to poor countries. The battles regarding pharmaceuticals, not only for treatment of HIV/AIDS but for other life-threatening diseases, are ongoing.

The role of activist organizations such as the TAC has been vital in constructing a moralizing discourse on corporate ethics and health issues globally. But it is precisely the multilayered nature of the struggle that has been critical in efforts to challenge neoliberal policies and practices at the local and global level, fracturing what James Ferguson and Akhil Gupta have described as strategies of “vertical encompassment.” Furthermore, in the South African case, collaborative efforts such as these have resulted in the South African government’s acquiescence in the ARV rollout begun in September 2004. The TAC successfully forged alliances with MSF, international researchers, and legal and medical experts to demand that the South African government had an obligation to provide treatment to all people with HIV/AIDS, not only MTCTP and other prevention programs. They called into question the ethics of affordability discourse, which essentially meant that people were (and still are) being left to die, focusing explicitly on treatment for all (challenging the individualistic rhetoric of biology, behavior, and HIV infection). As Steven Robins argues, these processes of social mobilization have resulted in the production of new social subjects, of new forms of “responsibilized citizenship.”

These varied efforts to address HIV/AIDS issues in South Africa challenge the reading of policies and practices simply as evidence of the widespread dominance of neoliberalism. Though neoliberal policies certainly shape the landscape of these varied political struggles, they are by no means hegemonic. It is not just national and international struggles that reveal the slippages, the spaces between, and the challenges to neoliberalism. NGOs at the local level (many of which are run by women) have also been central in challenging local government officials to provide necessary services to communities. In June through August 2005, I conducted preliminary research on NGO activity focused on HIV in the Durban and Pietermaritzburg area of KwaZulu-Natal and found that there were many complex ways in which small, local NGOs were conducting work in their communities that entailed engagements with local governmental authorities and alliances with other NGOs and with researchers. For example, CINDI (the Children in Distress network) has provided critical support to a varied array of organizations seeking to support children and their communities. In one case, CINDI brought an HIV–health care outreach
NGO into a dialogue with local health officials to ensure that basic medical supplies that should be provided to poor people would reach HIV-positive families. In this negotiation, the local health department agreed to supply backpacks containing basic medical supplies to the NGO, which would then ensure that these supplies reached families who were unable to come to the clinics and hospitals to access these services. In yet another instance, CINDI brought NGOs and local education department officials together to put in place an antidiscrimination desk to ensure that HIV/AIDS orphans were not shut out from educational opportunities as a result of stigma and economic need. They have worked together with families and communities in the midlands region of KwaZulu-Natal to ensure that no child is deprived of educational opportunities. These efforts have been aided by the rhetoric of predemocracy liberation, which insisted on the establishment of equitable access to education and health care (among others). Thus, although the liberation rhetoric of self-empowerment can be elided by neoliberal discourses on individualism, it can also be invoked to address the broader ideological goals of equity and redress for the inequities of the colonial/apartheid era. Here, too, we see examples of the ways in which local NGOs worked within existing structures of governance, broadening out service delivery to ensure that community needs were being met. In some ways one might argue that they are working within the neoliberal structures by fulfilling the role of service delivery on behalf of the state, but they are simultaneously ensuring that schools and health care agencies are adhering to their stated commitment to equality and to delivery of services to all members of society. The limitation of the purely local response is that the delivery of services becomes uneven when it lacks a coordinated national effort.

Of course, not all NGO activities challenge neoliberal governance—many NGOs in South Africa have been major sources of international and national funding and have frequently been drawn into servicing the neoliberal agendas of the South African government and of international aid agencies. NGOs can offer a means of challenging the neoliberal order but can just as easily work to support it. In my preliminary work with HIV/AIDS–oriented NGOs, it became apparent that they are not simply supporting or challenging neoliberal agendas but rather are navigating a much more complex political field shaped in part by neoliberal ideologies but also by legacies of struggle and civic disobedience and of historically constituted conceptions of self defined through community (rather than in opposition to community).

Much more complex are the gendered issues in the HIV/AIDS crisis. The struggle for gender equity in South Africa has a long and complex history of inconsistent organizing, policy making, and efforts to ensure changes in everyday life. Just as with treatment options, we see how people
have turned to different cultural frames of reference to inform discourse and practices related to gender and HIV/AIDS in their families and communities. Researchers have pointed to the complex intersection of social and physiological factors that has resulted in the disproportionately higher rates of transmission to women. With respect to policy and delivery of services, the failure to implement the multisectoral program recommended in the 1993 AIDS Plan is at the heart of the failure to address gendered issues in a consistent manner. According to Albertyn, it was the national government’s ineffectiveness in developing horizontal coordination across government functions and departments that “compromised government’s ability to govern effectively and to address cross-cutting issues such as violence against women, poverty, or HIV/AIDS.” Furthermore, as discussed above, the lack of state capacity to address the HIV/AIDS crisis resulted in the limitation of the plan to a health and biomedical framework. Hence most efforts to assist women with HIV have focused on medical technologies such as the use of nevirapine to prevent MTCT and research on female condoms and vaginal microbicides (South Africa is one of the major sites globally for testing the efficacy of vaginal microbicides).

Despite this, there are numerous and varied efforts to address the gendering of the disease. For example, there have been very limited, localized efforts to address the broader socioeconomic factors that contribute to the higher rates of HIV transmission among women as well as programs with men regarding gendered power relations. For the most part, these are not well-coordinated efforts, but rather disparate programs seeking ways to transform the social, political, and economic landscape. Here, activists and scholars would do well to turn to the model provided by the Women’s Charter Alliance.

The Women’s Charter Alliance: A Model for Coordinated Action

The women’s rights campaign that coalesced in 1992 around the founding of the Women’s National Coalition and the Women’s Charter Alliance (WCA) revealed tensions between the construction of the liberal modern citizen in terms of, on the one hand, the commitment to common good and to community, and on the other to individual rights. In drawing up the Women’s Charter, the concern was to protect women’s individual rights. At the same time, the Women’s Charter attempted to take into account women’s places in religious, cultural, and other groups. The ideology of universal equality as the basis for citizenship has been disrupted by the politics of difference—particularly by feminist critiques that have argued that liberal notions of universal citizenship have effaced differences. Historically the universal citizen was constituted as a white, European, propertied male. Increasingly citizenship is being defined “on
the basis of rights to different treatment with equal opportunity.”

The politics of difference informed the efforts of the Women’s National Coalition (WNC) to draw up the Women’s Charter.

In the new South Africa, tensions between common good and the right to different treatment with equal opportunity were being felt at all levels as the new, democratic “rainbow” nation not only came to grips with historically constituted racial differences, but also tried to take account of ethnic, gender, religious, and cultural differences. During the negotiations for a new constitution and, in particular, the inclusion of a Women’s Charter, the tensions between equality in terms of some universalist conception of women’s rights and cultural differences were pivotal. In a letter to Nomsa Jajula, the convener of the Women’s Caucus, Janet Williams, convener of the Women’s Charter Alliance, wrote, “We note with concern that article 32 of the draft Bill of Rights dealing with Customary Law does not offer women enough scope for affirmative action.” She continued,

Our organisation is working with women at grass roots level, where there is no doubt that women are suffering many hardships directly because of their position in terms of traditional and customary law—and they are expressing their dissatisfaction with this situation.

We therefore declare our wholehearted support for EQUALITY OVER CULTURE in the Bill of Rights, and we request that you note our protest against the lobby of the Traditional Leaders (29 October 1993).

In the end, equality did prevail over cultural difference. However, efforts to take account of these “cultural” differences, as well as other differences among women, led to the decision to include the Women’s Charter as a political rather than a legal document in the new constitution, since it would thus allow women to invoke such differences—it would allow for the articulation of difference within the context of equality of opportunity. As Albertyn argues,

To avoid a stand-off or a “clash of absolutes” between women’s rights (especially equality) and traditional claims to culture, feminists have often had to enter the cultural terrain with care. A small but significant body of academic and feminist opinion has thus rejected a simple “trumping” of equality over culture and suggested ways of engaging the new democratic values within cultural conversations that enable the development of indigenous ideas of equality, freedom, and autonomy that draw on a rich set of cultural sources. This coincides with an affirmation of South Africa’s cultural richness and diversity.

The participatory research process that shaped the Women’s Charter Alliance’s efforts to gather information regarding women’s varied interests
and concerns in five major areas of their lives (work, health, law, sexuality, and family) was remarkable for its inclusivity. It was also amazingly efficient, gathering data and getting feedback to and from regional headquarters in less than two years. In the invocation of the charter, we see the possibilities for attending to difference, common good, and rights.

The respect for differences is achieved through complex negotiations and attendant tensions in bridging the differences. As Shireen Hassim notes, “the coalition never assumed that a sisterhood existed. Indeed, right at the beginning, the coalition argued that it was an organization based on solidarity in pursuit of a narrow agenda. Political differences were acute: there was no common language in which to speak of women’s needs, especially because the potentially common discourse of feminism was itself highly contested.”

It is these tenuous alliances forged in the context of achieving a particular goal (in this case the drafting of a Women’s Charter) that strain efforts to bring about changes that would positively affect women. Chandra Talpade Mohanty’s conception of feminist community forged in the context of common struggles—a political solidarity that is always contested and always under struggle—is instructive. She argues,

Community, then, is the product of work, of struggle; it is inherently unstable, contextual; it has to be constantly reevaluated in relation to critical political priorities; and it is the product of interpretation, interpretation based on an attention to history, to the concrete, to what Foucault (1980) has called subjugated knowledges. There is also, however, a strong suggestion that community is related to experience, to history. . . . they are a constant recontextualization of the relationship between personal/group history and political priorities.

But it is in the implementation that we see the real challenge that continues to face women’s organizations in South Africa. The challenges and failures have come in realizing the ideals espoused in the Women’s Charter. Strategic alliances forged in the context of a particular goal do not easily translate into specific policies and practices—these will usually require a new set of negotiations, perhaps of smaller constituent alliances.

Albertyn notes that one of the major problems with addressing the gendered aspects of HIV/AIDS is that

Although women’s organizations have always focused on issues critical to HIV vulnerability—violence, reproductive choice, legal rights—they have, until recently, tended to do so without reference to HIV/AIDS. However, the complex and intertwined relationship between sexual inequality, poverty, and culture in fueling HIV/AIDS suggests a need to think across boundaries and to combine diverse forms of knowledge and skills in new alliances to engage multiple public spaces.
Women’s organizations have to examine ways in which they might take some of the successes of the Women’s Charter Alliance and apply them to a more concerted national effort to address the varied social, economic, and political ramifications of HIV/AIDS for men, women, and their communities. This will require forging new alliances and identifying clear goals. These alliances should shift and change as agendas are reformulated.

**Conclusion**

The varied struggles taking place in contemporary South Africa provide insights into the ways in which communities are engaging with neoliberal structures of governance. As Sagie Narsiah notes, “the struggle against neoliberalism has . . . taken on a geography whose goal is the recreation of the spaces of liberation.”

However, civic struggles are insufficient on their own to challenge the diverse arenas through which neoliberal forms of power are deployed. It requires the collaborative efforts of people mobilized through local and global networks in the way we are seeing the HIV epidemic being addressed in South Africa today. Krista Johnson argues,

Global and local debates continue to be shaped by the hegemonic neoliberal framework, which demands that we understand the AIDS pandemic in a particular way: as a health issue, rather than a development or human insecurity issue, as an individual concern, rather than a community or even a global concern. The emphasis on containment of the disease has meant that broader issues of nationalized healthcare, global public health, poverty or socioeconomic development are not discussed and debated.

This analysis takes for granted the hegemony of neoliberalism. It ignores the ways in which questions of poverty, socioeconomic development, sexuality, health care, and global public health are being debated and contested as government officials, activists, researchers, doctors, and the poor find spaces to confront, challenge, and engage in efforts to define community and individual needs. In South Africa, even as President Mbeki and Health Minister Tshabalala-Msimang shape the national agenda and define the spaces and terms of engagement, their framework does not fit neatly with neoliberal ideologies. Certainly, Mbeki has tried to redefine the disease in terms of poverty rather than in terms of individual diseased bodies. As activists, researchers, doctors, and lawyers have challenged the national government, they have invoked discourses of individual rights and of diseased bodies in varied ways.

Here Ed Cohen’s analysis in this issue of the moralizing discourses invoked in the controversies concerning HIV/AIDS in South Africa is
particularly useful not only for shedding light on the conflicting value systems at play but also in suggesting new ways to approach questions concerning health, life, death, and health care provision. Didier Fassin’s analysis of the politics of AIDS in South Africa draws our attention to the moralizing discourses that constitute policies, practices, and people as “good” or “evil,” laying claim to a higher moral authority in a crusade for human rights. Though these debates have been significantly shaped by neoliberal ideologies concerning individual bodies and rights, they have by no means been the only frame of reference. The loud dissenting voices in the HIV/AIDS debates in South Africa have invoked alternate interpretations and visions of a world in which individual experiences are shaped in and through global and local communities.

As we examine these struggles, it is critical that scholars and activists alike attend more acutely to the intersections of discourses on freedom and empowerment with neoliberal ideologies that draw on liberatory discourses to demand individual rights or specific group rights that trumpet self-sufficiency, privatization, and marketization. Instead, we have to see power as operating through the intersection of, in Inderpal Grewal and Caren Kaplan’s term, “scattered hegemonies,” and we have to begin to map and link the diverse local practices and transnational solidarities that are deployed to contest and disrupt neoliberal and other forms of governmentality, and to assert individual and communal rights.46

Notes

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7. Ibid., 33.
9. “National states” refers to what had formerly been called first Bantustans and then independent homelands.
19. Ibid., 18.
26. Ibid., 49.
27. Ibid., 48.
29. Cameron, Witness to AIDS.
30. Ibid., 176.
34. This information on CINDI’s activities is drawn from an interview conducted with Stellar Zulu of CINDI in July 2005.
35. In this essay, I have not dealt with the issues of varied treatment options that people in South Africa seek out in order to cope with the effects of the disease. The uses of indigenous spiritual and herbal healing alternatives are quite diverse and often coexist with biomedical options. The dominance of the biomedical framework and, in South Africa in particular, the struggle to ensure delivery of biomedical treatments and services have narrowed the space for a more careful examination of the multiple frames of reference for treatment. Here I am thinking in particular of Adam Ashforth’s research on witchcraft and spiritual insecurity in postapartheid Soweto, in which he argues that in large part the spiritual insecurity is a consequence of multiple cultural frames of reference for interpreting and effectively addressing the varied social and material problems people encounter in their daily lives. See Ashforth, “On Living in a World with Witches: Everyday Epistemology and Spiritual Insecurity in a Modern African City (Soweto),” in Magical Interpretations, Material Reality: Modernity, Witchcraft, and the Occult in Postcolonial Africa, ed. Henrietta Moore and Todd Sanders (London and New York: Routledge, 2002), 206–25.
38. For further discussion of these concepts, see the special issue “Cities and Citizenship,” Public Culture, ed. James Holston and Arjun Appadurai, 8, no. 2 (1996): 195.


