List of abbreviations

AIDS: Acquired immunodeficiency syndrome

AIK: African Indigenous Knowledge Systems

AMICAALL: Alliance of Mayors Initiative for Community Action on AIDS at the
            Local Level

ANC: African National Congress

ARV: Antiretroviral

BBC: British Broadcasting Corporation

CAB: Community Advisory Board

CBP: Community Based Plan

CDW: Community Development Worker

COSATU: The Congress of South African Trade Unions

CSO: Civil Society Organisation

DoH: Department of Health

ECD: Early Child Development

FAO: Food and Agriculture Organisation

FEDUSA: The Federation of Unions of South Africa

GDP: Gross Domestic Product

GNP: Gross National Product

HBC: Home Based Care

HIV: Human Immunodeficiency Virus

HVTN: HIV Vaccine Trials Network

HSRC: Human Science Research Council

ICASA: International Conference on AIDS and Sexually Transmitted Infections in
            Africa

IDASA: Institute for Democracy in Southern Africa

IDC: Inter-Departmental Committee on HIV and AIDS

IDP: Integrated Development Programme

IKS: Indigenous Knowledge Systems

ILO: International Labour Organisation

KZN: KwaZulu-Natal

LGA: Local Government Association   :

LG: Local Government

LIMP: Limpopo

MDG: Millennium Development Goal

MEC: Member of the Executive Council

MK: Umkhonto we Sizwe

MP: Mpumalanga

MSA: Municipal Systems Act

MTCT: Mother to Child Transmission

NACOSA: National Aids Convention of South Africa

NACTU: The National Council of Trade Unions

NGO: Non-governmental Organisation

NIMH: National Institute of Mental Health

OECD: The Organization for Economic Cooperation and Development

OI: Opportunistic Infection

OVC: Orphans and Vulnerable Children

PAC: Provincial Aids Council

PAC: Pan African Congress

PMTCT: Prevention of mother-to-child transmission

RSC: Regional Services Councils

SANAC: South African National AIDS Council

SAP: Structural Adjustment Programme

SSA: sub-Saharan Africa

STI: Sexually Transmitted Infection

TB: Tuberculosis

TRC: Transitional Rural Council

TRepC: Transitional Representative Council

UNAIDS: Joint United Nations Programme on HIV/AIDS

UNDP: United Nations Development Programme

UNESCO: United National, Educational, Scientific and Cultural Orgnisation

UNISA: University of South Africa

VCT: Voluntary Counselling and Testing

WHO: World Health Organisation

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CHAPTER 1

THE INFLUENCE OF INDIGENOUS KNOWLEDGE ON THE LOCAL GOVERNMENT POLITICIANS IN ENGAGING WITH HIV/AIDS

1.1.   INTRODUCTION

The process of conducting the study was guided by both qualitative and quantitative approaches. Data was collected through literature review and field survey conducted in three local municipalities namely: Umtshezi in KwaZulu Natal, Elias Motsoaledi formerly known as Groblersdal in Limpopo, and Bushbuckridge in Mpumalanga.

Umtshezi local municipality was formed through a combination of two towns namely, Escourt and Wembezi in 1995 into one Transitional Local Council. The area has 14 local councilors and according to the 2008 population estimation the area has 68314 persons. Growing in the middle of seven hills in KwaZulu-Natal (previous known as Natal) the area has a reach history dating back to the times before 19th century. The area formed a half way position for "travelers, soldiers and statesmen going to their destinations along the inland main road. It became an outpost of frontier defence, against their counterparts" (http:/municipalities.co.za). The area is known for the so called "Langalibalele Rebellion of 1873 of the Hlubis" (http:/municipalities.co.za). The realization of the Natal Government of "the growing Zulu danger under Cetshwayo" resulted in the construction of Fort Durnford in1875 above the town on the hill, just above the Alice Bridge.

Based in Limpopo, Elias Motsoaledi local municipality was previously known as Groblersdal Local Municipality. The municipality is located in Sekhukhune District. It is named after Elias Motsoaledi. Born in 1924 in Nebo, Sekhukhuneland Motsoaledi played a vital role in the establishment of the South African Congress of Trade Unions. He was an activist in the ANC and SACP and participated in many campaigns against the apartheid government. (http:/municipalities.co.za). African communities in the area are largely of three tribal origins namely: the Pedi, the Swazi and the Zulu.

These tribal groups have a long history of conflict among themselves mainly centered on land issues. They mainly fought among themselves in the tribal wars called Difaqane. According to Mafora (2014), in the 1840's "the so called Voortrekkers" displaced these tribal communities from their settlements and allocated "farms to themselves". Some of the African communities became workers in these farms, whereas others moved into the big cities such as Johannesburg. With no success, traditional leaders fought against the settlers to get their land back for many years, but instead of uniting against the settlers the tribal communities found themselves being divided further as some chose to cooperate with the settlers. Today black community members originating from Groblesdal are found in the cities around the area and in major cities such as Tshwane and Johannesburg (Mafora: 2014).

The name Bushbuckridge is derived from the "large heards for bushbucks" that were found in the area in the 1880s. The town started as a small trading centre with a small trading store opened in 1884. The areas known as Bushbuckridge and Hazyview today were regarded as one region before the colonial times. These areas together, were called Mapulaneng. Mapulaneng stretched from "Crocodile River in the South of Olifants River" and included the towns currently known as Hazyview, Sabie, Graskop, Hoedspruit, Barberton, Lydenburg and Dullstroom. They were under the chief Mapulana. Shangaan and Swazi people were the main tribes in the area.

When the colonial settlers came they named the area Bushbuckridge. During the period of the apartheid government, this area was under Transvaal Province. When apartheid was abolished in 1994, the new government attempted to include this area into Limpopo Province, but community members feared that once they are part of the Limpopo Province "they would be marginalized and suffer poor service delivery since, Polokwane, the Capital of Limpopo Province, is more than 300 kilometres away, whereas Nelspruit, the capital of Mpumalanga is 58 kilometres away" (https://www.revolvy.com). Thus for two years communities protested until the government decided to incorporate the area into Mpumalanga Province.

The theoretical underpinnings of this study have been guided by the Durkheim's Theory of Structural Functionalism and Relativism. Durkheim's Structural Functionalism, claims that social facts can be studied scientifically by examining structures and the influence of cultural norms and values. Social structures, cultural norms and values determine human behavior. This study claims that the aspects of social structures, cultural norms and values, can also be studied empirically as part of the main components of IKS. In line with Relativism, this study argues against Durkheim's claim that social structures, and cultural norms and values always determine human choices and behaviour. I claim that in line with the understanding of IKS in this study social structures, cultural norms and values are relative aspects, because they change and differ from context to context even if their carriers are the same, and human choice in different times and places play a vital role in determining decisions.

The study seeks to support the good governance, which, as will be explained later, aspires to promote the rule of law, transparency, responsiveness, consensus, equity and inclusiveness, effectiveness and efficiency, and accountability[1] in policy development and implementation. The study asserts that IKS has the potential to improve the efficiency and effectiveness of good governance at the local municipality level. Thus, the study has sought to understand the extent to which IKS is incorporated in the policy development and implementation at the local municipality level. This investigation has been undertaken in the thematic context of HIV/AIDS. I have investigated the extent to which IKS is incorporated into policy development and implementation related to HIV/AIDS at the local municipality level.

Specifically, this is a study about the political commitment to engage with HIV/AIDS in order to mitigate its brunt on local communities. The study was influenced by the assumption that while much effort is being made to mobilise local politicians[2] to engage

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[1]. This study has sought to understand these as key principles of good governance. Please note that these principles may not apply in government systems that are operating under the authoritarian rule such as China and governments of the former Soviet Union.

[2]. The main category of local politicians referred to here is that of the local municipalities. The choice of these made purposely with the view that they are the ones which are closest to the communities and indigenous knowledge systems

with the epidemic, very limited attempts are made to appropriate IKS to support the commitment of local municipality leaders and officials in addressing the epidemic.

It is important to understand the extent to which local municipality leaders and officials exercise their decision-making independence in order to incorporate IKS in their decision making processes. Such a consideration can act as a guide to designing proper mobilization and education programmes aimed at engendering the commitment of politicians to deal with the disease in a way that is in line with the prevailing tendencies of the local communities in their responses to the disease.

This thesis claims that political governance in the South African local municipalities is not only determined by the principles presented in the Western thought, but also by the traditionally and locally established mindset. However, the influence of the agents and individuals that deploy the local municipality leaders and officials into their positions is so dominant that the local municipality leaders and officials are not able to apply IKS in governance processes effectively.

This stance is mainly influenced by the general observation that the power dynamics between the local municipality leaders and officials and their superiors at the provincial and national level are such that the provincial and national superiors have influence on the extent to which IKS is incorporated in policy formulation and implementation. This has left local municipality leaders and officials to use their IKS in informal settings, while failing to incorporate it into policy documents such as Integrated Development Programmes (IDPs), thereby presenting a flaw in good governance. This state of affairs can be explained by referring to Max Weber's Theory of Rational Legal Bureaucracy. Weber informs us that the division of labour is defined by specified "spheres of competence" which are structured in a hierarchical manner so that each lower office is under the supervision of the higher one". He further states that rational legal bureaucracy requires that "the member of the administrative staff should be completely separated from ownership of the means of production and administration" (Weber 1922).

Ownership of the means of production and administration remains in the hands of those at the higher levels of the hierarchy. The researcher understands that in South Africa, a particular governance arrangement exists, which, in effect determines the extent to which IKS is incorporated in the policy development and implementation; and retrospectively, particular arrangements exist, within IKS, which may have an effect on the way policy developments and implementations are executed, thereby affecting governance systems in general.

This chapter seeks to provide an account of definitions, theoretical background and its related assumptions and the methodology that was followed for the field survey conducted as part of the study. At the end of the chapter I have provided an annotated outline of each chapter of this study.

Specifically I have provided a literature review constituting the definition of HIV/AIDS, followed by the historical context of HIV/AIDS in relation to its prevalence and responses by political leaders and other players in the social development context. This has been followed by the problem statement, which explains issues about governance that impinge upon the development and implementation of policies that can create room for the incorporation of IKS in the efforts aimed at addressing HIV/AIDS at the local municipality level. Following a detailed presentation of the problem statement I have presented the focus and the rationale of the study. This has been followed by the aim, theoretical framework, hypothesis, key questions, the methodology, and the work plan, which was pursued in conducting the study. In the last, but one section of the chapter, I have underlined how this study emerged in the mind of the researcher as an important one, by indicating the origin of the study. The last section of this chapter has presented an annotated outline of each subsequent chapter.

1.2 LITERATURE REVIEW: HIV/AIDS PREVALENCE, POLITICAL, AND CIVIL SOCIETY RESPONSE

1.2.1 HIV/AIDS Prevalence in South Africa

According to Hunter, the Acquired Immune Deficiency Syndrome (AIDS) was discovered in 1981 among gay men in the United States of America. In the early 1980s the discovery of the disease in South Africa was also among gay men. A study conducted by the Chamber of Mines in Johannesburg in 1986 found that "4 percent of Malawian immigrants were HIV positive" (2010: 24).

General orthodox discussion and research show that since its discovery the spread of AIDS has grown at a very fast rate. However, this growth is not evenly spread across countries. In some parts of the world the rate of its growth and prevalence has changed significantly. Analysts have attributed such variations to differences in socio-economic and political factors of each social setting and influence of various campaigns to change humanity from the behaviour patterns that influence the spread of the diseases to the patterns that help to minimise its spread. Geographical differences in prevalence patterns and statistics are sometimes interpreted on the basis of perceptions about people's social belonging. Hunter (2010: 26) for example, indicates that, race and culture, as social attributes, are among the aspects that have been uncritically interpreted as to determine the prevalence of the disease in specific geographical settings. He asserts,

> … the argument is sometimes made that Africans, even rich Africans, have multiple partners more often than other groups – that "race"and "culture"are therefore more important than poverty to sexuality and AIDS. Yet the categories of race and culture, if used uncritically, afford a false unity to the social history of AIDS. Even rich African men like Jacob Zuma argue that Zuluness is synonymous with men having multiple partners, poverty and apartheid helped to construct what gets called Zulu "culture"(often by men) (Hunter 2010: 26).

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Back in 2004 it was estimated that globally about 60 million people had already lived with the disease and 20 million of these had died. In the Sub-Saharan region alone estimates showed that about 29 million people were infected. Out of these, 10 million people were between the age of 15 and 24 and 3.5million were children under the age of 15.

In 2002 alone 3.5 million new infections were estimated to have occurred in the region. Ninety one percent of HIV/AIDS cases and 94% of HIV/AIDS related deaths of children globally were taking place in Africa. It was noted that since the start of the disease 2.9 million children in African had died as a result of the disease (Human Research Council Survey Report 2004: 2). 2016 figures from UNAIDS indicate that globally about 39.8 million people were living with HIV by the end of 2015 (UNAIDS 2016: 1-2).

The main source of information on HIV prevalence in South Africa is the antenatal clinic records of HIV seroprevalence surveys conducted by the Department of Health (DoH). The Human Science Research Council (HSRC) in 2002 also conducted a household study, which provided some picture of prevalence rates across the country. The studies showed that South Africa is one of the countries with the fastest growth rate of the HIV/AIDS epidemic in the world. According to Malan (www.bhekisisa.org), a similar picture was echoed by the HSRC study conducted in 2012 and in 2015. The Statistics South Africa reported that**:**

> The estimated overall HIV prevalence rate is approximately 11,2% of the total South African population. The total number of people living with HIV is estimated at approximately 6,19 million in 2015. For adults aged 15–49 years, an estimated 16,6% of the population is HIV positive. (Statistics South Africa P0302 Mid-year population estimates, 2015)

The 2002 household survey by the HSRC showed that the prevalence in the South African population was about 11.4%. The prevalence among children between the age of 2 and 18 was estimated at 5.4% (Human Research Council Survey Report 2004: 59).

The UNAIDS in its work with the South African Government in 2000 estimated that by 1999 about 95,000 children in South Africa were living with the HIV/AIDS. In 2000 the number of new infections among children was estimated at 70,000. In 2012 it was reported that this number had grown to 410,000 (www.avert.org). In 2016 the UNAIDS estimated that there were about 7 million people living with HIV in South Africa. According to the Human Science Research Council, the 2004 figures showed that while a handful of children could survive up to 5 years, a majority died within the first two years of their birth (Human Science Research Council Survey Report 2004: 21).

At the provincial level the picture that was presented from the Department of Health antenatal survey in 2001 was different from that of the HSRC household survey. The DoH survey left the impression that KwaZulu-Natal has the highest prevalence of all the provinces in South Africa. Western Cape was recorded to have the lowest prevalence (www.avert.org). In 2012 the Human Science Research Council's report showed that the Free State Province had the highest prevalence, while the Western Cape Province still remained as having the lowest prevalence.

Figure 1: HIV/AIDS prevalence in percentages per total South African provincial population
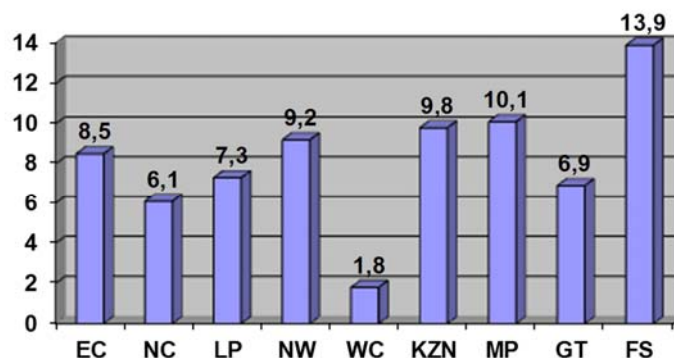
Source: Human Science Research Council: 2012

1.2.2 The challenge of appropriate response

Variations in the published statistics about the prevalence of HIV/AIDS may be one of the factors influencing debates about the degree of seriousness of the epidemic in South Africa. Whatever the figures we come up with the fact of the disease as the challenge to the country's future remains a reality among HIV/AIDS concern groups. For HIV/AIDS activists the need to engage in initiatives attempting to deal with the problem is a matter of necessity and urgency, rather than an option. Debates about which approaches must be taken to deal with the epidemic have always therefore formed part of the epidemic's history.

Within this history it is noted that before the transition from apartheid to democracy the South African government made no efforts to deal with the epidemic. There were no HIV/AIDS strategies both at the national and provincial level. The first national HIV/AIDS plan was developed outside the government by the National Aids Convention of South Africa (NACOSA) through a consultative process between the African National Congress (ANC)[3], the then DoH and a number of civil society organisations. Within its aim of making HIV/AIDS a recognisable problem by South Africa, NACOSA emphasised on the importance of multi-sectoral approaches in order to "mobilise and unify provincial, international and local resources" and policies (Strode & Grant 2003: 11-14).

When the South African democratic government came into place in 1994 the NACOSA plan was adopted by the government as its own policy. The DoH Directorate of HIV/AIDS was given the mandate to drive the implementation of the plan. Two bodies were also created to support the implementation of the strategic plan. These were the AIDS Advisory Group and the Inter-Departmental Committee on HIV and AIDS (IDC). The AIDS Advisory Group became outspoken in its character and attempted to take positions that were contrary to the government's policy. This made it unpopular to the government and was disbanded in 1997.

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[3]. At this stage the ANC was simply a liberation movement and not ruling party.

Amid criticisms that the NACOSA's plan was not receiving enough implementation boosts, it was noted that there was a lack of commitment of sectors outside the DoH. Implementation focus was found to be much placed in the governmental health sector and political commitment was inadequate. The 1997 national review, therefore, recommended that political leadership should be secured at the presidential level. The responsibility of HIV/AIDS would therefore be removed from the DoH and be put in the office of the Deputy President. The review also recommended that inter-departmental and inter-sectorial responses should be reinforced (Strode & Grant 2003: 11-14).

This move resulted in the formulation of the 2000-2005 strategic plan, which emphasized inter-departmental and inter-sectorial collaboration. A multi-sectorial body in the name of the South African National AIDS Council (SANAC) was formed as a replacement for the AIDS Advisory Committee which was disbanded in 1997. The 2000-2005 Department of Health Strategic Plan also recommended that each province should form their own AIDS Councils at the provincial, district and local level (Strode & Grant, 2003: 11-14). AIDS Councils at all levels were given the mandate to act as advisory bodies to the government on matters regarding policy on HIV/AIDS and other related matters and programmes.

In their training manual for AIDS Councils IDASA outlined the functions of the South African AIDS Councils as follows: coordination of the response to HIV/AIDS, development of partnerships, monitoring and evaluating programmes, fundraising and advising government on policy development. The manual also indicates that "SANAC implements this mandate through organizational mechanisms that provide for the participation of different sectors on the Council" (IDASA 2004: 2).

Within the AIDS Councils are sub-structures mandated to carry out certain roles. The executive for example is supposed to oversee the implementation of the entire programme while other sub-structures carry out responsibilities such as research, social mobilisation and monitoring and evaluation. A combination of the executive and these sub-committees form the AIDS Councils' secretariat.

Stakeholders from various sectors are supposed to participate in the activities of AIDS Councils by contributing information and ideas from their concrete experiences. Such ideas and information may be used as a support for the daily work of the secretariat and to advise government on matters of HIV/AIDS policy.

The executive, the sub-committees and the stakeholders together form the plenary. At the time of writing the plenary of SANAC had 44 members. Government representatives made up 19 of the 45 members with 10 ministers (including the Deputy President) 6 deputy ministers and 6 national government departmental representatives[4]. There were only three members of parliament and the rest of the members were from the civil society sectors[5].

Representation of the sectors outside the government includes business, labour, CSOs, traditional leaders, people living with HIV/AIDS, faith based organisations, academic institutions, and any other individuals and institutions that may be found to be crucial for the implementation of HIV/AIDS policy. The design of AIDS Councils structure also requires that experts from some HIV/AIDS intervention areas must take part in its activities. Critical among these intervention areas are: home-based care, orphans and vulnerable children and awareness and training.[6]

Between the SANAC, the provincial, district and local AIDS Councils there must be communication.

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[4]. Caesar points out that the Deputy President is the chairperson. The Ministries involved include: Education, Agriculture and Land Affairs, Public Service and Administration, Labour, Arts and Culture, Transport, Correctional Services, Social Development and Health. Deputy Ministers: Provincial and Local Government, Defence, Education, Finance, Correctional Services and Minerals and Energy. Departmental representatives: Public Service and Administration, Transport, Education, Health, Government Communication and Information Services and the Office of the Deputy President. The two members of parliament are from the Health and the Social Services Committee. A third MP has a dual role in that she also represents the disability sector

[5]. According to Caesar this comprises of women, Men, Non government organizations, Persons living with HIV/AIDS (2 representatives), Sports, Youth, Children, Business, Academics, Religious sector (2 representatives), Traditional Healers, Local Government, Human and Legal sector, Hospitality industry, Labour (one each from The National Council of Trade Unions (NACTU), The Federation of Unions of South Africa (FEDUSA) and The Congress of South African Trade Unions (COSATU).

[6]. Representation of intervention areas does not have to be limited to these areas. AIDS Councils may include other areas as they find fit.

This means that policies, plans and programmes at each level must be informed by experiences, plans, programmes and policies at the level below and above it. Such communication also entails lines of accountability between different levels of the AIDS Councils.

In line with this structure Provincial AIDS Councils were guided by the following Terms of reference:

- Initiate, guide and develop a Provincial AIDS Plan based on the 2000 – 2005 Strategic Plan;
- Feedback province-specific issues to SANAC;
- Strengthen partnership responses amongst government departments, sectors of the civil society, and local spheres of government;
- Mobilize resources for the Provincial AIDS Plan;
- Monitor the implementation of provincial Plans; and
- Advise the Provincial Cabinet on matters relating to HIV/AIDS (IDASA 2004: 3).

The composition of Provincial AIDS Council membership was to be on the same lines as that of SANAC. Public nominations would be solicited, and the final decision would be made by the Provincial Cabinet on the advice of the MEC for Health. The provincial Departments of Health would act as the secretariat to the Provincial Aids Council (PAC).[7]

1.2.3 International influence on political commitment to addressing HIV/AIDS

South Africa's decision to form AIDS Councils is a reflection international trends. Leading international organisations such as the Global Fund and the UNAIDS have for more than a decade been at the forefront in influencing national states to engage in multi-sectorial approaches in dealing with exceptional epidemics such as the HIV/AIDS.

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[7]. As we shall see below, despite all the developments presented above, there has been consistent dissatisfaction among HIV/AIDS activists about the political commitment to address the epidemic in South Africa.

This however does not mean that the AIDS Councils started only after these bodies were formed. Rather, their call to countries to engage in multi-sectorial approaches has been based on experiences gained from other countries.

Countries such as Thailand, Philippines, Uganda, France, and Britain had been engaged in multi-sectorial approaches in dealing with HIV/AIDS since the late 1980s. Success stories coming from these countries compelled organisations steering international initiatives to advocate for multi-sectorial approaches, which in many cases have taken the form of AIDS Councils.

One of the international initiatives created to influence political commitment in addressing HIV/AIDS is the establishment of the Global Fund. The Global Fund was created in 2002 to provide funding to governments for the fight against HIV/AIDS, Malaria and Tuberculosis (TB) across the globe. The idea to form the Global Fund started at the G8 Summit in July 2000 in Okinawa and endorsed in June 2001 at the UN General Assembly Special Session to focus on HIV/AIDS. The identification of HIV/AIDS, Malaria and TB as key focus for the fund was based on the fact that these diseases have an overwhelming impact on the general socio-economic and political development of society. Such an impact is evidenced by the fact that these diseases kill about six million people each year around the world (www.globalhealthsciences.ucsf.edu).

The Global Fund is managed on multi-sectorial principles. It is a "public-private partnership that includes donor and recipient country governments, multi-lateral agencies, CSOs, private sector representatives, and representatives from communities affected by the three diseases" (www.globalhealthsciences.ucsf.edu). Funding requirements for the Global Fund also stress that proposals submitted by organisations must embrace partnership principles. Each country must have one coordinating mechanism[8] that facilitates and co-ordinates development and submission of proposals to the Global Fund.

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[8]. The one coordinating mechanism is what has come out in the name of AIDS Councils in most of the countries across the world.

As a result of such coordination, interests of stakeholders will be integrated and multi-sectorial interests will be developed (www.globalhealthsciences.ucsf.edu).

At the 2003 International Conference on AIDS and Sexually Transmitted Infections in Africa (ICASA), by a UNAIDS working group, the UNAIDS attempted to reinforce political commitment by introducing a set of principles called "The Three Ones". The principles were endorsed by representatives from donors, host countries and major international organisations (www.unaids.org).

The principles were called "Three ones" because they were based on three main proposals. First is the proposal that each country must have one comprehensive national framework with its work plan and budget. The framework must be "negotiated and endorsed by the key stakeholders". Second, the principle proposes that each country must have an AIDS Coordinating authority "recognised in law and based on multi-sectorial support and full technical capacity for coordination, monitoring and evaluation, resource mobilisation, financial tracking and strategic information management". Third, each country must have "one national monitoring and evaluation system integrated into national AIDS framework with a set of standardised indicators endorsed by key stakeholders" (www.unaids.org).[9]

Within the African leadership itself the most spectacular point when multi-sectorial approaches were pronounced to form part of local strategies in dealing with HIV/AIDS is the Abidjan Declaration of 1997. At that forum, African mayors and municipal leaders affirmed their commitment to search for solutions relevant to local needs and realities, in accordance with the goals and principles of the United Nations and our own laws and regulations, in order to respond more effectively to HIV/AIDS in our communities (Alliance of Mayors and Municipal Leaders 1997).

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[9]. In its plans at that time, the UNAIDS intended to support the implementation of the first two ones in at least 15 countries by the end of 2005 and an additional 20 countries by the end of 2006. The UNAIDS also plans to support the implementation of the third one in at least 20 countries by the end of 2005.

Among other things the leaders in their declaration agreed that they would "promote and co-ordinate local multi-sectorial approaches for HIV prevention and the care of the affected and infected people" in their localities. Thus a network structure in the name of Alliance of Mayors Initiative for Community Action on AIDS at the Local Level (AMICAALL) stated that:

> AMICAALL promotes partnership approach to implementing LG HIV/AIDS Responses by encouraging cooperation and coordination between LGA and civil society. Partnerships are also central to the organisation of AMICAALL, which is built upon networks within and across countries. AMICAALL recognises that while empowering LGA leaders to address HIV/AIDS is critical, to be effective any LGA response to HIV/AIDS must be integrated with ongoing activities at the local and national levels (AMICAALL, City Alliance, UNDP, UNHabitat &World Bank 2003: 3).

1.2.4   The contribution of the civil society operations

Development theorists would point out that a good relationship between government and the civil society is usually possible when the state is ideologically democratic or has popular support. Autocratic states are usually not open for change. Hence they are hostile to the civil society, especially in situations where politically active citizens appear to be pro-democratic in character. Government's hostility can be channeled through structures such as the laws, policies and tax systems (Likalimba, 1999: 40-41).

According to Henri (2000), this form of suppression was best exemplified during the apartheid era when legal instruments were put in place to regulate the actions of civil society. For instance, the Fundraising Act of 1978 was used to the civil society organisations which were perceived as having an oppositional agenda through the denial of registration.

Henri (2000) further asserts that traditionally, civil society in South Africa has tended to be vocal and irrepressible in agitating for political space.

A draft legislation for the civil society organisations prepared soon after the 1994 elections sparked a very strong reaction from the civil society sector. Comments from the civil society showed that the legislation gave too much regulatory power to the government. Consultations and discussion on the legislation continued till 1997 when the legislation was finally passed.

The current constitution and legal framework of the South African Government has provided a conducive environment for the operations of the civil society. Freedom of association which the constitution embraces has opened a space for citizens to work together and form interest groups in the form of voluntary organizations, trusts and the Section 21 companies. The South African law allows these kinds of organizations to register as Public Benefit Organisations under the Income Tax Act. According to the International Centre for non-profit law (www.icnl.org), by gaining the status of Public Benefit voluntary organizations, trusts and Section 21 companies can enjoy benefits such as income tax exemption and tax deductible donations.

With this constitutional and legal framework in place, the civil society is probably one of the fastest growing sectors in South Africa. In 1998 alone the sector accounted for R9.3million in expenditure. This translated to 1.2% of the country's GDP. At the time the sector employed 328,326 full-time paid workers and 316,991 full-time volunteers making a total of 644, 317 altogether.

This was more than the mining and public sectors which had 534,000 and 436, 187 respectively (Graduate School of Public and Development, University of Witwatersrand and The John Hopkins University Institute for Policy Studies and Centre for Civil Society Studies: 2001). With the continued growth of the sector the situation has changed so much that the R9.3 million expenditure is currently equivalent to the annual budget of some individual NGOs.

A study by the Graduate School of Public and Development Management at the University of Witwatersrand and The Centre for Civil Society at the University of Natal[10] in 2002 indicated that the sector's latest financial figures showed that it had R14bn, "consisting of approximately R5.8bn from the government funding, R3.5bn from the private sector and R4.6bn" from self-generated funds.

The composition of civil society organisations in terms of their legal status shows that about 53% are voluntary organisations. Most of these focus on the issues related to poverty alleviation. They respond to the contending community problems of daily life. HIV/AIDS is one of the most common problems that these organisations have taken upon their shoulders especially in the areas such as Home-Based Care, awareness raising, training, and informal counseling (Swilling & Russell 2002: 21).

One of the most notable examples of the civil society activism on issues about HIV/AIDS in South Africa is probably the establishment and the activities of the Treatment Action Campaign (TAC) and the establishment of Lovelife (Hunter, 2010: 205 – 218) Established in on "10 December 1998" and supported by various national and international institutions, including the American Government, the Children Rights Centre, the Congress of South African Trade Unions (COSATU), Doctors Without Borders, and the UNAids, the TAC invested a significant amount of its energy and resources into pushing for the reduction of HIV/AIDS drugs.

The Campaign's strategies, among other actions, involved demonstrations, taking the government and pharmaceutical companies to court, mobilizing key players such as scientists in the health sector across the world to support their course, mobilizing people affected and infected with HIV for solidarity in challenging the government and the pharmaceutical companies, writing directly to the political leaders who seemed to succumb to denialism to change their minds, and participating in decision making forums and processes (Geffen 2010: 48-77).

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[10]. Now known as the University of KwaZulu-Natal.

Geffen points out that:

> From 2000 until 2004, when the ARV treatment finally became generally available in the public health system the state's response to AIDS was dominated by Aids denialism, only gradually eroding in subsequent years. It was as a result of TAC's efforts that state-supported Aids denialism was ultimately defeated (Geffen 2010: 48).

The TAC's campaign did not only influence the availability ARV treatment, it also influenced the wider spectrum of the policy environment related to the response of the government to the epidemic. One specific achievement in this light was the development of the New Strategic of the Department of Health in 2007, which sought to incorporate various issues that had been on the TAC's Campaign agenda. Geffen comments:

> The plan was to include new targets for prevention, treatment and much else. You might ask why a new plan was needed when we already had the 2003 one, but years of obstruction informed by Aids denialism and support for quackery meant the old plan had lost its shine. Some of its targets were now unachievable and it was also silent on many other interventions for stemming the epidemic. We needed new, much more detailed and realistic policy which could galvanise the state and society and on the basis of which we could realistically hold the government accountable (Geffen 2010: 73).

Lovelife was established in 1999 with the aim of raising awareness and strengthening optimism among the youth in South Africa.

> Running through LoveLife's institutional veins was a bold philosophy: it wanted to advance "a new life style brand for young South Africans, promoting health living and positive sexuality…." it's strategy built on what it regarded as "the fundamental aspirational optimism among South African youth". By tapping into this optimism, it could help youth overcome negative peer pressure and deadly silence around sex (Hunter 2010: 205).

The antagonistic engagement such as that of the TAC and the South Africa Government between the late 1990s and around 2010 is probably one example of development in the expression of people's democratic rights in South Africa after the apartheid. It may be argued that the engagement between the TAC and the government did not go without suppression. But it may also be argued that the fact that there was consistent engagement and the positive results were eventually achieved at the highest level of policy structures, is an indication that there reasonable level of mature and constructive democratic engagement.

In comments about LoveLife, Hunter (2010: 205) informs us that the growth of LoveLife was well propelled by the support of government leaders such as the then, Deputy President, Jacob Zuma. Hunter reports of Zuma's participation in the opening of a LoveLife Centre in Mandeni community, which was among the most highly HIV/AIDS infected communities in KwaZulu-Natal Province and the entire South Africa. At this meeting Zuma is reported to have displayed his support of the Campaign against HIV/AIDS through his words:

> It is important that we all should recognize the fact that it was deliberate that we choose this community of Mandeni… We do so to highlight our serious concern about the scale and ferocity that HIV/AIDS is engulfing our rural communities and youth in those communities (Hunter 2010: 205).

Within such a constructive policy environment, analysts have argued that though funding from the government to the voluntary organisations is not much, the government is one of the major funding agents for the civil society in South Africa.

The pie chart below shows the level of income to the civil society organisations through self-generated funds, private sector and government and donor funds.

Figure 2: South African Non-profit Organisations: Income
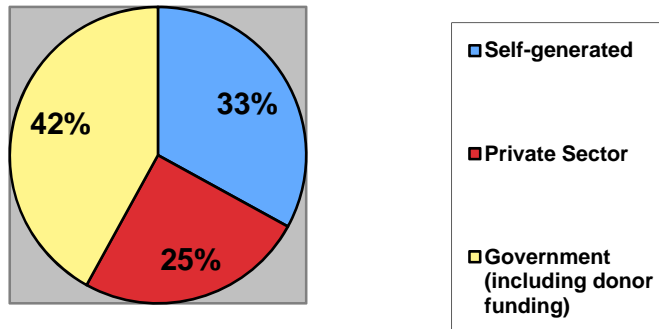
Source: Graduate School of Public and Development, University of Witwatersrand and The John Hopkins University Institute for Policy Studies and Centre for Civil Society Studies: 2001

Collaboration between the civil society and the government is now probably manifesting itself more and more through the formation of multi-sectorial forums. A significant example is the partnership, which the government forms with civil society through AIDS Councils where political leadership is seen as a critical pillar for the mitigation of HIV/AIDS impact on society. Advocates for this form of partnership have emphasised the importance of political leadership to mobilise different sectors, including the civil society sector, to form partnerships against HIV/AIDS.

1.2.5   The IKS gap in the political leadership for HIV/AIDS in South Africa

An example often cited as a success story on political leadership against HIV/AIDS in Africa, is Uganda. It is commonly known that the

> success in reducing the prevalence of HIV in Uganda is the result of a broad-
> based national effort backed up by firm political commitment, including the

personal involvement of the head of state, President Yoweri Museveni. From the outset, the government involved religious and traditional leaders, community groups, CSOs, and all sectors of society, forging a consensus around the need to contain the escalating spread of HIV and provide care and support for those affected (www.who.int).

As noted above following the examples such as those of Uganda, the South African government has made significant strides in working together with the civil society and other players to address HIV/AIDS. History records presenting these developments seem to have talked about everything, but failed to appreciate the potential of the indigenous people to influence political commitment through their knowledge systems and values. Even in situations where debates have seemed to divert towards the contributions of local communities, ideals advocated for to engage them have always been informed by the mainline debates largely loaded with Western paradigms.

This study is an attempt to move beyond the discourse about prevalence, general political commitment and general civil society response to HIV/AIDS. It is an attempt to bring IKS into the main stream of the history of HIV/AIDS. The study attempts to interrogate the extent to which the local government leaders have learnt from the IKS and made efforts to incorporate IKS to the policy formulation and implementation processes.

1.3 HYPOTHETICAL STATEMENT OF THE PROBLEM

1.3.1 The complexity of denial, limited capacity and the power of IKS in HIV/AIDS policy and programme development

The first reaction to the reported prevalence of HIV/Aids was probably one of denial. Denialism is one component of the epidemic which some leaders challenged. According to Thornton the attitudes against denialism were well echoed in the words of leaders who had been directly affected by the disease.

Specifically, in Zambia when the son of president Kenneth Kaunda reportedly died of AIDS in 1987, Kaunda appealed to the international community saying, "It does not need my son's death to appeal to the international community to treat the question of AIDS as a world problem" (2008: 148). Similarly, in 2005 the son of the South African former president Nelson Mandela reportedly died of the disease. Thornton observes,

> Mandela, who had made efforts to "normalize"the image of AIDS in South Africa, and who had campaigned for AIDS to be recognized treated like any other disease, said at his son's funeral, "Let us give publicity to HIV/AIDS and not hide it, because [that is] the only way to make it appear like a normal illness" (2008: 149 – 150).

Both Kaunda and Mandela affirmed the existence of denial by appealing to the world to change attitudes and treat HIV/AIDS as a normal disease. However, some political leaders affirmed the existence of denial by exhibiting tendencies of being part of the denialist community thereby becoming part of the general citizenry that had been in the state of confusion about the existence of the disease. According Thornton,

> Mandela's successor, Thabo Mbeki … fought mightly against accepting [AIDS] reality. At the other end of political spectrum, people in rural villages, and especially traditional healers, debate whether AIDS is curable, and some claim to cure it. The essence of the debate is whether the ancestors new about AIDS….South African ask themselves, "Is AIDS ours, African – from us and within us – or is it foreign, un-African, from without rather than from within?" … The deep ambiguities of reference to what is "ours" that is "African" or "South African" or to what comes from outside versus what comes from inside create significant barriers to acceptance (2008: 150 -151).

Different commentaries on political commitment in addressing HIV/AIDS would hold that political denial means negative or pessimistic response to the problems of HIV/AIDS by politicians which is mainly signified by comments and behaviours attempting to refute the extent or the existence of certain aspects of the epidemic. To a certain extent, political denial is a brainchild of the dissident culture.

A publication edited by Mary Crewe entitled *Buckling: The impact of AIDS in South Africa, The Centre for the Study of AIDS* at the University of Pretoria has unswervingly remarked on how the commitment of politicians could be influenced by denial. In that publication the author refers to the rumours "that HIV had been concocted in laboratories and was part of the plot to exterminate blacks" (Crewe 2005: 17). enialism is influenced by the perspectives of identifying with those at the margins of the society. Thus, propelled by the pessimism which has been influenced by AIDS dissidents literature and scientific assertions, political denial has taken the form of "Afro-nationalism and vestigial Third-worldism" (Crewe 2005: 18).

According to Nattrass one possibility that could have forced the leaders to succumb to denial was that their acceptance of the existence of the disease would have justified the need to provide the then, expensive highly active antiretroviral therapy (HAART) (2007: 4). In general,

> The denialists regularly deny that precautions against infection are necessary, deny that HIV testing is appropriate, deny that any approved treatments should be used (or CD4 or viral load tests to monitor diseases progression), deny that treatment saves lives, and often deny that AIDS is a real epidemic, or even real medical condition. The problem is not ideas, but the organized efforts to practice bizzare medicine, telling people which major illness to reject care entirely (James 2000, in Nattrass 2007: 23).

Nattrass (2007) observes that even denialists themselves are not the same. Some argue that HIV does not exist, while others "accept the existence of HIV but … believe it to be harmless". Within those differences, some denialists do not see the necessity for any treatment, while others argue for the use of "vitamins and other nutritional interventions, including herbs and garlic, complementary or indigenous remedies and detoxification therapy …" (Nattrass 2007: 23).

It has been indicated above that, reflections from activists have pronounced governance as one of the essential areas for effective intervention in HIV/AIDS. In line with this approach HIV/AIDS activists appeal to the government officials to take themselves as the central role players. Government leaders and officials are perceived as having the potential to pull out wherewithal from different role players including business and civil society in order to take in hand the epidemic.

This line of thought also aspires to ask political leaders to put in their own energy and political influence in dealing with the disease to the extent that political leaders have at times been asked to participate in voluntary counseling and testing as a way of demonstrating by example.

Practitioners and activists have also presented other factors that may influence the lack of commitment among local government politicians: lack of management skills among political leaders and various stakeholders attempting to support the initiatives; and the fact that HIV/AIDS challenges change very quickly and, therefore, not meeting the capacity of politicians who are already incompetent in many areas to catch up with those changes. Some have noted that this lack of capacity is the background for the inability of lower level local politicians to understand government policies and programmes, which in the main are influenced by Western paradigms of thought.

In summary, the lack of lower level municipal politicians to engage with HIV/AIDS has been influenced by their inability to understand policies and programmes and guidelines influenced by international, national and provincial/regional structures.

Political denial at the national and provincial/regional level may have also influenced the lack of commitment of local politicians. The three diagrams below illustrate further the hypothetical trajectory, which, in the researcher's view, presents the programmes and knowledge building systems that tend to result in the lack of political commitment at the local municipal level of the local government.

Figure 3: Trends of policy and programmes construction in the current context of knowledge building: Scenario
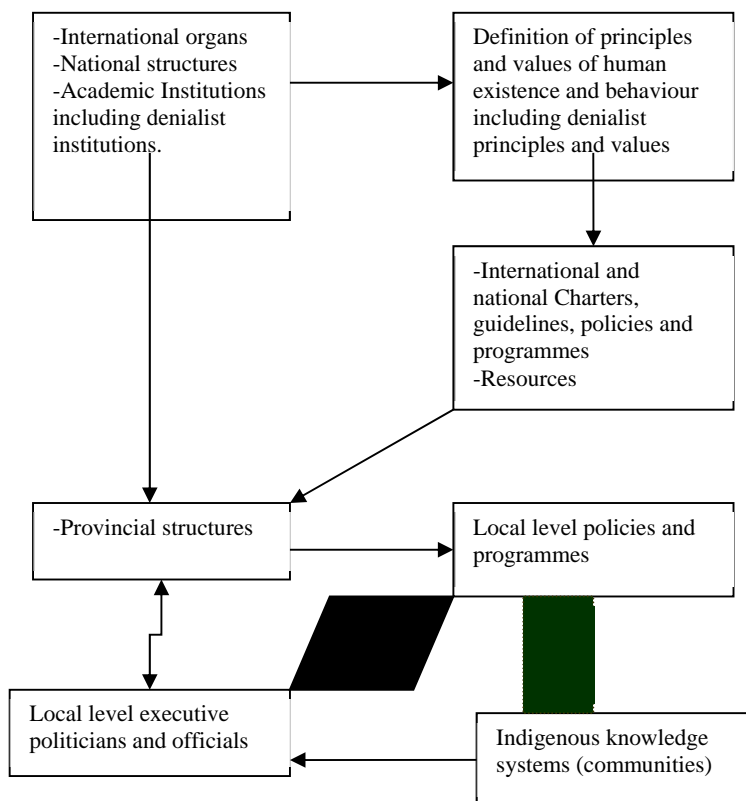
Figure 3 above presents the original assumptions in this study of approaches used to influence commitment of politicians at the local level. In this trend the international organisations, national structures, and academic institutions are the definers of the accepted principles and values of human existence and behaviours. The principles and values they stand for are organised into documents that act as guiding principles for policies and programmes at the local level.

Policies and programmes produced through this leaning are usually understood and consumed by both the role players at the international and national level including the academic institutions. For this reason there is meaningful communication between the international, national and regional structures.

However, between the executive wing of the provincial local government and the local municipality, communication is warped. There are two reasons for this. First, while the executive wing of the provincial local government tend to be competent enough to understand the principles embedded in the guiding documents produced by the international, national and regional structures, the competencies of the local municipality level politicians, emanate from the IKS and not from the principles and values emanating at the international, national and regional level. Second, because the knowledge produced at the level of communities (indigenous knowledge) is not accommodated in the mainline systems as established policy and programme guiding knowledge, lower level politicians do not take initiative to use it to influence local policies and programmes.

In this context the local municipality politicians are able to operate from the same frame of thought as their communities, which is different from the frame of thought from which their provincial counterparts operate. Thus both the communities and the local municipality politicians are left in darkness in terms of local government policies and programmes. Communication between the local municipality politicians and the provincial politicians ends up having no effect. Yet communication between communities and the local municipality politicians is meaningful and has the potential to carry effect.

The gap between the provincial politicians and the local municipal politicians and the influence of the national and international structures is to blame for the lack of local municipality politicians' ability to effectively incorporate IKS to HIV/AIDS related policies and programmes. This study attempts to argue that for that gap to be closed there is need to accommodate the indigenous knowledge, sitting at the community level and constituting the competencies of the local municipality politicians, into the mainline channels of policy and programme formulation.

Figure 4: The state of affair in the midst of dissident influence and denialism: Scenario 2
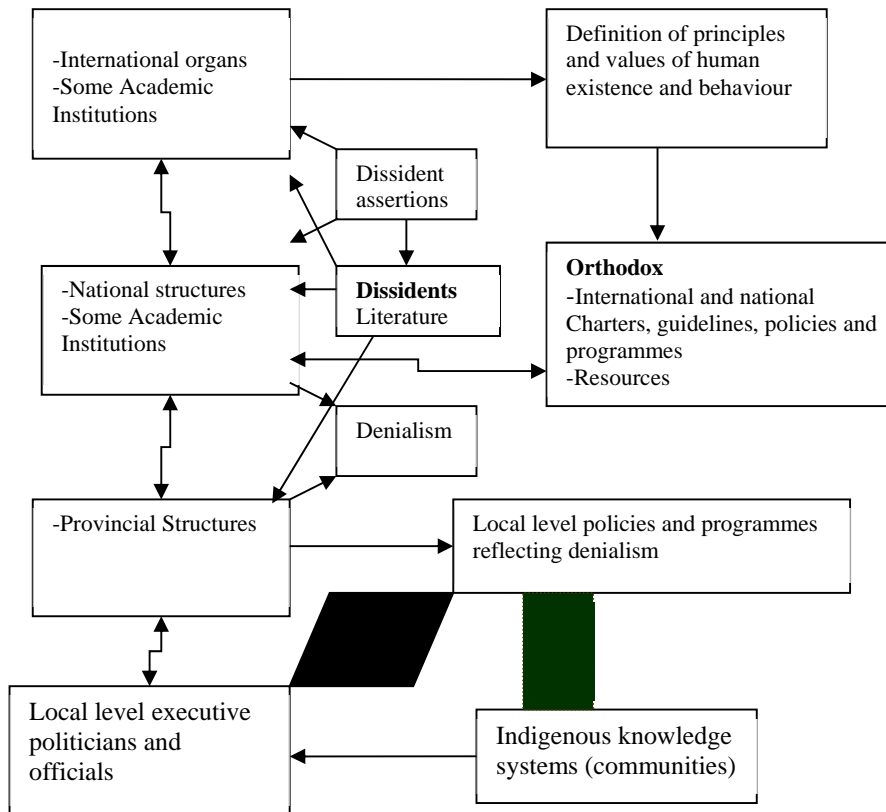
Figure 4 above presents a rather different picture from what we noticed in Figure 3. In figure 4 at the highest level international organs and some academic institutions are defining the principles and values of human existence and behaviour in ways leaning against denialism. The national, provincial and some academic institutions are separated from the international bodies. The dissidents' influence affects these groups separately through either direct communication or production of dissident literature.

Communications between international bodies and national structures, and between the provincial structures and the local municipality structures are misshapen by pessimism influenced by dissident views. This pessimism is also manifest when the role players at the national and provincial level and some academics try to interact with HIV/AIDS orthodox guiding documents produced by international organs and some academics.

The influence of the national and provincial structures on the local municipality leaders and officials is stained by denialism. Denialism therefore becomes an *objet d'art* of the local municipality leaders and officials in terms of general behaviour and policy and programme development.

The arguments to be presented in this study assert that the only way to redeem the orthodox view to reach the local municipality politicians and influence their action is through IKS.

Much of the explanation of reasons for the lack of political commitment has been directed to Westernised modes of thought which tend to accentuate knowledge, values and strategies acquired through formal education. This comes together with the top-down approach, in strategies used to engage political leaders in addressing the epidemic. There is the propensity to expect local government political leaders to implement policies and/guidelines developed at the national and provincial level. A living proof is the South African National AIDS Council, which developed Terms of Reference for the AIDS Councils operations at the local level.

What is being overlooked by these approaches is the fact that local politicians are accountable to their communities. These communities have their own traditions and life styles, which form patterns of learning and dealing with problems such as HIV/AIDS. Thus what advocates of Western modes of intervention influence the local politicians to do may not be compatible with the local trends of dealing and understanding the epidemic.

In addition the influence of dissident views is always from above. Such influence as seen above may breed denial. Thus due to denial, there may be nothing or very little coming from the upper levels of political structures to influence commitment of the lower level politicians. Aspects that can influence commitment of the local municipality politicians from the IKS need to be uncovered.

Local politicians need to be in touch with their cultural contexts and influence policy and programmes at the municipal level using their knowledge about local traditions, knowledge and systems.

The study attempted to focus on issues, not only about mere consultations of communities when formulating policies and programmes for HIV/AIDS, but about going even deeper to the level of understanding the indigenous knowledge treats that can be included in policy formulation and programmes designs and implementations. Figure 5 below attempts to illustrate this view further.

Figure 5: Trends of policy and programmes construction through the application IKS at the local level
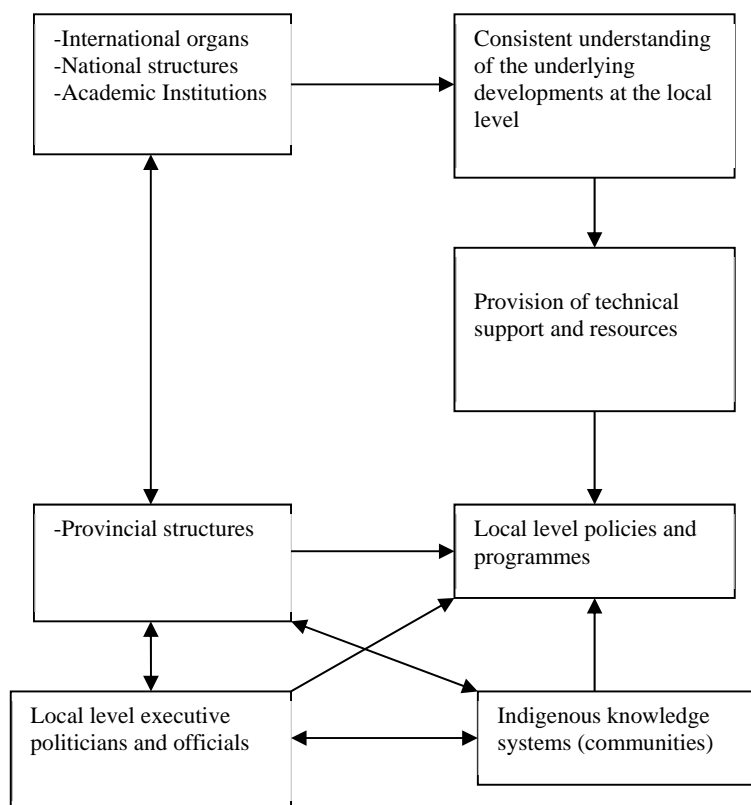
In Figure 5, the formulation of local policies and programmes is a product of collaborative effort**.** Principles and values for the policies and programmes are defined by the indigenous knowledge.

This happens through a process of mutual interaction and respect between the communities and the local municipality politicians and between the local municipality politicians and the provincial politicians and officials. In this process the knowledge that local municipality politicians draw from the communities is used in their communication with the provincial politicians to draft policies and programmes that are relevant to prevailing knowledge systems in the communities.

The international, national and provincial structures do not, however, become passive players. Rather through their interactions with the local municipality politicians they are able to understand the underlying developments at the local level. They then provide appropriate technical support and resources. Further, in this approach if dissidents' views influence lack of commitment of the local municipality, national, provincial and international structures, communities are able to use means and resources emanating from their IKS to address the epidemic.

Within the line of thought taken in this study Figure 5 represents the bottom-up approach which renders the local municipality politicians committed in addressing HIV/AIDS. Their commitment is influenced by the fact that the policies and programmes developed at the local level are defined by the knowledge with which they are competent to understand and interact.

1.4 KEY FOCUS AND RATIONALE OF THE STUDY

This study emanated from the aspiration to understand the potential of the IKS to influence policy and programme formulations in the manner presented in Figure 5. It aspired to answer the question: Are there aspects within the IKS that can influence formulation of effective policy and programmes at the local municipality level? The other question was: To what extent can these aspects influence valuable political commitment?

In pursuing these questions I have studied various policy related documents so as to establish the level at which IKS is incorporated in decision-making processes related to addressing HIV/AIDS. IDPs were used as a primary form of policy documents used to conduct the study along these lines. It was assumed that the IKS aspects that can influence policy formulation and political commitment would have been discovered by searching for those aspects that have already been incorporated in the policies and further investigate where and how they have influenced policies and commitment of political leaders.

It was then discovered that the current situation in the local government policy formulation systems shows that policy documents, such as IDPs, have actually incorporated IKS in a very minimal way. This was found when I studied about 75 (almost one third) local municipality IDPs around South Africa. This discovery pushed the study to the focus of trying to understand the extent to which IKS is included in the local municipalities. Thus my fieldwork was undertaken with the aim to understand whether the local municipality leaders and officials, within their interactions with local communities, integrate IKS in their work.

Through the field survey and interviews it was found that local municipality leaders integrate IKS in their work related to HIV/AIDS. This raised the question as to why IKS aspects are not prominently presented in the policy documents such as IDPs, while the local municipality leaders and officials themselves have been incorporating IKS in their work. Thus, the study advanced to the level of studying technical and political dynamics about policy formulation and how these affect the behaviour of local municipality leaders and officials in policy formulation systems.

In essence, because of the discovery that policy documents such as IDPs have limited incorporation of IKS this study made the following shifts:
1. From investigating the IKS aspects that can influence political commitment, to investigating the extent to which IKS is incorporated in policy formulation and implementation; and

2. After discovering that though the IKS aspects are minimal in policy documents the local municipality leaders and officials do incorporate IKS in their official practices, the study also investigated factors that inhibit the local municipality leaders and officials to incorporate IKS in the policy documents.

The study focused on political leadership at the local government level. In this respect the term "local government" refers to the government structures that in South African terms are called "local municipalities". According to the practical guide to local Government in South Africa produced by the Institute for Democracy in Southern Africa (IDASA) there are three categories of municipalities:

Category A: a municipality that has exclusive municipal executive and legislative authority in its area;

Category B: a municipality that shares municipal executive and legislative authority in its area with a category C municipality within whose it falls; and

Category C: a municipality that has municipal executive and legislative authority in an area that includes more than one municipality (IDASA 2001: 14 – 15).

In the South African Municipal Structures Act category A refers to metropolitan areas; category B refers to local municipalities and category C refers to district municipalities (IDASA 2001: 14 – 15).

This study placed emphasis on category B. The motive behind choosing this category was twofold. First, this is within the spirit of concurring with the general view among the development agencies interested in local government issues that the local municipality is the major government service and development delivery agency to the communities. Political leaders at the local level are very crucial for the government initiatives to address the HIV/AIDS epidemic.

Second, there is a lot that is recorded and happening at the national and international level about the work and commitment of politicians to address the epidemic, whereas in most local communities there is a serious lack of information that presents the commitment of politicians in the fight against HIV/AIDS; hence a lack of guiding literature that highlights the needs of local politicians to be equipped enough to take on the disease effectively[11].

The fieldwork for primary data collection for this study was originally planned to be conducted in 2 selected local municipalities of either Limpopo or Eastern Cape Province in South Africa. The choice of these two provinces was largely influenced by their status on the poverty scale among the South Africa Provinces. According to the United Nations Development Programme (UNDP) these are the poorest provinces of South Africa.

However, in the process of reflecting further on the key imperatives of the present study it was noted that linking poverty status of municipalities to the issues of IKS was not a necessary factor since the study is not directly about the issues of uplifting the economic well-being of citizens. The study is rather about the identity of social groups and their value in contributing to policies that concern their lives. Thus, a convenient[12] sampling of three local municipalities was made and used to collect primary data. The following local municipalities were selected and used to collect primary data: Umtshezi in KwaZulu Natal, Elias Motsoaledi in Limpopo, and Bushbuckridge in Mpumalanga. Part of the data collected here was of quantitative nature, another part was of qualitative nature, but the researcher notes that this data may only apply to the studied communities, and not to the entire South African society. The value of these data therefore lies in its confirming of the existence and importance of IKS in general, and not the degree of the existence of the IKS in the entire South Africa.

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[11]. Comments from various practitioners and researchers also indicate that there is dire need for capacity building in all kinds of service delivery responsibilities that the local municipalities are entrusted to take. This accompanies a lack of resources, poor infrastructure and serious illiteracy, whereas in metropolitan areas resources are readily available.

[12]. Convenient in the sense that the researcher had, through snowballing effort, identified people who would help in executing data collection process within the planned time of the study.

In this context the collected data were seen as an additional facet of the information for the triangulated analysis that lead to the conclusions to be made for this study.

As shall be noted in the methods used to collect primary data, interviews targeted black citizens with the understanding that their being a dominant population group in the South Africa renders them an opportunity not to be ignored in any national policy development system that claims to follow democratic governance such as one of South Africa. Hence they are a right candidate for a study aspiring to investigate about the integration of interests of citizens (in this case, interests related to IKS) in policy development and implementation such as this study.

Figure 6: Map of South Africa indicating all the country's provinces and the location of KwaZulu Natal, Limpopo, Mpumalanga Provinces

Source: http://www.luventicus.org
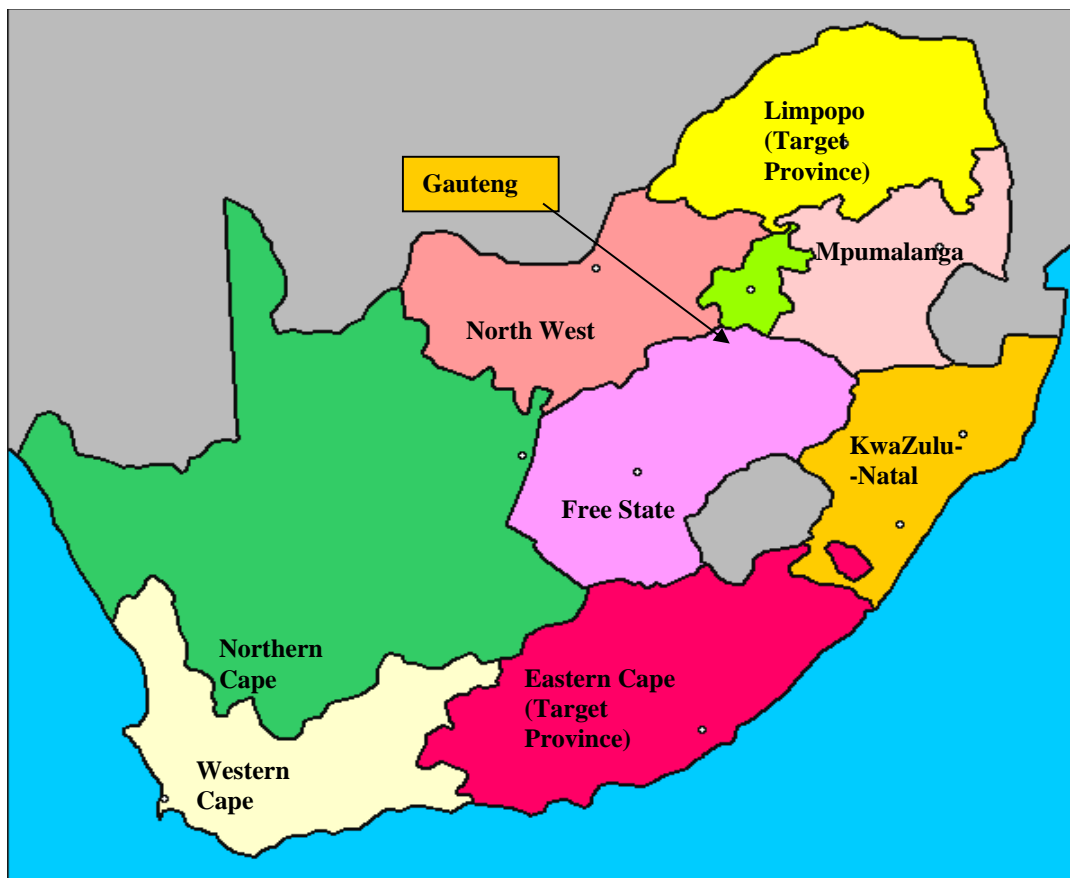
1.5 AIM OF THE STUDY

This study aimed at providing information to the development practitioners supporting the local government on the contribution of IKS in the efforts of the local municipality leaders and officials to address HIV/AIDS. It is hoped that such information will serve to develop policies and programmes that will support local politicians in their effort to engage with the epidemic or any other diseases seriously demanding political intervention.

The main outcome planned for this study is, therefore, information presenting:

- The current status of political commitment on the local government structures in addressing HIV/AIDS;
- The status of the use of the IKS in addressing HIV/AIDS at the local municipality level;
- Recommendations on how local municipalities can appropriate IKS for the development activities related to addressing HIV/AIDS; and
- Recommendations about future studies that could complement the findings from this study.

1.6 THEORETICAL FRAMEWORK

The point of theoretical departure for this study is Durkheim's Structural Functionalism, which will be explained in detail in Chapter 3 under section 3.8. Durkheim's Structural Functionalism claims that social structures, cultural norms and values can be understood empirically, whether in material form or non-material form. It will be shown in Chapter 3 that social structures, cultural norms and values are also part of IKS. In this way, social structures, cultural norms and values form a link between IKS and Structural Functionalism. As part of Structural Functionalism social structures, structures, cultural norms and values can be studied empirically. Thus they can also be studied as part of IKS. By studying social structures, structures, cultural norms and values empirically, it is possible to extract them and appropriate them into policy development and implementation.

In line with Structural Functionalism social structures, and cultural norms and values, referred to by Durkheim as *social facts*, constitute the cherished morality, collective conscience, collective representation and social currents which the indigenous people hold together as instruments to address their well-being. Thus the cherished morality, collective conscience, collective representation and social currents are also part of IKS, which can be studied empirically and appropriated for policy development and implementation.

I however sought to modify the Structural Functionalism by attaching the theory of *Relativism* to it. The origins of Relativism date back to c490 – 420 BC when one of the famous philosophers of the time presented his dictum entitled 'man is the measure of all things'. In particular, the Persian Wars of the time and the political disorder they brought resulted in the doubts about the ideas which had always been understood as unquestionable due to the belief that they are universal or divine. After this time *Relativism* has become one of the most important theories used by philosophers and social scientists at different levels. Essentially, *Relativism* is a theory, which attempts to claim that views have no absolute truth or validity. Truth and/or validity are different from individual to individual (Hales 2011:7). In other words, relativism implies that approaches to dealing with social reality vary from context to context. Thus in line with the theory of relativism, and as I have shown in section 3.8 below, this study understands that social structures, cultural norms and values are prone to change or to vary from time to time and place to place, even if their subjects (indigenous people) remain unchanged. The change takes place for a number of reasons namely: influence of human choices, influence of human experience from specific situations within their ecosystems, and influence of external forces from within the ecosystems in which human beings are part of. Social structures, and cultural norms and values then vary from context to context. It is argued that such variations are influenced by the fact that social structures, and cultural norms and values vary from context to context. In Chapter 3, I assert that the definition given to IKS implies that IKS varies from context to context.

Thus, while the theoretical point of departure is influenced by Structural Functionalism, the discourse in this study is consistently controlled by the theory of relativism. I argue that social structures, cultural norms and values are not static, but follow people's daily experiences and choices as they interact with their ecosystem.

1.7 HYPOTHESIS

The original hypothesis of the study was that IKS can influence political commitment to addressing social issues at the local government level. However due to the discovery that the inclusion of IKS in the policy documents is limited, my theoretical framework changed and the following theoretical framework was pursued in the study: Power dynamics between the provincial and national spheres of government on the one hand, and the local municipality leaders and officials on the other, have influence on the extent to which IKS is incorporated in policy formulation and implementation. The incorporation of issues into formal policy formulation and implementation is defined by the superiors who supervise the local municipality leaders and officials. This assertion is supported by Max Weber's Theory of Rational Legal Bureaucracy. Weber informs us that the division of labour is defined by specified "spheres of competence" which are structured in a hierarchical manner so that each lower office is under the supervision of the higher one". This is further underlined by the point that rational legal bureaucracy requires that "the member of the administrative staff should be completely separated from ownership of the means of production and administration" (Weber 1922). Ownership of the means of production and administration remain in the hands of higher ranking members of bureaucracy.

The effect of this is to stifle democratic participation by the lower ranking members of the bureaucratic system. In this study the lower ranking members of the South Africa policy making and implementation system are the local municipality leaders and officials and their communities.

The argument of the study is that local municipality leaders and officials have no influence on the extent to which IKS is incorporated in policy formulation and implementation. This state of affairs has left them to use IKS only in informal settings, while failing to incorporate it into public documents.

1.7.1 Key steps of the hypothesis

The following hypothetical steps were followed in line with the amended theoretical and hypothetical framework above:

- Though there is limited incorporation of IKS in local municipality documented policies, local municipality leaders and officials have the tendency to include IKS in their policy implementation processes;
- Despite their ability to include IKS in their policy implementation processes, local municipality leaders and officials are faced with limited capacity and power to include IKS in documented policies; and
- There are specific forces outside the local municipalities that influence the limited capacity and power of the local municipality leaders and officials to integrate IKS in documented policies.

Guided by the hypothetical assumptions above, I conducted an extensive investigation on the extent to which IKS is included in the policy documents. Such an investigation took strong cognisance of the fact that IKS can be produced and imparted in two forms namely: *Tacit* and *Explicit*. Through field data collection and analysis, I also conducted an investigation the existence of the integration of IKS by local municipality leaders and officials in their policy implementation engagements.

That pursuit was further concluded by conducting a literature review study of issues and factors that may influence the failure of the local municipality leaders and officials to include IKS in documented policies such as IDPs.

1.8 KEY QUESTIONS GUIDING THE STUDY

To illuminate the study, the following questions served as guidance:

1. What are indigenous knowledge systems?
2. How do indigenous knowledge systems relate to governance and development?
3. What are the powers and functions of the local government officials and politicians leading the local municipal jurisdictions?
4. How have the powers and functions been exercised?
5. What are the key indigenous knowledge and value treats in the local municipality under study that have featured as having the potential to make positive contribution in addressing HIV/AIDS?
6. To what extent has the exercising of powers and functions of the local municipal politicians leaned towards the inclusion of IKS?
7. What conclusions can be made from the study about the potential of the local municipality leaders and officials related to the appropriation of IKS in order to address HIV/AIDS?
8. What recommendations can be made about possible future studies that could complement the findings from this study?

1.9 METHODOLOGY

The researcher has used both the quantitative and qualitative approaches to conduct this study. According to Tulchinsky and Varavikova:

> Quantitative research uses questionnaires and surveys including telephone and electronic mail surveys to provide objective evidence. … Quantitative research yields data analyzed as rates, proportions, associations and multifactorial correlations. Quantitative surveys emphasize structure, consistency, precisely worded questions and analysis methods to quantify experiences and produce measurable outcomes (2009: 142).

Tulchinsky and Varavikova further state that,

> Although qualitative research also starts with questions, these may change with the experience of addressing people in open fashion in their own communities. This helps to generate knowledge of social influences and processes by understanding what they mean to people. Qualitative research methods are valuable for exploration, with open-ended collection of information by questionnaires, interviews, and focus groups… (2009: 143).

The quantitative methods have been used in collecting different categories of data through conducting a convenient survey at the three local municipalities namely: Umtshezi in KwaZulu Natal, Elias Mostoaledi in Limpopo, and Bushbuckridge in Mpumalanga. Structured questionnaires were conveniently distributed to the informants. Findings from the survey have been expressed in numerical terms and statistical terms which are presented in the form of a table. According to Kumar "In the popular mind, the obvious distinction between quantitative and qualitative methods is that the findings of the former are expressed in numerically and the later in text." He further says that "quantitative data are statistically analyzed" (2013: 138 - 139). Collection of data from the survey was made using structured questionnaires. Kumar asserts that,

> In quantitative research, protocols are precisely defined and should be strictly followed by the evaluator. If an evaluation team is conducting a survey … it would prepare a structured questionnaire, provide precise directions to enumerators as to how to administer the questionnaire, and instruct researchers not to deviate from it (2013: 139).

The study is also partly quantitative because the survey that was conducted in the three local municipalities deliberately focused on strict variables including types of remedies and the number of people responding in relation to such remedies in dealing with HIV/AIDS. Kumar states that,

> Evaluators working within the framework of quantitative methods are likely to focus on those variables that can be qualified. They are more likely to

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emphasise areas such as number of people, … the perceptions of stakeholders about the effectiveness and impact of the intervention… (2013: 140).

The qualitative nature of the study is at three levels: First, data collected was interpreted, not to present representational conclusions, but to affirm some qualitative observations drawn from literature and made out of the researcher's logical interpretations of statements made from literature. Such data have been presented in the descriptive manner. This is in line with Kumar's assertion that "… qualitative data are most frequently recorded in rich descriptive texts" (2013: 139). Second, in the three local municipalities mentioned above, key informant interviews were conducted and presented in a manner that supported the literature review. Kumar states that:

> Simply stated, key informant interviews involve interviewing a select group of individuals who are in a position to provide needed information, ideas, and insights on a particular topic. Two characteristics of informant interviews are worthy of special mention. First, only small number of informants is interviewed and they are selected because they possess information or ideas that can be useful to evaluators. Second, key informants are qualitative interviews that involve continually probing the informant (2013: 155 – 156).

For this study and as presented in Chapter 7, interviews were conducted in a flexible manner. Open-ended and semi-structured questionnaires were specifically used to substantiate the literature review.The open ended questionnaires and semi-structured questionnaires were used to conduct either face to face interviews or group discussions. Kumar informs us that,

> Researchers using qualitative data collection are more flexible. … They would pursue the leads and then probe a leader for more details. They would routinely modify their topic lists in light of the information they have already obtained (2013: 139).

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Third, the study is qualitative in the sense that it relied on analysing existing structures such as IDPs, HIV/AIDS intervention approaches, relationships between the local government, the provincial government and the national government, and relationship of established philosophies paradigms such as relativism, governance, Structural Functionalism, HIV/AIDS and IKS. Kumar informs us that,

> Evaluators committed to qualitative research examine a democracy program in the context of the existing social and political environment in which it is designed and implemented. To understand the dynamics of an intervention and the factors and forces that are affecting its performance, evaluators tend to focus on the variable such as existing institutional arrangements, prevailing political values and culture, nature of interaction between program staff and the intended beneficiaries, and stakeholders' perceptions (2013: 140).

1.9.1   Nature of the study

It is the researcher's view that though there is quite substantial information about the commitment of politicians at the national and international levels to the cause of HIV/AIDS, very little is known about the work of politicians at the local government level, more especially in connection with their will to engage with the epidemic using IKS. Commentaries given so far about the commitment of local politicians and the extent to which they incorporate IKS in their work are lacking in the policy analysis research. Thus, this is a groundbreaking study which will re-direct academic reflection to the local government with an emphasis on the importance of IKS to contribute in the formulation and implementation of policies. To that effect, this can, in technical terms be defined as an exploratory study.

> Exploratory research means that hardly anything is known about the matter at the outset of the project. You then have to begin with a rather vague impression work plan in advance (www2.uiah.fi).

As noted above, at an operational level, the study relied on literature review and primary data collected through a survey and interviews, which were conducted in three local municipalities which were conveniently sampled. Below is the detailed description of how data used in this study was collected.

1.9.2 Document review

The core chapters of this study have largely relied on the official government records. A document study included the following aspects: an analysis of literature on the concepts of development, governance, indigenous knowledge and values and sociological theories; the South African legal and constitutional framework that determines the powers and functions of politicians at the local government level; the status of HIV/AIDS prevalence in South Africa; theoretical and practical information on the work of local government politicians presented by various practitioners and academics; strategic planning documents for the local government officials such as the IDPs; periodic documents produced by relevant stakeholders; and study materials for university academic courses in related subjects.

1.9.3 Fieldwork and Interviews

The researcher had originally intended to interview the South African National umbrella bodies of local government such as the South African Local Government Association (SALGA), the South African demarcation board and the Department of Local Government.

However, though these bodies were assumed by the researcher to determine the direction of local government policies and programmes, it was found that there is quite significant amount of general formal literature [13] related to policy development and implementation at the local government level.

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[13]. This literature does not, however, include issues about IKS.

Thus data from these bodies would have added limited, if not nothing to the understanding about constitutional requirements for policy-making and implementation principles I needed to understand for this study. For this reason, fieldwork was conducted in a form of a survey and interviews with conveniently selected local communities and local municipality leaders and officials in selected local municipalities. Below is a detailed explanation of how the survey was conducted.

1.9.4 Local municipality survey and interviews

As part of this study, a survey was conducted, with the support of field assistants, to compare concrete local situations with the evidence found in the literature review about the inclusion of IKS in policy development and implementation by the local municipality leaders and officials. The survey and the interviews were conducted in a quantitative and qualitative manner.

Since the survey was conducted simply to complement the qualitative data from literature, my sampling efforts were very rudimentary. In this light I conveniently selected only one local municipality in each of the three randomly selected provinces namely: KwaZulu-Natal, Limpopo and Mpumalanga. These local municipalities were found to be convenient in the sense that they were largely rural and therefore had the potential to have a large percentage of people who were born and stayed in those communities for most of their life. Therefore, they had the potential of consistency in cultural and indigenous practices. The local citizens interviewed in these municipalities were also conveniently selected. Municipality leaders and officials identified for interviews were purposefully selected on the basis of the importance of their roles and responsibilities in the field under study, especially in light of comparing the findings from the survey and the interviews with the findings from literature review.

1.9.4.1 The approach followed to conduct the survey and the interviews

The survey was conducted among the conveniently sampled community members in the identified local municipalities. Interviews were conducted among local municipality leaders and officials who were purposely selected to provide specific information which was thought to be critical in comparing with the information that the study had so far drawn from various documents (e.g. IDPs and other policy documents).

In light of this categorisation of respondents, survey and interview tools were conceptualized and designed in such a manner that they helped to probe responses according to the social category or status of the identified respondents. Seven categories of questionnaires were developed. They included:

- Conveniently sampling questionnaire which targeted general citizens of the targeted communities: Questionnaire for local municipality Mayors' offices;
- Questionnaire for local municipality social development officials;
- Questionnaire for ward counsellors;
- Questionnaire for traditional leaders;
- Questionnaire for traditional healers; and
- Group interview guide.

Individual citizens in the communities were first asked whether they belonged to the communities where they were interviewed. They were also asked to specify the length of time they had lived in the particular community. This was done to establish whether they were eligible to participate in policy development related activities in the communities and made meaningful contribution. Further questions posed to them were designed to find out the extent to which they use traditional remedies as an explicit form of indigenous knowledge. The individuals were also asked to indicate what they thought the communities could do on their own to deal with issues related remedies for sicknesses.

The mayors' offices were asked questions seeking to understand the existence of structures in the local municipality designed to promote the inclusion of IKS both at the explicit and tacit level. Following these questions social development officials and ward counsellors were asked to indicate whether they participated in various community activities and structures related to HIV/AIDS initiated by the community members and not the government officials and political leaders themselves. They were also asked questions designed to find out whether the ideas they drew from their communities were incorporated in the local municipality activities and decision making processes. The officials and the ward counsellors were also asked to indicate the period they had been part of the communities they served. This was done to understand the possibilities of them having made some impact in the community, and also the extent to which they had been influenced by the dynamics of the communities in which they worked. It was assumed that such questions would help to examine the potential of being influenced by the community enough to appropriate the local IKS into the policy decisions and activities.

In the inverse, traditional leaders and traditional healers were asked questions designed to investigate the kind of traditional practices, activities, and structures initiated by the government officials and the political leaders that the traditional leaders and healers participated and contributed in. The traditional leaders and healers were also asked questions related to the influence they made in such activities and structures and the kind of local practices they thought could be instrumental in addressing HIV/AIDS.

A group discussion interview guide was designed to complement the oral interview questions. Respondents were asked to indicate traditional remedies they used as an explicit form of indigenous knowledge. The individuals were also asked to indicate what they thought the communities could do on their own to deal with issues related remedies for sicknesses. A sample of self-introduction and appointment arrangement statement was prepared as part of the instructions for the field assistants at the beginning of each questionnaire (see table 1 below)[14]:

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[14]. Instructions for the focus group questionnaire were similar to the ones of the local municipality leaders and officials since it was noted that to reach the specific organisations one would have to go through the leaders of such

Table 1: Self-introduction statements used during the survey

Questionnaires	Format of introductory statement
• Conveniently random sampling questionnaire directed to the general citizens of the targeted communities	Hallo, may I speak to you. My name is ………………… I am student at the University of South Africa and I am conducting a survey for my PhD research just to contribute to the world of knowledge. I have only 5 questions to ask you as part of this survey. I will not mention your or anybody's name when writing the results of the survey and so be assured that whatever you share here will be kept confidential. I will be writing or marking on my sheet of paper which I have here just to make sure that I remember when I write my research report. Are you ok with my request – can I go ahead and ask you the questions?
• Local municipality Mayors' offices questionnaire; • Local municipalities' social development officials' questionnaire; • Ward counsellors' questionnaire; • Traditional leaders' questionnaire; and	**Making an appointment:** Hallo, my name is ………… I am a student at the University of South Africa. I am conducting a study just for my school work. The study is about how indigenous knowledge can be useful in contributing to the work of local municipalities. And as one of the top leaders of this local municipality I think that your contribution is crucial for this study. I would be happy if you allow me to speak to you face to face. When can I meet you and where? (***Take note of the date, time and place and ask for directions if you are not sure of directions).***

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organisations. However it was mentioned to the leaders that the questionnaire would be for a group of people in their organisations and the leaders were asked to organise such groups.

Questionnaires	Format of introductory statement
• Traditional healers' questionnaire.	**After taking note of date, time, place and directions say:** Thank very much for accepting my request. I am looking forward to meeting you. Do you mind if I call you when I will be on my way to you on ……. (mention the agreed date). **On the day of interview call when you are leaving to meet the respondent and say:** Hallo, it's …….. (your name). How are you today? I just wanted to let know that I am now on my way. **When starting the interview:** As I indicated earlier, I am student at UNISA and I am conducting a study on indigenous knowledge for a research paper which the University wants me to submit. So thank you very much for making this time for us to talk. I have few questions and as we talk I will be taking notes just to remember what you have shared with me. Your name will be kept confidential when I write the report – which mean I will not mention your name anywhere in the report. But if you request to include your name I can do so in the acknowledgement part of my report. Can we start the interview now?

1.9.4.2   *Selection of respondent communities*

After the questionnaires were developed Umtshezi in KwaZulu Natal, Elias Motsoaledi in Limpopo, and Bushbuckridge in Mpumalanga were conveniently were conveniently selected to administer the questionnaires.

The convenience of these local municipalities was that they are considered rural in the South African context[15] . They have a strong potential to provide authentic data on IKS. Noting that there are many local municipalities of this nature, their selection involved grouping them together for each province and then randomly pick one of them. It is also important to note that all three local municipalities were selected from the provinces found in the Eastern part of South Africa. This was also a matter of convenience as the researcher had strong networks to conduct the research effectively in this geographical area. It was noted that through triangulation analysis and since the aim was not to collect representative data, but to collect general data for general qualitative triangulation, such overly sampling by convenience would not undermine the validity and reliability of the findings of the study.

1.9.4.3   Recruitment of field workers

A snowballing process whose objective was to identify contact persons around Pretoria, where the researcher's home base is situated, was employed. Three individuals identified in Pretoria helped to identify locally based lead field work assistants based in all the localities mentioned above.

1.9.4.4   Distribution of questionnaires

As noted above, the survey and the interviews were triangulated to elicit qualitative data. Thus, no preliminary mapping of the number of key respondents in line with the categories of the questionnaires above was made to find out the number of potential key respondents in each of the local municipalities identified. In addition there was no assessment of population size and other demographic factors in those local municipalities. Targeting of the mayors' offices, the municipal officials, the ward counsellors, the traditional leaders, the traditional healers and the focus groups was purposefully designed because of the

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[15]. Unlike most of the African countries South African rural communities are largely situated around small towns, which in some African countries would be considered as urban areas.

potential of these respondents to provide critical policy and IKS related information. Targeting of ordinary citizens as respondents was done without any form of bias. Table 2 below shows how the questionnaires were distributed in each local municipality in line with this pattern of targeting.

Table 2: Distribution of Questionnaires to local municipalities

Questionnaire	Number of copies distributed to each local municipality	Totals
Conveniently random sampling questionnaire which targeted general citizens in the targeted communities	100	300
Questionnaire for local municipality Mayors' offices	2	6
Questionnaire for local municipality social development officials	5	15
Questionnaire for ward counsellors	5	15
Questionnaire for traditional leaders	5	15
Questionnaire for traditional healers	5	15
Focus groups' guide	3	9
Grand Total		**375**

The distribution of the questionnaires as presented above was made through the lead field assistants who then administered the questionnaires either on their own or with the assistance of other people. Handing over of questionnaires to the lead field workers by the researcher was made face to face. The researcher travelled to meet the identified lead field workers at or near their places of residence.

During the handing over of the questionnaires the researcher provided explanations about how the questionnaires should be administered and the lead field workers were able to ask questions for clarification. The explanation was made in a form of a mini-workshop. Lead field assistants were asked to practice the administration of the questionnaires using any person available at the time and point of the mini-workshop. In addition the lead field assistants were trained to write field notes which would provide information about the challenges and other important experiences they faced when undertaking the field work.

A stipend was provided to the lead field assistants to buy cellular phone airtime for communication to make appointments with key respondents. It was also meant to communicate with the researcher wherever necessary and as remuneration for the time spent in undertaking the assignment.

1.9.4.5   *Challenges during the survey*

Like any field research, challenges were faced during the field work. These were mainly influenced by the distance between the researcher's and the field assistants' residential base and other social factors dominant in the communities where the survey was conducted. Below are the main recorded challenges.

   a. <u>Communication between the researcher and the field assistants</u>

The distance in residential base between the researcher and lead field assistants posed some communications challenges. The main mode of communication used between the researcher and the field assistants was cellular phones. In some cases the network reception was poor so much so that it was difficult to speak to the lead field assistants on regular basis. Some of the lead field assistants did not have access to the internet, and this posed difficulties to communicate with them through emails.

Reports from the field assistants showed that they also had some challenges in trying to reach key informants. Main challenges faced by the field workers are summarized below.

b. Difficulty to reach some of the key informants

The following were some of the common causes of communication failure:

- Poor communication networks;
- Unavailability of key informants due to their busy schedules;
- Unwillingness of some of the key informants due to a lack of interest to share their views;
- Poor time planning which resulted in being late for appointments;
- Poor transport systems in the studied communities which resulted to difficulty to travel to places of appointment; and
- Long distances between the field assistants' places of residence to municipal offices where some of the key informants were supposed to be met.

c. Poor writing skills of the field workers

All field assistants had qualifications beyond matric, but had no university degrees. They had limited technical writing skills and so they were lacking, especially where they were required to take detailed notes. In this context gaps identified in the notes taken by the field assistants were filled through discussions between the researcher and field assistants which sought to gain clarity on the general experiences when the researcher collected the completed questionnaires.

1.9.4.6   Measures taken to limit the negative impact of the challenges

A number of measures were taken by the researcher to limit the negative impact of the challenges on the authenticity of the findings of the survey. The researcher ensured that gaps were filled by probing further into key issues. The following approaches were used in this respect:

a. Discussions with the field assistants

As noted above the researcher conducted discussions with field assistants at the end of each field assignment. Field assistants shared their experiences, which helped to either

add substantive information to the findings on paper or clarify the extent to which data were collected from the field. Though without 100% accuracy, discussions helped to fill gaps in terms of reliability of the findings from the survey and interviews.

b. Use of literature Review

While a significant literature review was already conducted in the earlier stages of the study, during the field work specific literature review was conducted to understand the extent to which the findings from the survey and interviews tally with what other researchers and practitioners have discovered in the past, particularly in terms of the extent to which IKS drive health seeking practices of grassroots communities in South Africa. In light of this measure it should be noted that the findings presented from the survey and interviews do also reflect findings of other researchers such as Cocks & Møller (2002) and Peltzer, Mngqundaniso & Petros (2006).

1.9.4.7 *Reliability and validity of the results from the survey*

The researcher noted that the challenges outlined above posed some limitations in terms of producing valid findings from the survey. Shaeffer and Lamm define validity as "the degree to which a measure or scale truly reflects phenomenon under study" and "reliability refers to the extent to which a measure provides consistent results" (Schaefer & Lamm 1992: 40). Certain measures were taken to strengthen the reliability and validity of the findings. There are also facts about the nature of this study and the characteristics related to the individuals who directly participated in the survey as respondents, which confirm that limitations may not have any significant impact on the entire study. This is further elaborated below:

c. Level of confidence in terms of targeting only 3 local municipalities in the survey

The researcher notes that in terms of *validity* it may be asked as to whether the findings from the study reflect the cumulative situation in all the 231 local municipalities which formed part of the South Africa local government constituency at the time of study; and in terms of *reliability*, whether the findings from the three local municipalities surveyed

would consistently be the same if the researcher surveyed a significantly large number of the municipalities. These may be questions of debate based on varying opinions.

The researcher argues that in strict empirical terms, the *validity* and *reliability* of the findings can be understood as concerning only the local municipalities, which were surveyed.

b. Validity and reliability in relation to the qualitative importance of IKS

The researcher argues that due to an extensive reliance on literature review the thesis is mainly qualitative. The survey was conducted to support the findings from the literature review. The added value of the findings from the survey are that, within the context of triangulation analysis for the entire study, they help to emphasize that in spite of the sample size, the appreciation of the IKS is a reality that cannot be ignored in policy development and implementation. In this context the representational factor is considered to be of less importance. What is considered to be of more significance value is that the survey poses as a clear statement of the existence of IKS. In other words, there is a need to consider IKS as an important social aspect in policy development and implementation. As it is the case with any social aspect the degree of importance may vary from context to context. The sample size is therefore providing only the quantitative data whose value is only found in its qualitative interpretation.

c. The survey as a sub-set of information for the entire study

The value of the findings from the survey and interviews was in terms of their additional support to the qualitative analysis conducted in a triangulation fashion. In other words, they were a sub-set of information which was used in this study as an empirical case and not for the overall substantive value of the study. In this context we need to test the findings at the level of their solidness as case studies.

d. Consistency in pattern of findings

The findings in Chapter 7 indicate that the inclusion and appreciation of IKS is consistent in all the three local municipalities where the survey and the interviews were conducted. This makes the conclusions related to these findings to be reliable within the confines of the studied local municipalities.

Mathematically, the equation below is illustrative:

If '*a*' = a contributing factor and
'*x*' = a cumulative factor drawn from a repeated occurrence of '*a*',
The more the occurrence of '*a*' the stronger '*x*' *is achieved*.

In our context about the survey and the interviews at the three local municipalities, '*a*' would represent a sub-set of findings from each municipality, while '*x*' would represent cumulative conclusions drawn from adding the sub-sets of findings from all the three local municipalities. Thus if any observation of sub-sets of findings made in any one of the three local municipalities is also made in the other two local municipalities the cumulative conclusion would be stronger than if such observation was made only in one local municipality.

In light of this, the report of my findings presented in Chapter 7 shows that each local municipality studied provided a significant indication that the local communities and their leaders – both traditional and local municipality leaders – appreciate and include IKS in their informal activities. In other words, having been made in one of the local municipalities, this same observation has also been made in the other two local municipalities. In light of the equation above, this has made the fact of appreciation and inclusion of IKS a stronger reality for consideration in policy development and implementation.

I therefore conclude that the three local municipalities have made a common and cumulative statement that IKS has significance in policy development and implementation.

This statement can further act as a provocation for considering the importance of IKS in the policy making and implementation for all other local municipalities within South Africa. Though figures of observations in the appreciation and inclusion of IKS would vary from local municipality to local municipality, the fact would remain that a common statement exists from the three local municipalities – and the fact that such a statement is a common one means that it is such a strong statement that should not be ignored by all other local municipalities which have not participated in the survey and interviews. The way each of the local municipalities, which did not participate in the survey and the interviews, respond to such statement will depend on their choice of policy decision.

e. <u>Level of confidence in terms of characteristic similarities between the surveyed population groups and the general South African population context</u>

Since the cases were intended to support the entire study - the study which concerns the entire country - the researcher took time to study literature about similarities of the tribes from the ethnic group which forms the majority of the South African population and also formed a respondent population group for the survey, the Bantu people[16].

Scholarly analysis of the similarities of these communities does not however, provide straightforward answers. Bantu people and communities are not homogenous. The difficulty to provide a distinct picture about the cultural and socio-economic uniqueness of the Bantu is exacerbated by that these communities did not have written records of their history. By the time their history started entering into written records their traditions had already passed through many changes influenced by the loss of some of their leaders, or by encountering new communities, or by adapting to different natural conditions. What is generally presented by scholars as their original characteristics may only tell part and a superficial story. Oliver puts it,

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[16]. Note needs to be taken that, in South Africa, the term Bantu was used by white minority during apartheid as a sign of arrogance to black people.

For the period AD 1000 to 1600 … the availability of collections of oral traditions are not particularly helpful, not only because they have not been systematically gathered or scientifically analysed, but also because in general this period lies beyond the limits of their effectiveness. For a few areas, most notably amongst the Tswana and the Cape Nguni, genealogies do stretch back twenty generations and more, and their beginnings relate to the period before 1600. But the mere existence of chiefly genealogies unfortunately tells us little of the history of the period beyond the simple fact of the simple fact of an alleged continuous link between the contemporary population and its ruling group so many generations back. Nor can we always be certain that the links between generations are as straight forward as would appear in royal genealogies; many are product of contemporary interest and associations (Oliver 1977: 598).

The gaps in recording the comprehensive picture about the common original characteristics of the Bantu people (and other African ethnic groups) are also reinforced by the fact that by the time written records started to be compiled some of the leaders – and families – may have already lost their power. New leaders and families could have brought new systems and traditions different from the past ones. Each change of this nature could have led to diversity in the new traditions and social systems. Oliver relates to this point as he asserts that,

Perhaps an even more important limiting factor is that while, on the whole, the traditions of the people who were important in the nineteenth century, when traditional evidence was first recorded by a number of gifted amateurs, have received a fair amount of attention, people who may well have been of far greater significance in the earlier times had by then already lost their political power and were therefore largely ignored. Very often it is only the odd fragment which points to the earlier role of these submerged groups. The very terms we use to the people of South Africa – Sotho – Tswana and Nguni – obscure the crucial question which we are concerned to ask about this period: What were

the processes of migration, absorption and local evolution which gave rise to the homogenous cultural blocs of people which exist today? (Oliver 1977: 598).

Furthermore, changes in the traditions of the Bantu people were influenced by their encounter of other ethnic and racial groups. Notably, the Bantu ethnic groups interacted with the indigenous groups of the Southern Africa such as the Hottentots or the Khoi. Though the Bantu groups seemed to have stronger political influence over these people, there were also cultural traits which the Bantu assimilated from the Hottentots. For example, linguists and anthropologists have attributed the "click consonants" in some of the South African languages as to have emanated from their encounter with the Hottentots (Doke 1951: 35). Through these changes differences among these people are found, not in terms of social – economic and political lifestyles and practices, but also in terms of the evolutions of languages. Languages scholars have indicated both similarities and variations in the languages of these ethnic groups. Variations in languages are found in the form of "literacy form" and/or "dialects" (Doke 1951: 21). Some of the variations are not found in the form of spoken language per se. They are, rather, in the form of "literary and education medium". Doke cites the Northern and Southern Sotho as the language whose distinctions are pronounced through "literary and education medium" (Doke, 1951: 21).

Further influences, which came from the colonial intrusions, have given an escalating change in cultural and social practices. The closer the Bantu community is to the modern times the more their original cultural traits are difficult to trace and the more their cultural practices are as diverse as the geographical places and socials settings in which they are settled. This is further explained by the migration, which in the modern times has been exacerbated by urbanization. Analysing the changes in the social systems of the Bantu communities in the Central Africa back in 1954 Godfrey and Monica Wilson (1954: 2 – 14) inform us that the changes in the social and cultural systems of the Bantu have been influenced by four forms of social changes namely:

- The changes in the economic systems: While the primitive economic systems of these communities were oriented to local sufficiency through agriculture, subsistence pastoralism and production of crafts, the new economic systems are "part of a world organisation. … Foreign cloth and foreign hoes have now become necessities of life for the majority of the African population"
- Political changes: Mainly in the form of changes from the laws applied to small groups to laws applying to larger groups beyond the groups clustering around the traditional leaders;
- Technical and scientific changes: This is mainly in the form of changes from the "parochial and unspecialized" technical expertise to "techniques applied to more durable materials" accompanied by recording of observations and experiences in the form of written texts. Modernity could present this as consolidated by its educational systems; and
- Religious Changes: This entailed the shift from the communal allegiance to religious deity of the "ancestral or other spirits" to allegiance to the universal deity in the form of God, Allah and so on.

Notwithstanding this reality, some authors have attempted to present characteristics of the Bantu people. The distinctiveness of the characteristics, as presented by these authors, is shady in the sense that these characteristics could also be similar to the ones of the early traditions of ethnic groups other than the Bantu.

For example, in her book written in 1961, Monica Hunter (1961) gives detailed characteristics of the Bantu communities while simultaneously acknowledging of the changes taking place in the traditions due to outside forces. Hunter (1961) presents the structure of the bantu communes as comprised of, among other facets, great house (inkundla); store of a great house; right hand wife; rafter of a great house; store hut of right hand wife; rafter of right hand wife; cattle kraal; kraal for calves; and store house of rafter. The household did not have meal hours and children had to wait for their parents to give them food – they could not take and eat on their own.

Men would have more than one wife and each one of the wives had to acknowledge allegiance to the ancestral spirits of their husband's family. Their economic life was largely defined by ownership of cattle and their traditional technics of preventing pests and diseases. Animals such as cattle were ridden with superstitious beliefs. For example Hunter describes superstitions about cattle saying:

> Calves are closed with a herb *intolwane* lest they should cross the spoor of a woman with umlaza and become ill. After death or miscarriage in the *umzi* the cattle are closed with an infusion of herbs to avert danger. If witchcraft is suspected cattle are specially treated (Hunter 1961: 66).

Other agricultural commodities that defined the economic life of the bantu communities included cultivation of "maize, millet, sorghum, various kinds of pumpkin, and calabashes" (Hunter 1961: 71). Cultivation and growing of these crops was done in such a manner symbolizing the harmony between the economic life and the mythical life of the tribe, clan or household. Hunter states,

> Over the supply of water necessary for growth Pondo [one of the Bantu tribes] have no scientific control – no form of irrigation is used – but an elaborate magical technique has been developed. … Procuring rain in time of drought is normally the business of the chief. Where the district chief is powerful he is appealed to for rain (Hunter 1961: 79).

The economic life of the Bantu also included other aspects such as, incentives to work, hunting and fishing, and arts and craft. Later these were supplemented by working for Europeans. Land ownership is officially in the hands of men (Hunter 1961: 79 – 121).

As noted earlier, the characteristics above as presented above do not perhaps show clearly that these groups were a distinctive group as some of their practices could also be attributed to the early traditions of other ethnic and racial groups. Thus we need to explain further, indicating what makes the Bantu communities distinct from other ethnic groups. In other words, what are the similar characteristics among them that point to their identification as Bantu people? According to Parker and Pfukani,

The word Bantu … is a linguistic term and refers to those people speaking related languages which are distinguished by the division of nouns into classes and by the use of similar prefixes for these nouns and words which with them (1975: 20).

Borrowing from Doke's analysis of language groups it is noted that the Bantu group belongs to the zone of the Nguni, Sotho, Venda, Tsonga, and Inhambane ethnic groups. Doke defines the term zone as "a geographical term applied in a special way to a language area characterized by uniform or similar linguistic phenomenon" (Doke 1951: 20). In his subsequent analyses Doke indicates the groups presented above as belonging to the same zone. Doke further provides an analysis of the sub-groupings within the zone called "clusters" and "groups". According to Doke a Cluster is "…an aggregation of dialects which contribute to, or use, a common literary form" and.

> …the term 'group' indicates an aggregation of languages possessing common salient phonetic and grammatical features, and having a higher degree of mutual understanding, so that members can, without difficulty, converse with one another (Doke 1951: 20 – 21). is

While there are differences in terms of "clusters" and "groups", of different Bantu speaking people of South Africa, there is a common linguistic phenomenon among them. This is in the form of their "zone".

Second, the Bantu groups carry a common theoretical assertion from scholars that they originated from Congo Basin. Parker and Pfukani (1987: 20) inform us that,

> … it is now accepted that they [Bantu people] are basically of Negro stock and originated somewhere within the great Congo Basin. Joseph Greenberg believes that the Bantu homeland was in the region of the Cameroons Mountains and the Cross River Valley, while Malcolm Guthrite believes they originated in the Katanga region, along the watershed of Congo and Zambezi rivers … Both experts base their theories on linguistic evidence an in all probability both contain part of the answer to the mystery. Although debate

continues, many historians now accept Greenberg's theory and believe that the Bantu migrated east and south from Cameroons. But it also appears that the southward movement settled in the Katanga region and after many generations again dispersed.

The second common feature about the Bantu ethnic groups, which were included in the survey, is therefore their origin.

As noted above their languages, their social- economic and political systems have evolved a great deal. Such evolution has also resulted in social economic and political variations that can be accounted for from person to person, from family to family, from geographical setting to geographical setting, and from time to time. Thus their similarities are in terms of the common history they carry, rather than the characteristics they hold in the modern world.

This does not, however, mean that the traditional social practices which formed the main path of their social economic and political life in ancient times have become extinct. Rather, the traditions have become a part of many other forms of social economic and political phenomena. In the context of such a complex social order the Bantu people are able to assimilate practices that had never been part of their social systems, while at the same time other groups are assimilating the social-economic and political values from the Bantu traditions. In other words, the horizon of the Bantu's social-economic and political life has been a terrain of reciprocity between the Bantu and those foreign to their traditions. History behind such reciprocity gives accounts about conquests, mutual assimilations of each other cultures (e.g. through inter marriages) and other structural processes such as political governance. All this is found in various accounts that explain the history of Africa in various forms, which may not worthy exploring here.

In summary, there are common cultural values that are distinctively for Bantu. But the utility and texture of these vary according to the dictates of the modern world, social context in question or social demands at hand.

The distinctiveness of the values is of a complex nature. Within such complexity the only characteristics that remain constant as to define the commonality of the "Bantu" people are the dominant theoretical explanations of their origins being the *Cameroons*, as asserted by Greenberg's theory (in Parker and Pfukani, 1987: 20) and their linguistic zone being the South-Eastern Zone constituting the Nguni, Sotho, Venda, Tsonga and Inhambane language groups (Doke, 1954: 23).

The importance of targeting Bantu Tribes for the survey: Bantu speaking people are those generally known as black people in the modern South Africa. They are known to be in total population of 35,416,164 living in about 8,625,050 households. In other words they are about two thirds of the approximately South African total population of about 52,981,991(Statistics South Africa 2011). With such dominance in population size the researcher understands that the Black (Bantu) population group presents a compelling population size to stand as a major driver of values for policy development. This does not imply losing sight of democratic governance, which aspires to hear from and respect the human and socioeconomic rights of every citizen of the state.

The researcher is of the view that the dominance in population size of the Black (Bantu) ethnic groups in South Africa is just impossible to ignore in any democratic policy agenda. In essence this means that using this population group to investigate the extent to which indigenous knowledge is incorporated in decisions making processes is an appropriate targeting.

Another significant factor related to the Black communities concerns the epidemiological factor of HIV/AIDS itself. In the present instance, the study is not investigating issues about IKS in vacuum. Rather IKS is studied in the context of the efforts of local politicians to make decisions related to addressing HIV/AIDS. Epidemiological analyses show that black communities in South Africa are more affected by the HIV/AIDS than other racial groups. For example a study by the Human Science Research Council in 2012 noted that,

> Black Africans, especially females, continue to be disproportionately affected
> by HIV and AIDS, followed by Coloureds. … It was found that the high HIV

prevalence in the black African population is associated with low prevalence of marriage, low socio-economic status, and other behavioural and social factors that affect this group (HSRC 2012: 110).

In sum, the researcher's view is that the population size of the targeted ethnic group implies an availability of massive evidence of whichever line of observation is to be made on a number of issues. These include the interface between policy processes and citizen participation and specifically the appropriation of IKS in decision-making processes. Further, the necessity to situate the study in this population group is necessitated by the fact that this group experiences more HIV/AIDS prevalence than other population groups in South Africa.[17]

f. Triangulation of tools and data analysis

In addition to the above, the questionnaires were designed in such a manner that data collection on each variable was made from multiple angles. That enabled *triangulation of data analysis.* Compounding consistence in the triangulation resulted in strengthening of confidence in the results. For example data on the appreciation of IKS by local municipality leaders and officials was collected from four angles namely:

- Their interaction with their communities through local structures;
- Their acknowledgement of the roles that traditional leaders and traditional healers play in the local municipality initiatives and programmes;
- Their integration of various IKS aspects into HIV/AIDS initiatives; and
- The nature of their historical belonging to the communities they lead (i.e. Are those places of their birth? Have they stayed in the communities the whole of their lives? And, are they currently living in the communities they lead or work?)

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[17]. By making this assertion the research does intend to ignore the fact that in human history there has been situations where the values of minority groups have dominated policies through oppressive political strategies and behaviors. Rather the researcher is relying on the fact that the country under study (South Africa) is in the historical phase of reasonable democratic governance.

The triangulation was further supported by three sources of data, namely, the three local municipalities. All three local municipalities were examined and analysed from the same tools of triangulations.

1.9.4.8   *Conclusion on validity and reliability of data collected from the survey*

As the arguments above bring us back to the question of the *validity* and *reliability* of the findings from the survey, it is noteworthy that data collected from the survey are valid given the following:

- The findings from the survey are only provided to assert the importance of IKS;
- There is a consistency in the observation made in all the three local municipalities under the survey, and such consistency has implied a strong statement about the importance of including IKS in policy development and implementation;
- The study is qualitative but highly supported by quantitative illustrative information: All findings from the field survey should only serve illustrative to support the findings from the entire qualitative process which in the main, has relied on literature as a source of data and information;
- Discussions between the research and the field workers helped to close some gaps from the fieldwork so as to ensure that findings from the survey and the interviews provide a meaningful support to the entire qualitative study;
- The use of literature review provided additional observations which supported the findings from the survey and interviews to render them a substantive sub-set of information supporting the entire study;
- By understanding and referring to the fact that target respondents in the sampled local municipalities were from a population group which is similar to the population groups which are dominant in the remaining local municipalities, we can conclude that the survey and interviews used a reasonable population group which cannot be ignored in policy processes. This is further enforced by the fact that the population group in question (black population) has been rated in epidemiological analyses as being more vulnerable to HIV/AIDS than any other population group

in South Africa. In other words though it may be argued that the sample size was not significant to form a representative size for the entire study, the target population group and its HIV/AIDS related epidemiological factors are enough to justify that the survey and interviews have a representational significance on issues related to influencing policy decisions; and

- By triangulating the design of tools and data analysis we have managed to strengthen the confidence in the results.

1.9.4.9   Data Analysis

Critical analysis of each questionnaire was made to find a pattern of responses, which compound into solid arguments. Such arguments were then presented in a form of generalized statements supported by examples and statistical information which only sought to confirm the solidness of such generalised statements.

The researcher did not use any computer based analysis package apart from the excel package. It was deemed use of excel package would be enough considering the simplicity of the data research tools and data collected. Logical congruency was therefore used in as much as the researcher's observation of common and related patterns of information would bring substantive points to fore.

Thus data analysis was conducted largely by using logical analysis and not statistical analysis. Rational co-relations of different responses which compounded to solid arguments formed objective conclusions for each questionnaire or parameter of analysis.
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1.10   WORK PLAN

In line with the broad areas presented above the process towards developing the thesis for the Doctor of Philosophy in Sociology started in July 2006. While the original plan was to complete this study within a period of 36 months, it was noted that the need to probe into every variable attached to the study was so overwhelming that the allocated time was not enough and the study was conducted in about 96 months.

This time allowed for an exhaustive analysis of each variable and no argument was left. The following are stages that were followed in conducting the study:

1. Developing a research plan;
2. Developing and submiting proposal to the Department of Sociology, University of South Africa;
3. Discussing the research process and terms and methods of supervision with the supervisor of the thesis;
4. Conducting preliminary literature study and write up key findings from literature;
5. Developing field research tools and plan;
6. Discussing the field research tools and plan with the supervisor;
7. Recruiting field assistants;
8. Identifying, selecting and communicating with key informants;
9. Undertaking the field survey;
10. Drafting the research report;
11. Discussing the research report with the supervisor;
12. Finalising research report;
13. Submiting research report to the University of South Africa;

1.11   ORIGIN OF THE STUDY

The study emanated from the researcher's own interest in the subject of IKS and governance in the context of HIV/AIDS interventions.

Further, the study was influenced by the researcher's reading of various literature sources on the subject of HIV/AIDS in the context of the leadership of local municipalities. As this study focuses on the institutional interest and commitment in addressing HIV/AIDS, the reader is informed that the study poses as an extension of the researcher's interest in the engagement of institutions with the epidemic, which he demonstrated during his Master of Social Science (Sociology) degree about 17 years ago.

For his Master's Degree in Social Science (Sociology), the researcher studied the engagement of religious institutions with the epidemic.

1.12   THE FOCUS OF THIS STUDY CHAPTER BY CHAPTER

The approach followed in this study comprised literature review, field survey and interviews, and reflections on insights and information drawn from the literature review and the field survey and interviews. The chapters have followed the stages: First, defining various terms and issues which form the theoretical variables attached to the study; second, critiquing various terms, issues and policies that have seemed to dominate the field under study; third, providing a report constructed from the primary data collected from the field work; fourth, making critical arguments informed by literature and guided by what has been discovered from literature study and the field survey and interviews; and fifth, making final conclusions which seek to summarise the findings from the study and share suggestions for future studies that could complement this study. Thus the chapters have been distributed as follows:

In Chapter 1 I have provided the general literature review of the study covering the understanding of the subject being studied namely HIV/AIDS. I have looked at different conceptual and practical issues related to the disease and related issues of political and civil society commitment to address it. I have also reflected on these issues in relation to IKS. The first chapter has also provided a problem statement presented alongside the assumptions of the current state of how local government leaders and officials engage with their communities in addressing HIV/AIDS. The problem statement and the assumptions presented have brought to fore views of what the researcher sees as the current situation and what he perceives as the ideal approach of engaging with local communities in addressing HIV/AIDS. The chapter has also highlighted the focus of the study so as to inform the reader the limits of analysis that the researcher has put into consideration in the process of undertaking the study. This has been followed by an explanation of the aim of the study; and the theoretical frameworks, the hypothesis, and the main questions being pursued.

The methodology employed in undertaking this study; the general structure of the work plan followed during the study; and an explanation of the origin of the study have formed the last three sections of Chapter 1 leading us to Chapter 2.

Chapter 2 has covered a sketchy description of the evolution of the concept of governance. It has also significantly covered explanations and definitions of various terms related to governance and development. These terms have been given such a significant attention with the understanding that decision-making related to IKS in addressing HIV/AIDS fall within the ambit of political governance and its related social and economic development policies and approaches. Like many other concepts, the concept of governance may be understood from different angles. These depend on the historical evolution of both definitions and world events which have influenced changes in the understanding and definitions of the term. It is, therefore, imperative to provide some analysis and explanations so that the reader understands the core perspective used in this study as compared to other perspectives.

Given the reality that HIV/AIDS is generally understood to be a disease, rather than an ordinary human condition, Chapter 3 has brought to light sociological perspectives about disease. I have reflected on these perspectives in light of some of the theoretical social ideas, issues and concepts related to HIV/AIDS and disease in general. The sociological perspectives have conclusively been interpreted in line with the main sociological perspective which is in line with IKS, namely, *relativism*. Thus the chapter has been used to highlight the main theoretical perspective which has guided the philosophical reflection in justifying the relationship of various conclusions being made with IKS. The explanation of these terms in this chapter has been of paramount importance so as streamline the sociological philosophy that underpins this study as it relates to HIV/AIDS. By doing so, the reader is helped to situate the study in the sociological perspective in question, *relativism*, with no or limited doubt or confusion as to how such perspective compares with other sociological perspectives about disease.

It is impossible to talk about the inclusion of IKS in policy development, analysis and implementation without talking about public participation in these processes. This is because for IKS to be incorporated, protagonists of IKS need to be involved in these processes and provide appropriate information and guidance about IKS. The concept of citizen participation has therefore been introduced in Chapter 4. Here I have attempted to answer the question of the extent to which policy development, analysis and implementation in the history of South Africa from the time of apartheid has sought to incorporate citizen participation. This history has been presented in the form of comparisons between the apartheid and the democratic eras of South Africa. Thus the reflection about public participation in chapter four has been given an extensive space in order to sift the core trends and meanings and show that in the context of the South African history such a concept is of significant nature. Public participation is the core channel for inclusion of IKS in decision-making processes. It is therefore critical that the reader is assisted to understand the concept comprehensively.

The aim to understand the extent of citizen participation in policy development has continued to Chapter 5. The chapter looks at citizen participation at the local municipality level as a channel for the inclusion of IKS in developing and implementing concrete policy documents. IDPs have been used as a primary example of such documents. Thus in Chapter 5 I have selected and analysed IDPs of about one third of the South African local municipalities. Noting that the incorporation of IKS through citizen participation can be done either consciously or unconsciously, in this chapter the concepts of *tacit* and *explicit* knowledge have been introduced. Thus from this point I have shown the reader that this study understands IKS in both *tacit* and *explicit* forms.

Further, in Chapter 5 I have discussed relationship between the creation of space for explicit and tacit knowledge and good governance and relativism. It has been found important to do this here because in Chapter 5 the two terms, tacit and explicit knowledge, have been introduced for the first time and from this chapter these terms have been extensively used in the study.

Thus it was found important to examine their relationship with good governance and relativism since good governance and relativism form key institutional structural concepts of analysis in this study.

The introduction of the concepts of *tacit* and *explicit* IKS in Chapter 5 prompted me to analyse various approaches used to address HIV/AIDS presented in the studied IDPs in order to understand whether such approaches have the potential to allow citizens to provide their IKS for policy development and implementation through *tacit* and *explicit* means. In Chapter 6 the main approaches in addressing HIV/AIDS discussed in Chapter 5 have been analysed by answering the question of whether they have the potential to create room for citizens to contribute IKS in policy development and implementation. In this chapter I have also analysed different forms of participation incorporated in the development process so as to understand their potential for creating room for the incorporation of *tacit* and/or *explicit* IKS in the policy development and implementation.

The effort to investigate the extent of application of IKS in concrete policy development and implementation by the local municipality leaders and officials has further been deepened through the survey and interviews conducted in three local municipalities (Umtshezi in KwaZulu Natal, Elias Motsoaledi in Limpopo, and Bushbuckridge in Mpumalanga). In Chapter 7 I have provided a report of the findings from the survey and the interviews. The report has brought to light various structures and processes through which IKS is attained by the local municipality leaders and officials and used for policy implementation. The survey has revealed that while there is limited incorporation of IKS in policy documents such as the IDPs, concrete experience shows that local municipality leaders and officials appropriate IKS in their policy implementations processes, yet the local municipality leaders and officials do not make effort to include the IKS in formal policy documents such as the IDPs.

Chapter 8 has endeavoured to understand why the local municipality leaders and officials are not able to incorporate IKS in formal policy documents such as IDPs.

Chapter 8 brings to fore major discoveries about why the inclusion of IKS in policy documents such as the IDPs is limited in spite of the prevailing informal appreciation and inclusion of the IKS in the policy implementation processes undertaken by the local municipality leaders and officials. In this way, the chapter has formed a core statement of my arguments about the power dynamics and limiting factors that exist between the leaders and officials at the local municipality level, on the one hand, and the leaders and officials at the provincial and national tiers of government on the other. In essence, Chapter 8 forms a critical statement of what the major findings of this study are.

Chapter 9 is the final chapter. It sought to bring the reader back to key points discussed in all the preceding chapters. Chapter 9 is therefore a conclusive summary of the entire study and brings the reader to the closure of this study.

CHAPTER 2

GOVERNANCE AND CITIZEN PARTICIPATION: CENTRAL DEFINING TERMS RELEVANT TO THIS STUDY

2.1.   INTRODUCTION

In this chapter focus is on providing a broader picture of governance and citizen participation18 in line with central terms forming the main areas of this study. Explanation of the two key terms, namely, IKS and HIV/AIDS is given.

Like many other concepts, the concept of 'governance' may be understood from different angles. Some of these angles depend on the historical evolution of both definitions and world events which have influenced changes in the understanding and definitions of the term. It is has therefore been found to be imperative to provide some analysis and explanations so that the reader understands the core perspective used in this study as compared to other perspectives.

I also show the relationship between governance and citizen participation in ways that support the significance of IKS in policy development and implementation.

Firstly, reflection is on the term "Indigenous Knowledge Systems" (IKS). Views about IKS by different theorists on the term and its relevance to human social and economic life are discussed.

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[18]. Citizen participation in this study relates to the involvement of community members and their traditional leaders in decision making and implementation processes by government authorities. Though it may have the potential to enhance democratic participation in bureaucratic systems, such participation can be limited by factors such as communal power dynamics, cultural systems, individual motives, and access to means of participation. The term "participation" in this study should therefore be understood with a strong cognizance of these limitations. Further, in Section 7.6 it has been argued that participation can be structured in different forms some of which undermine the notion of popular democracy. Examples include: functional participation when participation is driven by goals defined by external institutions; participation by material incentives when communities only contribute their resources without decision making powers, participation by consultants, when communities are consulted only to answer certain questions from external institutions; passive participation, when communities are only told what has been decided by external institutions; and manipulative participation when representatives of communities have no decision making powers though mandated by their communities. (cf: Section 7.6. below).

This is followed by the probe into the sociological meanings of the word "disease". This is done with the understanding that HIV/AIDS, which is one of the main subjects in this study, is generally understood as a disease. This has taken me further to studying specifically HIV/AIDS in line with the orthodox position which understands HIV, the human immunodeficiency virus, as the cause of AIDS.

The researcher went further to study theoretical socio-political settings in which the practice of addressing problems related to HIV/AIDS takes place namely governance and social development. Here my concern was to show the relationship between governance and citizen participation in decisions making and implementation processes. This is paramount to the subject about IKS in policy development and implementation for HIV/AIDS programmes. This is so because issues of indigenous people in decision-making processes are seen in this study as falling under the general question of citizen contribution in decision making and implementation.

Addressing HIV/AIDS by government and political leaders falls under their role as social and economic development agents. Hence I found it necessary to study the term "development". This is in line with one of the aims of this study, which is concerned with the powers and functions of the local government that provides space for their response to the issues of HIV/AIDS and also the powers and functions that provide space for the integration of IKS into policy development and implementation processes.

The last part of the chapter looks at how the terms reflected upon relate to one another. This is done with the intention of emphasising the point that in human experience and practice, there is a symbiotic relationship between these terms.

2.2. INDIGENOUS KNOWLEDGE SYSTEMS: WHAT IT IS AND ITS PLACE IN THIS STUDY

In this section focus is on defining the term 'Indigenous Knowledge Systems'. As noted above the abbreviation "IKS" will be used. I provide views presented by different theorists

as to how the term "IKS" is understood and its relevance to human social and economic life.

Consistent reflection of the term gradually provides clarity about its relevance to human life. By the end of the study there is a comprehensive understanding of the term.

2.2.1. The recognition of IKS as an important social phenomenon

Amid socio-political and economic challenges of our time, scholars of IKS have argued that the failure of the exogenous knowledge – generally the Western Knowledge - to meet human aspirations to self-development and protection against life-threatening evils of society accounts for the need to recognize the value of IKS in the mainstream operations of human life. Utilization of IKS in the contemporary social and economic issues has been so recognsable that various institutions have been established to protect and tap on the IKS across the world. These include, The International Consortium for Indigenous Knowledge, founded at the Pennysylvania State University in 1995; the International Centre for Indigenous Knowledge for Agriculture and Rural Development (CIKARD) based at the Iowa State University; The Commonwealth Centre for Indigenous Knowledge to focuses on the communities of the Commonwealth; Coordinating Body of Indigenous People's Organisation of the Amazon Basin (COICA) found in Lima, Peru in 1984; Continental Commission of Indigenous Nations (CONIC) (Semali & Kincheloe, in Semali & Kincheloe, 1999: 3; and Maurial, Semali & Kincheloe, 1999: 3). Furthermore, International organisations such as the World Bank, International Monetary Fund, The United Nation Nations; The International Union for the Conservation of Nature (IUCN) and others have paid significant attention to the subject of Indigenous Knowledge, not only for its utility in the social and economic development processes, but also as part of highlighting and defending the human rights of the local and indigenous communities. The World Bank has a publication entitled "Local Pathways to Global Development". In that volume examples about how indigenous peoples have utilized their local experiences and creativity to deal with their socio-economic and political issues are presented by different authors.

Within the Commonwealth Centre for Indigenous Knowledge, focus has been on amplifying the importance of Indigenous Knowledge, creating opportunities for scholars and development practitioners to appreciate and incorporate IKS in their scientific and professional enterprises. Specific areas of interest within this centre include: validation of indigenous knowledge; developing tools and methodologies to use IKS in intellectual and scientific learning; using IKS as tool enhance understanding of diversity, "interdisciplinary, participatory research and cooperative problem solving"; localizing developing efforts; internationalizing IKS through facilitation of global networks of institutions of higher and their respective students; "identifying and compiling resources"; reinforcing teacher awareness of IKS; training on comparative analysis for IKS against scientific knowledge; linking IKS to Science, Technology and Society Education; and "encouraging interaction between indigenous epistemologies and western epistemologies for the purpose of finding new methods to produce knowledge" (Semali & Kincheloe, in Semali & Kincheloe, 1999: 5).

Within the Indigenous communities themselves promotion of IKS has been linked to social and political reforms of the day. These have sought to re-conceptualize development from desire to promote indigenous knowledge. This is happening in all its facets of human life and society including: politics and policy systems; education systems; agricultural systems; heath and well- being systems; arts and culture; and other systems that form the basis for human existence and livelihood. Semali & Kincheloe inform us that**:**

> The stakes are high, as scholars the world over attempt to bring indigenous knowledge to the academy. Linking it to an educational reform that is part of larger political struggle, advocates for indigenous knowledge delineate the inseparability of academic reform, the reconceptualization of science, and struggle for justice and environmental protection. …In indigenous studies, such as Native American academic programs, emerging new political awareness have been expressed in terms of the existence of a global Fourth World Indigeneity. Proponents of such view claim that Fourth World peoples share the commonality of domination and are constituted by indigenous groups as diverse as the Indians of the Americas, the Innuits and Samis of the Arctic

north, the Moaros of New Zealand, the Koori of Australia, the Karins and Katchins of Burma, the Kurds of Persia, the Bedouins of the African/Middle Eastern desert, many African tribal peoples, and even the Basques and Gaels of contemporary Europe (Semali & Kincheloe, in Semali & Kincheloe 1999: 16).

In this context IKS has been utilized as a tool to stand in solidarity against the oppression of the colonials powers. In light of this, a view is taken that indigenous knowledge itself has been denigrated by forces of colonialism and in part, liberation from colonialism implies freedom to apply indigenous knowledge. Thus,

The denigration of indigenous knowledge cannot be separated from the oppression of indigenous peoples. Indeed, modernist science, anthropology in particular, has been deployed as a weapon against indigenous knowledge (Semali & Kincheloe, in Semali & Kincheloe 1999: 17).

2.2.2. What is IKS?

Effort to amplify indigenous knowledge as indicated above, has been met with the need to clarify what we mean by indigenous knowledge. This becomes more important as we find ourselves grappling with the realities of societal change, which affect indigenous peoples in their localities or places where they have settled through migration. Academic and general reflective debates have attempted to define the terms "Indigenous knowledge" and "Indigenous peoples". These debates show that "Indigenous Knowledge Systems" comprise all the areas that concern socio-political and economic human nature. It is a composition of all the aspects that govern the daily life of human beings:

…technology, social, economic and philosophical learning, or educational, legal and governance systems. It is knowledge relating to the technological, social, institutional, scientific and developmental (Nabudere 2012: 170).

The term "indigenous" as opposed to "exogenous" refers to something whose roots have originated from within the place it is found. Hoppers (2002:1) remarks, "…the word indigenous refers to the roots, something natural or innate". Exogenous refers to something borrowed or intervening into a specific community from other communities.

In the global society, the interaction of people from different backgrounds has probably ushered in some confusion among the academics on the appropriate definition of indigenous people or knowledge. Such people have made themselves citizens of places where their ancestors were not born. They have intermarried with either the local people or people from other backgrounds and reproduced into new generations that are socialised into a mixture of cultural values and practices. Thus the term "Indigenous people"

> …is by no means a clear term. Taken in isolation, it does not do sufficient justice to the complexity and dynamics of intercultural relations between 'indigenous and other peoples. It is nonetheless an important notion. Some academics may find it controversial and ambiguous, but in the political arena it has helped to focus the increasing interest in indigenous societies which could even be said to represent a new dimension in Western thinking about the meaning of culture, human rights and development (van de Fliert 1994: 4).

Some definitions of the indigenous people prefer to isolate such people from the rest of the society, daily experiences and changes emanating from the internal and external forces. The definitions call "indigenous people" the people considering themselves or seen by other social groups as descendants of the ancestors of the localities in question. Indigenous people are considered to have inherited distinct cultural values and practices which are different from the values and practices diffusing into their localities through outside forces. From this perspective, indigenous peoples are inclined to preserve the values and practices they have inherited from their ancestors. In his aspiration to define indigenous people of Americas, Australiasia and Pacific Martinez van de Fliert quotes Cobo as saying,

Indigenous communities, people and nations, are those which having historical continuity, with the pre-invasion and pre-colonial societies that developed on their territories, consider themselves distinct from other sectors of the societies now prevailing in those societies, or parts of them. They form at present non-dominant sectors of society and are determined to preserve, develop and transmit to future generations their ancestral territories and their ethnic identity as the basis of their continued existence as peoples, in accordance with their own cultural patterns, social institutions and legal systems. In short indigenous people are the descendants of the original inhabitants of a territory overcome by conquest or settlement by aliens (van de Fliert 1994: 4).

Van de Fliert further indicates that the definition provided by the World Bank in their operational directive (4.20) still espouses the trend of isolating indigenous people from the daily developments of society, experience and external forces. In this context indigenous peoples are defined as having the following characteristics:

(a) close attachment to ancestral territories and to the natural resources in specific geographical areas; (b) self-identification and identification by others as members of distinct cultural group; (c) an indigenous language often different from the national language; (d) presence of customary social and (e) political institutions and primarily subsistence-oriented production (van de Fliert 1994: 4).

These definitions may be compelling for those who prefer to see indigenous people as stagnantly attached to their ancestral customs and institutions. Terms such as "historical continuity" "distinct from other sectors", "determined to preserve ancestral territories", as in Martinez Cobo's claim above "attachment to ancestral territories," "distinct cultural group" as in the World Bank definition above, attempt to imply that indigenous peoples are those who have closed themselves into a particular set of values and practices and may not be open for any infusion from outside forces or transformation through experience.

According to van de Fliert, the International Labour Organisation (ILO) provides a much shorter and open, but also isolative definition. The ILO calls the indigenous people, the people:

> whose social, cultural and economic conditions distinguish them from other sections of the national community and whose status is regulated wholly or partially by their own customs or traditions or by special laws and regulations (van de Fliert 1994: 4).

Another isolative definition of "Indigenous Knowledge" and probably one that has been distasteful to most of the previously colonized communities, is one that has attempted to define "Indigenous Knowledge" as to imply "Primitive Knowledge".

> The term, indigenous, and thus the concept of indigenous knowledge has often been associated in the Western context with the primitive, the wild, the natural. Such representations have evoked condescension from Western observers and elicited little appreciation for the insight and understanding indigeneity might provide (Semali & Kincheloe, in Semali & Kincheloe 1999: 3).

In general these definitions do not clearly indicate the significance of the dynamic nature of indigenous people through passing times. They do not, for example, indicate that within the indigenous people there are experiences that challenge their prevailing modes of operation and that may necessitate change of patterns of *modus operandi*. This is contrary to the fact that human history from the perspective of evolution will always show that indigenous people have always learnt through practice and experience and their modes of behavior and operations have always changed according to prevailing challenges and experiences. For example,

> For …the millions of indigenous peoples of Africa, Latin America, Asia, and Oceania, indigenous knowledge (or what others have called native ways of knowing) is an every day rationalization that rewards individuals who live in a given locality. In part, to these individuals, indigenous knowledge reflects the dynamic way in which the residents of an area have come to understand

themselves in relationship to their natural environment and how they organize that folk knowledge of flora and founa, cultural beliefs and history to enhance their lives (Semali & Kincheloe, in Semali & Kincheloe 1999: 3).

Thus, in this study indigenousness is not seen as a stagnant mode of social – economic and political life. Rather it is something that changes partly through daily experiences and partly through the infusion of external socio-political forces. In a book entitled *Relations: Indigenous dialogue a New Mexican Native American*, Bob Haozous (2006: 7-8) comments,

> I wondered if the sunset of my ancestors compared to the glorious panorama I was enjoying. No words or painting could have communicated the subtle blending of oranges, pinks, yellows, blues and purples that stretched over Jemez Mountains to the West. What I experienced was mine experience, mine to enjoy, mine to absorb and love. I could easily in idealistic fantasies and pretend that this was the same shared sunset my tribe viewed in the past but I question that pretext. Just as we of today claim to hold the culture of the past, I too could pretend to live and maintain an Apache[19] culture that was thriving over 120 years ago…. Consecutively we must always acknowledge the residual damage to our contemporary indigenous cultural reality and claimed identity. The knowledge we share with our children must focus upon a more meaningful and honest portrait of ourselves. That portrait must include the negative. The Apache people of the past had had entirely different cultural ways than we have today. Our existence was based upon hunting, raiding, warfare, trade and occasional farming and harvesting. In the harsh dessert of the southwest our Apache spirituality and communal laws required a strong relationship to nature and tribe for basic survival. I would be remiss to remind my tribe or family of past tribal deities such as Giver, Monster Slayer, White Painted Woman, the Twins, the Little People or our creations stories without also including more immediate adopted Western concepts that are the

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[19]. Apache is a group of Native American Tribes. Their commonality is traced through language and cultural practices. They are comprised of six sub-tribes and are mostly found in Arizona, New Mexico and Oklahoma.

antithesis of indigenous or Apache beliefs. … Our older ones are all gone and none of our contemporary people experienced the distant times of cultural autonomy. Nor do they understand what a true Apache identity encompassed or what shared cultural responsibilities are required for survival…. Many of us believe that there was and still exists a profound philosophical foundation supporting tribal identity, knowledge and purpose … We have lost the true meaning of being sovereign and indigenous.

The experiences of Bob Haozous confirm that the world is a changing phenomenon. Change happens through the facets that form it. Indigenous Knowledge as one of the facets that form the world is prone to change. Change happens as a result of daily demands, experiences and external infusions. Abdullah and Stringer argue that,

We have recently become more sensitive to the understanding that knowledge does not exist in objective, decontextualized forms, but is intimately linked to specific contexts, people and issues. This understanding is particularly relevant for indigenous people whose systems of knowledge have been subordinated by the forces of colonization that have worked to subvert their social and cultural life (in Semali & Kincheloe 1999: 143).

Alongside this view, proponents of IKS have argued that IKS have:
- Exchange value … that with the support, can be transformed into enterprises and industries; and
- Social, cultural, scientific, philosophical and technological knowledge that can provide the basis for an integrated and inclusive knowledge framework for a [society's] development (Haozous 2006: 7-8)

In addition, theorists argue that IKS "represent major socio-cultural institutions and organizational systems" (Institute of American Indian Arts 2006: 7-8). Human action and interaction in that system are reinforced by that they are part of their ecosystem. Hence ecosystems are consistent feeders of human knowledge.

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IKS is therefore a product of human beings and their ecosystem. This observation is well presented in an introductory statement by Battiste and Henderson (2000) as they mimic Hogan (1998) in their book entitled *Protecting Indigenous Knowledge and Heritage*. They point out:

> The ecologies in which we live are more than settings or places; they are more than homelands or promised homelands. These ecologies do not surround Indigenous peoples; were are an integral part of them and we inherently belong to them. The ecologies are alive with enduring processes of creation itself. As Indigenous peoples, we invest the ecologies with deep respect, and from them we unfold our structure of Indigenous life and thought. … Ecological insight creates our vision of the animate "natural" world. It informs our communion with the land, our wisdom, and the various dimensions of our faith and our hopes. Indigenous order, consciousness, and heritage are shaped and sustained by ecological forces and by the interrelationship of their changing forms. Ecologies are not static or gentle, they are places of eternal and often violent change. Indigenous orders are not singular modes of existence, but are manifested in the diverse ways. We carry the mysteries of our ecologies and their diversity in our oral traditions, in our ceremonies, and in our art; we unite these mysteries in the structure of our languages and our ways of knowing. The forces and aspects of our ecologies are manifest in our stories, which are to us what water is to plant (Hogan 1998: 227, in Battiste and Henderson, 2000: 9).

The susceptibility of Indigenous Knowledge to change is a condition for its response to prevailing issues and experiences at different times and social settings; indeed in different ecological settings. Change of IKS is a definitive result of, not the mind of the human being, but of the ecosystem itself. According to Battiste and Henderson, this assertion is contrary to the Eurocentric view which asserts that "The world is the background against which the mind operates, and knowledge is regarded as information that originates outside humanity" (2000: 23). As different settings bring new issues and demands people are confronted by the need to engender change.

Change of knowledge is based on the fact that it is a tool to dealing with issues from human experience as presented by the prevailing social and ecological contexts, which humans form part of. As such changed knowledge still remains part of the existing ecosystem, its change does not mean that it has lost its meaning of being Indigenous Knowledge. It remains Indigenous Knowledge since it is still being produced by indigenous people and the ecosystem of which humans are part to address social and economic indigenous issues. Thus in this study I aspire to understand the role of Indigenous Knowledge to deal with HIV/AIDS as it is being experienced by indigenous people and as it remains part of their ecosystem.

In other words, I am engaging in a search for HIV/AIDS response using home grown knowledge – the knowledge that is achieved through experiences of local challenges, within the dynamics of the ecosytems. Therefore, this study views Indigenous Knowledge as knowledge of the people who own the problem and its respective ecosystem – but have had their efforts to solve the problem pushed towards the margin due to unsympathetic dominance of Western knowledge and mode of social problem solving. This is what this study means by the term IKS. In short, this study will follow the definition provided by Mbingi (2006) in his training manual about IKS. In his training manual Mbingi states that IKS is:

> The knowledge of the citizens of a specific locality achieved through a mixture of experience, interaction with external forces and inclination to ancestral values and practices (Mbingi 2006: 18).

This means that IKS and the understanding and the response to HIV/AIDS are treated as by-products of cultural, social and the ecosystems at stake. According Mbingi (2006), we can only see what our cultural paradigms allow us to see. In light of the observations above, it can further be argued we can only see that which forms part of our ecosystem. Thus people react to stories and experiences about HIV/AIDS through the behavioral treats imbued in their cultural social and ecosystems.

The way we as species handle AIDS is a measure of our changing times, of our deepest fears, of our varying values and of our collective aspirations. It is impossible to truly understand the role of AIDS in our lives unless we consider the social and cultural context of AIDS-related behavior (Feldman 1990: preface).

Though factors such as fear of death, stigma and discrimination and socio-political response influenced by HIV/AIDS are common to all societies their definitive trend vary from society to society. In addition, "We know that AIDS is a preventable disease and cultural-specific interventions can substantially reduce the future spread of AIDS throughout the world" (Feldman, 1990: 6).

From the Sociological perspective the study will therefore attempt to retranslate the human health and disease connotations of four sociological theories namely, Parson's functionalism theory, conflict theory, labeling theory and social interactionist theory into relativism thereby bringing these theories into the realm of IKS.

2.3. THE DEFINITIVE UNDERSTANDING OF HIV/AIDS IN THIS STUDY

Though HIV/AIDS is one of the most commonly known epidemics of our time it is imperative to provide definitions in order to set the scenario from which the researcher's thoughts emanate.

The orthodox position is that the human immunodeficiency virus (HIV), as the cause of AIDS. As the volume 4 of Health Reference Series edited by Karen Bellenir and Peter Dresser (1995: 6) points out:

After a person is infected with HIV, the virus gradually weakens the disease-fighting immune system of that person. A weakened immune system let's other diseases successfully attack the body. When a person's immune systems is weakened by HIV that his or her body can no longer fight off serious infections and some types of cancer; that person develops AIDS.

General symptoms of AIDS include: fever, diarrhea, weight loss, tiredness, and enlarged lymph gland, persistent skin rashes, and flaky skin. In addition to these symptoms one other symptom specific to women is repeated serious yeast infections of the vagina (Bellenir & Dresser 1995: 6). A person having AIDS may succumb to problems such as pneumonia, cancer, TB and loss of memory.

In terms of how people get infected by HIV the orthodox view is that people get infected through sexual intercourse and using contaminated needles to inject drugs (Bellenir & Dresser 1995: 8-9). Infection to children takes place mostly through mothers and can happen any time between pregnancy and breastfeeding (Human Research Council Survey Report 2004: 21).

The authenticity of the orthodox view about HIV/AIDS is usually challenged by AIDS dissidents. AIDS dissidents are not a specific organized group of people; rather, they are isolated scientists, doctors, journalists, and academicians whose experiences from research, practice, or interaction with other individuals have made them to question the existence of HIV in the way presented by the orthodox view.

In the main, some dissidents say that HIV has never been isolated and studied on its own. So we cannot say that it causes AIDS. Because this study does not intend to go deep into understanding the meaning of HIV/AIDS, I will not dig further into explaining different arguments signifying the antagonism between the orthodox and dissident views. However, I will try to reflect on some of the important issues that have affected the governance of HIV/AIDS from the dissident orientations. First, analysts such Geffen observe that the resistance of the local communities in South Africa to enter into ARV programmes was probably influenced by the denialist behaviour of the South African political leaders when the ARVs were first introduced in the country. Instead of emphasizing on the importance of the ARVs, the policy makers of the time, emphasized on the side-effects.

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For example asked by a BBC reporter, Mark Rolfe in 2000, why he (Mbeki) as the president of the time "deny pregnant women the use of AZT … when there is solid evidence [that] it [AZT] reduces transmission of HIV from mother to child", part of the Mbeki's answer was to say that "What the WHO is warning about – is that if you don't do it properly, you might kill the pregnant mothers because of the toxicity of the drug" (2010: 41).

Geffen further informs us that,

> Mbeki's denialism was often expressed more explicitly behind closed doors, encouraging those faithful to him to carry his message forward. ANC MP Andrew Feinstein recorded Mbeki's exact words in a closed-door party caucus meeting. If we say HIV = Aids then [we] must say [HIV] = drugs. Pharmaceutical companies want to sell drugs which they can't do unless HIV causes Aids. … The Treatment Action Campaign is leading the statements and vitriol against one. They are funded by pharmaceutical companies in the US (2010: 56).

Geffen notes that these closed-door comments were followed by various other public comments symbolizing the deep divide between the orthodox view, mainly advocated by the TAC and the dissident views advocated by the policy makers and others. Thus it is recorded that views similar to those of President Mbeki were repeatedly echoed by the then Minister of Health Dr. Manto Tshabalala – Nsimang "who claimed to be terribly concerned about the ARV side-effects" and Anthony Brink who distributed pamphlets to the public, including at the 2009 South African Aids Conference (2000: 41-42).

While the antagonism between the dissidents and orthodox protagonists was dominating the policy arena, doctors in public and private facilities continued to diagnose people with HIV. Mixed messages in the policy arena meant that those who were diagnosed would go home confused about remedies. Even the policy makers found themselves grappling with the need to provide reliable response.

This confusion may probably explain why African medicine and good nutrition, rather than ARVs were so popular during the time of Dr. Manto Tshabalala-Nsimang as Minister of Health.

Notwithstanding the importance of these views, this study is not designed to follow the dissident and orthodox views in detail. My concern is by and large, about the influence of IKS in addressing HIV/AIDS. This of course comes with the bias towards the orthodox views. Such a bias is an intended one. It is influenced by the understanding that issues and knowledge gained from a study of this nature may not only be useful for one type of disease.

In other words, knowledge gained about political commitment and indigenous systems for HIV/AIDS may also be employed to facilitate political commitment and use of IKS to address other forms of sickness and development issues. HIV/AIDS therefore becomes simply a channel through which wider issues are addressed. Dissident and orthodox views will therefore only be useful where they present us with a space to understand the wider picture about political commitment and IK. Thus they are at par with all other issues that will form part of this discourse – and the succinct explanations about their meaning presented above should suffice to serve this purpose.

2.4. GOOD GOVERNANCE: CITIZEN CONTRIBUTION IN DECISION MAKING AND IMPLEMENTATION

In this section I attempt to show the relationship between governance and citizen participation in policy development and implementation processes. This is paramount to the subject about the importance of the contribution of IKS in policy development and implementation for HIV/AIDS programmes. It is also paramount because issues about contribution of indigenous people in decision-making processes are seen in this study as falling under the general question of citizen contribution in policy development and implementation.

Key to undertaking this exercise is the concept of good governance. I aspire to understand practical connotations of the term "governance" and "good governance" with the hope that such understanding provides a direction on the kind of space indigenous people need to enjoy in policy development and implementation processes.

I started by looking at some historical background of the term 'governance' – how it has been understood in the past, and how its practical connotations have evolved over time. I referred to historical stages of nomadic life, national states, feudalism, territorial states, country states and their accompanying administrative systems and philosophical commentaries about the citizen power and space in decision making and implementation processes.

2.4.1. The evolution of political power systems

Governance takes place in the context of political and bureaucratic power systems. Policies and their implementation for the wellbeing of society therefore take place in the context of bureaucratic and political power systems. According to Thompson and Tunstall, Max Weber describes bureaucratic contexts as follows:

> The members of the administrative staff may be bound to obedience to their superior (or superiors) by custom, by affectual ties, by purely material complex of interests or by ideal (wertrational) motives. Purely material interests and calculations of advantage as a basis for solidarity between the chief and his administrative staff result, in this as in other connections, in a relatively unstable situation. Normally other elements, affectual and ideal, supplement such interests. In certain exceptional temporary cases the former may be alone decisive. In every routine life these relationships, like others, are governed by custom and in addition, material calculation of advantage. But these factors, custom and personal advantage, purely affectual or ideal motives of solidarity, do not, even taken together, form a sufficiently reliable basis for a system of imperative coordination. In addition there is normally a further element, the belief in legitimacy (Thompson & Tunstall 1987: 68).

The political and bureaucratic system described by Weber above, as applied at the local municipality level, is the context in which the level of which space indigenous peoples enjoy in contributing their views about policies and their implementation for HIV/AIDS programmes is interrogated. Here I try to uncover some coarse elucidation about how political power systems have evolved over time. This step is taken simply to ensure that, later in this study, when I refer to political power systems either directly or indirectly, in light of the local municipality policy development and implementation systems, there will be knowledge of what is being talked about.

Kruat states that Aristotle's "politics" teaches that governance is as old as politics itself. In the contemporary United National literature it is said "The concept of "governance" is not new. It is as old as human civilisation." This is primarily because the inclination for human beings to live together has always been there since times immemorial. Aristotle claims that human beings have, at all times, had the inclination not to live separate from each other. The evolution of human communitarian tendencies would show that at first there were households – households came together and formed villages and villages grew to cities (Kruat 2002: 240).

As these developments grew, life presented itself with the questions about the inevitability to live well. People were then confronted with challenges to make choices about what constitutes the ability to live together well, more especially with the need to share resources and power to control time and space. Making social arrangements that would govern people to design their behavior in adherence to the requirements of living well became unavoidable (Kruat 2002: 240). This, is, probably the root of origins of the concept of governance.

In history governance has taken different forms that are determined by the political trends of a particular time in a particular setting. Definitions and meanings of governance have evolved over time in reaction to the historical developments of the day.

An effective analysis to understanding this evolvement can only be possible with a rigor of critical reflection about what has happened in the history of human beings since evolution started.

However, not all history has concrete written accounts. Reality about the earliest ages of human being is hanging behind the theoretical assumptions of historians and evolutionists. These assumptions chiefly present possible lifestyles whose political dynamics were primitive and not as systematic as those of the later stages. So an examination looking at the evolvement of the meaning of governance for such early stages can only give us slapdash assumptions.

As this study is not about the history of governance, such discrepancies do not have to worry us. Neither should we be worried about how these discrepancies will affect this section. In this part of the study the intention is mainly to show that governance as a human feature has history, and that such history points to the fact that protagonists of governance have always designed their governments, policies, and their implementation plans in a varied ways – according to the specific contexts and thinking of time and space; and such different designs have engendered different meanings about the space of ordinary people in decision-making and implementation processes.

Time is taken to look at some different forms governments have taken in history. It is hoped that this will provide some perspectives about governance in the ancient and contemporary times. This, on the whole, is an attempt to convince the reader that in as much as the word "governance" is attached to systems of government in particular places and times we cannot attach only one generic meaning to it. Governance carries as different meanings as history and social settings themselves. Such variations in meanings have determined the extent to which grassroots people have participated in decision-making and implementation processes. This probe has slightly gone deeper as I look at evolution with reference to government administrative systems.

Examples such as the political systems of nomadic societies, national states, feudalistic societies, territorial sovereigns and country states have formed the basis for reference in this quest.

Above all, this is the pursuit to uncover the rational interrelationship between governance and IKS and the search for the space of indigenous people in policy development and implementation. Certain claims in relation to this quest have been made as I conclude this section.

2.4.2. Governance in the Nomadic societies

There are many accounts about the nomadic people. Nomadic life is generally taken as primitive in nature. Nomads tend to move from place to place in order to cater for the needs of their social economic life. It may be naïve to say that because nomads do not stick to one geographical territory they do not have a distinct system of governance. Within their own social systems nomads have forms of leadership, roles and responsibilities of each member of the society – forms of institutional structure and management.

Politically and historically, one of the commonest aspects in the life of nomadic tribes has been the tendency and attempts to conquer and dominate the encountered tribes or communities. As nomadic tribes moved they encountered other tribes – such encounters would result in either war or peaceful infusion into the new communities. If the settling people happened to be more powerful either by way of being skillful in managing communities or by way of militant invasion, they stood a better chance to be rulers over the native communities. Social systems within such settings would clearly show that one tribe is a ruling tribe over another. The ruled tribe would suffer marginalisation in many respects, for example, from receiving low privileges in land distribution to being enslaved.

The pattern of social and political systems in which one tribe becomes ruler over another has dominated politics to the point that even today new systems of governance have, at times, been defined around traditional political systems of those tribes that have been dominating others for years.

Probably one of the most concrete examples explaining this state of development is that of Basarwa people of Botswana. In Botswana the Basarwa people have over the years experienced discrimination, which in the present days has sparked an international outcry by those lobbying for the rights of the indigenous communities. One of the institutional apparatus that has been used to discriminate against the Basarwa is what has been known as Remote Areas Development Programme. The background behind the Remote Areas Development Programme shows that the land where the Basarwa lived had once been appropriated without consideration of their traditional systems. First, for years the Tswana People of the then Bechuanaland had been living in lifestyles that discriminated against the Basarwa by dominating the use of most the land for livestock farming. In his article entitled, *Integrating Basarwa the under Botswana Remote Area Development Programme: Empowerment and Marginalisation*, Boko (2002) highlights a statement quoted from Schapera. Boko states that in the 19th century the land was appropriated by the Tswana ethnic groups without regard for the rights of the Basarwa.[20]

> Under the Tswana model of land tenure, the chief had substantial powers over the control and administration of land. Schapera provides some sense of the centrality of the chief in the Tswana polity. Thus, the Chief, as head of the tribe, occupies a position of unique privilege and authority. He is a symbol of tribal unity, the central figure round whom the tribal life revolves. He is at once the ruler, judge, maker and guardian of the law, repository of wealth, dispenser of gifts, leader in war, priest and magician of the people (Boko 2002: 62).

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[20]. The dominance of Tswana ethnic groups presented here does not imply that it was the government which influenced the dominance. Rather it was the traditional ethnic and traditional leaders that took charge of the dominance.

Second, colonial land appropriation policies defined land division in ways that excluded the Basarwa. Land divisions were defined as *Settlement Land* (this was the land for the colonial settlers); *Tribal Land* (this was the land left for tribal communities largely the Tswana Communities) and *Crown Land*, which was left for communities that were not integrated to new social and political development systems.

Crown Land was therefore the land that was left for the indigenous communities such as the Basarwa to live on. However, researchers have argued that despite the fact that the Basarwa were given the *Crown Land*, their rights were not given any consideration in the prevailing policy reforms under the Bechuanaland Protectorate. Basarwa people lost their space in the land they had been inhabiting for years.

In addition, communities that lived in the *Crown Land* suffered discrimination when the flora and founa regulation started to be enacted at a later stage. While the Tswana Traditional chiefs were consulted when being displaced for conservation of flora and fauna, the Basarwa were removed from the land they had been occupying without consultations. This was further aggravated by the creation of *National Parks* and *Game Reserves* in the land where the Basarwa lived. The Basarwa lost their land and were forced to leave the livestock farming lifestyles, which did not correspond with their traditional lifestyles.

Third, further developments such as those of constitutional reforms of 1961 were designed in ways that corresponded more with the lifestyles of the Tswana people rather than the San people. Land appropriation and use followed patterns that corresponded with the lifestyles of the Tswana communities mainly in the form of permanent settlements, grazing and cultivations and not in the form of indigenous lifestyles such as hunting and gathering. All the *Crown Land* at this stage was declared *State Land*.

When the Tribal Land Act was enacted in 1968, chiefs were given an Exofficio powers in decision-making processes regarding the land. Chieftainship systems were however recognised only among the Tswana Tribes.

The Basarwa were therefore not given any administrative and political powers even at this stage.

Thus as nomadic communities encountered other communities that were more powerful in their governance systems they tended to lose their own traditional, political, and other systems for livelihood such as control of land. In such a context there was a governance system that looked at one tribe as the ruler and another as a subservient tribe.

Sociologists have also indicated that another aspect of nomadic tribes was the fact that division of labor was based on gender. Giddens relates to this aspect as he says, "In hunting and gathering communities … there was a fairly simple division of labor. The most important separation of tasks was between men and women" (Giddens Third Edition: 54). As these communities grew, governance systems social and political systems, which they had started ascribing to also grew and evolved. Subservient tribes would start to accommodate themselves into the mainstream politics. Gaps between the ruling tribes and ruled tribes would start to narrow down slowly until they reached the point where talking about one tribe as ruling and another as subservient was in principal a thing of the past[21]. Sometimes such level of political evolution would be attained through political rivalry by the ruled tribe, to the point of weakening the ruling tribe. Sometimes this would be achieved through general assimilation of cultural and traditional treats between the fusing tribes (Finer, 1999: 2).

2.4.3. Traditional states

As infusion of different tribes grew, people started to develop national consciousness – hence national identity rather than sticking to tribal identities. Burns and Ralph (1974) in Giddens (Third Edition: 52.) attest to this, and say:

> From about 6000 BC onwards we find evidence of larger societies than ever existed before, which contrast in distinct ways with earlier types. These

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[21]. Some would however argue that for the social and political context such as that of the present day Basarwa dominance of one tribe over another is probably not a thing of the past.

societies were based on the development of cities, showed very pronounced inequalities of wealth and power and were associated with the rule of kings or emperors. Because they involved the use of writing and science and art flourished, they are often called *civilizations (*Giddens).

These national identity communities came later to grow as traditional states, which had one leader who mostly was an authoritarian who would pull all the power around himself (Finer, 1999: 3). These states came into existence through "conquest and incorporation of other peoples". Giddens calls these "Traditional States". Examples include the Roman Empire, the Chinese Empire and others that emerged and grew in India, Pakistan, Mexico and Latin America (e.g. Aztecs of Mexican peninsula and Inca of Peru) (Giddens Third Edition 52).

There are three distinctive characteristics of this age. First, there grew some *sophistication* in arrangement of division of labor. Though roles tended to follow gender boundaries, a degree of sophistication and multiplication in the roles attributed to men grew. These included "specialized trades such as those of merchant, courtier, government administrator and soldier" (Giddens Third Edition: 54). Second, there was a *ruling class* with the ruler at their head. While the ruler lived an exclusive upper class and maintained an exclusive higher position, followers within his class enjoyed a special social status. "Slave-owning was a common feature of these societies" (Giddens: 54).

Third, though there were few states built through trade and ruled by the merchants, a great deal was established through "military conquest or involved a substantial build-up of armed forces (McNeill, 1983; Mann, 1986 in Giddens: 55). Giddens stresses:

Traditional states saw the development of professional armies, anticipating modern types of military organization. The Roman army, for example, was highly disciplined and intensively trained body of men, and was the foundation on which the expansion of the Roman Empire was built. We also find in traditional states the beginning of the mechanization of war.

The swords, spears, shields, and the siege equipment carried by the Roman army were manufactured by specialized craftsmen (Giddens Third Edition: 55).

2.4.4. National states

A powerful social and economic development that came to challenge the traditional states was the invention of power other than human to sustain human livelihood. This is the development generally known as Industrial Revolution. It took place in the 19th Century. This is the time that brought new inventions such as machines and electricity. Because of the advanced development of technology, the political systems of this type became more sophisticated. Political systems started to develop mechanism that tended to have a direct impact on the behavior of individuals and communities who lived in self-contained spaces far away from where their leaders lived (Giddens Third Edition: 56). This in essence meant the birth of national states to human history. As Giddens stresses:

> National-states are political communities, divided from each other by clearly delimited borders rather than the vague frontier areas that used to separate traditional states. National states have extensive powers over many aspects of citizens' lives, framing laws that apply to all those living within their borders (Giddens Third Edition: 56).

In line with this development is what is today known as territorial states. Territorial sovereignty as we know it today "was not finally defined till the congress of Vienna in 1815"[22]. At that point boundaries became distinct and people surrounded by these boundaries became distinctively national people. Rational evolvement of territorial political systems left the world with development of what is today known as city-states, generic states, national states and empires[23].

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[22]. The Congress of Vienna was held from November 1814 to June 1815. Its objective was to resolve the issues that had emanated from the conflict of French Revolution Wars during the reign of Napoleon. The main outcome of this congress was the drawing of the political map of Europe (Webster 1950).

[23]. Finer (1999: 6 – 8) defines "City states" "as independent governing units consisting of town or city with a narrow band of dependent territory around it". In reference to generic state, Finer says "When there is no reason to think that a communal self-consciousness exists among the inhabitants of a region, and there is reason to underline this fact, the

With this evolutionary development, countries as we know them now could have started with a territory of the size of city-states, which with the growth of geographical administrative coverage they could have grown into larger units. Expansion in this manner could have moved from the centre to the periphery – expanding slowly to wherever the rulers decided to stop. [24] Decisions to stop could be occasioned by situations and challenges at hand such as failure to sustain logistical muscle in government administration processes or encountering resistance from another territory. Such resistance is called "balance of power" by historians (Finer 1999: 10).

Together with expansions of this kind, governments developed centers used as smaller operation points. These smaller operational points were answerable to the larger central operational points, where the main ruler usually lived. The political nature of these smaller operation points was that their inhabitants could be treated as distinct "political communities".[25]

This style of territorial administration and division is relevant even to some present day government administrative structures. However, the present day territorial national state administrative systems such as those of South Africa have taken a democratic form in which citizens are given space to make contributions in decisions and developments concerning their lives. In such modern administrations systems are organised on the basis of rational democracy primarily controlled by the rule of law.

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state will be called 'generic, or generic-type state. … In terms of Empire's Finer says, "Empires are commonly thought of as having been brought into existence by conquest and with good reason for the term 'empire' carries the implication that an identifiable ethnic or communal group … exert dominion over other ethnic, territorial or communal groups". Lastly Finer sees term "national state as defined by the fact that the inhabitants in a specific territory have a sense of communal belonging.

[24]. As noted in the history of the Scramble of Africa, this theory about territorial development may very much concern the ancient European History and not the Africa History. In Africa partitioning of what we is now known as countries was largely determined by the dynamics of the Scramble for Africa by European Colonizers.

[25]. Finer (1999: 13) defines political communities as "aggregates of humans who are drawn together by the fact that they participate in a common structure and set of processes, however tight or loose the ties may be."

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Further, these systems are organized around major administrative divisions supported by their sub-divisions dubbed as national, provincial and local government and administrative systems. Thus at the lowest level of government systems today in South Africa we have:

Category A: a municipality that has exclusive municipal executive and legislative authority in its area;

Category B: a municipality that shares municipal executive and legislative authority in its area with a category C municipality within whose it falls; and

Category C: a municipality that has municipal executive and legislative authority in an area that includes more than one municipality. (IDASA 2001: 14 – 15)

In the South African Municipal Structures Act, Category A refers to metropolitan areas; category B refers to local municipalities and category C refers to district municipalities (IDASA 2001: 15).

Though the Industrial Revolution made advances in human development, the combination of advanced technology and its resultant creation of mechanisms to control meant that most of the powerful nations, communities and individuals would have had power to control others. Powerful weapons and mechanisms were improvised for the powerful to take the land and local resources of the communities. Thus we see European rulers, traders and other rich nations taking over the lands and determining the living conditions of the indigenous and semi-indigenous communities in Africa (e.g. The Tswanas and Basarwa of Botswana) and other parts of the world.

This means that industrial evolution left local communities devoid of control of their resources and lives. Even after indigenous people have gained their independences the legacy that has been left by European rulers has remained in the social political behaviors of most of indigenous leaders so much so that indigenous people are still struggling to free themselves from the dominance of their rulers.

2.4.5. The place of a citizen in governance

The ancient governance systems were largely designed in such ways that citizens did not have much say on how government resources were run. Such systems came in different forms. Some were simply run by the king who would be in power by virtue of charismatic influence, nobility[26], inheritance or by virtue of being understood as a person chosen by the divine power. Others were run by the council, which would act as an advisory group for the king. In such cases kings would make decisions out of the information they gathered from their councillors. These councillors could be clerks, eunuchs, king's guards, slaves and ministers. In some cases councillors could also act as implementers of the kings decisions. In situations where the political system of this nature gave absolute power to the king, the king would follow the advice of the councillors only out of his own choice. He had the right to make decisions contrary to what his councillors have advised him to do. But where the councilors were seen as having strong influence on the citizens, the king's decisions would always have to be compatible with the opinion of the councillors.

As long as absolute power was to be attained through nobility, feudalism would not be avoided. Finer (1999: 49) relates to us how this was the case in the medieval period:

> A paradigm model of this nobiliar polity would reveal a number of equally powerful magnates each possessing his own power – resources – in lands, clientele and wealth – in his own local territory. He controls the lives of the persons living in his area … The local peasants and the like are 'his' clientele and he both exploits them and protects them from other lords.

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[26]. According to Finer (1999: 47) nobility was attained either by lineage or by acquiring status by serving the monarch.

A more advanced system of government was one that the leadership understood the importance of accountability to the people and/or inclusion of all, if not a handful group of people, within the specific territory in the decision-making processes. Aristotle's philosophy informs us that:

> It would be unjust … for any individual or group – even the best one – to rule alone and thereby oppress others. If the few, however good, rule then most people will be dishonoured because they will have no opportunity to rule; if one person alone rules it is even worse (Blythe, 1992: 20).

Aristotle's sense of inclusiveness revolved around specific social qualities that had to be achieved before the pursuit for inclusiveness is declared valid. He sets limits in the qualities that are relevant for political power. Blythe (1992: 20) asks: "What qualities [according to Aristotle], are relevant for political power?" And he answers:

> Aristotle mentions nobility, wealth, freedom, justice, virtue and number. In any one of the simple constitutions, the class embodying one of these attributes will dominate and therefore the best constitution must be mixed. An equitable balance of elements, Aristotle writes, preserves the city.[27]

In this form of administration need for accountability may come from the fact that the mandate of the leadership had been attained through the power of the people by virtue of elections or general popular support. "In practice this means periodic renewal of its (government's) mandate by such processes as elections and the like" (Finer 1999: 42-43).

In the ancient times the systems that gave power to the people in this manner would not however be equated to the democracies of our time. As seen in the Aristotle's thinking above, the definition of 'people' was limited. For example in

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[27]. As we shall see later in this section, Aristotle believed that decisions have to be made in the assembly where citizens of society participate to contribute their views.

Athens every adult male citizen had the right to vote and speak, but this franchise excluded women, metics (foreign settlers) and slaves. In the more democratic of the Italian medieval city republics – Florence, for instance – the proportion of what the French Revolution was to style the 'active citizens' was only about 3-4 per cent of the adult male citizens. In some societies … the active and the passive citizenry are distinguished by the amount of property they own (Finer 1999: 54).

Nowadays we are talking of totalitarian regimes. Contrary to the ancient absolute power regimes, the current totalitarian regimes do not use only individuals as drivers of political processes of the country. They also use the powerful machinery of what they call official political parties. Masses of citizens are indoctrinated to believe in the political agenda of the official political party. In these political systems the power of the powerful is manipulated to act and behave in a way that is in line with the beliefs of the official political party. Anyone not ascribing to the beliefs of the official political party is seen as deviating from the normal direction for the development of the wellbeing of all citizens in the territory in question (Finer 1999: 58).

If a totalitarian regime transforms to the point of accommodating the views of other parties – the parties that do not necessarily have to ascribe to the beliefs and agenda of the official party - we start talking about democratic regime. Decisions are made by virtue of parliamentarian debates – hence in democracy we talk of "Parliamentarianism".

Parliamentarianism … is a regime in which the government, in order to come to and stay in power, must enjoy the confidence of the legislature. Since these are systems in which decisions are made according to majority rule, it follows that no government under parliamentarism will exist that does not enjoy the support of a majority (Cheibub: 2002).

Some national states have however been designed in a way that leaves all the power in the hands of the president.

In those states the governance style has been to have one party, that stands as the only party of the country and each citizen of the country is automatically taken as a member of the party. Citizens are indoctrinated to follow the teaching of the only existing party. Opposing views are treated as diversion from the publicly accepted direction for the country. From a critical point of view such governance has been referred to as totalitarian. While they praise themselves as democratic, analysts are treating them as totalitarian.

In this respect we have the totalitarian African governments of between 1960s and 1990s including: Uganda (Idi Amin); Ghana (Kwameh Nkrumah); Zaire (Mabutu Sese Seko); Malawi (Kamuzu Banda); Zambia (Kenneth Kaunda) – and the latest in Southern Africa – Zimbabwe (Robert Mugabe). In his article, Human Rights Actors and Institutions in Africa, John Akokpari (2008: 1) summarizes the deplorability of post-independence African governments:

> The need to foster development and meet popular post-independence expectations led to the further deterioration of human rights standards and the atrophy of fragile governance structures bequeathed by a century of European colonialism. This resulted from the establishment of one-party systems, military regimes, and various brands of one-man dictatorships under leaders such as Idi Amin of Uganda, Kwameh Krumah of Ghana, and Mabutu Sese Seko of Zaire (now the Democratic Republic of Congo) that marked Africa's immediate post-independence years. In countries such as Ghana, Mali, Guinea and Tanzania, socialist or quasi-socialist regimes were established, which concentrated power in the executive but which were used to suppress dissent and alternative views to the reigning ideologies. In these countries, the imperative to promote collective rights led to restrictions on individual rights.

2.4.6. People's power

In his theory about the ideal city Aristotle (in Kraut, 2002: 226) points out that decision-making processes need to take place in the assembly. The assembly does not involve only the leaders of the government, but also the people.

The assembly is opened and closed by the herald. It was therefore Aristotle's view that ordinary people would have to meet together and influence decisions of the government.

In this insight Aristotle is convinced that all citizens have the capability to make decisions towards certain goals of the community. He believes that even though some people may have more formal education in disciplines, such as mathematics than others, the capability to contribute in decision-making processes belongs to every citizen as long as the citizen adheres to certain ethical virtues and has practical wisdom. For Aristotle the only exception in participating in decision-making process should be that one's mind must not be impaired and that must not be a woman, a child, an elderly person, or a slave (Kraut 2002: 226).

Remarking on disagreements among citizens in decision making processes, Aristotle claims that, because people have partial perspectives and self-love, they are prone to disagree. Self-love and partial perspectives also meet with complexity of issues. Complex issues are those issues for which there is no single best solution (Kraut 2002: 230). However, during disagreements people must search for solutions that represent the common interests of citizens in question.

These views do point to the fact that participation of majority of citizens in decision-making processes is not a new concept. Without having to go into any painstaking discourse it may make sense to argue that the need for participation in decision-making processes by different social groups has probably been the cause for conflict in some societies since times immemorial. Throughout the trajectory of human history, human beings have resisted dominance of one group or individual over others.

Rationalisation around such resistance has resulted in theoretical thinking about the best way of inclusiveness in decision-making processes. Such theoretical thinking has evolved over time.

Today the question of inclusiveness in decision-making processes becomes imperative, among others, for the indigenous people.

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Accordingly, this study attempts to look at the current context in appropriating IKS in policy decision-making processes. My brief reflection about the history of government administrations systems above tells us that principles of allowing people to participate in decision-making and implementation process have not always been embraced by governments. Even at theoretical or philosophical level as we notice in the views of Aristotle, bringing people into decision- making processes has always been viewed with some bias.

But this study is about contemporary times. It concerns the indigenous people of modern times. So we need to have a close look at what the concept of good governance as it is understood by the theorists of our time. This is what I have attempted to do in the next sub-section.

2.4.7. Contemporary views about governance

The most contemporary view about governance is probably one highly advocated for by the United Nations. This view defines governance as meaning "the process of decision-making and the process by which decisions are implemented (or not implemented)." Looking at governance from this angle there is a general agreement that governance is not only applicable to political decisions processes, but also other bodies that form institutional arrangements. Thus we talk of "corporate governance, international governance, national governance and local governance" (www.gdrc.org).

Governance is about systematic exchanges of power, resources and ideas between people and institutions. It is about the dealings between those entrusted to drive decision-making processes and those earmarked to benefit from decisions made. Dynamics within decision-making processes may be informal and/or formal.

Since governance is the process of decision-making and the process by which decisions are implemented, an analysis of governance focuses on the formal and informal actors involved in decision-making and implementing the decisions made and the formal and informal structures that have been set in place to arrive at and implement the decision.

Government is one of the actors in governance. Other actors involved in governance vary depending on the level of government that is under discussion. In rural areas, for example, other actors may include influential land lords, associations of peasant farmers, cooperatives, NGOs, research institutes, religious leaders, finance institutions, political parties, the military etc (www.gdrc.org).

In governance processes decisions made, are influenced by different facets of society and communities in question.

2.4.8. Good governance

Good governance is generally perceived to have "8 characteristics" (www.gdrc.org). These include:

2.4.8.1. Participation

One of the popular views about participation in decision-making processes is one that has been termed as "participatory democracy". Nürnberger (1998: 270) defines "participatory democracy as a system in which people participate in the actual decision-making processes which affect their lives".

Theories about good governance emphasize participation by different social groups, more especially vulnerable groups so that decisions made should take into consideration the needs and concerns of these groups.

Where decisions are translated into action "participation" also means that people are partaking in the activities that concern their lives (Nürnberger 1998: 270).

Proponents for this line of thought also emphasise that participation must be complemented by freedom of association. Freedom of association paves way for the vulnerable groups to make informed contributions in decision-making and implementation processes.

2.4.8.2. Rule of Law

Quashigah and Okafor (1999) stress that:

> In the field of International human rights law, scholars have presented important arguments that democratic[28] norms represent a standard which all governments must observe and that, further, governments which fail to meet such standards should be denounced as illegitimate by the international community (Quashigah & Okafor 1999: 21).

While the rule of law can enforce observation of democratic principles, in a particular setting it can act as a measure for the extent to which democratic principles are being observed – hence the extent to which good governance is observed. The rule of law may therefore have to be in compliance with the views that represent the interests of people. For example when the American High Court banned School segregation in 1954, local newspapers in the United States interpreted this as a move influenced by the popular thinking of the majority of citizens. The Cincinnati Enquirer Newspaper commented "What the justices have done is simply to act as the conscience of the American nation" (Irish & Prothro 1965: 458).

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[28]. As we shall see in the section under "accountability" below good governance and democratic government are twin concepts (Van Gerven 2005: 63-64)

The rural of law designed around the principles of good governance

> …requires fair legal frameworks that are enforced by impartiality. It also requires full protection of human rights, particularly those of minorities [and the vulnerable groups]. Impartial enforcement of laws requires an independent judiciary and an impartial and incorruptible police force (Irish & Prothro 1965: 458).

As Morita, Sachiko and Zaelke put it, the understanding is that the institution that respects a fair rule of law:

> guarantees freedom of access to information, gives right to participate in environmental decision and provides for recourse to judicial and administrative remedies when these rights are denied by state authorities (www.inece.org).

The rule of law may also be a tool for guarding against violation of appropriate channels in making decisions and for the citizens to participate in the decision-making processes and their consequential activities. As Nürnberger comments, when a proper rule of law is in place "No arbitrary decisions are allowed" (Nürnberger 1991: 12). He adds,

> A law which has been passed by legitimate organs of the state is binding on all citizens and can be enforced until it has been changed or abolished. … Those who disagree have to follow the normal channels to make their voices heard or to try and change the law (Nürnberger, 1991: 12).

Rule of law is therefore perceived as an anchor for effective participation in decision-making process by vulnerable social groups. Rule of law provides for a safe environment for the citizens to participate with confidence and without fear and without interfering with the normal order of the society in question.

2.4.8.3. *Transparency*

Decision-making processes become credible when they ensure that information for citizens to contribute their voice is readily accessible in a user-friendly manner.

This is what the contemporary thought about governance means by *transparency*. This however does not mean that citizens must be told the kind of ideas they must contribute. Rather, it means that people must understand channels and supporting mechanisms that are there for their contribution (www.gdrc.org).

Holtz and Havens explain transparency as having two categories namely: financial transparency and governance transparency. They say for financial transparency,

> Companies are required to disclose some financial information, such as earnings and profits, particularly if they are public companies. Other data, such as budgets and reports, may be disclosed if it serves the company's interests. Research has documented relationship between the accuracy of analyst forecasts (for public companies) and financial transparency (2009: 13).

The authors observe that governance transparency implies "exposure of the rules, processes, behaviours that characterize how a company is run" (2009: 14).

Table 3: What is transparency?

As the word itself suggests, transparency is about openness. In terms of democratic governance systems, it is about being able to see what decisions are being made and how they are made, as well as if and how decisions are implemented once they are agreed to. Access to information law is critical to transparency. But transparency is not an end in itself; it is a means to an end. More than anything, transparency is about creating the "political space" for people to defend and exercise their rights.

Without transparency:

citizens are unable to monitor the affairs of their elected representatives;

• decision-making in the legislature, executive or judiciary can be tainted by hidden interests and agendas;

• legislatures do not have the information they need to exercise oversight over the executive; and

• citizens cannot access the information they require to participate effectively in the democratic process.

Transparency is strengthened when:

• critical decision-making fora are open to public and media attendance;

• obligations are placed on political office-bearers to disclose their interests;

• the right of the media to disseminate information on the affairs of government is protected;

• regular, accurate and user-friendly information on government plans, proposals and policies is available and accessible to the public and media;

• the executive has the duty to provide regular, accessible reports on its performance in the public domain;

• there is public access to independent audit reports on government spending; and

• para-statal bodies are subject to account for their performance and fiscal management in the public domain.

Source: IDASA

2.4.8.4.   Responsiveness

The degree of impartiality in decisions and inclusiveness in decision-making processes may explain the degree of good governance in the leadership under consideration. Decision-making ought to take into consideration the needs of all social groups concerned. Decision-making processes need to ensure that all social groups and sub-groups concerned have equal opportunity to contribute their views. This, according to modern schools about governance is one of determinants of the level of good governance in every society (www.gdrc.org).

2.4.8.5.   Consensus Oriented

Having consensus is one of the challenges the world of diversity is facing. Leaders find themselves in the middle of diverse interests, opinions, beliefs and agendas. Making decisions in a way that satisfies every concerned citizen is therefore a challenge. Governance theorists such as Kooiman (2003) would thus claim that:

> Governing diversity means influencing diverse social or natural entities by protecting, maintaining, creating, promoting, or limiting the similarities or dissimilarities of their qualities (Kooiman 2003: 194).

But how does one limit similarities and/or dissimilarities of individuals, communities – social groups whose different unique qualities are so deeply inculcated into their social, psychological and political life? This can probably be answered by relating to the United Nation's understanding of consensus.

Consensus does not mean that the interests of all social groups and individuals are accommodated in the decisions made. Rather, it means that enough synthesis of issues in question has been made by all social groups and individuals concerned and that those who have participated in the decisions-making processes have done so on equal footing with all other groups and individuals concerned – and that all who have participated understand how conclusions have been reached; and that they understand the rationale given for such conclusions though they may not necessarily agree with it.

In the world of diversity, consensus means mean, "…what is in the best interest of the whole community and how this can be achieved" (Kooiman 2003: 194).

2.4.8.6. Equity and inclusiveness

As an aspect of good governance, this in essence means that leadership in a given society has created an environment which makes all its citizens feel that they have a stake in the decisions made and resources available. No group or individual must feel excluded – all groups and individuals, especially the vulnerable ones must have equal opportunities "to improve and maintain their wellbeing" (Kooiman 2003: 194).

2.4.8.7. Effectiveness and efficiency[29]

Efficiency in the production and distribution of goods and services is one of the determinants of good governance. Good production and distribution of goods and services is largely influenced by the way the government uses resources and the extent to which execution of decisions produce results that meet the needs of citizens. It also implies best use of resources in a manner that promotes and ensures sustainability and protection of environment (Kooiman 2003: 194).

2.4.8.8. Accountability

van Gerven (2005: 63-64) claims that:

> Democratic government and good governance are twin concepts: the first refers to the organization of public power in a democratic fashion that is in a way that makes it answerable to the people; the second refers to the exercise of power in the pursuit of public good and justice for all…

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[29]. In Economics efficiency and effectiveness are probably among the most critical terms as they relate to allocation of inputs, critical decisions made and the results that these bring to various stakeholders for the sectors and/or enterprises concerned. We will not go into detail on these issues. In a nutshell, Hardiman and Mulreany (1991: 19) defined "efficiency" from economy perspective as meaning "obtaining the maximum outputs or as achieving the minimum level of inputs for a given level of output. They define "effectiveness as "the extent to which outputs achieve objectives or policy aims".

In a democratic system those at the helm of the executive power must be made politically accountable to the people.

The Institute for Democracy in Southern Africa (IDASA) understands accountability to be an essential aspect of democratic governance. IDASA claims that accountability can be experienced and exercised at different levels: They present the following as examples of the levels at which accountability in democratic systems can be encountered:

When citizens elect a person or party to represent them in parliament (or any political decision-making body), they should be able to hold these leaders accountable for the promises they made at election time. In some countries, there is a right to recall elected representatives if they do not act in accordance with the needs and interests of those who elected them. But in most countries, citizens do not have formal mechanisms to enforce the accountability of their representatives between elections. They do, however, have the power to lobby and protest - and not to re-elect those who have let them down. Elected representatives, in turn, have the right and duty to hold the executive accountable. In many democratic systems, there is a legal obligation on the executive arm of government to explain and justify its decisions and the implementation of these in terms of the responsibilities conferred on it. Legislatures play a critical role in securing accountability when they exercise oversight of government on behalf of citizens. They have the task of making sure that the executive is implementing agreed policies and spending public money raised through taxes. In this way, the executive is accountable to elected politicians – within the legislatures – for fulfilling its functions. Democratic societies may also have – or nurture – a culture of accountability. In this sense, accountability might be understood as part of a broader value system that guides interaction between citizens, between government officials and members of the public seeking assistance or information, between service-providers and beneficiaries, employers and employees and so forth.

For example, where there is a culture of accountability, a government official may make a point of reporting back regularly to a community about progress in establishing a promised health care clinic in their area, even though no law or regulation enforces such communication (www.idasa.org.za).

According to the United Nations (www.gdrc.org), in good governance the rule of law and transparency are key to enforcing accountability. Players both as citizens and leaders need to be accountable to each other. Lines of accountability may be defined by the rule of law. Transparency acts as a catalyst for effective accountability. Transparency opens up channels for citizens and leaders to ensure that each one of them is taking and executing his/her responsibilities in ways that are in the best interest of the general citizenry and in ways that respect the rule of law. Thus accountability, transparency, and rule of law have a symbiotic relationship in good governance.

2.4.9. Good governance and the indigenous people: Concluding Remarks

In theory, the concept of governance is complex and embraces the basic values of the polity of the day. Since ancient times, thinking and designs around government, decision-making and implementation have been found to float around the question of the best form of governance. Ancient philosophers such as Aristotle, had their share in this discourse. Aristotle however represents the ancient school of political thought which was largely selective in defining inclusiveness. For example women, children, and vulnerable groups such as slaves were not seen as social groups that can make any meaningful contribution in decision making processes.

There is strong evidence that while the old schools were selective in defining who should be key role players in decisions making processes, contemporary thought do largely point to all-inclusiveness[30] in decision making processes.

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[30]. Meaning that there is no selective definition of who should be involved in decision making and implementation processes.

The values about inclusiveness in the contemporary thoughts have brought "a clear reduction in the absolute or unconstrained power of those in positions of power" (OECD 2001: 9). Emphasis in these values has been on equality and social wellbeing of citizenry. This in essence entails the general understanding that good governance is that which promotes and sustains the values of equality and social wellbeing of citizenry.

This unique development of theories and designs of governance, as the OECD (2001) puts it, "is perhaps symbolized by the adoption, starting in the Middle of 20th Century, of the Universal Declaration of Human Rights." OEDC (2001) comments that,

> This event can be seen as a landmark of a long voyage, still far from complete, towards the universal and full implementation of governance practices that both limit the arbitrary exercise of power, and in a variety of ways, render decision making throughout society open to questioning (OECD 2001: 9).

The Human Rights Declaration of 1948 asserted the indisputable worth of human dignity and rights, human diversity, freedom and security from any form of abuse, equality and non-discriminatory practices, equal use of structures and systems of justice, freedom of movement, freedom of association, freedom to own property, freedom of thought conscience and religion, right to contribution in any form of government and community social and political activities, right to access to social and well-being services and resources such as health and education.

Despite that we have a long way to go before reaching the realisation of absolute appreciation of the values of equality and social wellbeing of citizenry advocated by this Declaration, we at least, learn that governance is not interpreted as a stand-alone concept. Rather, it is seen as a component within a functional composite of social phenomena. Referring this to its relation to IKS, governance becomes a precipitator for indigenous people to enjoy the use and exercise of their indigenousness, while the indigenous knowledge itself contributes in ensuring that the decision-making responding to the local needs effectively.

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In this nerve we are living in a society whose governance systems have opened a room for indigenous people, to make known to the world about the significance of, not only their existence, but also of their traditional values, beliefs, ideas and resources in engendering decision-making effective for local needs. Thus, in the context of good governance of our time, IKS has a room for not only exposure, but also contribution to the policy decision-making process and their implementation. Governance structures have a role to precipitate contribution of IKS – hence a functional relationship between IKS and governance.

It therefore makes sense to conclude that in the context of good governance systems of our time, IKS have a role to play. An assessment of the extent to which leadership is in line with the principles of good governance should therefore not undermine the question: To what extent does the leadership value and include indigenous people's contribution in decisions-making processes and their relevant implementation? It should not be overlooked to take any score of leadership in light of this question as a contributor to determining the extent to which the leadership in question is in line with principles of good governance.

As I look at this claim in light of the subject of HIV/AIDS decision-making and implementation processes at the local government level, I am compelled, in reference to the principles of good governance, to interrogate the extent to which indigenous people enjoy the space of contributing their knowledge and home grown skills. I am compelled to make this interrogation because the aspects of good governance I have observed above do endorse the validity of involving indigenous people in decision-making processes and their implementation.

Table 4: 1948 Human Rights Declaration: Preamble

Whereas recognition of the inherent dignity and of the equal and inalienable rights of all members of the human family is the foundation of freedom, justice and peace in the world,

Whereas disregard and contempt for human rights have resulted in barbarous acts which have outraged the conscience of mankind, and the advent of a world in which human beings shall enjoy freedom of speech and belief and freedom from fear and want has been proclaimed as the highest aspiration of the common people,

Whereas it is essential, if man is not to be compelled to have recourse, as a last resort, to rebellion against tyranny and oppression, that human rights should be protected by the rule of law,

Whereas it is essential to promote the development of friendly relations between nations,

Whereas the peoples of the United Nations have in the Charter reaffirmed their faith in fundamental human rights, in the dignity and worth of the human person and in the equal rights of men and women and have determined to promote social progress and better standards of life in larger freedom,

Whereas Member States have pledged themselves to achieve, in co-operation with the United Nations, the promotion of universal respect for and observance of human rights and fundamental freedoms,

Whereas a common understanding of these rights and freedoms is of the greatest importance for the full realization of this pledge,

> **Now, Therefore THE GENERAL ASSEMBLY proclaims THIS UNIVERSAL DECLARATION OF HUMAN RIGHTS** as a common standard of achievement for all peoples and all nations, to the end that every individual and every organ of society, keeping this Declaration constantly in mind, shall strive by teaching and education to promote respect for these rights and freedoms and by progressive measures, national and international, to secure their universal and effective recognition and observance, both among the peoples of Member States themselves and among the peoples of territories under their jurisdiction.
>
> *Source: www.un.org[31]*

Thus in the manual designed to train the local communities to make contributions in HIV/AIDS decision and implementation processes the Institute for Democracy in South Africa (IDASA) asserts:

> Tapping into the knowledge, experience and capacity of citizens makes it possible to find solutions that can be owned and implemented by people themselves. The aim is to find solutions that work in terms of the culture and customs of a particular place and group (StrÖm 2005: 3).

The exercise of decision-makers to include indigenous knowledge in the effort to address HIV/AIDS acts as an opportunity to learn more of how IKS can be functional in other developmental processes. In this respect HIV/AIDS serves a functional role of being a medium for learning about the interaction between IKS and good governance. Thus there is a triangular functional relationship of IKS-good governance –HIV/AIDS.

This observation leads to the understanding that decisions and their implementation, within the functional relationship of IKS, good governance, HIV/AIDS may not be an end in themselves. Rather, they are a channel to improving the wellbeing of society. In other words, they form part of tools for development.

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[31]. Here you can also find the articles of the declaration in detail.

Any functional relationship of social variables used to influence positive social, economic and political wellbeing of humanity and the society they live must therefore be treated as a tool contributing towards the development of society.

Since this study emphasizes interrogation of IKS there is need to ask the question: To what extent can the IKS be instrumental to development? To answer this question well, I studied both the concept of development and IKS as two sides of one coin. I attempted to answer the questions: What is the place of IKS in development? Could these two concepts be related in ways that bring meaningful results to the aspirations about social wellbeing of our society? These, are the key points of enquiry in the next few sections.

2.5. DEVELOPMENT AND IKS

In this section the main focus is to discuss some of the ideas that practitioners and theorists in development tend to share in the attempt to define the term "development". Studying the term "development" is in line with the aims and nature of this study: I am concerned about the powers and functions of the local government that provide space for their response to the issues of HIV/AIDS and also the powers and functions that may provide the functional space for integration of IKS into policy development and implementation processes. In South Africa it is known that the local government has a developmental responsibility for its citizens. The study is aligned to the developmental role of the local government.

HIV/AIDS issues are not only about health. They are also about development. This study explains that line of thought at two levels. First, approaches to addressing HIV/AIDS issues are informed by development paradigms. Second, this study is designed around the thinking that ideas drawn from practices and theories about how to address HIV/AIDS can also be useful in addressing any other form of development activity.

Further, as I am concerned about the use of IKS in addressing HIV/AIDS I understand that integration of these knowledge systems is only possible at the point where addressing HIV/AIDS is tuned in a developmental activities nature – that is, development activities which form a vehicle for policy implementation.

There could be many other factors that can be shared in order to justify promotion of better understanding of the term "development" in the discussion of how IKS can be useful in addressing HIV/AIDS at the local municipality level. The validations above should however, suffice in a study whose main concern is issues beyond the term development itself.

In my analysis, the term 'development' was broken into theories and ideas that may help understand where integration of IKS in development and eventually in addressing HIV/AIDS issues may lie. In retrospective, such analysis should also mean that the knowledge gains from applying IKS into the governance processes related to HIV/AIDS will further have a functional influence of how decision makers deal with development processes in general.

The section provides the ideas that practitioners and theorists uncover and adhere to in their effort to guide development practice. In particular, I studied ideas about development as they refer to social and economic growth, change of human social conditions, and inclusion of different social groups. In the midst of these reflections I also provided some critical commentaries that theorists and practitioners bring to fore in order to share the advantages and disadvantages of the prevailing ideas about development. In reflecting further summarised critical remarks that explain where IKS may find space in development and eventually in the efforts that address HIV/AIDS, were provided.

2.5.1. The broad understanding about development

The ideas about the concept of "development" presented in this section and other parts of this study are influenced by the understanding that society may have the inclination to develop initiatives and actions to alleviate the suffering of some members of society. This human behavior is not necessarily driven by the interest to alleviate the suffering of others. It may be driven by self-interest. Adjibolosoo (1999: 17) argues,

> …orthodox economic thinking, theorizing and policy assume the rationality of human behavior. Human beings are viewed as economic agents that act in "reasonable" ways in order to achieve their own interest. …every individual is usually led by an invisible hand to pursue his or her own interests, without necessarily taking into account the needs of others in a conscious manner.

Thus I note that development ideas and practices are based on market systems driven by rational and individualistic goals. These market systems and goals are not rooted in altruistic or moral motives, but the self-interest, of the individuals participating in and driving the development programmes and projects. While bearing this aspect in mind, I have not engaged in critiquing the moral or altruistic nature of development theory, concepts and practices. Rather, I have engaged in a discussion on practical imperatives about the concept of development as presented by different scholars and practitioners.

Monaheng (2000) claims that, broadly, development approaches are divided into two: Growth centred and people centred approaches. In growth centred approaches focus is on the growth of economy on the basis of certain goals. In people-centred approaches focus is on the needs of the people (Monaheng 2000: 124).

To understand whether development is taking place or not we need to be able to make comparisons between the specific economic situations of a particular place with another place or make comparison between different situations of one place at different times. What is crucial in such a comparison is to understand the specific aspects of human social and economic conditions to which change and growth can be attributed.

2.5.2. Evolution of development paradigms

A historical picture about the definitions about development is presented in an article entitled 'Evolving Themes in Rural Development 1950s-2000s' published in 2001 in *Development Policy Review*. Here the authors, Ellis and Biggs (2001: 437-448), provide a trajectory of how development rationalisations and practice have changed over time between 1950s and 2000s. The authors use the theoretical developments in the agriculture sector to illustrate their point.

Ellis and Biggs (2001: 441) point out that in the 1950s, the dominant view was that subsistence farming has very little potential for supplying the resources to the modern world. Thus small farmers had to be considered to be "the very engine of growth and development", meaning small scale farming had to be improved using modern technology and growth strategies (such as using better yielding crops and improved farming methods) to the point where they could be in a position to supply resources to the modern world. The authors assert:

> According to these theories, the subsistence sector possessed negligible prospects for rising productivity or growth, and therefore could play only a passive role in the process of economic development, supplying resources to the modern sector of the economy until the latter eventually expanded to its place. This modern sector was envisaged as containing large-scale 'modern' agriculture (plantations, estates, commercial farms and ranches) in addition to manufacturing industry. … Thus a first 'paradigm shift' in rural development occurred in the early to mid-1960s period, when small-farm agriculture switched to being considered the very engine of growth and development.

By the mid-1970s there were shifts towards policies related to integrated rural development alongside state led credits to the economic role players and green revolution. At that stage there was also some emphasis on ensuring the growth of the economy using urban based economic activities.

In the mid-1980s this was followed by structural adjustments programs accompanied with free markets, retreat of government from business to pave way for the private sector, the growth of the NGOs in taking lead of development issues and emphasis on poverty alleviation. This is also the stage at which emphasis about providing significant space for women in development became one of the paramount issues (Ellis & Biggs 2001: 439).

By the 1990s development models had started receiving a new spate of thinking. This largely involved ideas backing micro-credits, participatory rural appraisal, stakeholder analysis, promotion of rural safety nets, poverty reduction and environmental sustainability. The 2000s have this trajectory taking a further step emphasising good governance, decentralization, refining of participation paradigms, sector-wide approaches and poverty eradication (Ellis & Biggs 2001: 439).

2.5.2.1. *Development as an economic growth and human conditions improvement work*

In the attempt to define development, the BBC Website points out that assessing development is conducted through the measurement of economic and human development in a specific context. The website further points out that the economic and human development measurement can further be divided into development indicators namely: health, industry and education (www.bbc.co.uk). Thus:

> **Health**: Do all the people in a country have access to medical care? What level of healthcare is available - basic or advanced? Is it free or paid for?

> **Industry:** What type of industry predominates? Is it primary, secondary or tertiary industry? [Low Economically Developed countries] tend to focus more on primary industries, such as farming, fishing and mining. Medium Economically Developed Countries tend to focus on secondary industries, such as manufacturing. The most advanced countries tend to focus more on tertiary industries - services businesses, such as banking and information technology.

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Education: Do all the people in a country have access to education? Is it free? What level of education is available (i.e. primary education, secondary education or further/higher education)? (www.bbc.co.uk)

In light of the views above, development is about the kind of services that people in a specific setting are able to access, the conditions in which these services are and the level of their advancement. The examples above provide health and education as these services. To understand development we need to assess these services, interrogating the extent to which they have the potential to improve the life and the welfare of human beings.

Development is also about the kind of activities that people undertake in a specific setting. These activities present themselves in the form of industries. In reference to the BBC's reflection above, it can be argued that experience and research have shown that primary industries are usually the common mode of activity attributed to the low development, secondary industries are attributed to the medium development and tertiary industries are attributed to the advanced development.

A deeper study of development would require interrogating further economic development indicators and human development indicators. According to the BBC Website economic development indicators include: Gross Domestic Product (GDP), Gross National Product (GNP), GNP per capita, inequality of wealth, inflation, unemployment and economic structure. The website refers to the following as human development indicators: Life expectancy, Infant mortality rate, Poverty indices, Access to basic services, Access to healthcare, Risk of disease, Access to education, Literacy rate, Access to technology, Male/female equality, and Government spending priorities (www.bbc.co.uk).

The dichotomy between economic development indicators and human development indicators can be understood as implying that approaches to development may have to focus on economic growth and rating of improvements about certain human conditions.

However, these approaches do not say anything about human empowerment to develop the capabilities that can increase the ability of communities and individuals to address their own problems. Thus in the next sections I examine some of the development approaches and theories that have attempted to address issues pertaining to facilitation and empowerment of grassroots communities to address their needs.

2.5.2.2. *Nature and limits of growth centred approach*

Monaheng states that in growth centred development approaches have been criticised as placing much concern on economic growth and not on the needs of the people though the end result for economic growth is deemed to be change in the condition of people (Monaheng 2000: 124).

Insights from other practitioners and theorists also reveal that economic growth approaches have the tendency to emphasise the markets and use of technology to facilitate and accelerate economic growth (Development Cooperation Forum: Human Security and Future of Development Cooperation: 2002). This, in essence, implies that accumulation of wealth and development of machines to produce wealth become more imperative than improvement of people's abilities and skills to be able to address their own concerns.

Monaheng warns us that economic growth approaches are seen to have the potential of putting poor people in oppressive conditions at the expense of ensuring economic growth. In the same vein, Nancy Birdsall, President of the Centre for Global Development in 2002 at the Development Cooperation Forum Conference, comments:

Let me suggest three ways in which the global economy sustains or worsens unequal opportunities.

- The market works; in the global market game, those without the right training and equipment lose;

- The market fails, in the global economy, negative externalities raise new costs for the vulnerable and compound the risks faced by the already weak and disadvantaged; and

- In the global game, economic power matters more than ever. It is natural for the rich and powerful to design and implement global rules to their own advantage (Development Cooperation Forum: Human Security and Future of Development Cooperation 2002: 68).

Additionally, growth centred approaches have the potential of looking at social economic change only at the macro level. The economic development indicators presented on the BBC website, for example, present a picture in which focus is on numerical representations of goals to be achieved at an aggregate or macro-level and not on individuals and communities. Some development practitioners have claimed that development approaches geared toward macro-achievements have little, if not nothing, to do with uplifting the wellbeing of local poor communities. In this respect Robert E. Rubin, director and chairman of the executive committee of Citigroup Inc. in 2002 at the Development Cooperation Forum Conference commented:

I believe that globalization, the spread of market-based economics and the development and expanded use of technology is the best path for growth. However, these forces also create terrible dislocation for large numbers of people, and these forces do not adequately address, and in some respects may exacerbate, poverty, the failure to achieve broad based sharing growth, environmental degradation, and financial crisis. Thus we must have equally important parallel agenda of programs that do what markets by their nature won't do to specifically address these issues (Development Cooperation Forum: Human Security and Future of Development Cooperation 2002:68).

The stories about structural adjustment programmes and policies, that African governments were engaged in during the 1980s at the influence of their Western counterparts, practically illustrate the quandary attached to the economic growth based

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development approaches. Structural Adjustments were a set of economic policies and programmes influenced by the International Monetary Fund and the World Bank on the Third World Countries. These programmes and policies were designed to promote economic growth, reduce poverty, and eventually assist the Third World countries to reduce borrowing from the Western Countries and be able to repay their debts to these countries (Dasgupta, 1998: 66-136).

The design of Structural Adjustment programmes was macro in nature and had little space in looking at the needs of individuals and grassroots communities. An observation in Malawi on the impact of Structural Adjustment Programmes provides an insight to this effect. In his book entitled *Social Policy in Malawi*, Allast Mwanza argues:

> Malawi Experience with SAPs [Structural Adjustment Policies] is difficult to characterize as success or failure. SAPs have resulted in mixed results with positive developments at macro level and negative impact at more micro level (Mwanza 1999: 20-21).

Citing Cornia et al (1987), Mwanza further argues:

> … Structural Adjustment Programmes completely ignore the social consequences and place undue emphasis on macroeconomic measures with the result that adjustment programmes fail to promote long term objectives of development (Mwanza 1999: 20-21).

Practically, one significant reason why SAPs have been detrimental to the development of poor communities has been the emphasis on expenditure reduction for governments on programmes and projects that aspire to uplift and sustain the well-being of poor individuals and communities. The Malawi example, cited above, further informs us that during the SAP period there had been reduction in social expenditure resulting to an overall reduction in expenditure from the government's budget.

"It is argued that the required reduction in government expenditure has largely been realized by decreasing expenditure for education and health care (Mwanza 1999: 20-21)[32]."

Development definitions that are based on economic growth do not therefore help in defining clearly the stake of local communities in development. As a result these definitions leave no space for defining and understanding possible avenues to include the voice, knowledge and resources of local communities. This in essence, means that these definitions leave no room for indigenous voice, knowledge and resources.

The place of indigenous communities in development should be understood. This will help to understand the level at which their knowledge and resources can be useful in developing their own lives and addressing social issues that impinge upon their progress. In this quest I looked at some insights about community development. This was done with the understanding that indigenous people are a group of people in the specific setting, dealing with their daily social economic needs. In other words, indigenous people are a people of grassroots community. Thus in the next section answers to the question: What is community development? are attempted.

2.5.2.3. What is community development?

Human beings have always been communal animals. They have always lived together in ways that they share roles and responsibilities. Research on the ancient communities shows that hunting and gathering denoted a larger part of economic activities of the time. In these activities individuals and families worked together. Division of roles and responsibilities was paramount at the household level.

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[32]. The irony is that within the development theory as indicated by the BBC above, education and health care form part of human development indicators.

Practitioners, researchers and theorists in development have defined ideas about community development as a series of activities that are undertaken by communities in order to empower and strengthen their own capacities for self-sustaining (Monaheng 2000: 124). The origin of this thinking is attributed to the "poverty relief" programmes that were undertaken in the 1920s and 1930s in Britain, United States and India. After the Second World War, these approaches were transferred to the Third World Countries by the colonial powers. By and large in 1950s these approaches depended on donor funds and thus their failures during the late 1960s "came to be closely associated with the withdrawal of aid" (Monaheng 2000: 126).

Key to this approach has been the emphasis on undertaking social economic activities in an integrated fashion. Integration implies the effort to embrace different facets of social economic life of the communities that may have influence in improving their wellbeing. It also implies that different social groups have a stake in development efforts and therefore must have a part in the execution of those efforts.

Inclusion of local communities is not only intended to have their voices in the relevant decision making processes. It is also an effort aimed at ensuring that the issues addressed in the development programmes are those at the heart of the community's needs. In other words, it is an effort to ensure that the communities for whom the development activities are undertaken are able to say what their needs are and are able to contribute their capabilities in the activities forming the development process. Community development process designed in this way can be seen as an alternative to the Structural Adjustment Programme (SAP).

According to Mohaneng (2000: 127), development agents may not always rely on the communities to define their needs. At times communities may be on the receiving ends of ideas about how their development needs should be addressed. Referring to the Jeppe (1985) Mohaneng calls this "Induced felt needs" (Monaheng 2000: 127-128). He argues,

Due to lack of access to information about outside factors which affect them, local communities may not be able to clearly define their needs. Thus the

necessity could arise for community development workers to help them to clarify these needs and to prioritize them (Monaheng 2000: 127-128*).*

Mohaneng however shares the warning presented in Jeppe's insight:

> … care must be taken to distinguish between needs inducement and manipulation of the people to make them see needs imposed from outside as their own. In the end inducement can only mean that local communities are served with information that will enable them to see the broad picture (Monaheng 2000: 127-128).

Integration of communities in local development programmes is also termed "community participation". As explained above, ideas about community participation are drawn from the principles of participatory democracy. We recall that Nürnberger defines "participatory democracy as a system in which people participate in the actual decision making processes which affect their lives" (Nürnberger 1998: 270).

Considering that community development is not a haphazard process, participation of local communities is also considered to be a methodical process. Monaheng says:

> Participation also implies some form of organization. … Community based organizations (CBOs) are the vehicle through which community participation takes place … These CBOs can take different forms, such as farmers' unions, women's associations, church groups, youth clubs, development committees and project committees … (Monaheng 2000: 127-128).

2.5.3. The relationship between IKS and Development

Historical records show clearly that human beings have in the past used their indigenous knowledge to manage their daily lives.

During the times when humans were largely gatherers and hunters, methods, tools, and equipment used were results of indigenous people's creativity and knowledge they acquired through their daily socialisation and livelihood processes.

In a World Bank publication called Indigenous Knowledge – Local Pathway to Global Development, Benjamin Mkapa, the Tanzanian former president comments:

> In Laetoli, near Olduvai Gorge, Northern Tanzania, paleontologists have found footprints of early hominids, presumably two adults and a child, idealised as father, mother and child. We do not know where the three walkers in the "cradle of mankind" came from, where they went and what their plans were. But it is reasonable to assume that were they capable of speech they would have shared thoughts, ideas, knowledge, while walking along the plain some three and a half million years ago. Ever since humans walked on earth, they have sought more knowledge to feed their families, stay healthy, argue with their neighbors, getting a better understanding of their environment or just have some distraction from an otherwise rather challenging life (World Bank 2004: 1).

Intrusion of outside communities brought new ideas and sometimes these tended to insult the Indigenous Knowledge as primitive.In Africa, for example, the Western settlers who came to colonise the local people influenced their knowledge about how to deal with social and economic issues. These models persisted even after the colonial period and were always propelled by new ideas coming from the West to feed into what the critiques saw as neo-colonialism. In her article entitled "African Indigenous Knowledge Systems (AIK): Implications for the Curriculum" Gloria Emeagwali argues that:

> The fact is that Africa in the 20th century was afflicted by 2 major externally derived economic models of exploitation, namely, the colonial model of exploitation and neo-colonial models aimed at re-colonization. The economic and epistemological or knowledge oriented aspects of those models were aimed at exploitation and mal-development.

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Built into those models were negative and unwholesome presuppositions about race, gender and segregationist policies and discriminatory modes of allocation of space, resources and infrastructure prevailed. Export- oriented growth, monoculture and outward-bound programs for the export of first stage mineral and agricultural extraction were the dominant trends in most parts of the continent (www.africahistory.net).

To illustrate the point of external intrusions further, Mkapa refers to the fact of indigenous knowledge being sub-sided by modern science. He recounts,

As scientists struggle to respond to global challenges, they have increasingly distanced themselves from local ways of solving problems. Local solutions were even discriminated against as hindering progress, outdated, "old wives tales" or simply just unfashionable. As we "modernized" our societies, a "degree" in traditional or Indigenous knowledge was not planned for. Hence, we overlooked its potential as a resource and even further neglected the knowledge that women and men, families and communities had developed themselves for centuries (World Bank 2004: 1).

Arguments from both Mkapa and Emeagwali confirm that despite the influence of outside forces to wipe out IKS, local people have always proven the relevance of indigenous knowledge. They have displayed this relevance as they execute their daily social economic efforts.

Mkapa asserts:

Indigenous Knowledge (IK) is a resource that can help to solve local problems, a resource to help grow more and better food, to maintain healthy lives, to share wealth, to prevent conflict, to manage local affairs, and thus contribute to global solutions. Indigenous Knowledge has contributed to building solidarity in communities affected by globalization and shielded them against some of its negative impacts.

There is not one of the Millennium Development Goals to whose achievement Indigenous knowledge cannot contribute (World Bank 2004: 1).

And Emeagwali comments,

The survival of the informal sector took place against the odds. Its survival is a testimony to the strong capacity for resilience and growth of [African Indigenous Knowledge] AIK which invariably persists not only at the level of material culture and the natural environment but, also fields such as business management, banking and hospitality or service (www.africahistory.net).

Emeagwali further alludes to the point made by Jeffrey Fadiman about South African local business management approaches,

Jeffrey Fadiman points out in South Africa's Black Market (2000) that African business methods include a people- centered approach which places people above the product. In a reversal of western business strategy, personal relationships precede product presentation. He identifies indigenous management strategies which are the result of indigenous commercial value systems and ethics 'refined' over several millennia. Fadiman's text is geared for the business traveler from the West but it is an excellent springboard for in-depth research into IK at the level of management and business administration (www.africahistory.net).

Comments from writers such as Benjamin Mkapa and Emeagwali are further illustrated in the publication by World Bank's publication: *Indigenous Knowledge: Local Pathways to Global Development* (2004). Here examples about how indigenous peoples have utilised their local experiences and creativity to deal with their socio-economic and political issues are presented by different authors. Table 5 below presents some of these insights:

Table 5: Practical Indigenous Knowledge articulation by the local people[33]

Country	Authors	Method of Indigenous Knowledge Systems Appropriation
Zimbabwe	Larson, J and Sibana, H.	A study by Larson, J and Sibana, H. emphasizes that "indigenous technologies must be recognized and integrated in development efforts".
Ghana	Easton, P. (1999)	Using their Indigenous Knowledge a group of young people addressed the problems related to "afforestation, agro-forestry, organic farming, adult education and training by working with local leaders and linking with the institute of adult education, forestry department and international development agencies.
Burkina Faso	Easton, P. (1999)	The Manegbzange association in Burkina Faso initiated an alternative approach to primary schooling and adult education by teaching in the written local Moore Language; they developed a curriculum around agriculture and research in to local cultural dimensions, involved parents in school management and 'local resource people' in classroom learning. The outcomes suggest higher student success rates compared with schools that use French as the only language of instruct ion.
Senegal	Easton, P. (1999)	The development of a locally designed and managed savings and loans network [started in a small locality and are expanding] rapidly to other communities in the region and promotes economic development, women's empowerment, farming and technical skills training programs.

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[33]. World Bank 2004: 65-71

Country	Authors	Method of Indigenous Knowledge Systems Appropriation
Mozambique and Angola	Green, E.C.; Honwana, A.	Angola and Mozambique demonstrate the need for building on indigenous healing practices when helping to reintegrate children into society and suggest partnerships between indigenous healing approaches and donor assisted foreign psychological interventions. Because efforts to address emotional, mental and social needs of children affected by war or ethnic conflict are still in the preliminary stage, study of indigenous healing practices can help develop culturally appropriate approaches to support victims.
Mali	Clemmons, L. and Coulibaly, Y.	The Africare's Child Survival Project in the District of Dioro in the Segou Region of Southern Mali conducted act ion-oriented research to investigate knowledge, attitudes and practices regarding maternal health, pregnancy and child birth, highlighting the need for open dialogues within the community about maternal health, use of culturally relevant methods to educate about pregnancy and recognition of the role of appropriate media (stories, folk song etc.).
Nigeria	Moran, K.	Shaman Pharmaceuticals, Inc. has established a benefit sharing relationship with Nigerian scientific institutions, village communities and traditional healers. The company focuses on more efficient drug discovery and development processes while ensuring benefits … to collaborating countries, cultures and communities. The case demonstrates

Country	Authors	Method of Indigenous Knowledge Systems Appropriation
		how benefits can be derived by linking indigenous medicinal systems with modern medical institutions.
D.R. Congo	Ngula, L.; Khonde, B. Char les, P .; Bazabana, J .-J . (2000)	Sugar cane wine processing in which only elders and women are allowed to participate in D.R. Congo suggests that sometimes Indigenous Knowledge can be strengthened by modern knowledge.
Eritrea	Wolff, P. H. (2002)	The practice of female genital mutilation is common in many African communities and historically, affected women have often approved of it for various reasons. The experience of the Eritrea liberation forces suggests that imposing sanctions against the practice is ineffective as this alienates the communities and drives the practice underground. Working with traditional birth attendants, educating them about inherent health risks have proven to be more appropriate and effective.
Uganda	Rubaihayo, E. B. (2002)	Traditional vegetables grown mostly by women in kitchen or home gardens or collected are part of the staple diet in rural households in many African countries. Policies on household food security, however, do not emphasize their cultivation. Urban and rural consumers would benefit from understanding their impact on health, the local economy and environment.
Ethiopia	Fassil, H . (2003)	A study conducted in Ethiopia aimed to gain insight into the local distribution of knowledge related to traditional health and the uses of various medicinal

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Country	Authors	Method of Indigenous Knowledge Systems Appropriation
		plants among men and women in rural communities. IK is not only residing with the professional traditional healers but also with women who provide the first line of health care to their families. The study calls for a community oriented, multidisciplinary research approach to this subject.
Ghana	Fred-Mensah, B. K.	*Bate Kate* and *Adzina* are institutional mechanisms developed by local communities in the Buem traditional area in Ghana. They represent an indigenous system of trial-by-jury on the Ghana-Togo border with its own procedural, institutional and community dimensions of dispute settlement and conflict resolution. The presence and interventions of community elders with 'supernatural wisdom' and opinions of community members is critical in arbitration and resolution of civil and criminal disputes.

2.6. CONCLUSION

One thing that comes clearly from the section above is that indigenous knowledge is not a stand-alone aspect of human life. Indigenous knowledge is placed in the context where different faculties of life play their roles. It interacts with these different faculties to produce specific benefits for humanity.

Indigenous knowledge thus acts as a contributor to the process and experiences surrounding human beings. In other words, indigenous knowledge plays a role in the social and economic life of human beings.

The aspiration throughout this study is to make this role more explicit and to assert the connotation of this role, in human's efforts to deal with HIV/AIDS within the context of local government systems.

To this extent, this chapter has clarified the higher level rationale of the key concepts that guide the structural systems of the local government and how those rationales provide guidance to understand the relationship between the IKS and the key concepts themselves. Thus, after providing the definition of indigenous knowledge I have gone through the trajectory of defining the concepts of governance and development. At each of these stages I have concluded by answering the questions about how these concepts relate to IKS.

It has been demonstrated that good governance is participatory in nature, hence it stands a chance to create space for the contribution of indigenous knowledge in decision making and implementation processes. This implies also to the concept of development. Development approaches that are participatory in nature have the potential to create space for indigenous knowledge.

Within this path I have also attempted to provide a sketchy meaning of HIV/AIDS. The value of doing so is in nothing, but the fact that appropriate response to HIV/AIDS is a subject for which this study is attempting to bring tangible answers though such answers may be applicable to other cases of social and economic development endeavors.

CHAPTER 3

HEALTH AND DISEASE: RELEVANCE OF SOCIOLOGICAL PERSPECTIVES TO GOVERNANCE AND INDIGENOUS KNOWLEDGE SYSTEMS

3.1.   INTRODUCTION

HIV/AIDS has been seen as a developmental problem, political problem and generally, a social problem.[34] Views about HIV/AIDS as a problem beyond health issues emanate from claims, which assert that disease is, in general, a social problem. In other words, these views have contributed to what sociologists have always claimed about the relationship between disease and human social nature. In this chapter I have examined some sociological views about disease in the attempt to illustrate the relationship between HIV/AIDS, sociological theories, indigenous knowledge, and good governance.

The explanation of these terms is considered to be of paramount importance so as to streamline the sociological philosophy that underpins this study as it relates to HIV/AIDS. By doing so, the reader is helped to situate the study in the sociological perspective in question, *relativism*, with no or limited doubt or confusion as to how such perspective compares with other sociological perspectives about disease.

It will be noted that the relationship between HIV/AIDS, sociological theories, indigenous knowledge, and good governance can be illustrated through reflection of the link between various aspects of good governance and the relativistic nature of sociological perspectives. In particular focus has been on five sociological paradigms namely relativistic views, functionalistic views, conflict views, interactionist views, labeling views, and the relationship between structural functionalism and relativism.

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[34]. The Human Science Research Council of South Africa for example has a research unit focusing on the Social aspects of HIV/AIDS.

This study considers these paradigms to be key to understanding social human behavior as it relates to disease and to indigenous knowledge systems. It is deemed that any human behavior surrounding management of diseases is governed around these paradigms and this may apply also to managements of HIV/AIDS in as far its social aspects are concerned. It is further deemed that dynamics related to these paradigms in the indigenous knowledge context are not similar to those in the modern knowledge context. Thus it becomes inevitable to particularly give them scrutiny related to indigenous knowledge.

All in all, while theorists have looked at these paradigms in an unadorned and parched isolation presently I have looked at how they relate to indigenous knowledge systems and good governance in line with contextual social realities about disease. This is done with the intention not only to give them a form of complex meaning, but also to define their functional relevance in the context of good governance in relation to disease and HIV/AIDS.

I started by reflecting on each sociological perspective in isolation. This was followed by a synthesis of these perspectives so as to define their convergence into one perspective namely, relativism as a bridge to define their relationship to indigenous knowledge systems and resources.

Having understood the relationship between the sociological perspectives and indigenous knowledge I looked at the question of how various aspects of good governance can be used as a conduit to facilitate inclusion of indigenous knowledge systems and resources in light of the underlined sociological perspectives. Before staging down to conclusions I have made some critical remarks indicating how my reflection in this chapter displays the possible compatibility between good governance and inclusion of indigenous knowledge systems in decision-making and their implementation.

3.2.   RELATIVIST VIEWS AND ASSERTIONS

The first recorded ideas about *Relativism* were found in the "famous dictum 'man is the measure of all things' by the Sophist, Protagoras (c490 – 420 BC)" (Baghramian, 2004: 21). Baghramian states that:

> The Persian Wars (490 – 480 BC), in particular, and the political turmoil that ensued, cast doubt over the old certainties and introduced the idea that social and ethical rules which had been construed as unchanging, universal or of divine origin were in fact merely transitory and local. The historian Herodotus (c. 485 – 430 BC) cites the vast array of practices and customs which Greek standards would be seen as abnormal and unacceptable. For instance, marriage between brother and sister was considered natural among the Egyptians and was even prescribed by their religion, while to the Greeks it appeared disgusting and reprehensible. He contends that if any man was asked to name the best laws and customs, he would name his own (2004: 21).

The appreciation of *relativism* in this study is largely based on the understanding that though Indigenous Knowledge has been seen by both academics and practitioners as one of the practical and effective ways to render development and policy implementation sustainable and successful, the ethical justification of the importance of indigenous knowledge need to be rooted in the philosophically arguable theories that are relevantly supporting its existence, validity and nurturing. In this nerve, relativism has been seen to be that theory. As will be discussed in Section 3.8 below, there is also understanding in this study that IKS is related to Durkheim's Structural Functionalism in the sense that both IKS and Structural Functionalism has social structures, cultural norms and values as some of their main components. Relativism is used to modify the theory of Structural Functionalism with the understanding that social structures, cultural norms and values change and vary from context to context even if their carriers remain the same. [35]

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[35] The relationships between relativism, structural functionalism and IKS as they used in this study are explained in section 3.8 below.

In this section Relativism is explained, showing its relation to IKS. This is done in a non-extensive way, but with succinct logical correlation of the two terms. I have avoided going into detail simply for the purpose of avoiding moving away from the path of the study. Further elucidations of the relationships between the two terms are found in the subsequent chapters as they relate to various concepts and lines of discourse constituting this study.

Relativism is a philosophical position, which claims that views have no absolute truth or validity. This claim is paramount in the global relativism, which holds that "everything is relative" and "no one is ever wiser than anyone else". Truth and/or validity therefore are different from individual to individual. Because truth or validity is attached to individuals, relativism seeks to deny "that there are no neutral or transcendent perspectives" (Hales 2011:7).

However, a relative perspective or validity can be agreed upon or commonly owned in the form of what the idea of good governance as observed above defines as "consensus". Thus when a disagreed perspective emerges a common ground can be reached in consideration of how the perspective relate to other prevailing factors. In light of this study a common ground can be reached based on the considerations of how perspectives and validity relative to specific community relate to addressing HIV/AIDS effectively. Thus, relativism can be limited to times when what is seen to be relative can be agreed upon by contesting parties for a common agenda.

In light of this, the current study seeks to deny the notion that "truth is relative to [universal] parameters" but to times, possible worlds and context" (Hales 2011:6).

When applied to the philosophy of norms and ethics, relativism means that specific norms and ethical values and principles are only relevant to specific context whose patterns of behaviour may be informed by specific language and/or cultures. This has made philosophers to classify relativism as moral, aesthetic, social constructionism, and cognitive.

This study seeks to make relativism a development aspect and specifically, a tool to addressing HIV/AIDS in the form of IKS. What is seen as developmentally effective by an outsider in a specific social context may not be seen and validated as developmentally effective by the local citizens indigenous to the context in question.

This line of thought seeks to assert that relativism goes hand in hand with pluralism. Scholars who have reflected on the dichotomy of relativism and pluralism hold that a relativistic view is that which claims that "some true judgments are relatively true". Some true judgments are only true because they relate to a specific context or individual's sense of judgment. For pluralists, "there is more than one property of judgments that makes them true" (Lynch, in Hales 2011: 87). Following this logic, this study holds that true judgment about what is developmentally effective in one context is relative to that context, and may not be relative to other contexts. True judgment of what is developmentally effective differs from context to context. True judgment of what is developmentally effectively is both a relative and pluralistic phenomenon.

Those arguing against relativism are called truth monists or truth absolutists. They see truth as lacking in dynamism. They see truth as static, and argue that there is always one correct view. Differences are based on the fact that our own biases prevent us from seeing things from a different angle. Bias can be influenced by culture as learnt to take things from the angle of significant others we trust. At the apex of absolutists and monists is the emphasis that there is no need to discard the fact that there is absolute truth simply because one wants to accommodate the views of others. In specific terms, as Lynch puts it, truth monists claim that "there is only one property of judgments that makes judgments true"; while pluralists claim that "all judgments, if true are absolutely true". (In, Hale 2011: 87).

My quest to appreciate the significance of IKS as it relates to contribution in the efforts to address HIV/AIDS (and inferentially, developmental problems in general) aspires to influence development policy process that moves away from monistic and absolutistic thinking.

It is argued that there are different properties of judgments of what is developmentally effective. The truth of such judgments rests in what the indigenous citizens has found to be affective based on experience gained from the past and current engagements with the situation in question such as HIV/AIDS. It is argued that all judgments are true only in as much as they relate to specific context, individual and experience such as the indigenous context in relation to the experience about dealing with diseases such as HIV/AIDS.

This further implies that in engaging with people, decision makers and implementers are expected to disposition themselves from their original culture and assume an objective position which enables them to engage with the local citizens according to their indigenous knowledge. This study notes that though some decision makers and implementers may be willing to disposition themselves from their original cultural, their level of willingness to apply the IKS may be tainted by cognitive judgment influenced by their past – hence relativistic from the individual perspective. The study therefore holds that willingness to apply IKS should also be applied in the form of direct participation by indigenous citizens in the decision-making and implementation processes.

As discussed later there are different levels of participation. Some levels may not effectively create room for IKS as others. Additionally, the study understands that IKS may not be of value to influence effective decision-making and implementation just by the virtue of its being IKS. It may be of value because it can bring the lives of people from worse situations to the better ones. Relativist value of IKS must be appreciated with the understanding that its application in decision making and implementation should incorporate "evaluative predicates" (de Sa, in Hales 2011: 102). As explained in Section 3.8 below, IKS may change according to experience and outside forces within the ecosystem of the indigenous people.

Noting that the relativist proposition implies agreement with embracing context, De Sa (in Hales 2011: 105) argues that:

> A context is a particular concrete location – a spatiotemporally centered world
> – in which a sentence might be uttered.

A context has countless features determined by the character of the location. It thus encodes things such as a speaker of the sentence and the time and place in which the sentence is spoken, but also things such the body of the knowledge or standard of taste that are made salient in the conversation that takes place around the centre of the context, and so on. This richness of the context guarantees the availability of features on which the truth of sentence might turn out to depend, and thus supersedes attempts … to isolate tuples of features that are relevant for the truth of sentences.

This study asserts that sentences uttered by individuals; features encountered in specific locations; knowledge and standards adhered to in specific contexts constitute facets of IKS. The propensity of these to define the truth about what can be effective in policy development and implementation, essentially means the propensity of the IKS to define the truth about what can be effective in policy development and implementation. The richness of the context to define what can be effective in policy development and implementation can be determined by its evaluative predicates, which in essence mean the evaluative predicates of the prevailing IKS.

In this study such evaluative predicates are seen to be those directed to addressing the issues of HIV/AIDS. Policy development and implementation is therefore understood to be drawing from IKS for the purpose of addressing issues about HIV/AIDS. This further extends to the general responsibility of the policy development and implementation in addressing disease as an enemy of societal development.

Thus, relating the ideas about relativism to the relationship between sickness and society it is noted that every society defines how the people perceived to be sick in their communities are supposed to be treated.

Societies have also sub-systems of "damages and remedies[36]" in which individuals, relatives, friends, co-workers and medical practitioners define what sickness is and what the healing mechanism for the sickness is (Schaefer & Lamm, 1992: 510-512). This study argues that when perceptions about sickness and how sick people should be treated; and systems and remedies about sickness and their healing mechanisms enter into the policy development and implementation arena, policy makers and implementers should embrace and incorporate their relativistic – IKS nature.

HIV/AIDS has become a universal phenomenon. It also has universal attitudinal and theoretical aspects. These present us with the knowledge that HIV/AIDS is a condition accompanied with stigma and discrimination and that it is a condition that must be cured from those who are already infected and prevented from being transmitted to those who are not infected.

The Western approach to dealing with these attitudinal and theoretical perspectives has always followed the line of physical science, particularly along the line of bio-medical science. Hence provision of antiretroviral medicines (ARVs), voluntary counselling and testing and prevention of mother-to-child transmission (PMTCT) and promotion of disclosure to minimise stigma and discrimination.

In relativist - IKS approach it is assumed that approaches to dealing with the universal attitudinal and theoretical perspectives vary from context to context. Every social setting develops its mechanism of dealing with these aspects. Because such mechanisms are embedded in the daily social life of the communities, they are likely to be more effective than those mechanisms pressed upon them by the foreign agencies.

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[36]. In ordinary language "damages" may be terms as "sicknesses" whereas "remedies" may be termed as "healing mechanisms".

3.3. FUNCTIONALISTIC VIEW ABOUT THE ROLE OF THE SICK PEOPLE IN SOCIETY

In every social context sickness is perceived as posing a challenge to the normal and effective operations of its social systems. This, according to Parsons (in Feldman 1990: 30) is due to the fact that every person in society has a role to play so as to provide day-to-day needs. In functionalistic terms sick people are perceived as deviants who have diverted from the normal workings of society.

In their deviant disposition, sick people are not able to exercise their social responsibilities as they normally should. Hence it is necessary to help them recover so that they can return to their social duties. In addition as the sick themselves perceive their state of illness as "undesirable" they seek to cooperate with those taking the role of helping them to come out of their state of illness.

Thus in relativistic terms every society tends to develop its own mechanism to help the sick to heal so that they may go back to their normal responsibilities in order to fulfill day to day needs and duties for the society to which they belong. I can also be assumed that every society tends to define what the roles of sick people are, the implications of those roles to the normal workings of the society and hence the kind of reaction that must be undertaken in response to the perceived implications.

3.4. CONFLICT VIEW

Referring to the views from Conrad and Schneider (1980), McKinlay and McKinlay (1977) and Zola (1972), Schaefer and Lamm (1992: 513) state that Conflict position holds that "Medicalisation of society" has taken the position of social control[37] by defining what constitutes health and illness. Healing is understood as a formal "regulating mechanism".

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[37]. Social control refers "techniques and strategies for regulating behaviours in order to enforce distinctive norms and values of culture".(Schaefer & Lamm 1992: 513)

In practical terms this has happened through the development of domains of expertise in medicines. Through different expertise the field of medicines is seen to be managed to simplify the complexity of human problems. In this context medical experts are able to examine a wide range of issues such as "sexuality (including homosexuality), old age, anxiety, obesity, child development, alcoholism, and drug addiction".

Medical experts then define the direction of policies, as their views are taken as having authority over the views of an average citizen. Thus "it becomes difficult for common people to join the discussion and to exert influence on decision making" (Schaefer & Lamm 1992: 513).

In addition, medical experts play the role of social control by defining what is acceptable medicine and what is not. Medical practices such as those of chiropractic and midwifery are taken as subordinate in the field of medicine. Physicians are seen as acceptable medical experts. This creates a deliberate scarcity of medical experts and opportunity for the available experts to make profit.[38]

Emanating from these views, it is understood that societies have medical experts as a dominant group with the potential to define the behavior and policy trends about health. From the relativistic view this means that each social setting has its own medical experts who are perceived to be more legitimate than others. The more a category of experts is considered to be legitimate the more it is likely to influence health related policy change and people's behavior toward accessing medical remedies.

This justifies the necessity to investigate the kind of prevailing medical expertise in a particular community and the kind of influence the role players in those expertise are making toward general health related policies of the particular political constituency.

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[38] . Writing in 1992, Schaefer and Lamm note that there are 549 people per physician and 20,000 to 70,000 people per physician in United States and Africa respectively.

In such an investigation it is also worthwhile to make a comparative investigation seeking to understand the level at which the local leadership and citizenry embrace their local medical practices vis-à-vis medical practices brought to them by external actors. Such an investigation helps us to understand the extent to which local medical practices are likely to influence effective policy change as opposed to the foreign practices.

3.5.   INTERACTIONIST VIEW

This position holds that while the physicians have the power to influence trends of medical practices, patients should not be seen as passive actors. Schaefer and Lamm (1992: 515) quote Alonzo (1989) and Zola (1983) as affirming that "…the patient should not always be seen as passive, but instead as an actor who often shows a powerful intent to see the physician".

In their interaction with physicians, patients demonstrate their power of independence through making decisions that may be contrary to the instructions given by physicians. Schaefer and Lamm point out that:

> despite physicians' instructions nearly half of patients stop taking medication long before they should. Some take incorrect dosage on purpose and others never fill their prescriptions. Such noncompliance results in part from the prevalence of self-medication: in our society, many people are accustomed to self-diagnosis and self-treatment (Schaefer & Lamm 1992: 515).

Such trends of behavior denote the independence of patients from physicians. Patients make their own decisions about the kind of remedies they use to overcome their sickness. From relativist perspective, every local community has its own alternative medical and health practices that may replace those methods perceived to be along the line of mainstream practices such as public and private hospitals and clinics.

For example, in Africa alternative remedies from those of physicians may be obtained from local traditional healers.[39] Patients have the tendency to decide whether to consult traditional healers, spiritual leaders or use their home made concoctions learnt from relatives, friends or neighbours.

3.6. LABELLING POSITION: VULNERABILITY OF PEOPLE LIVING WITH HIV

Labeling theorists claim that the state of being "healthy or ill involves certain definitions by significant others." In this view, not only does labeling come from others, but also the sick persons themselves. The state of being sick reshapes the way people see themselves. Thus sickness has connotations that attempt to define what it means to be less than healthy (Schaefer & Lamm 1992: 516).

Labelling theory is well illustrated with issues about stigma, prejudice and discrimination from HIV/AIDS. Schaefer and Lamm observe:

> Once someone is told by a physician that he or she has tested positive for HIV … the person must deal with the possibility that death may not be far away. Immediate and difficult questions must then be faced: should one tell one's family members, one's spouse or loved ones, one's friends, one's co-workers, one's employers. How will each of them respond? (Schaefer & Lamm 1992: 516)

Patterns in the way patients perceive themselves or are perceived by others result in defining patterns of how patients behave or are treated by others. This may also explain the vulnerability of those affected and infected with HIV/AIDS.

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[39]. The term traditional healer here means medical practitioners whose medicines and expertise are culturally attained either through traditional rituals, inheritance, and spiritual revelation or through training from another traditional healer. Thus the term here is used with a connotation opposite to that of Western context. In Western context the term "traditional medicine" refers to medication obtained from the either private or public hospitals. (Schaefer & Lamm, 1992: 531).

Welfare programmes have been understood by labeling theorists as institutionally organized mechanisms which show how patients are perceived by the society (e.g. too helpless to feign for their lives). Welfare programmes have also been seen by labeling theorists as encouraging patients to see themselves as helpless and needing support from others.

Translating this view to relativist approach it is noted that each community setting has its own patterns of perceptions about sick people and particular sicknesses. That is why, for example some sicknesses are associated with taboos in some societies while they are not in other societies. Trends of how people suffering from certain sicknesses or conditions are treated by the community emanate from the way those sicknesses are perceived. Tendencies of how people suffering such sicknesses behave in the society emanate from the way they perceive themselves in their context.

3.7. THE RELATIONSHIPS BETWEEN RELATIVIST, FUNCTIONALIST, CONFLICT AND LABELING POSITIONS AND INDIGENOUS KNOWLEDGE SYSTEMS

In general the four theoretical positions presented above are interrelated. Schaefer and Lamm argue that the interrelationship of these theories is that they all confirm the fact that illness is not only a health, biological and completeness of wellbeing, but also a social issue. For the purpose of this study I have attempted at every step of my theoretical path to show that each theoretical perspective can be interpreted from relativistic angle (Schaefer & Lamm, 1992: 518).

Relativistic interpretation of Parson's functionalism denotes that every society has its own conduct of defining the kind of roles that sick people play or fail to play. In the same vein I have concluded, from the conflict theoretical perspective that each society has its own conducts of interpreting who the dominant medical practitioners are. From the labeling theory it has been noted that each social context has its own perceptions about sick people and the kind of sicknesses they suffer from.

This has been done with the intention of showing how these theoretical perspectives may correspond with the concept of IKS. Definitions about roles that sick people play or fail to play; who the dominant medical practitioners are and meanings about what it means to be sick can be by-products of IKS. Thus there is a correlation between the relativistic interpretation of these approaches and their meaning in light of IKS. In Section 3.8 below, you will see that IKS has also some connection with Durkheim's theory of Structural Functionalism in that both of these concepts have social structures, cultural norms and values as some of their key aspects. This connection of IKS and Durkheim's theory of Structural Functionalism has guided me to view Durkheim's Structural Functionalism as a point of theoretical departure.

However, by noting that social structures, cultural norms and values vary from context to context and by understanding that every context has aspects such human agency and the stimuli from ecosystem, which changes the way people deal with IKS, I have claimed that *relativism* renders itself as a more practical theory. Hence *relativism* is used consistently as a guiding theory for this study, though Durkheim's Structural Functionalism forms a point of theoretical departure.

3.8. DURKHEIM'S STRUCTURAL FUNCTIONALISM AND IT RELEVANCE TO THIS STUDY

This study has used structural functionalism and relativism[40] theories as the main and guiding theories. The background of these theories using key points drawn from scholars such as Ritzer (2014), Giddens (1978), (Hales 2011:7), and Baghramian (2004) have been presented. I have also presented the relationship between Structural Functionalism and IKS. The weaknesses of the theory of Structural Functionalism in terms of its relation to IKS, has also formed part of this section. These weaknesses have lead me to suggesting modifications of the theory by attaching the theory of *relativism* to IKS as applied in this study.

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[40]. As noted above, theories about disease have been briefly studied and integrated in the theory of relativism.

3.8.1. Structural Functionalism

Concerned that Sociology is a discipline that could be seen as stuck in the arena of philosophical analysis, in the late 19th Century Durkheim asserted that Sociology needs to deal with empirical facts. According to Durkheim this shift should imply that a new discipline in the field of science called *Sociology* is born. According to Giddens, Durkheim claimed that,

> Sociology is a science that has just been born. Rather than debating its possibilities abstractly, we should get on with the process of inaugurating concrete sociological studies. Such studies can be applied to the elucidation of traditional philosophical problems, by recasting the latter in a more empirical light (1978: 14).

Durkheim claimed that to study society in such an empirical manner focus must be put on the social facts manifesting themselves in the form of

> social structures and cultural norms and values that are external to, and coercive of, actors. … This means that we must study social facts by acquiring data from outside our own minds through observation and experimentation Ritzer 2014: 77).

Durkheim emphasised on the social dimension of society and not on the individual. He asserted that social facts can be studied scientifically by examining structures and the influence of cultural norms and values. These phenomena cannot be reduced to an individual. According Durkheim the social facts are *sui generis* (unique). Their examples include: legal rules, moral obligations, and social conventions. Language was also seen as a social phenomenon as it can be studied separately through its "logical rules" and as it is external from an individual (Ritzer 2014: 78).

In Durkheim's view, social facts can be categorized as material and non-material. The material ones are those facts that are "easily observable", such as architecture, forms of technology and legal codes. Non-material ones are facts that are not easily observable such as values and norms. Individuals are just "substrates" for non-material social fact. "The form and content are determined by the complex ways of their interactions and not by the individuals" (Ritzer 2014: 79)

Durkheim further asserted that non-material social facts can be categorised into four types namely: morality, collective conscience, collective representation, and social currents.

On morality Durkheim was concerned with what he called the "moral health" of society. He was not necessarily claiming that society has become immoral. Rather, he claimed that focus on self-interests by individuals in society moves them away from the focus on the importance of morality.

This tendency can be reinforced by the freedom of individuals to choose between self-interest instead of following the morality which seeks to bind the society together.

As for the term, collective conscience, Durkheim asserted that though it can be realized through the intermediacy of an individual, it is essentially comprised of

> The totality of beliefs and sentiments common to average citizens of the same society forms a determinate system which has its own life; one may call it the collective or common conscience … It is, thus an entirely different thing from particular consciences, although it can be realized only through them (Durkheim, 1893/1964: 79-80, in Ritzer 2014: 81).

In light of this definition, collective conscience, in Durkheim's mind, forms a component of a particular society. It is "independent and capable of determining other social facts." It can be realised "through individual consciousness".

Primitive societies had stronger collective conscience than modern societies. Hence primitive societies were stronger in "shared understanding, norms and beliefs" than the modern societies (Ritzer 2014: 18).

Understanding that Durkheim's stance was in asserting that society structures and cultural norms and values can be studied, the question is: How does one empirically study collective conscience? Durkheim answered this question by first accepting that "collective conscience is such a broad and amorphous idea". "[I]t is impossible to study directly and must be approached through related material social facts". Thus collective conscience can be studied through collective representations visible in the form of "material symbols such as flags, icons and pictures". Collective presentation can also be depicted through "practices such as rituals" (Ritzer 2014: 81-82).

Durkheim observed that morality, collective conscience and collective representation are not the only forms of social facts that can be studied empirically. He asserted that phenomena that emerge from social interactions such as "enthusiasm, indignation and pity" can also be studied empirically. He called this kind of social facts, *Social currents*.

Durkheim did not present his views in a vacuum. He applied his views to concrete issues of society. More specific of these was the *Division of Labour in Society* (Giddens, 1978: 21 – 33 & Ritzer 2014: 84 -91). He reflected on the trends of division of labour in the primitive societies as compared to the modern society. The complexity of the social facts that can be studied empirically in these contexts was different. This happened due to shifting historical developments in Dukheim's own society. Durkheim was born in 1858 and died in 1917. These were the challenging times in the French and European History (Giddens 1978: 10-11 & Morrison 2006: 148). Ritzer presents the shifting historical developments of the time as follows:

> In France, in Durkheim's day there was widespread feeling of moral crisis. The French Revolution has ushered in a focus on the rights of the individual that expressed itself as an attack on a traditional authority and religious beliefs. This trend continued even after the fall of the revolutionary government. By the

mid-nineteenth century, many people felt that social order was threatened because people thought only about themselves and not about society. In less than 100 years between the French Revolution and Durkheim's maturity, France went through three monarchies, two empires, and three republics. These regimes produced fourteen constitutions. The feeling of moral crisis was brought to a head by Prussia's crushing defeat of France in 1870, which included annexation of Durkheim's birthplace by Prussia. This was followed by the short-lived and violent revolution known as the Paris Commune. Both the defeat and the subsequent revolt were blamed on the problem of rampant individualism (Ritzer 2014: 84).

Durkheim's interest in the morality, collective conscience and collective representation was linked to his concern about the "rampant individualism". Durkheim noted that individualism was the reality of modern society and needed to be tackled (Giddens 1978: 9). The existence of individualism denoted difference with the primitive society. Putting it in a more succinct way:

In simpler societies, people do basically the same thing, such as farming, and they share common experiences, and consequently have common values. In modern society, in contrast, everyone has a different job. When different people are assigned various specialized tasks, they no longer shared common experiences. This diversity undermines the shared moral beliefs that are necessary for a society (Ritzer 2014: 84).

This dichotomous analysis brought Durkheim to the definition of how "social solidarity and social cohesion" present themselves in the simpler primitive societies as opposed to the modern societies. He coined the terms *mechanical* and *organic solidarity* (Morrison 2006: 161-168). While the *mechanical solidarity* relates to the simpler societies, *organic solidarity* relates to the complex modern society. Put simply:

A society characterized by *mechanical solidarity* is unified because all people are generalists. The bond among people is that they are all engaged in similar

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activities and have similar responsibilities. In contrast, a society characterized by organic solidarity is held together by the differences among people, by the fact that all have different tasks and responsibilities (Ritzer 2014: 84).

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In life people need each other because they cannot do everything for themselves. People tend to take narrow responsibilities and because of the multiplicity of human needs for survival they can only survive if they depend on the services provided by others. This state of affair, according to Durkheim, is influenced by what he calls *Dynamic density*. The term dynamic density "refers to the number of people in a society and the amount of interaction that occurs among them". More people result to more "competition for scarce resources, and more interaction means a more intense struggle for survival among the basically similar components of society" (Ritzer 2014: 88). Thus a mechanical and simpler society has less competition and more differentiation resulting in more cooperation under "the same resource base". In the organic and modern society there are intense "solidarity and … individuality" more than the society "characterized by mechanical solidarity". According to Muller, (in Ritzer 2014: 89) this implies that individuality in the modern and organic society is not an "opposite of close bonds but a requirement for them".

Due to the fact that the societies characterised by simpler and mechanic social facts share common moral values, when the values are violated against the offence is felt by everyone in the community. The violation is therefore seen as an offence to the larger community. Thus sanctions in such communities are characterized by *repressive law*. An offender is punished severely because the offender is seen as violating the "collective moral system". On the contrary, in the societies characterized by organic (and modern) solidarity tend to use *restitutive law.* Because of the rampant individualism offenses are seen as only connected to the offender and the offended person or persons. "In such societies, offences are more likely to be seen as committed against a particular individual or segment of society than against the moral system itself" (Ritzer 2014: 89).

In summary, Durkheim argues in The Division of Labour that the form of moral solidarity has changed in modern society, not disappeared. We have new form of solidarity that allows for more interdependence and closer, less competitive

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relations and that produces new form of law based on restitution (Ritzer 2014: 89)

According Giddens:
> Durkheim's conception of functional analysis is closely connected to his attempt to provide criteria for distinguishing social normality from social pathology (1978: 40).

Durkheim made a distinction between what he called normal and pathological societies. He claimed that normal societies can be identified by the fact they have similar characteristics to other societies which are in similar stages as them. Any society that does not comply with this natural pattern may be seen as pathological.

Pathological societies, according to Durkheim, emerge out of three factors. First, lack of *regulations*, which in essence means a lack of moral restraints, may result in people not having a proper concept of what is proper. This can lead to situations where people in the division of labour "cease to feel a common bond with those who work or live around them. This gives rise to *anomie*." (Ritzer 2014: 90).

Second, Durkheim points out that pathological society can result from the "kind of rule that could lead to conflict and isolation and therefore increased anomie." Durkheim calls this state of affair, *forced division of labour*. The third kind of pathological situation of society is one that Durkheim sees as emerging from poor coordination. In organic solidarity good coordination must result in increased

> interdependence of people. If people's specialization does result in increased interdependence but simply in isolation, the division of labour will not result in social solidarity (Ritzer 2014: 91).

According to Durkheim to address the pathological situation of society, we must work on *justice.* Thus he concludes:

The task of the most advanced societies is, then, a work of justice … Just as the idea of lower societies was to create or maintain as intense a common life as possible, in which the individual was absorbed, so our ideal is to make social relations always more equitable, so as to assure the free development of all our socially useful forces (Durkheim, 1893/1964: 387, in Ritzer 2014: 91).

3.8.2. Relevance of Durkheim's Structural Functionalism to this study

Ritzer (1988: 58) states that Structural Functionalism theory had its peak moments in 1940s and 1950s. Soon after this, the theory started to lose popularity with scholars such as Talcott Parsons making effort to refine the theory in response to the criticism of the day. In essence the theory has been criticised as ahistorical. Reference to its evolutionary trends have seen scholars labeling it as "speculative "and influenced by "idealisation" of society marred with lack of appreciation of the processes of social change (Ritzer 1992: 119). These criticisms have led to some scholars claiming that "functionalism as an explanatory theory is dead". Others such as Nicholas Demerath and Richard Peterson (1967), have resorted to mildly positive inclinations pointing out that the theory cannot be treated as irrelevant, but should receive modifications (Ritzer 1992: 93 and Ritzer 2000: 97).

This study does not seek to enter into the debate of endorsing or correcting Durkheim's theory of Structural Functionalism. But it is argued that the theory is relevant to the appreciation of IKS as the core concept of this study. Relevance comes from the fact that Durkheim has presented social structures, cultural norms and values as some of the key aspects of his Structural Functionalism Theory. He asserts that these cannot be reduced to individual, but they are separate and unique *material* (easily observable) and *non-material* (not easily observable) social entities that can be studied empirically. He further asserts that the social structures, cultural norms and values are "independent and capable of determining other social facts" (Ritzer 2014: 18). According to him non-material social structures and cultural norms and values can be categorised as morality, collective conscience, collective representation, and social currents.

The emphasis on social structures, cultural norms and values in Durkheim's theory corresponds with some aspects of IKS as presented in this study. It has been noticed above that the definition of IKS in this study is the following:

The knowledge of the citizens of a specific locality achieved through a mixture of experience, interaction with external forces and inclination to ancestral values and practices (Mbingi 2006: 18).

It is argued that the "inclination to ancestral values and practices" as presented by Mbingi resonates with Durkheim's emphasis on "cultural norms and values" since cultural norms and values are a phenomena which indigenous people (bearers of IKS) inherit from the past generations or ancestors. Beyond incorporation of the cultural norms and values in the definition about IKS by Mbingi above, the concepts of "cultural norms and values" have been extensively used in this study as a component of IKS. For example, in Chapter 1, it is learnt that, indigenous people are considered to have inherited distinct cultural values and practices (van de Fliert 1994: 4). In chapter six the study has presented of male circumcision and virginity testing as among the cultural practices used as a form of IKS to address HIV/AIDS.

In terms of social structures, in chapter seven social structures such as traditional healing forums, house of traditional leaders, and locally established structures such as burial societies, youth structures, moral regenerations structures are all examples of what Durkheim calls "social structures" – and structures such as house of traditional leaders and traditional healers forums carry the cultural feel with them since they are comprised of authorities and values passed on from past generations.

It is then concluded that there is a relationship between IKS, as presented in this study, and Durkheim's Structural Functionalism. Both of these concepts include social structures, cultural norms and values as some of their components, which seek to guide human beings on how to deal with their social realities.

3.8.3. Modifying Durkheim's Structural Functionalism with Relativism and its practical relevance to this study

As observed above, the strength of Durkheim's Structural Functionalism, in line with this study, is that social structures, cultural norms and values can be studied empirically. In this study I agree with this assertion by arguing that, as part of IKS, social structures and cultural norms and values can be studied empirically and appropriated into policy development and implementation. However, there are three weaknesses in Durkheim's assertion, which need to be pointed out. These weaknesses have influenced me to modify the Structural Functionalism Theory so that it fits neatly in the definitive parameters of IKS in this study – hence fitting neatly in the focus and the main arguments made in this study.

The first weakness concerns Durkheim's claim that social structures, cultural norms and values are "independent and capable of determining other social facts" (Ritzer 2014: 18). Durkheim emphasizes this point to the extent of claiming that social structures, cultural norms and values are *absolute* determinants for human behavior – meaning that human beings do not have the capacity to make choices on their own. The choices they make are *absolutely* determined by social structures, cultural norms and values.

I argue that this assertion ignores the importance of human agency – the fact that humans are capable of making and using their choices.

As indigenous peoples interact with their social and economic needs they gain different experiences. They interact with external forces, and also gain different experiences. This is why Mbingi (2006) includes knowledge from *experience* and *external forces* in his definition of IKS above. Through the experiences and external forces humans are able to make choices. For example, in chapter one when I tried to define the Bantu ethnic group in South Africa, I concluded that though there are common cultural values that are distinctively for the Bantu ethnic people, the utility and texture of these, vary according to the dictates of the modern world, social context in question or social demands at hand, which force the indigenous people to make different choices at different time and place.

In addition, in chapter five I have observed that inclusion of IKS in policy development and implementation at the level of tacit knowledge can be within the general processes where people are not proactively cajoled to share their ideas. People contribute their IK spontaneously by responding to prevailing situations and opportunities. In other words, even if they are to use social structures, cultural norms and values, people make choices (human agency) according to *prevailing situations and opportunities.* Thus I argue that Durkheim's theory has undermined the importance of human agency as a component of IKS. One can argue that human agency has the propensity to modify social structures, cultural norms and values on the basis of situations in the particular context.

The second weakness is that Durkheim's Theory of Structural Functionalism does not appreciate the fact there are other factors that can determine human behavior beyond the social structures, cultural values and norms. Following the definition of IKS above, "experience and external forces" can also determine the behavior of human beings and change social structures, and cultural norms and values. In terms of experience, human beings engage with their ecosystems and develop capacities that help them to deal with the challenges and needs in that ecosystem.

For example in chapter two as I tried to explain the relationship between IKS and HIV/AIDS I pointed out that, in this study, I am engaging in a search for HIV/AIDS response using home grown knowledge – the knowledge that is achieved through experiences of local challenges, within the dynamics of the ecosystems. Thus experience emanates from human's engagement with their ecosystem.

In terms of external forces, as humans interact with their ecosystem, the stimuli they receive from other objects within that ecosystem, become an external force that may determine their actions and choices at a particular time and space. This is also depicted in the example about the Bantu ethnic group, discussed in Chapter 1. At that point it was noted that external forces and daily experiences have been one of the critical factors that have influenced change in the Bantu ethnic group's cultural norms, values and practices.

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I therefore hold that "human experience" and influence of "external forces" which are part of each ecosystem should also be studied empirically as part of IKS. Thus, the lack of appreciating the influence of external forces and human experience is another weakness of Durkheim's Structural Functionalism in terms of its relationship with IKS.

The third weakness is that Durkheim does not emphasise the fact that social structures, cultural norms and values vary from context to context. Though social structures, cultural norms and values, which have influenced me to embrace Durkheim's structural functionalism theory, may be part of the IKS, this study understands that social structures, cultural norms and values are prone to change or vary from time to time and place to place, even if their subjects (indigenous people) remain unchanged. Thus the absence of appreciation of change of social structures, cultural norms and values from context to context is another weakness of Structural Functionalism in terms of its connection to IKS.

The three weaknesses of Durkheim's theory as presented above promote the understanding that, though this study is influenced by Structural Functionalism, the theory of **Relativism** has also strong relevance to it. As noted above, the first recorded ideas about *Relativism* were found in the "famous dictum 'man is the measure of all things' by the Sophist, Protagoras (c490 – 420 BC)" (Baghramian 2004: 21).

Following these origins *Relativism* has been a subject of reflection by many philosophers and sociologists. In essence, *Relativism* is a theory, which attempts to claim that views have no absolute truth or validity. Truth and/or validity therefore are different from individual to individual (Hales 2011:7). My explanation of relativism, above in this chapter, further shows that, in *relativist - IKS approach* I assume that approaches to dealing with social reality vary from context to context. Every social setting develops its mechanism of dealing with human needs.

In the final analysis, I first argue that humans make choices in relation to their context which define their experiences and the way they should interact with social structures, and cultural norms and values.

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Second, I argue that each context has factors, such as external forces that manifest themselves as stimuli to humans, which are not part of the traditional social structures, and cultural norms and values and these influence human behavior differently in each respective context. Thirdly, I argue that the social structures, cultural norms and values, which have influenced me to embrace Durkheim's Structural Functionalism theory, are part of IKS, but they are prone to change or vary from context to context, even if their subjects (indigenous people) remain the same.

Influenced by these three arguments, this study has extensively used the theory of relativism in a practical way. I have referred and used relativism consistently to remind the reader that my understanding of IKS goes beyond its relevance to Durkheim's Structural Functionalism. Social structures, and cultural norms and values change and differ from context to context even if their carriers are the same and human choice in different times and places plays a vital role in determining decisions.

While the reality of the diversity and variations of social structures, cultural norms and values lingers, power dynamics between social structures within the governance institutions may influence directions and discrepancies in the way the social structures, cultural norms and values are embraced and included in decision making and implementation processes. As noted in the introduction and hypothesis of this study above, the way social structures, cultural norms and values are utilised in the context of power dynamics may be explained further by Weberian theory of Rational Legal Bureaucracy. In his reflection about Rational Legal Bureaucracy Weber informs us that the division of labour is defined by specified "spheres of competence". In this context rationalization of market systems is such that "nature, society, and individual action are increasingly mastered by an orientation to planning, technical procedure and rational action" (Morrison 2006: 279). Thus market systems are operated using methodical systems where calculation and reasoning are used to control the outcomes. While this would be seen as instrumental in enhancing effective outcomes, it is further noted that,

> …Weber argued that in modern society social action can vary depending on
> the 'orientation' of the actor, the sphere in which the action is carried out and

the means and ends which the actor selects in particular situation of action….
In and of itself, this can produce variations in rationality and rational action and
lead to strict means-ends calculation, depending on the desired outcome
(Morrison 2006: 285).

In this light Weber's Theory of Rational Legal Bureaucracy explains how bureaucratic
leaders make decisions within the bureaucratic hierarchy basing on desired and
calculated outcomes. Desired outcomes are pursued using decisions, calculations and
reasoning that are channeled through different spheres of competencies. This manner of
making decisions is understood here as professionalization of policy development (See
Chapter 8 for more reading). I argue in this thesis that professional policy analysts and
technocrats are mandated to develop policies on behalf of those at the bottom of the
bureaucratic hierarchy.

This context is structured in such a manner that the officials at the bottom of the
bureaucratic systems should abide by the rules made by their superiors; hence stifles
democratic participation of the lower ranking officials and leaders. Thus Weber asserts
that, in Rational Legal Bureaucracy, hierarchical structures prevail so much so that the
officials at the bottom of the system are supervised by the officials above them.
Administrative staff are completely separated from the ownership and administration of
the means of production (Weber 1922). Observations in terms of how IKS is incorporated
in decision making and implementation processes in the local municipalities within the
context of the power dynamics which resonate with the Weber's rational legal
bureaucracy, as presented here, are detailed in Chapter 8. Kalberg (2005) states that this
darker side of bureaucracy is explained in Weber's concepts of Ossification and Power.
Kalber (2005: vi) points out that:

Dominated by extreme bureaucratization, ossified – or closed and stagnant –
societies are ones which social and political hierarchies become massive and
rigid. Opposite of societal dynamism. …In direct contrast to authority, power,
in Weber's classic definition, implies sheer coercion, or "the likelihood that one

person in a social relationship will be able, even despite resistance, to carry out this own will."

3.9. SOCIOLOGICAL THEORIES AND GOOD GOVERNANCE

Understanding of sociological theories and their relationship to IKS has implications in designing governance processes related to diseases. We need to ask: How does good governance in the context of IKS relate to the paradigms above? I have noted in the previous chapter that good governance has been defined around 8 concepts: Participation, rule of law, transparency, responsiveness, consensus oriented, equity and inclusiveness, effectiveness and efficiency, and accountability. I can therefore summarize the relationship between veracity of relativism and good governance using these 8 concepts:

Participation: A governance system that has participation as one of its valued aspects will provide room for the actuality of relativism. In such a context citizens are allowed to participate in the decisions and implementations that concern them. Their participation can come from nowhere, but their relativistic reality, which may be of IKS. Thus it may be concluded that giving room to citizen opinions and resources relative to their indigenous knowledge implies good governance from the angle of participation.

Rule of Law: From Section 2.6.8. it is observed that it is not only the existence of the rule of law that matters. It is rather, the quality of the rule of law that matters. Thus "The rule of law may … have to be in compliance with the views that represent the interests of people" (cf. Section 2.6.8. in this publication). The relation of this observation to the reality of relativism is that rule of law must correspond with the relativistic reality of the people in question – and this is no exception to the rule of law which concerns management of disease and HIV/AIDS.

In the same section I have also noted that the rule of law must be designed in such a manner that it "provides for a safe environment for the citizens to participate with confidence and without fear and without interfering with the normal order of the society in question." In this nerve the rule of law is a protective coating for anything or anyone that may violate against people exercising their participation in the decisions and the implementations that concern their daily life. Within that context, the rule of law further protects citizens' relativistic reality embedded in their IKS. Citizens are able to use their relativistic knowledge, even from the angle of IKS to participate in decision making processes and their implementation with confidence and without fear – but also in ways that do not interfere with the rights of others and the smooth running of the society in general.

Transparency: On transparency, Section 2.6.8. concluded that processes related to making decisions must be designed in the manner that "people must understand channels and supporting mechanisms that are there for their contribution" (www.gdrc.org). This is mainly because a governance system that values transparency shares any form of information with its citizens including the information that concerns channels and supporting mechanisms that are there for citizens to contribute in decision-making processes and their implementation.

In such a system people cannot be stranded with the knowledge and resources relative to their context due to lack of knowledge about where and how to use them as a tool for their participation in decisions and implementations that concern them.

Transparency can therefore open doors for integration of IKS in decisions making processes and their implementation. Where indigenous knowledge related to dealing with issues about disease and HIV/AIDS exist, transparency can provide channels and mechanisms for such knowledge to infiltrate into policy and programmes developed to address diseases and HIV/AIDS.

Responsiveness: Section 2.6.8. indicates that responsiveness denotes impartiality.

Decisions need to take into consideration the needs of all social groups concerned. Decision-making processes need to ensure that all social groups and sub-groups concerned have equal opportunity to contribute their views (cf. Section 2.6.8. in this thesis).

A governance system designed in a way that does not give way to partiality ensures that it opens doors to listening to every citizen concerned and/or willing to share ideas and resources. Such openness can act as an opportunity for the bearers of IKS to share what they know in order to contribute in critical decisions and programmes. Thus impartiality – responsiveness – acts as an aid for people to share knowledge and resources relative to their context including those knowledge and resources acquired by way of their indigenousness.

Consensus Oriented: Based on the understanding that consensus is not an easy point to reach in any form of decision-making process, the United Nations has sought to define consensus as the ability and willingness of leaders to ensure that all those concerned in decisions at hand have understood the process used and how decisions have been reached. In short, this would mean reaching decisions that are in the best interest of the citizens concerned in ways that every citizen concerned understands how those decisions have been reached.

It is noteworthy that knowledge and resources that are relative to citizens are not always valuable tools for bringing effective decisions and programmes. At times such knowledge and resources can be counter-productive to effective decisions and programmes – in essence this may imply counterproductive to development.

However, this does not mean that knowledge and resources relative to people in their context should be ignored. A good governance system will make sure that such knowledge is given an equal traction of evaluation as that sought from different sources. And when its exclusion, in part or in full, becomes inevitable, proper explanation is given in order to pave way for future improvements.

Thus, the relationship between "Consensus Oriented" as an aspect of governance, and relativism is that citizens acting as bearers of the knowledge and resources relative to their context – citizens acting as bearers of their indigenous knowledge and resources – have an opportunity to understand the weaknesses and strengthens in their knowledge and resources since consensus oriented processes will ensure that reasons for inclusion or exclusion of such knowledge and resources are given.

This is applicable to decisions and programmes developed to address diseases and HIV/AIDS. Dealing with such decisions and programmes in a consensus oriented manner would mean that knowledge and resources about disease and HIV/AIDS relative to specific context are given an equal balance of evaluation and inclusion in decision making processes – and when such knowledge and resources are inevitably to be excluded, concerned citizens are able to know and understand reasons justifying such exclusion.
Equity and inclusiveness: Section 2.6.8. informs us that the terms equity and inclusiveness imply that

> No group or individual must feel excluded – all groups and individuals, especially the vulnerable ones must have equal opportunities "to improve and maintain their wellbeing" (cf. Section 2.6.8.).

This, in essence, means that a good governance system will ensure that citizens have an opportunity to improve their lives using the knowledge and resources relative to their context. Support by leaders for citizens to make decisions and implement them using the knowledge and resources relative to their context must not be given with partiality.

Applying this ideal to the subject about disease and HIV/AIDS would mean that existing knowledge and resources related to addressing disease and HIV/AIDS among the indigenous citizens must not be sidelined. They rather must be given cognizance and be supported in non-discriminatory ways and in ways that enhance their efficiency and effectiveness.

Effectiveness and efficiency: Effectiveness and efficiency are among basic aspects of good governance. They mean that resources are used in ways that ensures that the needs of citizens are met.

Knowledge and resources relative to citizens' context are not necessarily always a positive tool for development. Thus where effectiveness and efficiency are a concern, hard decisions may have to be made about excluding knowledge and resources relative to people's context due to their lack of qualities that may enhance effectiveness and efficiency. This however, does not mean that concerned citizens need to be ignored if knowledge and resources relative to the people's context are found to be counter-productive to effectiveness and efficiency. Rather, in the spirit of consensus oriented aspirations, effort need to be made that citizens understand that their knowledge and resources have been excluded to ensure effectiveness and efficiency – something that is in the best of their own interest. This may satisfy, not only the whims of the citizens concerned, but also the aspirations concerning two of the principles of *effectiveness and efficiency*, sustainability and protection of environment. This has also to be the case with respect to decisions, knowledge and resources concerning disease and HIV/AIDS.

Accountability: According to observations made in Section 2.6.8. accountability signifies reciprocity between leaders and citizens. Citizens choose their leaders into power and in return citizens hold the right that the leaders should address their needs. Such needs may include the recognition of knowledge and resources relative to the context of the citizens in question.

Accountability is also seen as part of general broader values in which leaders and citizens interact to search for ways of mutual support. To this effect, accountability becomes an opportunity for citizens to share knowledge and resources relative to their context.

Accountability is a channel for citizens to legitimise the use of knowledge and resources relative to their context. This may mean legitimizing the use of indigenous knowledge to contribute in decisions and their implementation.

Through the principles of accountability, citizens are able to face their leaders and claim that in as much as those leaders are accountable to them they have to take them seriously –meaning they have to take knowledge and resources relative to their context seriously.

3.10. CRITICAL REMARKS

In theory there is compatibility between good governance and inclusion of indigenous knowledge in decision-making and implementation processes. As noted above all the eight characteristics of good governance can act as propellers for appropriation of indigenous knowledge into decision making processes.

This, in essence, means that in as much as leaders embrace principles of good governance they will have no excuse to eliminate indigenous knowledge and resources as part of their good governance practice. It would more justifiable for them to invent instruments for inclusion of indigenous knowledge and resources as part of their commitment to embrace and enhance good governance principles and practice. This assertion is applicable to every aspect needing the attention of leaders in their jurisdictions – one of these being attention to disease and health issues. In the current study, one of such jurisdictions is addressing issues related to HIV/AIDS.

At analytical level, good governance will look at paradigmatic dimensions of the sociological perspectives underscored above – relativist views, functionalist views, conflict views, interactionist views and Structural Functionalism. Analytical processes would make a synthesis of what these views mean and create channels in policy development and implementation. These do not only appreciate indigenous knowledge and resources, but also pave way for local ownership and enduring sustainability.[41] Such a focus would pay deliberate attention on the sociological perspectives in light of disease and health issues in general and HIV/AIDS in particular.

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[41]. Theories about the term sustainability assert that achievements are sustainable when they are owned and informed by the thinking patterns of their beneficiaries. In the context of this study, beneficiaries of decisions, implementations and their achievements are indigenous communities as defined earlier in this study.

Relativism would be seen as a central view, since, in order to reinforce the indigenous nature of these views, each view has to be seen from the angle of how it is being understood in each community context.

The analysis of indigenous knowledge in this case is at two levels: First, process of analysis needs to ask and answer the questions about who the bearers of specific views are. Second, process of analysis needs to investigate the content and philosophical background of such views. Conducting analysis at these two levels may help in two ways: first, it helps to define the bearers of particular relativistic perspectives and areas of decision-making and implementation for where specific bearers of those perspectives need to be allocated so that they can make meaningful contribution in decision making processes and their implementation; second, to define which views need to make contribution and where.

All in all, this means that as long as good governance is to be used as a tool for paving the way for the inclusion of indigenous knowledge, policy development and implementation, is a process of engagement, rather than an effortless process of inclusion. As part of accountability, leaders may need to make themselves available to the bearers of indigenous knowledge in order to create a space for interactive analysis of sociological perspectives above and their relativistic nature, which in essence is indigenous knowledge and resources.

In the context of this stance, I have kept in mind the fact that the current study is influenced by the observation that in South Africa, a particular governance arrangement exists, which in effect determines the extent to which IKS is incorporated in the policy development and implementation; and retrospectively particular arrangements exist, within IKS, which may have an effect on the way policy developments and implementation are executed, thereby affecting governance systems in general. In other words, governance structures and IKS structures have relationships over each other.

3.11. CONCLUSION

The Sociological perspectives I have reflected on in this chapter are Relativist View, Functionalistic View, Conflict View, Interactionist View, Labeling Position, and Durkheim's Structural Functionalism. The Relativistic View is a converging axis through which all the views meet to signify their indigenous nature. Thus each of these views takes relativistic nature once it is seen from the angle of how it is held by each social context and ecosystem. Such an angle may automatically become an angle of indigenousness.

The relationship between these sociological perspectives and HIV/AIDS is in the sense that both sociologists and practitioners do agree in theory and in practice that HIV/AIDS is not only a disease, but also a social problem. In line with this study the sociological nature of HIV/AIDS is in how it is understood in each social context within the framework of the underlined sociological perspectives and how such understanding renders itself as an extension of relativism, which in the final analysis may be an extension of indigenous knowledge and resources.

Good governance owes it to the sociological perspectives above to act as a precipitator for inclusion of indigenous knowledge in decision making and implementation processes. Good governance will seek to analyse how these perspectives are being held by each social context, their context and bearers. Such analyses may pave way to finding appropriate methods of engagement and inclusions of indigenous knowledge in decision making and implementation.

This chapter has largely focused not only on analysing sociological perspectives, but also on the critical dimensions of the integration of good governance and indigenous knowledge in policy development and implementation. In theory, the integration between good governance and indigenous knowledge in policy development and implementation can be through the reflection of the sociological perspectives and through the reflection of how various aspects of good governance stand as precipitators for inclusion of social groups, in their diversity, in policy development and implementation.

At the practical level this can only happen when mechanisms within governance systems have been provided for social groups of different backgrounds to participate in policy development and implementation. It therefore becomes inevitable to engage in discussions that scrutinise whether and how mechanisms have been provided in government systems to create room for integration of good governance and indigenous knowledge and resources. This has been done by looking at the policy systems that govern the roles and responsibilities of the local government. Apart from the fact that the local government has already been identified as one of the key areas for this study, there is also a rational justification for reflection on the local government at this stage –the local government is generally understood as having a strategic advantage of interacting with grassroots people in a direct way since it is located where people themselves live. Chapter 4 has therefore examined the South African local government systems and history of social inclusions in order to enhance public participation in policy development and implementation. The chapter has further sought to answer the question: Is the local government system designed in ways that adhere to the principles of good governance – and in that way creating room for integration of indigenous knowledge systems and resources in decisions and their implementation?

CHAPTER 4

THE POLICY ENVIRONMENT AROUND LOCAL GOVERNMENT INSTITUTIONS: THE SOUTH AFRICAN TRAJECTORY FOR LOCAL GOVERNMENT REFORM FOR PUBLIC PARTICIPATION IN POLICY DEVELOPMENT AND IMPLEMENTATION

4.1. INTRODUCTION

In this chapter the brief history of public participation in South Africa is narrated. The reflection about public participation has been given extensive space in order to sift the core trends and meanings and show that in the context of the South African history such a concept is of significant nature. Further, public participation is the core channel for inclusion of IKS in decision-making processes. It is therefore critical that the reader is assisted to understand the concept comprehensively.

The trajectory of apartheid from the 1940s to the date of the establishment of a democratic government (1994) will be reflected upon with the aim to depict the reality of how public participation of grassroots communities in policy development and implementation can be seen as an issue of political struggle.

Political struggles are generally followed by policy and government structure reforms. This chapter will briefly shed light on the reforms that have taken place after the apartheid government was abolished to engender social, political and economic values of public participation in policy development and implementation. This has been done by way of studying some of the legislative documents. I have concluded by looking at 2005 Draft Public Participation policy framework.

The conclusion for this chapter has run down key areas, which it has tackled.

4.2. THE APARTHEID TRAJECTORY

If the local government is to be understood as an instrument for participation of local communities in issues pertaining to policy and development, there is every reason to conclude that the South African Apartheid Government did not have a local government in place. Local Government as we understand and have it now is the result of the reforms that have taken place over the past two decades, preceded by years of struggle against Apartheid.

> The apartheid system did not provide for a system of local government in rural areas. In the homelands, where the majority of South Africa's rural people were concentrated, elements of public services normally associated with local government were provided by systems of traditional authority. In other rural areas, largely under the control of white commercial farmers, services were provided by national government departments or provincial administrations. For African Communities living outside the homelands, the Department of Development Aid provided a minimal level of services. This department rarely consulted communities on how services should be provided and corruption was rampant (Davids 2003: 32).

The beginning of the reforms that brought about the current local government systems emanated from apartheid government's response to the pressure it received from those who were at the forefront of the struggle and their supporters from within and outside South Africa.

On the effort to engender democratic participation in decisions-making processes by a majority of South Africans, strong resistance to the Apartheid Government and its systems of governance can be dated back to 1940s**.** According to Ginwala,

> In 1948, the victory of the National Party led to imposition of ever harsher racist policies through greater repression and violence. Resistance shifted from making representations to mass action, with growing unity within the black population (Ginwala, in Mapungubwe Institute for Strategic Reflection: 32).

At that point the ANC espoused a system of resistance designed around protests, strikes and demonstrations. This resulted in a myriad of events, which sought to strengthen the fight against apartheid. These events included The Defiance Campaign in 1952; followed by the formation of Congress Alliance which included, the ANC, South African Indian Congress, the Coloured People's Congress, a small white congress organisation (the Congress of Democrats), and the South African Congress of Trade Unions (Giliomee, in Nurnberger 1991: 500).

In 1955 the principles of non-racialism and human rights were included in the struggle as its main guiding strategy in the form of the Freedom Charter. The Freedom Charter formed the main funnel for negotiations, mobilisation of support from outside South Africa and intellectual rationale for keeping the struggle intact in the years to come. Giliomee points out, "Although some of [the] documents appear to clash with certain clauses of the Freedom Charter, the ANC subsumes everything under the rubric of Charterism". (Giliomee, in Nurnberger 1991: 501).

The Apartheid Government's attempts to suppress these developments through legal instruments such as taking activists to courts on charges of treason were not successful. Resistance grew in more violent reaction from the Apartheid Government which saw the killing of 69 anti-pass demonstrators in Sharpville in 1960. Political organisations were banned and their leaders were sent into exile. Militant resistance, combined with underground activism and mobilisation of international support strengthened within the ANC and the PAC. This gave birth to ANC military instrument: *Umkhonto we Sizwe* (MK) (Ginwala, in Mapungubwe Institute for Strategic Reflection: 32 - 33).

The long-term arrests that were made by the apartheid government in reaction to these developments gave panic and relative disempowerment of political activism to the oppressed masses within South Africa during the 1960s. Throughout this period political struggle became largely a phenomenon limited to those who were in exile and some isolated actions of resistance in various communities of South Africa including those of *Umkhonto we Sizwe* (Bell & Ntsebeza 2001: 15-20 and Ginwala, in Mapungubwe Institute for Strategic Reflection: 32 - 33).

The Black Consciousness Movement led by Steve Biko in early 1970s reawakened the militants' struggle within South Africa. International outcry for the plight of the oppressed masses at the hands of the apartheid government was further resounded when Steve Biko was assassinated in 1977. New waves of the struggle erupted from the academic sector, largely, through the intellectuals and black students movements (Giliomee, in Nurnberger 1991: 502 – 504; Ginwala, in Mapungubwe Institute for Strategic Reflection: 32 – 33; and Mukuka 2012: 8-46).

At that point students started to organise themselves around the issues of fighting for better education; fighting for education systems that are not tainted by apartheid government's manipulations of black people to accept its influences and sub-standard education resources and services. This was largely highlighted by the Soweto youth uprising of 1976 against Apartheid Education and the formation of a number of students organisations such as Congress of South African Students and Azanian Students Organisation (Giliomee, in Nurnberger, 1991: 503).

In the 1980s these movements, together with the underground armed struggle, international pressure solidified into a system of pressure which further infiltrated into religious organisations and workers. Organisations such as the United Democratic Front, Congress of South African Trade Unions and the National Council of Trade Unions were formed and led the struggle from within South Africa. A number of leaders in the organisations were from the religious organizations. At this point anger from the activists was directed not only at the oppressive regime, but also at the individuals and groups, regardless of their racial background, that seemed to support the oppressive regime's agenda. This led to conflict among the black people themselves mainly in the townships (Mukuka 2012: 8-46 and Bell & Ntsebeza 2001: 17-20).

In response to the pressure from these organisations the government established systems that allowed for limited participation of oppressed masses in political and economic decisions matters.

This development saw the recognition of trade unions, legitimisation of community councils for participation of people outside Bantustans into policy issues and the limited participation in the houses of Parliament for the minority Coloured and Indian Groups. In 1987, particularly,

> ... local structures referred to as Regional Services Councils (RSCs)[42] were created to regulate the distribution of wealth between urban and rural areas, and to develop limited infrastructure for rural African Communities within the context of neo-apartheid reform strategy under way at that time (Davids 2003: 32).

The rejection of these limited reforms by the activists was coupled with the strengthening of the military apparatus by the apartheid government to suppress activism. The special body called State Security Council was established in 1972 to enhance militarised suppression.

In the late 1980s the struggle against apartheid grew to the point of involving grassroots communities and individuals in the support of the political prisoners who had been released. Pressure on the Apartheid Government at that stage was further strengthened by the imposition of Sanctions by the International Community through the United Nations. When FW de Klerk replaced PW Botha as President in 1989 his first move was to release prominent political prisoners such as Nelson Mandela and to unban the political movements (Bell & Ntsebeza 2001: 17-20 and Giliomee, in Nurnberger, 1991: 503).).

Negotiations that followed from that point saw the drafting of the interim constitution and the holding of the first democratic elections in 1994, followed by the local government elections in 1995, and the change in the municipal systems in 2000. Change of municipal systems was however reached after a number of transformation processes which had proved to be of dissatisfaction for the grassroots people's expectations about participating in governance processes. Notable is the fact that

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[42]. RSCs were the main "determinants of the districts council regions which were established just

Local Government Negotiations Forum, a body established during the later part of political negotiations to decide South Africa's post-apartheid local government dispensation had strong urban bias. It focused mainly on urban concerns raised by political parties and the South African National Civics Organisation (Sanco). The only rural lobby was the Congress of Traditional Leaders (Contralesa). The framework for the Local Government Transitional Act of 1993 was thus urban ... and the Act failed to make provision for rural areas (Davids 2003: 33).

In June 1995 Members of the Executive Council (MECs) at the provincial level were given powers to decide on the type of local government systems they wanted to establish. Three forms of local government systems were established namely: Transitional Rural Councils (TRCs); Transitional Representative Councils (TRepCs) and the so called "remaining areas". Transitional Rural Councils were "fully operational" administrative structures with elected or nominated members. These had full executive and legislative powers. Transitional Representative Councils were relatively small

low capacity municipalities that existed almost exclusively to provide representation for a geographic constituency on district structures, but did not have powers or functions of the TRCs in budgeting and carrying out programmes. ...most had no administrative staff. Districts Councils constituted the next level, and they had to oversee several local structures. Some people were elected or nominated directly into District Councils, others served on the District Council as representatives from local level and from surrounding urban councils (Davids 2003: 33).

The newly established local governments systems were designed around the principles of maximum participation of grassroots communities and individuals and different stakeholders at the local level. This was further enhanced by the establishment of local municipality housed structures and systems such as the Integrated Development Plans (IDPs) which were designed in the fashion that allow representation from different sectors and government departments based at the local level.

4.3. THE IMPLICATIONS OF THE HISTORY OF STRUGGLE TO LOCAL GOVERNMENT: RESTRUCTURING THE LOCAL GOVERNMENT

The history of the struggle outlined above implies that the local government structures as we know them today are a result of the long time struggle for people to participate in policy development and implementation. When the local municipality structures were being established, this history was taken into account. Participation of people in political and development decisions-making processes regardless of their colour, sex, origin and gender became one of the superior principles guiding the way the local government structures were designed. Powers and functions of the government leaders had to be designed in ways that allow for consultation from and feedback to the grassroots communities.

This consideration is evident right from the way the government tiers are structured: National government; provincial governments; district governments; local government. The latter is further divided into ward committees and their sub-committees. The rationale in this layout is to the effect that ward councils make decisions informed by the grassroots communities and individuals; local government councils make decisions informed by wards councils; district councils make decisions informed by local councils; provincial councils make decisions informed by both local and district councils; and national council makes decisions informed by provincial council. The cascading of consultations and feedback in this fashion would eventually mean that decisions made at the national level are based on the continuum of issues emanating from the grassroots communities and individuals running through all the tiers of the government.

As Davids (2003: 31-54) states, powers and functions of the local government have therefore been designed in ways aligned to this rationale with reciprocal consultations and feedback between the tiers being one of the paramount guiding strategies used to ensure that decisions address exactly what people really want and need.

Davids' cites the draft policy framework for public participation (2005) indicating that supporting mechanisms for these new systems have been through provision of locally managed funds, promotion of development of Community Based Plans (CBPs) and provision of Community Development Workers (CDWs). Ishmail Davids further states that,

> The terms 'sphere' is used in the Constitution to connote the principle of co-operative governance and thus calls for new types of relations between government structures and public institutions and civil society. Section 41 of the Constitution clearly spells out that all spheres of government and organs of state must 'co-operate with one another in mutual trust and good faith'. Moreover, the Constitution obliges all spheres to help other spheres build their legislative and executive capacities (Davids 2003: 35).

Thus, involvement of citizens in decision-making processes informed the way the government tiers were structured. The underlining ethic has been not to repeat the mistakes that were made by the apartheid government of excluding some communities and individuals in decisions making processes that concern their lives. Figures 7 and 8 below depict this rationale in a more clear way.

Figure 7: Linkage between ward plans, communities and higher-level plans
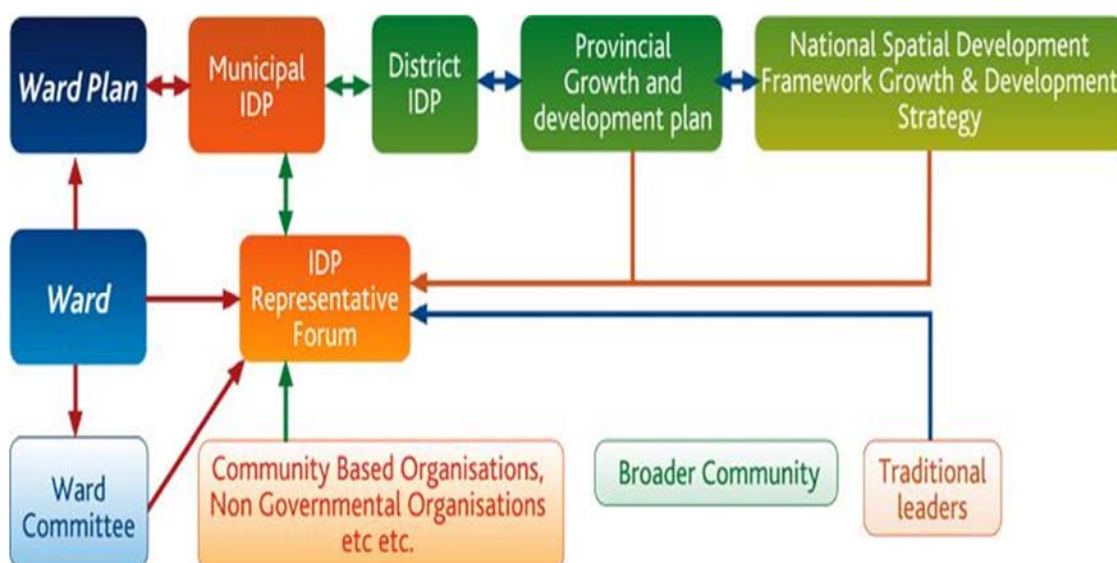
Figure 8: Working groups at all levels, informed by CDWs
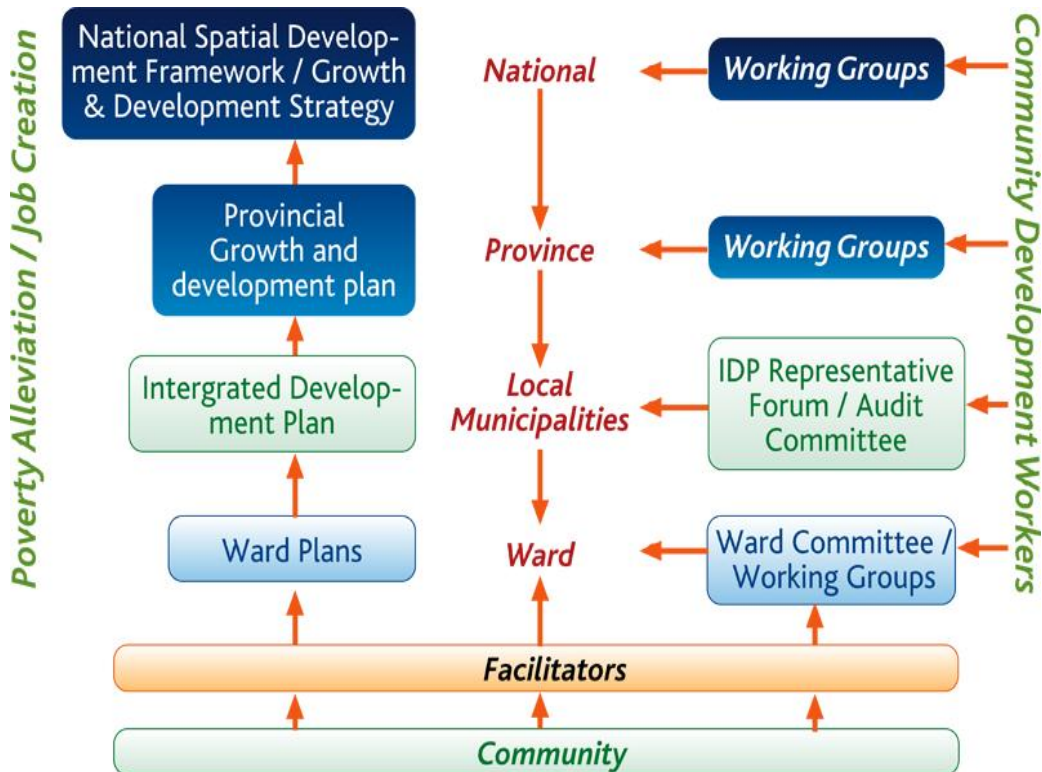
4.4. LEGISLATIVE PROVISIONS FOR GRASSROOTS INVOLVEMENT

Reconstruction and Development: In 1994 the White Paper on Reconstruction and Development identified the local municipalities as key instruments for bringing development to the grassroots communities. The paper stressed the need for the local municipalities to work in collaboration with community based stakeholders namely CBOs and NGOs to address issues about development in the ambit of Reconstruction and Development processes. Thus right from the first days of the new dispensation the local government had been entrusted with the role of local development.

The developmental role of the local government was well specified in Article 152 (1)(b)(c)(e) of the Constitution:

- The provision of services to communities in sustainable manner;
- The promotion of social and economic development; and
- Encouraging the involvement of communities and community organisations in matters of local government.

Article 153 (a)(b) further articulates this role as it states that local municipalities must,
- Structure and manage its administration, budgeting and planning process to give priority to basic needs of the community and promote the social and economic development of the community; and
- Participate in national and provincial development programmes
  (South Africa 1994).

Reflecting on these first developments in redefining the developmental role of the local government critics such as Liebenberg (1998) have claimed that the mandate to steer local development was given to the local government with "clumsy understanding of how to institutionalise development policy" (Davids 2003: 35). Further enunciations for this role were inevitable. A step that was taken in 1998 to strengthen the definition of the developmental role of the local government through the 1998 White Paper on local government is therefore seen as being of great importance. Here specific functions of the local government as a custodian of the development of local people were idiosyncratically defined:

- Exercising municipal powers and functions in a manner which maximises their impact on social development and economic growth;
- Playing an integrating and coordinating role to ensure alignment between public and private investment within the municipal area;
- Democratising development, empowering the poor, and redistributing income and opportunities in favour of the poor; and
- Building social conditions favourable to development (Davids 2003: 36).

In the same White Paper, specific expected outcomes from the functions of the local government add potency to the reinforcement of the significance of development as one of the functions of the local government:

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- The provision of household infrastructure and services;
- The creation of liveable, integrated cities, towns, and rural areas;
- The promotion of local economic development; and
- Community empowerment and redistribution.

The White Paper suggests specific approaches to ensure that the functions are executed effectively. These approaches include:
- Integrated development planning, budgeting and performance monitoring;
- Performance management; and
- Working with citizens and partners (Davids 2003: 36 – 37).

In a nutshell Ishmail Davids comments that

> The White Paper represented a radical reorientation of local governance in South Africa, and gave reality to paradigm shift in terms of how municipalities should integrate development planning with community based goals. Moreover, by including references to redistributing income and opportunities in favour of the poor and democratising development, the White Paper underscores the Constitutional concepts of human dignity, human rights and democracy as fundamental elements of developmental local government (Davids, 2003: 37)

Following the White Paper has been a number of Acts that have sought to reinforce the efficacy of the proposals made in the White Paper. Major among these Acts were:

The Municipal Structures Act (1998): This Act defined practical dimensions of the metropolitan, local and district municipalities by way of assigning them specific powers and functions.

The Municipal Demarcation Act (1998): This Act made provisions for the re-demarcation of municipal boundaries under the auspices of Municipal Demarcation Board. The Board was given the mandate to demarcate municipal boundaries and the ward boundaries within the municipalities.

The Municipal Systems Act (2000): This specifies municipal responsibilities in line with internal systems and administration processes. For this Act, the Integrated Development Plan was used to inform patterns aimed at

> …managing and evaluating performance, allocating resources and organisational change. At the same time it [the Act] aims to promote synergy, between the local, provincial, and national spheres of government and their inter-governmental functions and relationships (Davids 2003: 37 - 38).

The Municipal Systems Act further gave prominence to community participation in the developmental and policy activities in the local municipalities. Critical stress is made on the need to make certain the participation of communities and other stakeholders in the development and implementation of the IDPs.

> The IDP provides the framework for determining the budget of a municipality. This is closely linked to the performance management system of a municipality and how the progress of a municipality is judged by (amongst others) the community (Davids, 2003: 38).

The Municipal Finance Bill (2002): This Bill seeks to regulate the financial management of municipalities. In particular it regulates processes related to budgeting, financial accounting, auditing, reporting and borrowing (Davids, 2003: 38).

The Municipal Structures Amendment Act of 2000: This provides for the division of powers and functions between the local and the district municipalities. It holds that district municipalities have the responsibility of supporting the roles of the local municipalities, especially those based in the rural areas, to ensure that their capacity to deliver services to the local communities is strengthened.

Strengthening of the capacity for the local municipalities must be supported by the creation of conducive systems for development including: devising integrated development plans, developing the infrastructure of the whole district municipality and "promoting the equitable distribution of resources between the local municipalities in the area to ensure appropriate levels of municipal services within the area" (The South African Municipal Structures Amendment Act of 2000(s. 83(3).

Furthermore, the Act requires the district municipalities to prepare the framework of the local municipality IDP in addition to preparing their own municipalities. Key areas of focus in this framework include:

- An inventory of all plans and planning requirements binding in terms of national and provincial legislation on district and local municipalities;
- A list of issues of alignment to be included in the district and local IDPs;
- The approach to achieve coordination;
- A statement of principles for coordination; and
- Procedures for consultation between the district and local municipalities during the process of drafting the respective IDPs. (Davids 2003: 43)

This pattern of alignment between the local and district municipalities has been criticised as problematic by some of the analysts.

First, the alignment has lacked mechanisms for holding district municipalities accountable to the local municipalities and to the communities in general. District municipalities have been seen as having superior power from the assumption that their capacity is more advanced than that of the local municipalities. This has the potential of creating a sense of superiority among the district municipalities, which may be manifested in the undermining of the ideas and experiences that the local municipalities may have from their own communities.

4.5. RECOGNITION OF GRASSROOTS PARTICIPATION IN THE INSTITUTIONAL REFORMS ABOVE

Effort to bring about reforms in the local government systems above clearly gives an indication of how limited the involvement of grassroots communities has been in policy development and implementation. Alignment of governing systems has largely focused on the higher institutional levels of powers and development systems. They have undermined the fact that grassroots people have a great stake in the outcomes from responsibilities executed by these powers and development systems.

Though there was a mention of encouraging involvement of local communities in the 1994 Reconstruction and Development Programme hardly, is there any indication of how this would be done. There were no clear systems directly linked to the Reconstruction and Development Programmes to involve local communities in the decision- making processes and their implementation. Ward Council structures within the local government would probably be a channel perceived to be the entry point for the involvement of the local communities. But from the perspective of reforms presented above, this would simply be assumed and not strategically designed to be the *modus operandi*. Moreover, being the structures established from the prescriptions of the national governments, the design of the wards councils would not be in correspondence with the institutional situations of the local people themselves. In some cases ward councils would have duplicated already existing similar local entities. For example ward councils would have duplicated traditional village structures.

Furthermore, in these reforms local government has been depicted as a service provider who should acquire more and more – better and better capacities to provide services to the grassroots communities. In this nerve of developments local government structures are seen as instruments for policy development and implementation and not stakeholders standing at par with communities as a partner seeking collaboration for policy development and implementation.

Even in cases where capacity building/strengthening of local government structures is of paramount importance little, if not nothing, is mentioned about capacity building/strengthening to tap on indigenous knowledge and resources. Capacity building/strengthening is more viewed from the lenses of local government as service provider and not as a stakeholder standing potential of building partnership with grassroots communities.

In this context the term "service delivery" has been one of the most commonly used by those securitising on the performance of local government structures, be it activists from the civil society, academics, researchers or grassroots communities themselves. Measurement of the performance of local government structures is guided by reflections of the extent to which designated services are delivered to beneficiary citizens.

In retrospect, viewing local government structures as service providers has meant that grassroots communities are viewed as local government service recipients/beneficiaries – meaning that their positions as partners in policy and development with local government structures is reduced to passivity. No wonder in some cases grassroots communities themselves have internalised this view to the point that their claim for good governance from local government structures tends to revolve around issues about "how much we are benefiting from local government services", and not how much we are involved in the policy development and implementation processes.

Considering that local communities use their local knowledge and resources to deal with most of their daily needs, sidelining of grassroots communities in policy development and implementation automatically sidelines local knowledge and resources and further results to giving traditional authorities limited powers through what is termed as *Ex Officio* status.

The undermining of traditional authorities may be indicative of how the local government reformed structures have lost the essential grassroots structures that could be channels for tapping traditional knowledge and resources.

Overlooked in this respect may be the fact that traditional authorities are the fountains of experiences pertaining to local nature and spontaneous development which may have influence on determining correct decision and development implementation agendas. This in essence further means undermining of the fact that traditional authorities have led grassroots communities in hard times of natural disasters, in hard times of oppressive governments, in hard times of tribal conflicts, in hard times of internal conflicts, and in hard times of ... the list can be endless.

Leading communities in these hard times have always gone with searching for solutions which in effect do not only serve to fight and end the hard times, but also serve to build up knowledge about possible and practical solutions for various problems encountered by the grassroots citizens. More often than not these solutions have been successful without complementary resources such as those brought by local government development programmes and projects. Thus the knowledge attached to these solutions is designed around strategies based on experience of what has been found to be relevant and workable in the contexts in question. It is therefore knowledge with strong potential to bring about stable and sustainable solutions.

Furthermore, in the reforms presented above comments about limited capacities about local government structures have largely reflected on the nature of human and material resources available to deliver services to the citizens. Little is done to reflect on the capacity to engage in creating environment for involvement of grassroots communities and contribution of indigenous knowledge and resources in policy decisions and implementation. Use of grassroots knowledge and resources is hardly reflected as a strategy to address shortage of human and material resources. The fact that grassroots communities have always dealt with their issues of social and economic livelihood without conventionally accepted materials and human resources is hardly visible.

All in all, reducing the powers and functions of the local municipalities from being a facilitator of policy development and implementation to mere service providers stands the potential of influencing the local municipalities to view grassroots communities as recipients of policies and development, and not as major partners in policy development and implementation.

4.6. PUBLIC PARTICIPATION POLICY FRAMEWORK

Probably the most significant shift that has been made since the end of apartheid at the policy and political institutional reform level is the Draft National Policy Framework for Public Participation of 2005. Here structural reciprocity between grassroots communities and the governing authorities has been depicted in a much more laconic way. Focus has been on appropriation of ward committees and sub-committees to strengthen social and economic development efforts of grassroots citizens.

The Draft Policy Framework regards local municipality systems as a waterway to facilitate the public participation through strengthening communities to understand the responsibilities they have for their own development; through provision of funds that are managed by the communities themselves; through creating community based mechanisms for service delivery; through improving accountability of ward and municipal structures; and through improving linkages between provincial and national departments and their clients.

In its preamble the draft policy framework points out:

> This government is committed to a form of participation which is genuinely empowering, and not token consultation or manipulation. This involves a range of activities including creating democratic representative structures (ward committees), assisting those structures to plan at a local level (community-based planning), to implement and monitor those plans using a range of working groups and CBOs, supporting community-based services, and to support these local structures through a cadre of community development workers.

We must also improve the accountability of ward and municipal structures to each other and to the communities they serve, as well as improving the linkages between provincial and national departments to their clients, and so to service delivery and policy (South Africa 2005: 2).

The document claims that promotion of public participation is a legal requirement and, promotes accountability and development approaches that are relevant to the local contexts. To this effect promotion of publication participation is based on specific assumptions:

- Public participation is designed to promote the values of good governance and human rights;
- Public participation acknowledges a fundamental right of all people to participate in the governance system;
- Public participation is designed to narrow the social distance between the electorate and elected institutions;
- Public participation requires recognising the intrinsic value of all of our people, investing in their ability to contribute to governance processes;
- People can participate as individuals, interest groups or communities more generally;
- In South Africa in the context of public participation community is defined as a ward, with elected ward committees; and
- Hence ward committees play a central role in linking up elected institutions with the people, and other forums of communication, such as the *izimbizo* (policy dicusioon forums), roadshows, and the *makgotla* (meetings of village leaders) reinforce these linkages with communities (South Africa 2005: 22 – 3).

The legitimacy to engage in public participation campaigns is taken from a number legislative provisions including those that have been reflected upon above: The Constitution, White Paper on Local Government – 1998, The Municipal Structures Act 117 of 1998 as amended, and The Municipal Systems Act 2000. The draft policy framework indicates that the public participation reforms are an evolving process.

A number of approaches are being promoted to engender comprehensive and effective public participation. These include:

- Legitimate structures for community participation (ward committees);
- Mechanisms for communities to plan (Community-based planning, CBP);
- Integrating general planning with the Integrated Development Planning (IDP) process of local governments;
- Support for wards to implement their plans, using discretionary funds that they control, and encouraging voluntary action to do so;
- Facilitation and support of ward committees and community groups using community development workers; and
- Holding ward committees and municipalities to account (South Africa 2005: 5).

The framework emphasises that, in essence, these approaches denote that governing systems at the local level are moving towards partnership between grassroots citizens and government structures through "delegated responsibilities". This will eventually lead to practically "empowering citizens to take charge of their own development, in partnership with the government (South Africa 2005: 6 -7)."

The Draft National Policy Framework emphasises that specific principles of good governance necessitate public participation around these approaches. The principles are underlined in the following order:

- Inclusivity - embracing all views and opinions in the process of community participation;
- Diversity - In a community participation process it is important to understand the differences associated with race, gender, religion, ethnicity, language, age, economic status and sexual orientation. These differences should be allowed to emerge and where appropriate, ways sought to develop a consensus. Planning processes must build on this diversity;
- Building community participation - Capacity-building is the active empowerment of role players so that they clearly and fully understand the objective of public

participation and may in turn take such actions or conduct themselves in ways that are calculated to achieve or lead to the delivery of the objectives;

- Transparency - promoting openness, sincerity and honesty among all the role players in a participation process;

- Flexibility - the ability to make room for change for the benefit of the participatory process. Flexibility is often required in respect of timing and methodology. If built into the participatory processes upfront, this principle allows for adequate public involvement, realistic management of costs and better ability to manage the quality of the output;

- Accessibility - at both mental and physical levels - collectively aimed at ensuring that participants in a public participation process fully and clearly understand the aim, objectives, issues and the methodologies of the process, and are empowered to participate effectively. Accessibility ensures not only that the role players can relate to the process and the issues at hand, but also that they are, at the practical level, able to make their input into the process;

- Accountability - the assumption by all the participants in a participatory process of full responsibility for their individual actions and conduct as well as a willingness and commitment to implement, abide by and communicate as necessary all measures and decisions in the course of the process;

- Trust, Commitment and Respect - Above all, trust is required in a public participatory process. Invariably, however, trust is used to refer to faith and confidence in the integrity, sincerity, honesty and ability of the process and those facilitating the process. Going about participation in a rush without adequate resource allocations will undoubtedly be seen as a public relations exercise likely to diminish the trust and respect of community in whoever is conducting the process in the long term, to the detriment of any public participation processes; and

- Integration – that public participation processes are integrated into mainstream policies and services, such as the IDP process, service planning (South Africa 2005: 7-8).

Table 6 below indicates how the draft policy framework for public participation suggests these principles to be applied in concrete policy and development implementation processes by government authorities:

Table 6: Examples of the practical application of good governance principles

Principle	Examples of applying these principles
Inclusivity	Identifying and recognising existing social networks, structures, organisations, social clubs and institutions and use them as a vehicle for communication
Diversity	Ensure that different interest groups including women, the disabled and youth groups are part of governance structures
Building community capacity	Solicit funding from external sources to train ward committees on their role in development; and Embarking on consumer education on all aspects of local governance including the functions and responsibilities of the municipality and different municipal structures
Transparency	Engendering trust in the community by opening council meetings to the public and encouraging attendance
Flexibility	Being flexible in terms of time, language and approaches to public meetings
Accessibility	Conducting public meetings in the local language
Accountability	Ensuring report backs to community forums or ward committees at least on a quarterly basis
Trust, Commitment and Respect	Ensuring that the purpose of the process is explained adequately, as well as how it will develop
Integration	Integrating ward planning with the IDP process Including user committees into mainstream services, e.g. School Governing Bodies

Source: South African Draft National Policy Framework for Public Participation: 2005

4.7. PUBLIC PARTICIPATION AND GOOD GOVERNANCE PRINCIPLES

The public participation policy framework shows significant improvement in addressing grassroots participation in decision-making and implementation in the sense that it makes a distinct indication of the importance of participation of communities in decision-making and their implementation. However examining the framework against the principles of good governance we have learnt in chapter 1 we note that the framework is lacking in some aspects.

The principles identified as of good governance principles by the framework indicate clearly that emphasis is on participation, transparency, equity and inclusiveness[43] and accountability. The rest of aspects of good governance, rule of law, consensus oriented, efficiency and effectiveness and responsiveness do not seem to be given any consideration in the framework. In other words, the framework does not show how public participation mechanisms will be designed in such a manner that:

- Grassroots citizens participate in decision-making and their implementation without fear and without interfering with the normal order of the society – i.e. in line with the rule of law;
- At the point of making decisions citizens understand the process that has been used and how the decisions have been reached – i.e. in line with consensus oriented aspect;
- Decisions reached and their implementation do specifically result in meeting the needs of concerned citizens [44] - i.e. in line with efficiency and effectiveness governance aspect; and
- Decisions reached take into consideration the needs of the people concerned – i.e. in line with the aspect of responsiveness.

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[43]. Here equity and inclusiveness are seen to be accommodated through the principle of "diversity".

[44].The understanding in this argument is that participation does specifically imply that those who participate will have their need met. Once participation takes place, additional monitoring mechanisms need to be put in place to ensure that expectations of citizens are met. This is in essence the idea around efficiency and effectiveness.

These limitations can mean a lot in terms of inclusion of indigenous knowledge and resources. In a nutshell, it may mean that in situations where bearers of indigenous knowledge and resources have gone through a history of being oppressed, undermined or stigmatised because of their beliefs and life styles there may not be mechanisms to assist them to overcome fear to contribute in decision-making and their implementation. Where indigenous knowledge and resources are left without inclusion in decisions made and their implementation bearers of such knowledge and resources may be left without understanding why their contribution has not been given consideration – and in that way room may not be created for the bearers to rectify weakness in their knowledge and resources.

The limitations above may further mean that even if bearers of indigenous knowledge and resources participate in the policy development and implementation, their knowledge and resources may not specifically be given consideration. Last, but not least, this may mean that specific needs of bearers of indigenous knowledge and resources may not be addressed through the policy development and implementation processes they have participated in.

The public participation policy framework is therefore not devoid of limitations. In general it has managed to make specific propositions for participation of grassroots communities in policy development and implementation, which may essentially open room for participation of bearers of indigenous knowledge and resources. The framework has however failed to make tight propositions to enhance participation without fear, participation with full understanding of processes used to reach specific conclusions, participation, which translates into meeting and considering the needs of those who participate.

Such limitations affect the extent to which indigenous knowledge and resources may be appropriated to contribute in making and implementing decisions related to disease in general and HIV/AIDS in particular.

Fear, lack of understanding of how consensus is reached on particular decisions, and lack of meeting and considering specific needs may be de-motivating for the bearers of indigenous knowledge and resources to make contributions in the decisions related to HIV/AIDS in ways that correspond with their indigenous knowledge and resources.

4.8. PRACTICAL APPLICATION OF THE PUBLIC PARTICIPATION POLICY FRAMEWORK: IDPS AND CONCRETE IMPLEMENTATION

Practical application of the policy framework can be understood at two levels. First, policies need to be translated into programmes and projects designed to channel policy propositions into concrete activities and results. Second, the programmes and projects need to be implemented on the ground in such a manner that embraces the policy propositions.

The next chapter will reflect on the local municipalities at programme design level. I have used the Integrated Development Plan documents to examine the extent to which local municipalities have embraced public participation policy framework propositions in ways that facilitate the inclusion of IKS on issues about HIV/AIDS.

4.9. CONCLUSION

Participation of grassroots people in policy development and implementation through the local municipalities was non-existent during the apartheid government. Grassroots people were excluded to the point that there were no systems such as the local government to act as a channel for public participation.

Since the democratic government was put in place in 1994, a number of attempts have been made to engender local government systems that provide room for public participation in policy development and implementation. This has involved restructuring of government systems resulting in the establishment of government tiers namely, national, provincial and local government.

At the local municipality level, the local government has been seen as an entity closest to the grassroots citizens and an entry point for public participation in policy development and implementation processes.

A number of legislative reforms were made to provide guidance to government leaders on how to put systems in place that promote public participation. Most of these legislative developments were however, found to be lacking especially from the fact that local government structures were designed as service providers to grassroots communities, rather than a collaborating partner with grassroots communities. In addition emphasis on publication participation was either unclear or devoid of practical propositions.

The 2005 Draft Public Participation Framework is probably the most concise legislative document, which clarifies what public participations means and practical ways in which it can be approached. The framework has however been found to be lacking in the sense that it does not embrace all good governance aspects as presented in chapter two of this paper. This limitation is observed as a loop hole in terms of providing supporting mechanisms for participation and achievement of specific needs of bearers of indigenous knowledge and resources – and this applies in cases of appropriation of indigenous knowledge and resources to contribute in the policy development and implementation processes related to HIV/AIDS.

There is, however, a question of whether the propositions made by the Draft Public Participation policy framework are concretely followed. This question will be pursued by way of studying the IDP documents and conducting a field survey, which will seek to interrogate concrete implementation of public participation policy framework by local government duty bearers.

CHAPTER 5

PARTICIPATORY DEVELOPMENT AND INCLUSION OF IKS IN THE CONTEXT OF IDPS

5.1. INTRODUCTION

This chapter is guided by the thinking that IKS inclusion in policy development and implementation can be at the levels of tacit and explicit knowledge. Inclusion at the level of tacit knowledge can be within the general processes where people are not proactively cajoled to share their ideas. They contribute their IK spontaneously by responding to prevailing situations and opportunities. At the explicit level, initiatives are deliberately undertaken by those in control of processes to ensure that IKS takes precedence and/or drives processes.

The researcher takes note that the dichotomy of explicit and tacit knowledge is mainly included from this point of the study because. This is a point where there is movement from the national policy to local municipality policy issues. The dichotomy concerns appropriation of knowledge at the practical level; and it is at the level of the local municipalities where the practical nature of policies is encountered. Thus though some policy pronouncements at the national and provincial level may have relevance in terms of the explicit – tacit knowledge dichotomy, this study has chosen to start using this dichotomy at this stage because policies at the local municipality level are designed to open the door for the practical implementation of national policy agendas.

It has been found important to do this because the two terms, *tacit and explicit knowledge*, have been introduced in this chapter. Thus it was found important to examine their relationship with good governance and relativism since good governance and relativism form key concepts of analysis in this study.

My analyses of IDPs and their accompanying conclusions are focused on answering the question: To what extent is IKS tacitly and/or explicitly incorporated into the IDP processes. In more specific terms, I answer the question about the extent to which appreciation and inclusion of IKS in IDPs is reflected in policy development and implementation in relation to HIV/AIDS interventions.

Note must be taken that conclusions made in this chapter may not specifically represent reality on the ground. What was drawn from the documents was, not verified empirically by studying the communities whose local municipalities' IDPs were studied.

I have started by undergoing an exploration of what IDPs are and the principles and strategies, which render them effective. I have then gone into a review of sampled local municipality IDPs to understand the extent to which they embrace community participation, which becomes a vehicle for inclusion of IKS at tacit level; and to understand the extent they embrace IKS in an explicit way. This review has led to synthesised analysis, which provide conclusions about the extent to which community participation and IKS are integrated in IDPs.

5.2. BACKGROUND OF IDPS

Legislated in 2000 by the Municipal Systems Act (MSA), the Integrated Development Programmes (IDPs) have been rated as one of the key governance tools guiding development in the local government sector in terms of both long term and short term objectives and strategies. IDPs are statutorily esteemed local government tools superseding "all other plans that guide development at a local level" in South Africa (South Africa 2000).

Aspirations presented in the IDPs cover different areas of social and economic development with the main purpose "to foster more appropriate service delivery by providing the framework for economic and social development within the municipality" (South Africa 2000).

At the practical level, IDPs have been considered as defining strategic frameworks and plans of how local government structures should arrive at decisions and achieve development objectives in a democratic manner through "key issues such as municipal budgets, land management, promotion of local economic development, and institutional transformation in a consultative, systematic and strategic manner" (South Africa, 2000).

The general ethical underpinnings of IDPs relate to aspirations of the local government structures effort to be inclusive, pro-poor, and embracing comprehensive reflection and targeting of development priorities; promotion of participation; enhancement of bottom-up approach to policy development and implementation; empowerment of various stakeholders and primary beneficiaries of the local municipality services; and promotion of development sustainability in the way that considers the importance of ecological, economic and social transformation for citizens. Thus IDPs are seen as strategic and practical tools to realise government's democratic vision.

Programmes and projects whose designs are enshrined in the principles and good practices of IDPs are expected to reveal that the ethical principles above are followed both in terms of their processes and choice of target areas. In other words, it is the alignment of these ethical principles to coordination and institutional management instruments and systems in the local government that render IDPs credible. A number of characteristics can be identified as defining what IDP frameworks have been thought to be comprised of:

- Embracing and creating room for interaction between different spheres of the government – local, provincial and national government;
- Defining mechanisms to ensure accountability and partnership in concrete debates of critical issues, planning development agendas and their implementation, and in resources allocation;
- Providing mechanisms for integration of various sectors through government department representative bodies at the local level;

- "Harness[ing] all public resources of the three spheres of government behind common goals and within a framework of municipal support";
- Defining and creating mechanisms for participation of various beneficiary communities and social groups in decisions that concern them; and
- Identification of needs that concern both the municipalities in question and their residents. (South Africa 2000).

The assumptions and theoretical characteristics attached to these principles are that integrated approaches to policy development, and implementation heightens cost effectiveness, innovativeness, effectiveness, and dealing with development problems from their root causes and not from the symptoms (South Africa, 2000).

5.3.   WHAT ARE THE IDPS?

IDPs are strategic frameworks designed to realise the development and democratic agenda of the local government. Development issues and democratic principles are supposed to be part of both the designing process and implementation processes of the IDPs. The democratic slant of these processes is in the fact that development agendas and their implementation are not conducted in the corridors of power and without the involvement of citizens. Citizens are expected to channel their views and other contributions through the structures made available to them. Integrated Development Planning facilitates community participation in the planning processes conducted at the local government level.

Thus the credibility of IDPs is in the extent to which their design and implementation processes create space for continuous engagement with citizens. In line with my discussions in the chapters above engagement of citizens in designing and implementing policies and development processes is critical for various reasons including:

- That the relativistic nature of society implies differences in contexts, and that those entrusted to drive the designing and implementation process should not operate on the basis of preconceived assumptions;
- That citizens are the ones who know what kind processes will be in line with their needs;
- That policy and development process that involve citizens enhance local ownership which may further create foundation for sustainability;
- That in terms of rights based development approach citizens have the right to define and guide the development processes that concern their lives;
- That in terms of functionalistic nature of society all people have specific functions that may contribute in the existence and the dynamism of the whole; and
- That involvement of citizens creates room for transparency, responsiveness and accountability of those in leadership.

All in all, the rationale for involvement of citizens in IDP designing and implementation processes is thought to be a facilitative factor for their efficiency and effectiveness. Efficiency and effectiveness in this regards is deemed to be creation of development impact that is in line with the needs of the citizens and the sustainability of such impact.

5.4. IDP DESIGNING TEMPLATE

According to the South African Department of Provincial and Local Government, designing of IDP frameworks needs to go through a prescribed process which is in line with the democratic principles and aspirations of the South African Government. Steps followed in line with this proposition are indicated in fig 3 below:

Table 7: IDP Development phases

PHASE O: PREPARATION PHASE
- Programme for different planning steps;
- Procedures for consultation and participation; and
- Identification of binding plans and planning requirements.

PHASE ONE: ANALYSIS
- Assess existing level of development through Compilation of existing information;
- Community and Stakeholder Issue Analysis;
- Municipal Analysis: Economic, Environmental, Institutional, Spatial, Socio-economic;
- Agree on Priority Issues; and
- In depth Analysis of Priority Issues through assessing context, causes dynamics, resources and potential related to priority issues.

PHASE TWO: STRATEGIES
- Formulating of long term shared vision (25-30 years);
- Setting of mid-term municipal objectives with related targets and Indicators;
- Deciding on appropriate strategies to address priority issues and achieve municipal objectives and targets; and
- Identification of projects.

PHASE THREE: PROJECTS
- Make preliminary budget allocations for capital and operational expenditure; and
- Design Project proposals and set project objectives, targets, and indicators.

PHASE FOUR: INTEGRATION
- Screen Project proposals;
- Integrate projects and programmes;
- Draft Integrated Plans and Programmes:
  - *5 year Action Plan;*
  - *5/7 year Financial Plan;*
  - *Institutional Plan;*
  - *Integrated Environmental Programme;*
  - *Integrated LED Programme;*
  - *Integrated Poverty reduction and gender Equity programme;*
  - *Integrated HIV/Aids Programme; and*
  - *Spatial Development Framework.*
- **Draft Sector Programmes**
  - *Water Services Development Plan;*
  - *Integrated Waste Management Plan;*
  - *Integrated Housing Plan; and*
  - *Integrated Transport Plan.*

PHASE FIVE: APPROVAL
- Inviting and Incorporating Public Comments; and
- Adoption by council.

PHASE SIX 6 A: MONITORING AND EVALUATION
- Monitor and collate information on implementation management, the achievement of organizational objectives and new information that may have a bearing on IDP; and
- Evaluate the implications of input from the performance management system, the impact and relevance of new information, the achievement of objectives, the impact of intergovernmental and municipal budget review process.

PHASE SIX B: ANNUAL REVIEW
- Use the insights gained through monitoring and evaluating and redraft the relevant sections of the IDP document.

Source: Department of Local Government: South Africa

5.5. THE STRATEGIC APPLICATION OF IDP FRAMEWORK

Local strategic application of the guiding framework as indicated above has been largely in the form of the development of documents known as IDPs documents. As they are legislated plans, IDPs may be thought to be mandatory for local government structures. Every South African local municipality is expected to develop and implement an integrated development plan.

While compliance with this legislation is in the fact that local municipalities have been developing their IDPs, questions may be asked as to whether compliance is also evident in the approaches of developing and implementing processes of the IDPs. In line with the guiding principles underlined above and in line with good governance and public participation principles and approaches. It is particularly important to analyse the extent to which participation of citizens in developing and implementing processes has been embraced.

This question further enabled me to investigate the extent to which such participation has recognised the significance of indigenous knowledge and resources. Thus in essence this enquiry was made with the aim of driving my investigation into IKS inclusion in the development and implementation of IDPs. I did so by looking at a sample of about 75 IDP documents. Focus was particularly given on interrogating the method used to design the IDPs, and the general content of the IDP documents themselves.

5.6. CITIZEN INVOLVEMENT IN DECISIONS AND DEVELOPMENT AT THE LOCAL MUNICIPALITY LEVEL

Citizen involvement is seen by various municipalities as to fall under the arena of public participation. IDP defines public participation as "…an open, accountable process through which individuals and groups within selected communities can exchange views and influence decision-making" (Matjhabeng Loval Municipality (2009 – 2010)).

Public participation is deemed to be a vehicle to fulfilling democratic governance within the municipality structures. It is a statutory requirement and a people's right which must be encouraged as it leads to services that are in line with the "local needs and conditions … narrowing the gap between the electorate and the citizens" (Matjhabeng Loval Municipality IDP Review (2009 – 2010).

5.7. STUDYING THE INTEGRATION OF COMMUNITY PARTICIPATION AND IKS IN IDPS

5.7.1. Sampling Local Municipalities

At the time of conducting the study, there were 231 local municipalities in South Africa. Decisions on sampling local municipalities for the purpose of this study were therefore based on a number of considerations. First, noting that this study was about IKS it was decided that municipalities that were included should not be those whose central social and economic systems are of urban nature. Effort was made to select local municipalities that are outside major South African cities. Selection of local municipalities within the relatively rural districts was done using a controlled random method. The process followed deliberately ensured that selected local municipalities spread across provinces and that the selected local municipalities are situated in relatively rural geographical settings.

5.7.2. Document analysis

Analysis was done by reading 75 IDP documents with specific intention to identify how community participation and IKS were presented in the documents. There were questions used to guide the analysis namely: Are there indications that community participation is depicted as one of the key governance and development principles in the documents? Is the appreciation of community participation in principles of good governance and development reflected in the methodology in which IDPs are developed and implemented? To what extent is the appreciation of IKS evident in the documents as part of good governance and development and community participation processes?

Scaling analysis was used to highlight the extent to which IKS is evident in the documents as part of good governance and its explicit appreciation. The table below indicates how the scaling system was conceptualized.

Table 8: Scaling Parameters for explaining levels of IKS inclusion in good governance and development practices at the local municipality level

Explanation	Scaling parameter used
There is no information which indicate that indigenous knowledge is explicitly embraced at any level	Not evident
There are only one or two areas which seem to bring evidence that indigenous knowledge systems are to a certain degree appreciated	Low
Three areas which seem to bring evidence that indigenous knowledge systems are to a certain degree appreciated are presented, but the areas are conventional in terms of explicit appreciation of indigenous knowledge e.g. traditional leadership, traditional medicine etc.	Mediocre
Mention of three areas which seem to bring evidence that indigenous knowledge is being appreciated and included is accompanied by some general statement which bring insight that generally indigenous knowledge is appreciated and is a key governance and development aspect used in various sectors	Medium
Indigenous Knowledge Systems is generally mentioned as having a critical role in enhancing development sustainability, but no specific sector is mentioned as a vehicle to embrace indigenous knowledge	General
Mention of three or more areas which seem to bring evidence that indigenous knowledge is being appreciated and included is accompanied by explicit indication that indigenous knowledge is the central driving force for good governance and development in the local municipality and IDP in question	Exceptional

Results from the analysis of each studied IDP using the parameters presented in the table above are presented in Table 9 below. The table does not present results for only indigenous knowledge systems analysis, but also information related to community participation. The table has included all 75 IDPs, which were studied.

Conclusions presented under each analysed document provide a compound analysis depicting the level of appreciation and inclusion of community participation and IKS by each local municipality in the IDP context. This is done mainly because, while specific mention of indigenous knowledge aspects may imply explicit appreciation of indigenous knowledge by the local municipality, community participation in general may imply that there is tacit inclusion of IKS in the local municipalities in question.

Table 9: Levels of community participation and indigenous knowledge systems inclusion in governance and development processes under 75 Integrated Development Programmes Documents[45]

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
IDP1	• Recognised as legislative requirement • Recognised as good development practice	• Executed through the consultation of ward committees, and through community survey using templates	• There is no explicit information indicating the appreciation of IKS	• Not evident	Basing on the understanding that participation is a legislative requirement, there is structured participation of local communities in the development of the IDP. There is no evidence that participation at the IDP development level is embraced with the intention of taking the advantage of the value of IKS

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[45]. Please note that the order of IDPs presented here does not correspond with the one in the bibliography. This was done to ensure anonymity.

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
IDP2	• Democratic governance is seen as a principle worthy adhering to, hence appreciation of community participation.	• Executed through the media and local political leaders	• Recognised though traditional leadership and arts and culture	• Low	Community Participation is embraced as a general strategy to implement democratic principles. Traditional leaders' are recognised, which may be a sign of appreciating IKS,, but there is no explicit indication that at the wider level of programme implementation these traditional leaders and their subjects are utilised to make any indigenous knowledge based contributions.
IDP3	• Local community participation is	• Ward Councillors are	• Partially, recognised as an	• Low	Community participation is a recognized principle in

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
	presented as one of the key requirements in drafting and reviewing the IDP. This is influenced by the Batho pele principles	said to drive community participation in development matters through community development workers and wards committees	instrument for youth development through sectorial approach (arts and culture) and consultation of traditional leaders		the development activities of the municipality. Ward committees and community development workers are seen as key instruments to facilitate community participation. However there is no evidence indicating that these ward committees and community development workers are given a deliberate mandate to give a focused attention to IKS. Indigenous Knowledge is approached at sectorial level.

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
IDP4	• Not Evident	• Communities are given the opportunity to analyse their problems	• Recognised through promotion of arts and culture	• Low	The document shows that community participation is used at the technical level when developing IDPs. There is no evidence that this is emanating from the principles of the Municipality's intention to embrace community participation as a major good governance area. IKS is not specifically mentioned as an area of focus at any level. Culture is however given an isolated, not mainstreamed attention as one of the development issues.

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
IDP5	• Followed as part of compliance to Municipal Systems Act and is taken as one of the municipality's strengths	• Community participation is included in the review of the IDP	• Dealt with in isolation at the level of arts and culture	• Low	Community participation is followed as part of compliance to constitutional requirements. IKS is followed on sectorial basis (Arts and Culture). Thus it is isolated from other initiatives of the municipality.
IDP6	• Embraced as a principle of good governance	• Utilised in the development of IDP through ward committees	• Initiatives are principally required to embrace cultural imperatives	• General	Community participation is embraced as a general principle of good governance. Indigenous knowledge is also recognized as an important aspect for development sustainability

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
					enhancement. However there is no evidence of where indigenous knowledge has been embraced in practice.
IDP7	• Communities are recognised as partners worthy of consulting in all matters of development in the municipality	• Embraced as part of core areas of focus in all development initiatives	• The municipality shows that it generally recognises IKS as a critical contributor to development and sustainability	• General	Community participation is consistently presented as an important development catalysing area. Indigenous knowledge is appreciated at the sectorial level and through recognition of its significance in contributing in specific social development areas.

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
IDP8	• Recognised as a channel to identify local problems	• In all issues of development community participation is implemented through Print Media, Electronic Media, Ward committees, Izimbizo, Sector department consultation (IDP Technical Committee). Business forums,	• Appreciated by way of recognising the significance of traditional leadership as a key partner representing its subjects in development issues and specified under environmental issues namely – protection of indigenous plants	• Low	Community participation is channelled through available mechanisms. There is an understanding that community participation needs to be embraced. Traditional leaders are recognized as custodians of indigenous knowledge and key partners in development issues, especially to represent their subjects.

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
		Existing IGR Structures and websites			
IDP9	• Mentioned both as a developmental value and a development strategy	• Recognised as part of the entire public participation strategy in development matters	• Appreciated at the sectorial level - arts and culture and indigenous game conservation	• Low	Community participation is recognized and embraced as a key development strategy at all levels. Indigenous knowledge is only recognised at the arts and culture level.
IDP10	• Recognised as key principle in the municipality's mission statement	• Used as part of the whole public participation strategy. It is channelled through	• Recognised at the arts and culture level and through inclusion of traditional leadership	• Low	Community participation is recognized as both a principle and development strategy. Indigenous knowledge is embraced at arts and culture level only.

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
		various existing structures, e.g. ward councils			
IDP11	• Included as part of good governance principles	• Included in the review processes	• Included in conservation, arts and culture and through appreciation of traditional leadership	• Mediocre	Community participation is embraced as good governance principle. Indigenous knowledge is acknowledged as a critical sector and symbolised through the inclusion of traditional leaders in community participation processes, art and culture sector and conservation issues.

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
IDP12	• Followed as part of the municipality's responsibility to comply to the constitutional requirements	• It is included in the IDP review processes	• Embraced at the level of nature conservation, arts and culture, and consultation of traditional leadership	• Low	Community participation is integrated, not only as development principle, but also sustainability strategy. Indigenous knowledge focus is however limited to three areas namely: conservation, traditional leadership, and arts and culture.
IDP13	• Appreciated in principle as it appears in the municipality's mission statement	• Appreciated as part of common development strategy	• Appreciated at arts and culture level and through recognition of traditional healers	• Low	The principle of community participation is followed as one of the key development strategies. Indigenous Knowledge systems are receiving isolated attention at arts

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
					and culture and traditional leadership levels.
IDP14	• Recognised as one of the key IDP development strategies	• Included in the IDP development processes	• Recognised through consultation of traditional leaders	• Low	Community Participation is recognized as one of key development strategies. Indigenous knowledge receives focus only at the level of traditional leadership.
IDP15	• Recognised as one of the key performance areas	• Included through ward committees	• Embraced through arts and culture and consultation of traditional leaders	• Low	Community participation is embraced as one of the key performance areas. IKS are dealt with at the level of arts and culture and traditional leadership recognition.
IDP16	• Embraced as a development goal	• Used as a strategy to	• Included at the arts and culture	• Low	Community participation is recognised and utilized as

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
	crucial for the success of IDP processes	enhance development success	level. Traditional leadership is also recognized but there is not mechanism to facilitate their contributions		a key development strategy. IKS however do not follow suit. They are embraced only as arts and culture level.
IDP17	• Appreciated as part of good governance practice	• Included as part of general good governance practice	• Included at the arts and culture level	• Low	Community participation is in principle taken as good governance practice. This is reflected at IDP development and implementations level. Indigenous knowledge systems are only embraced at the arts and culture level.

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
IDP18	• Embraced as part of good governance practice	• Appreciated through ward committees	• Recognised at the arts and culture level	• Low	Community participation is recognised and implemented largely at the consultative level. Indigenous knowledge is only dealt with at the arts and culture level.
IDP19	• Appreciated as part of compliance to the constitutional requirements	• Recognised through community meetings	• Appreciated at the level of housing department, consultation of traditional leaders and arts and culture level	• Mediocre	Community participation is embraced within the framework of complying to the constitution. It is largely applied though consultations. Indigenous knowledge is dealt with at the arts and culture level and promoting traditional housing.

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
IDP20	• Appreciated as part of compliance to the constitutional requirements	• Recognised through community structures	• Recognised through engagement with traditional leaders	• Low	Community participation is embraced as part of compliance to the constitutional requirements. Traditional leaders are recognised as key stakeholders and custodians of indigenous knowledge, but their involvement in development matters is limited to consultations.
IDP21	• Appreciated as part of compliance to the constitutional requirements	• Appreciated through community structures	• Recognized through engagement with traditional leaders	• Low	As above.
IDP22	As above	• As above	• As above	• Low	As above

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
IDP23	As above	• As above	• Recognised through traditional leadership, traditional medicine and traditional art and events	• Mediocre	Community participation is included in the IDP development processes. Indigenous knowledge is recognised at the level of recognising traditional leaders, traditional medicine and traditional art and events as important parts of social development.
IDP24	• Understood as part of good governance practice	• Implemented through consultations at the ward level	• Through consultations of traditional leaders in the processes of public participation	• Low	Community participation is being embraced as good governance practice. Ward Committees are used as channels for public participation including

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
					incorporation of traditional leaders.
IDP25	• Understood as part of good governance principle	• Through consultations with communities	• Recognised through traditional leaders and at arts and craft level	• Low	Community participation is embraced as part of good governance practice. Indigenous knowledge is not necessarily presented as critical aspect of development, but recognised at the arts and culture level and traditional leaders are consulted only to share issues that concern their areas.
IDP26	• Embraced as part of good governance principles	• Through consultations	• Appreciated at the arts and culture and	• Low	Community participation is embraced as good governance practice. Indigenous knowledge is

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
			traditional leadership level		not widely utilised. There is only recognition of existence of traditional leadership and appreciation of arts and culture.
IDP27	• Regarded as part of good governance practice	• Largely through consultations	• There is recognition of the existence of traditional entities, but there is no indication of how they are integrated to development processes	• Not evident	Community participation is recognised as part of good governance practice, but there is no evidence of how IKS is utilised.
IDP28	• Regarded as part of good	• Recognised as an important	• Though mentioned as an	• Not evident	Community participation is recognised as one of the

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
	governance practice	part of IDP strategy, but it is not clear whether it has been concretely utilised	important social aspect, no practical inclusion is evident		key principles of good governance. IKS are also recognised, but there is no evidence of municipal mechanisms to utilise it.
IDP29	• Recognised as good governance principle	• Used in the IDP development processes	• Traditional role players such as traditional leaders and healers are recognised as significant role players in the society	• Low	Community participation is being embraced as an important component of good governance. It is also being integrated to IDP development processes largely at the consultation level and through ward committees. Indigenous knowledge systems is recognised at the level of

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
					traditional leaders and healers
IDP30	• Recognised as part of good governance practice	• Executed through consultative meetings	• Recognised through consultative processes with traditional leaders	• Low	Community participation is taken as part of good governance practice. The IDP indicates that structures have been developed for public participation. These structures are largely vehicles for consultation and not for inclusion at every step of development processes. Traditional leaders are consulted as part of one of the strategies to enhance public participation.

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
					However, there is no evidence that this implies incorporation of IKS.
IDP31	• Recognised as an essential part of good governance practice	• Appreciated through consultations through ward committees	• Embraced at the arts and culture level and through traditional leaders	• Low	Community participation is considered to be a good governance practice, but attention to IKS within the context of public participation is limited to the sector of arts and culture and traditional leadership.
IDP32	• Recognised as good governance practice that enhances local ownership of	• Executed through consultations and mechanisms for	• Appreciated at the arts and culture level and through traditional healers at the level of	• Low	Community participation is recognised as good governance practice and mechanisms have been established for inclusion of local communities in

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
	development processes	consultations are developed	addressing HIV/AIDS issues		development related processes. Evidence of attention to IKS is visible only at the level of HIV/AIDS interventions where traditional healers are given space to make their contribution.
IDP33	• Included in its development plans	• Not evident	• Appreciated through education systems, traditional leadership and arts and culture level	• Mediocre	Community participation is generally included in the IDP development. Indigenous knowledge is said to be applied in educational systems, traditional leadership and arts and culture[46].

[46]. KwaZulu Natal is known to be one of the South African areas with strong appreciation of indigenous social systems. In the IDP document it is however not presented as such. One assumption that may be related to this is the possibility that IDP are designed in a specific prescribed structure.

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
IDP34	• Recognised as good governance practice	• Executed through consultations process	• Included at the level of arts and culture (indigenous entrepreneurship)	• Low	There is an indication that community participation takes into considerations of diversity of cultures. But there is no evidence that concerted effort is made to ensure that IKS are used as a primary resource by the local people in their contribution in development activities.
IDP35	• Presented as one of the key good governance principles	• Executed through consultations	• Included at arts and culture level and traditional leadership	• Low	Community participation is given attention as one of the good governance practices. Indigenous knowledge is largely given attention only through appreciation of arts and

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
					culture and through traditional leadership.
IDP36	• Included as part of compliance to statutory good governance practice	• Executed through consultations of various structures	• Appreciated at the arts and culture level and through traditional leaders	• Low	Community participation is included in the IDP processes as compliance to good governance practice. IKS are embraced at arts and culture level and through traditional leadership.
IDP37	• Recognised as a key principle in processes related to IDPs	• Embraced as one of the key terms of reference for development and	• Mentioned as a key area in promoting agriculture and food security	• Low	Community participation is included as one of the key terms of references and legislative requirement for development and management of IDPs. IKS are presented as an important aspect in rural

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
		management of IDPs			agriculture and food security development initiatives in the context of IDPs.
IDP38	• Community participation is included as a key good governance principle	• Executed through ward committees, but there is also a recognitions that general community participation outside ward committees must be embarked on	• Recognition of IKS is at the arts and culture level and inclusion of traditional leaders in development processes	• Low	Community participation is embraced as good governance principle. Ward committees are seen as an instrument for promoting and implementing public participation. There is an observation about using other channels for public participation, but it is not clear what these ways are. IKS are only recognised at the arts and culture level

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
					and through inclusion of traditional leaders in development processes.
IDP39	• The process of developing and reviewing IDPs does indicate that community participation is recognised	• Included as part of reviewing the IDP	• There is no evidence that use of IKS is recognised at any level	• Not evident	Community participation is indicated as one of the key channels of ensuring that IDP processes are responsive to community needs. There is no evidence of use of IKS at any level.
IDP40	• Recognised as a good governance principle basing on compliance to the propositions made by highest government	• Pursued as a way of including the views and needs of the communities in various areas	• Appreciated at arts and culture and social development levels	• Low	Community participation is recognised as a good governance principle and practice. Implementation of community participation is conducted using ward committees. There is

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
	leadership – the president	of the municipality			recognition of the importance of promoting various cultures and their practices both at the social development and arts and culture level.
IDP41	• Recognised as an important aspect of good governance	• Appreciated as an integral part of the IDP development	• Recognised at the arts and culture level and through traditional affairs initiatives	• Low	Community participation is embraced in compliance to legislative good governance practices. IKS are not integral to development processes. They are dealt with at the arts and culture level.
IDP42	• Embraced as one of the key aspects for good	• Integrated to the IDP processes in compliance	• Recognised only at the arts and culture level	• Low	Community participation is recognised and implemented as a principle of good governance

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
	governance practice	with legislative requirements			practice and in compliance with the legislative requirements. IKS are only evident at the arts and culture level.
IDP43	• Embraced as a key good governance aspect	• Integrated through locally instituted structures such as ward committees	• Recognised at the arts and culture level	• Low	Community participation is noted as a key good governance principle, structures for implementation of community participation have been put in place. IKS are appreciated at the arts and culture level.
IDP44	• Recognised as key governance principle	• IDP process incorporates	• Evidently included at the arts and culture level only	• Low	Community participation is recognised as good governance principle. Structures for incorporating

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
		community participation			it into IDP processes are in place. IKS are only embraced at the arts and culture level.
IDP45	• Recognised as one of the key good governance principles	• Community participation forms an integral part in IDP development process	• Indigenous knowledge is included at the arts and culture level and inclusion of traditional healers as an alternative healing system	• Low	Community participation is embraced as good governance practice and implemented through public meetings and community structures such as ward councils. IKS are embraced at the level of incorporating exploration of alternative medicines through consulting traditional healers on matters of traditional medicine.

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
IDP46	• Recognised as a good governance principle on the basis of compliance to the constitutional mandate	• Utilised in the IDP development methodology	• Recognised at the arts and culture level and through involvement of traditional leaders	• Low	Community participation is embraced principally in compliance to the constitutional requirements. It is utilised in IDP development processes. Indigenous knowledge is embraced at the arts and culture level and through the involvement of traditional leaders in decision making processes.
IDP47	• Included as part of compliance to the constitutional mandate	• Included in the IDP development processes	• Recognised at the arts and culture level and through involvement of	• Mediocre	Community participation is recognised as a good governance principle in compliance to the municipal legislative

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
			traditional leaders in public participation processes and traditional healers in conservation and environmental issues		requirements. Indigenous knowledge is included at the arts and culture level. Traditional leaders are involved in the processes of public participation, while traditional healers are incorporated to the conservation and environmental issues.
IDP48	• Incorporated as part of good governance principle and in compliance to legislative requirements	• Included in the IDP development and implementation processes	• Included at the arts and culture level, recognition of traditional legal services through traditional courts, and through involvement of	• Mediocre	Community participation is embraced as a good governance principle and as a requirement from municipalities' constitutional mandate (legislative requirement). IKS are recognised

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
			tradition authorities		through the inclusion of tradition leaders and through recognition of traditional legal services manifested by the existence of traditional court.
IDP49	• Included as a good governance principle and in compliance with the legislative requirements	• Incorporated to the IDP development processes	• Recognised at the level of inclusion of traditional authorities in decision making processes	• Low	Community participation is embraced as a good governance principle and in compliance with legislative requirements. IKS are included only in terms of the involvement of traditional leaders in IDP processes.
IDP50	• Embraced as a good governance	• Incorporated in the IDP	• Included at the arts and culture	• Low	Community participation is recognised as one of the

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
	principle and in compliance with legislative imperatives	development processes	level and through incorporation of traditional leaders in public participation processes		most important good governance principles. Its incorporations largely emanates from the need to comply with legislative requirements. IKS are recognised as one of the important facets in development processes. Their application is limited to arts and culture interventions and at the level of including traditional leadership in public participation processes.

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
IDP51	• Included as one of the key good governance principles	• Incorporated in the IDP processes	• Indigenous knowledge is recognised as one of the areas that need attention in terms of the preservation of cultural practices and also as an important part of public participation to reinforce sustainability. At the implementation level there is an	• Medium	Community participation is embraced as one of the key good governance principles. Indigenous knowledge is understood as a key development aspect in reinforcing sustainability. But there is no evidence that at the intervention level, efforts are made to specifically give space to IKS. Efforts are only visible at the sectorial level and the level of inclusion of traditional leaders in public participation processes.

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
			indication of the incorporation of traditional leaders and sectorial intervention		
IDP52	• Included as a good governance principle	• Integrated to IDP processes in order to ensure that the IDP addresses concrete needs of communities	• IKS are evidently included at the arts and culture level and at the level of the involvement of traditional leaders	• Low	Community participation is embraced as a good governance principle which helps to ensure that the IDP addresses issues that are relevant to the experiences of communities. IKS are limited to arts and culture issues and inclusion of traditional leaders in the IDP forums.

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
IDP53	• Included as a good governance principle and in compliance with the legislative requirements	• Included in the IDP processes at both design and implementation level	• Indigenous knowledge is embraced through inclusion of traditional leaders and traditional healers in the IDP processes and at the arts and culture level	• Mediocre	Community participation is embraced as a good governance principle. Indigenous knowledge incorporation is only at the level of traditional leadership, traditional healers and at the arts and culture level.
IDP54	• Community participation is given consideration on the basis of compliance to the	• Participation is incorporated in the IDP processes	• Indigenous knowledge inclusion is visible at the arts and culture level and through inclusion of	• Low	Community participation is included in compliance to the constitutional requirements. IKS incorporation is only evident at the level of general public

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
	constitutional requirements		traditional leaders in IDP processes		participation, arts and culture level and through incorporation of traditional leadership in the IDP processes.
IDP55	• Included in compliance with constitutional requirements	• Incorporated in the IDP designing and implementation processes	• No evidence of explicit incorporation of IKS	• Not evident	Community participation is embraced in compliance with good governance principles and constitutional requirement. Explicit incorporation of indigenous knowledge is not evident at all

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
IDP56	• Included as a good governance principle and in compliance with constitutional requirements	• Incorporated to the IDP processes	• IKS are included at the arts and culture level and through the inclusion of traditional leaders in community participation processes	• Low	Community participation is included largely as a constitutional requirement, while IKS are included at the arts and culture level and through the inclusion of traditional leaders in public participation processes.
IDP57	• Community participation is included as a constitutional public participation imperative	• Incorporated in IDP design and implementation processes	• No evidence of inclusion of IKS at any level	• Not evident	Community participation is incorporated as one of the good governance principles. There is no explicit evidence that IKS are included.

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
IDP58	• Included as a good governance principle	• Included in the designing and implementation IDP processes	• No evidence of explicit incorporation of IKS	• Not evident	Community participation is included as part of the principle of good governance in the context of public participation strategies. There is no evidence of appreciation of indigenous knowledge at the explicit level.
IDP59	• Community participation forms part of public participation as a good governance principle	• Community participation is part of IDP processes	• Use of indigenous knowledge is only at the arts and culture level	• Low	Community participation forms part of good governance processes at the level of public participation. Indigenous knowledge is embraced at the arts and culture level.

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
IDP60	• Included as a mechanism to enhance community ownership of development initiatives	• Incorporated in IDP processes	• Appreciation of IKS is only evident at the level of appreciation of traditional leadership and arts and culture	• Low	Community participation is viewed as a strategy to enhance ownership and sustainability of IDP initiatives. IKS are only appreciated at the level of recognising traditional leaders and arts and culture.
IDP61	• Included as part of general public participation aspects	• Incorporated in IDP design and implementation processes	• Inclusion of IKS is only at the arts and culture level	• Low	Community participation is embraced as a good governance aspect in the context of public participation processes. IKS are included only at the level of arts and culture initiatives.

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
IDP62	• Community participation is perceived as a strategy to maximise the achievement of objectives of the municipality	• Integrated to IDP design and implementation processes	• Indigenous knowledge systems are included at the level of arts and culture engagements	• Low	Community participation is appreciated as a tool to enhance the achievement of programme objectives. IKS appreciation is limited to arts and culture engagements.
IDP63	• Community participation is perceived as a strategy to address appropriate and meaningful needs of beneficiary communities	• Integrated as one of the key pillars that ensures that the IDPs stand a potential of achieving meaningful results	• There is an indication of effort to integrate IKS at the arts and culture level, traditional leadership and traditional healers levels	• Mediocre	Community participation is given priority as a mechanism to enhance assurance that issues addressed are in line with community needs. IKS are appreciated at the sectorial, traditional leadership and the

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
					involvements of traditional healers.
IDP64	• Community participation is appreciated as a good governance practice in line with constitutional requirements	• The methodology of designing and implementing the IDP incorporates community participation	• Evidence of appreciation of indigenous knowledge is only at the level of incorporating medicinal plants for the development of economic opportunities of the local communities	• Low	Constitutional requirements have formed the basis for inclusion of community participation. IKS are noted to be appreciated only in terms of searching ways of creating community economic opportunities through medicinal plants.
IDP65	• Community participation is appreciated as a	• Integrated to IDP designing and	• There is no evidence of use of IKS	• Not evident	There is a general appreciation of community participation. Appreciation

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
	good governance principle	implementation processes			of IKS in is not evident at all.
IDP66	• Community participation is appreciated as a good governance principle in line with the constitutional requirements	• Integrated to IDP designing and implementation processes	• The incorporation of IKS is only visible at the arts and culture level	• Low	Community participation is appreciated as a good governance principle through the influence of the constitutional requirements. IKS are evidently appreciated only at the arts and culture level.
IDP67	• Community participation is appreciated as a good governance principle and is applied in	• Community participation is seen as critical at the level of situation	• Indigenous knowledge is evident at the arts and culture level and in terms of the inclusion of	• Low	Community participation is appreciated as a good governance principle and is applied in compliance with constitutional requirements. Inclusion of IKS is evident at the arts

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Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
	compliance with constitutional requirements	analysis in IDP processes	traditional leaders in IDP processes		and culture level and in terms of the inclusion of traditional leadership in IDPs.
IDP68	• Community participation is regarded as a mechanism to ensure that issues addressed are in line with the needs of the people	• Incorporated to IDP processes through consultative meetings	• IKS are evidently appreciated at the arts and culture level	• Low	Community participation is being appreciated as a strategic mechanism to reinforce efforts to address real issues that concern the people. IKS are however not explicitly appreciated except from arts and culture angle.
IDP69	• Community participation is evidently included as a mechanism to reinforce	• Integrated to IDP designing and	• Indigenous knowledge is evident at the arts and culture level	• Low	Community participation is embraced as a mechanism to reinforce ownership of IDP processes. IKS are however not included

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
	ownership of IDP initiatives	implementation processes			beyond the arts and culture level.
IDP70	• Community participation is explicitly included as a constitutional requirement	• Integrated to IDP designing and implementation processes	• Indigenous knowledge incorporation is merely visible in terms of appreciation of traditional leadership	• Low	Constitutional requirements are a key driver the for inclusion of community participation. Appreciation of indigenous knowledge is not explicit. There is only a mention of incorporation of traditional leadership as part of mechanisms for public participation.
IDP71	• Community participation is appreciated in compliance to	• Integrated to IDP designing and	• There is no clear evidence of appreciation of indigenous	• Not evident	Community participation is appreciated as a constitutional requirement and mechanism to reinforce addressing real

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
	constitutional requirements while at the same time understood to be a method to reinforce efforts to address issues that are critical to the needs of the communities	implementation processes	knowledge systems		issues. Appreciation of IKS is not evident.
IDP72	• There is a lot of mention of efforts made to include public participation.	• Not evident	• Appreciation of indigenous knowledge is only evident at the arts and culture level	• Low	It is not clear to what extent community participation is included as it is all inhibited in the general public participation processes. Explicit inclusion of IKS is only at

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
					the level of arts and culture engagement.
IDP73	• Community participation is included in compliance with constitutional requirements	• Included through consultation of ward committees	• IKS are pronounced to be included in disaster management processes. There is also an indication at the arts and culture and incorporations of traditional leaders levels	• Mediocre	Community participation is noted as a key aspect in IDP processes as a requirement from the constitution. There is understanding that IKS can be useful in disasters management. Indigenous knowledge is also conventionally appreciated at the arts and culture and traditional leadership level.

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
IDP74	• Community participation is appreciated as a constitutional requirement	• Incorporated through ward committees	• Indigenous knowledge is appreciated at the arts and culture level and traditional leaders are noted as key role players at this level	• Low	Constitutional requirements are the basis for the appreciation of community participation. Inclusion of indigenous knowledge is in terms of Arts and culture and acknowledgement of traditional leaders as key role players in the promotion of traditional culture
IDP75	• Community participation is noted to be included in compliance with	• Integrated to IDP designing and implementation processes	• IKS are pronounced to be included in disaster management processes. There	• Mediocre	Community participation is included as a constitutional requirement. IKS are appreciated as one of the key considerations in disaster management.

Municipality (Actual names withheld)	Participation in principle	Participation in methodology	Inclusion of IKS	IKS Score Level	Conclusions
	constitutional requirements		is also an indication of inclusion of IKS at the arts and culture and incorporations of traditional leaders level		Conventional appreciation of indigenous knowledge at the arts and culture level and through traditional leadership is also evident.

5.8. INTERPRETING THE INTEGRATION OF COMMUNITY PARTICIPATION AND IKS IN IDPS

5.8.1. Method of interpretation

There are two concepts, which I employed in this analysis in order to bring out a proper understanding of the extent to which IKS is incorporated into IDPs. First, analysing the table above from the angles of community participation I referred to IKS which presents itself to the society in a tacit form. According to Gunson (1998) tacit knowledge implies an internal or intuitive disposition which a person possesses. This disposition may be analogous with the spoken words or actions of the subject in question.

> …the adequacy of this general position [tacit knowledge] … depends, to a larger extent on the philosophical credentials of the states whose structure is thought to be mirrored by the theory of meaning. Such states are thought to have certain features which, it must be admitted, cry out for elucidation. For example, the role that such states play in the explanation of the display of speakers' disposition is rather analogous, in certain respects, to international explanation of the kind that exploits belief/desire psychology. On this model [tacit knowledge model] the explanation of a particular piece of behavior sees it as a consequence of the procession by the subject of certain attitudes to certain contents. Moreover, this would seem to require that the subject is conscious of the content of his attitudes (Gunson 1998: 146).

Bearing the explanation of tacit knowledge in mind the method of interpreting the extent of inclusion of IKS in IDPs was based on analysing the extent to which IDPs include community participation (community participation can be a vehicle for inclusion of tacit knowledge) as a way of ensuring that community knowledge systems drive ideas, concepts, decisions, programs and their implementation. I also explored the question how drivers of IKS are included in the local IDP policy development and implementation bodies, especially in ward committees in order to tap on their knowledge in a tacit way.

Second, I analysed the IDPs by tracing direct or explicit inclusion of IKS. I noted that this happens in the form of special provisioning[47] for IKS. In this analysis it was revealed that specific aspects of IKS are explicitly given attentions and presented in the IDPs as areas demanding and/or receiving social and economic development focus.

5.8.2. Community participation as vehicle for tacit appreciation of IKS

IDP documents, as analysed above, show that public participation is one of the constitutional requirements, which local municipalities have complied with in a discernible way. Statements are presented in almost every IDP document, indicating that local municipalities have included public participations in compliance to the Section 28 of the Municipals Act. This Act postulates community participation as one of the key components of public participation. IDPs are developed and implemented in fashion that incorporates community participation.

Development practitioners would however, argue that community participation comes in different forms, some of which are more comprehensive and effective in their inclusivity than others. Thus I am compelled to pose the question: What kinds of approaches of community participation are used by the municipalities studied above? Table 10. below indicates different levels of community participation as presented by Mose Kotane Local Municipality IDP document and helps us to answer this question in a succinct way.

Observations from Table 9 above, indicate that at least 26 of the studied IDPs have clearly shown that consultation through ward committees is the key method they employ to mobilise communities for participation in the IDP processes.

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[47]. The term "special provisioning" has been coined from the understanding that specific stipulation is made in the IDP documents to focus on IKS in isolation from other aspects under attention.

This is confirmed in the "Guidelines for the establishment and operation of ward committees" gazette by the Department of Provincial and Local Government (Notice 965 of 2005) which indicates that one of the functions of ward committees is *"Disseminating information in the ward concerning municipal affairs e.g. the budget, IDP, performance management system, service delivery options and municipal properties"* (Community Law Centre 2009: 14)

In its publication entitled, *The role of Ward Committees in enhancing participatory local governance and development in South Africa: evidence from six ward committee case studies,* The Community Law Centre states,

> Since 2001, ward committees have emerged as a key institutional mechanism intended to contribute towards bringing about people-centred, participatory and democratic local governance. The rationale for ward committees is to supplement the role of elected councilors by creating a bridge between communities and the political and administrative structures of municipalities. These committees have been set up in the vast majority of wards in municipalities across the country (Community Law Centre 2008: 4).

While ward committees are noted to be locally based structures, they are constitutionally established entities by the local government leaders. Authority for the local government leaders to establish ward committees was first instituted in 1998 through the Municipal Structures Act (No. 117). The Act prescribes the composition, framework, powers and functions and governance procedures of ward committees. The link between ward committees and community participation in matters relating to policy making and implementation was officially instituted in 2000 when the Municipals Systems Act (No. 32) was issued. Among other things the Systems Act made prescriptions of what systems and processes must be in place to enhance community participation. Ward committees were then seen as central instruments for enabling community participation and educating communities about how they must participate in policy development and implementation matters. (Community Law Centre 2008: 6-7)

Thus establishment of ward committees is not out of the communities' own proactive acumen – out of communities' principled practice. Rather, they are top-down imposed structures. This is so far-reaching in that its institutionalisation emanates from the constitutional structures of the political systems of the day. The institutionalisation does not stop only at the point of their establishment. It goes as deep as prescribing critical principles, behaviors and *modus operandi* of the ward committees. In addition, the Municipal Systems Act shows that prescriptions relating to both the composition and representation of social interests of local people do not specifically mention IKS or the social role players that represent IKS themselves. Hence there is no mechanism to ensure that where IKS may seem to be useful at the tacit level it may be appreciated and protected through the local structures such as the ward committees.

To this effect, it is worthy arguing that the inclination of ward committees toward responding to systemic processes and behaviours of IKS as a resource for decision-making and development is compromised. I conclude that ward committees are not a product of indigenous knowledge; hence they have no capacity to behave as such. In addition, the constitutional instruments used to guide the establishment and operations of the ward committees have not shown any inclusion of IKS; hence even at the constitutional level, there is no influence for the ward committees to incorporate IKS as one of the key resources for local policy development and implementation.

In juxtaposition and without engaging in any scientific analysis, theoretical reasoning may however show that consultations in the context of community participation operations are generally not limited to ward committees. Other structures such as traditional leaders, traditional healers, local businesses, religious leaders are also consulted. It can further be argued within the same context that since ward committees are locally based structures, by creating general room for participation, they automatically create room for the local people to share their views which are a product of their local knowledge systems – hence a product of their IKS.

In light of Table 10 below this leaves me with the argument about the levels of participation. The analysis of local municipalities as presented in the Table 9 above shows that consultation through various channels and with various social role players is the major method of community participation employed by the local municipalities. In this operational fashion, the mandate of development officials representing the government is already determined, meaning that ideas about what needs to be done are already thought through – and consultation is undertaken simply to validate or provide a local dimension to programmes that have already been decided upon. This according to Table 10 below is participation level 3, which is:

> Participation seen by external agencies as a means to achieve project goals, especially reduced costs. People may form groups to meet predetermined objectives related to the project.[48]

This means the approaches used in mobilising for community participation are lacking because they provide limited room for communities to self-analyse. They do not allow communities to define objectives and means of achieving them so that they can engage in collaboration with local government leaders only for resources and additional support that can facilitate the achievement of their goals and objectives. Such participation may also undermine local knowledge as communities collaborate with local government leaders to make their contribution in already set objectives (which may have already ignored the importance of IKS) and not locally set objectives.

One would still argue that before local municipalities engage with local communities they conduct needs analysis whose findings are further used to define the objectives and so the development and decision-making leaders do not only act on their mandate without locally based information. This argument may however not be in harmony with trends of how indigenous knowledge is used by the local people. In their use of local and tacit knowledge local people do not base their activities on scientific analysis. Rather, they respond to issues and needs as they emerge at face value - as social and environment systems change.

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[48]. See Table 10 below.

It can further be argued that top-down establishment of ward committees, limitedness of consultation processes and lack spontaneity in responding to emerging issues are not exhaustive enough to lead to conclusions that participation of communities in IDPs is limited. Some local municipalities have indicated approaches to enhance community participation which are organised around a number of stages, known as action objectives. Community participation stages below from IDP12[49] and Table 10 below illustrate the understanding of community participation at the practical level as seen by some of the local municipality IDPs:

> *Stage 1:* Mobilize communities to participate in the planning and implantation of government programmes;
> *Stage 2:* Popularise and ensure participation in IDP and budgetary processes;
> *Stage 3:* Inform communities of their rights [to participate in the programmes government leaders themselves have put in place];
> *Stage 4*: Promote and practice a people centred local government within the context of Batho Pele;
> *Stage 5*: Build and enhance capacity of Ward Committees and community Development Workers (CDW);
> *Stage 6*: Provide communities with accurate, up to date information about municipal plans, projects and programmes;
> *Stage 7:* Account to the citizens about progress, achievements, failures and challenges; and
> *Stage 8:* Market government services.

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[49]. This is the IDP12 presented in Table 9 above. Abbreviations are used for the purpose of anonymity.

Table 10: Types of community participation

1. Self-mobilization	2. Interactive participation
People participate by taking initiatives independently of external Institutions for Resources and technical advice they need, but retain control over how resources are used.	Groups take over Local decisions and determine how available resources are used, so they have a stake in maintaining structures or practices. People participate in: • Joint Analysis, • Development of Action Plans and • Formation or Strengthening of Local Institutions.
3. Functional participation	**4. Participation for material incentives**
Participation seen by external agencies as a means to achieve project goals, especially reduced costs. People may form groups to meet predetermined objectives related to the project.	Participation by contributing resources, for example: • Labour in return for food or Cash or other material incentives.
5. Participation by consultantion	**6. Passive participation**
People participate by being consulted and answering questions. External agents define problems and information gathering processes, and so control analysis. The process doesn't concede any share in decision making; Professionals are under no obligation to take on board people's views.	People participate by being told what has been decided or have already happened. It involves unilateral announcements by an administration or project management without any listening to people's responses.
7. Manipulative participation	
Participation is simply pretense, "people's" representatives on official boards but who are not elected and have no power.	

Source: Moses Kotane Local Municipality Draft IDP
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Table 11 below shows results from logical examination of the stages drawn from IDP12 as presented above, against the understanding of the ideal approach to community participation that enhances effective inclusion of IKS in development processes.

Table 11: Samples of IDP Action community participation related objectives

IDP Action objectives for promotion of community participation	Compatibility with ideal community driven approaches that should create enough room for IKS mainstreaming
Mobilise communities to participate in the planning and implantation of government programmes	***Not compatible because:*** Communities have to be self-motivated and mobilised and programmes need to come from communities and not governments.
Popularise and ensure participation in IDP and budgetary processes	***Not compatible since IDPs and their budget are developed by government leaders:*** Popularisation should be of that which people have decided to do. Government structures should provide technical support and resources for the people-demanded and self-driven popularisation processes.
Inform communities of their rights [to participate in the programmes government leaders themselves have put in place]	***Not compatible:*** People should be informed of their rights, not related to participating in what the governments have already established, but to drive what they themselves have identified and decided to be the focus for self-development.
Promote and practice a people centred local government within the context of Batho Pele	***Not compatible:*** People centredness of policy development and implementation must not be decided upon by leaders, but by the communities themselves. Batho Pele is a principle established and controlled from the top-down angle.
Build and enhance capacity of Ward Committees and	***Not compatible:*** Both ward committees and community Development Workers are top-down established structures.

IDP Action objectives for promotion of community participation	Compatibility with ideal community driven approaches that should create enough room for IKS mainstreaming
Community Development Workers (CDW)	
Provide communities with accurate, up to date information about municipal plans, projects and programmes	***Not compatible***: Because information about plans, projects and programmes presented to the people are already decided upon by government leaders. They should rather be decided upon by the communities themselves.
Account to the citizens about progress, achievements, failures and challenges	***Not compatible:*** While accountability is important, it should not be applied in presenting progress, achievements, failures and challenges. It should be about opening space for people to identify, define and address their own needs, achievements, failures and challenges and accounting on the extent to which leaders provide an enabling environment for community to engage in activities that help them to engage in these activities.
Market government services	***Not compatible:*** Marketing would not apply where communities are the initiators of projects, programmes, and their related services as they are the owners of processes and their outcomes.

Source: IDP12

The action objectives/stages from IDP12 presented above indicate examples of operational aspects that municipalities may integrate in IDPs to promote participation. Testing these examples against the ideal and effective participation approaches of self-mobilisation and interactive engagement in Table 10 above, which would be considered conducive for the creation of space for IKS, Table 11 above informs us that there is a gap.

These IDP action objectives do not present themselves as compatible with the ideal development approaches tuned around recognising IKS as a defining force for policy development and implementation.

Thus observations above indicate that ward committees and their systems are top-down established structures. Participation of communities in IDPs is approached at the level of consultations and objectives related to enhancing participation on communities in IDPs are leaning towards top-down principles and approaches. This conclusively brings me to the point that participation as presented and approached in IDPs is not a justification for inclusion of IKS in IDPs at least at the tacit level. In other words, examining approaches used by local government leaders and officials for IDPs I noted that there is no evidence that IKS is included in these processes at least at the tacit level.

5.8.3. IDP Tacit inclusion of IKS and good governance factor

We can examine our observations above in light of good governance principles with the intention to answer the question: Looking at the level of tacit inclusion of IKS in IDPs as observed above, to what extent are IDPs following the principles of good governance? I conducted this examination by referring to aspects of good governance presented in chapter 2 above namely: *participation, rule of law, transparency, responsiveness, consensus oriented, equity and inclusiveness, effectiveness and efficiency, and accountability.*

Participation: Participation is about the people being involved in the decision-making processes that concern them. It is noted that there are many decisions about the design and implementation of IDPs that are made by government leaders and not the people themselves. Furthermore, at least in the context of ward committees, which are some of the major vehicles of community participation, IKS has been noted to receive no direct appreciation.

Rule of Law: IKS are generally known to be associated with traditional legal systems. However, the dominance of modern legal systems today has meant that they must play a role of creating an enabling environment for the beliefs, ideas and practices associated with IKS to be integrated to social systems wherever necessary.

As noted in Chapter 2, legitimate rule of law must be that which protects the interests and priorities of the grassroots people. Participation in policy development and implementation processes by the local people is their constitutional right. However, as noted in chapter 4 above the policies related to good governance in relation to public participation do not include rule of law and its enforcement. In this nerve, if tacit inclusion of IKS in IDP policy development and implementation processes is to emanate from public participation, we can safely say that it is not protected by rule of law since public participation itself is not protected by rule of law. Moreover lack of direct appreciation of IKS in ward committees has automatically resulted a lack of use of IK legal systems to stand any chance of being used as a tool to bring about rule of law for the designing and implementation of IDPs in order to pave way, not only for the IKS, but also for the meaningful participation in general.

Transparency: The inclusion of participation as one of the key principles in IDP decision making and development processes should help to accept that transparency is automatically appreciated since opening the room for participation assumes the window for those who participate to see internal processes. In this case it is noted that where there is limited participation there is limited transparency. Thus in light of the observations made above that there are many IDP related processes (development of ideas, designing of programs and so on) that cannot be considered as including participation. These are devoid of transparency. As participation is a vehicle for the inclusion of IKS at a tacit level it stands that limited participation automatically translates to limited transparency of IDP processes to those who would have appropriated the transparency opportunities for advocating for the inclusion of their IKS.

Responsiveness: Responsiveness means that all social groups have their interests included in the decisions and development process. It is noted that IDPs at the tacit level are lacking in the inclusion of IKS. Thus as far as tacit integration of IKS into the IDPs is concerned, there is limited responsiveness from local government leaders.

Consensus oriented: Consensus assumes that all concerned parties understand reasons why certain decisions are made. I assert that meaningful consensus can only be reached through participation processes, since participation results to meaningful understanding of ideas, concepts and programs. Limited participation will therefore automatically translate to limited consensus. As long as the custodians of IKS do not have enough space for contribution in key decision-making processes at the tacit level, they cannot be counted as part of whatever might emerge as commonly agreed decisions and processes.

Equity and inclusiveness: The fact that there is limited tacit inclusion of IKS in the IDPs means that those adhering to IKS cannot take themselves as having an equal stake in the concerned policy development and implementation processes with all other social groups involved.

Effectiveness and efficiency: Effectiveness and efficiency implies best use of resources in a manner that promotes and ensures sustainability and protection of environment. Limited appreciation of IKS in IDP development processes may undermine sustainability and protection of environment since integration of IKS means that people are able to make contributions that emanate from social aspects in which they are competent enough to make meaningful decisions. Thus in as far as tacit IKS and their bearers are concerned IDPs cannot be treated as effective and efficient.

Accountability: Accountability assumes that those who are in power open up space for their actions to be scrutinised by citizens. Those who scrutinise can provide their feedback to their leaders on the basis of their ideas and ideals in which they are competent. Indigenous people are competent in indigenous knowledge.

Thus lack of incorporation of tacit indigenous knowledge in IDPs means that indigenous people cannot scrutinise the actions of their IDP leaders using their tacit knowledge. Hence IDPs leaders cannot tacitly claim to be accountable to bearers of IKS.

All in all, analysis of integration of IKS in IDPs in light of good governance principles tells us that those principles are not respected. In other words, those inclined to understand IDPs from the perspective of their tacit IKS can argue that IDPs do not follow good governance principles. They follow principles that are foreign to them and that have nothing to do with their experiences and concerns.

5.8.4. Inclusion of IKS in IDPs in light of sociological perspectives: A synopsis

From Sociological perspective it has been noted earlier that inclusion of IKS, whether it is analysed from Parson's functionalistic, rebelling, conflict, interactionist or Durkheim's Structural Functionalism view is a relative social aspect, since it concerns the engagement with social issues in ways that are relative to the contexts in question and using knowledge and resources relative to the contexts and peoples in question. By understanding that the notion of IKS being employed in this study is specifically about knowledge that people have in a particular context, through their tradition, learning by doing and adapting themselves to outside forces, IKS has been understood to be synonymous with relativism. Thus in as much as there is no evidence that IKS is being embraced in IDPs at tacit level I also conclude that relativism is not being embraced at tacit level in the studied local municipalities (See Chapter 3 above).

This assertion is further supported by the fact that in the guidelines of ward committees, which could play a part in the incorporation of tacit IKS, social role players that play the function of guiding the society about IKS are not directly mentioned as one of the key partners in policy development and implementation processes.

From conflict position, on the one hand, it is noted that due to social control of those who guide and protect, IKS is not recognised at least at the level of ward committee structures.

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It is learnt that social control is dominated by the leaders attached to government and political systems and this further aggravates a lack of appreciation of the social control which could be exhibited by the custodians of IKS.

From the interactionist view, analysis on participation above entails that, while opportunities are created for various role players to interact with others through IDP processes, there is no evidence that such interaction is meaningful in rendering IKS instrumental for enhancing policy development and implementation processes.

This in essence shows that there is no deliberate effort made within participatory approaches employed for IDP policy development and implementation processes to appreciate sociological perspectives from the IKS angle.

5.8.5. The explicit inclusion of IKS in policy development and implementation processes

From the above discussion, one cannot conclude on the extent to which IKS is included in policy development and implementation processes related to IDPs. The gap, which needs to be filled is that which may shed light about the explicit appreciation of indigenous knowledge systems. In this section, this will be done with reference to the analysis of local municipalities presented in the Table 9 above. Thus the attempt to answer the question: What does the table tell us about the extent to which local municipalities explicitly incorporate IKS? What conclusions can be made? I start this reflection by presenting a graph below.

Figure 9: General level of explicit IKS inclusion in local municipality IDPs[50]
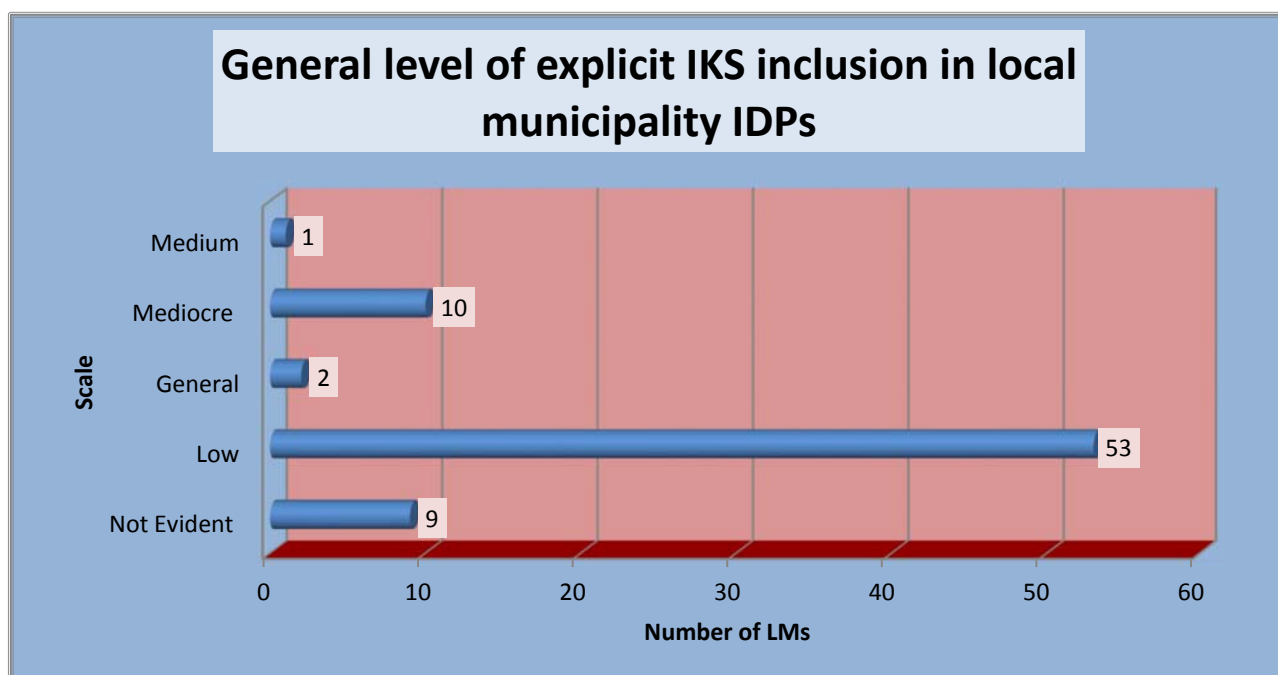
Source: Table 9 on the levels of community participation and IKS inclusion in governance and development processes under 75 IDPs

The graph above indicates that at least 53 local municipalities recorded low inclusion, ten recorded mediocre inclusion, two general inclusion, and one medium inclusion; while nine recorded no evidence of inclusion of IKS at any level. Thus this analysis leads to the conclusion that there is generally low explicit incorporation of IKS in the IDP process.

The analysis further indicates that for those local municipalities that show explicit incorporation of IKS, the inclusion is largely through sectors such as arts and culture, traditional healing, traditional leadership and efforts of interacting with indigenous people in selected initiatives such as those tackling conservation of nature. This means that they treat indigenous knowledge systems as a separate social sector that has no or limited functional connection to other social and economic development processes.[51]

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[50]. For the meaning of the scale consult table 8 above

[51]. The assertion here is that if the appreciation was not limited, IKS would have been considered as applicable in almost every sector.

Thus general systematic analysis as presented in Table 9 and Figure 9 above leads to the conclusion that as far as IDPs are concerned, explicit incorporation of IKS at the local municipality level largely takes the form of special provisioning, rather than mainstreaming[52] form. This incorporation is however low. In other words, IKS in context of IDPs is largely appreciated only in one or two social sectors.

Inclusion of IKS in the IDPs at special provisioning level implies that IKS is treated as an isolated sector within the larger spectrum of sectors accommodated in policy development and implementation processes. Further, it means that where application of IKS is made to address social and economic issues, such application is isolated from the main social and economic arena where key decisions are made. For example, when IKS is applied in social and health practices such application will not be given similar facilities and authority as given to modern health practices which largely dominate the agendas and programmes of decision makers and health programmes implementers.

5.8.6. Applicable definition of IKS in the context of explicit and special provisioning[53]

Explicit or special provisioning of IKS largely follows the pattern of looking at IKS as a specific sector isolated from other sectors. Thus explicit or special provisioning of IKS is largely in congruent with the definitions of IKS, which aspire to imply that IKS is a social aspect emanating from people's traditional practices and not specifically from lessons acquired out of interaction with and involvement in various social and economic developments in their social context. Explicit or special provisioning of IKS is therefore in conformity with the definitions about Indigenous peoples given by Martinez Cobo, the World Bank and the ILO as presented in Section 2.3.2 above which in the main imply that indigenous peoples and their IKS have distinct pattern of social systems that emanate from the influence of their ancestral beliefs, social life and practices.

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[52]. Mainstreaming in this context means integration of IKS aspects to various areas of development processes
[53]. Note must be taken that the terms "explicit" and "special provisioning" are synonymously utilized.

In essence, explicit and special provisioning of IKS is not inclined to looking at daily social developments and make adjustments about life in line with such developments. Rather, it aspires to keep people remaining in their traditional beliefs, practices and lifestyles that have been handed over to them from the past generations. If anything of development nature is to happen to address the social, political and economic conditions of people, it has to happen without comprising people's traditional beliefs and practices which have been transferred to them from their ancestors and sometimes initiatives will stress that such development must precede critical analysis of IKS itself so that relevant aspects that need to be connected to the initiative in question must be isolated and appropriated accordingly.[54]

In the final analysis, this renders explicit and special provisioning of IKS an enclosed social evolvement whose developments find limited or confined space in enhancing the developments in other sectors under the IDPs.

5.8.7. The relationship between good governance and explicit or special provisioning of IKS

In this section I reflect on various good governance aspects and their relationship to special provisioning or explicit appreciation of IKS. In other words, I seek to understand the extent to which IKS benefit from the commitment of local government decision makers and development practitioners to embrace good governance principles. Good governance principles reflected upon earlier: *participation, rule of law, transparency, responsiveness, consensus oriented, equity and inclusiveness, effectiveness and efficiency and accountability* will be referred to.

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[54]. This could be the case in situations where IKS is integrated to issues about nature conservation. And when we reflect about the relationship between explicit IKS and HIV/AIDS issues later we will discover that a process of dual special provisioning takes place in such cases.

Participation: Since in special provision sectors are approached in separation from other sectors it is true that it does not provide space for the bearers of IKS to make contribution in all other sectors. Such approach implies that their indigenous knowledge and resources are regarded as having no relevance to other sectors. However, since IKS in this context is included in the global IDP documents, it can be said that special provisioning provides for isolated participation, and not mainstreamed participation for IKS.

Rule of law: In special provisioning the principle of rule of law is respected in the sense that people are able to enjoy their rights of expressing themselves through their cultures, arts and other forms of traditional practices[55]. But in the context of IDPs such privilege can also be counted as limited since expression of ideas and needs by IKS bearers are confined to the sector they belong. Thus we can conclude that while the rule of law is being appreciated in terms of the right to express oneself through one's own culture, arts and traditional beliefs the limiting factor in terms of special provisioning for IKS in the IDPs is that the right for such expression is limited to the IKS sector itself – IKS is not used to strengthen the impact of other sectors included in the IDPs.

Transparency: As transparency implies visibility of various processes and decisions made or facilitated by leaders for their citizens, one can argue that special provisioning does not provide room for visibility to the IKS bearers of other IDP processes conducted outside IKS sector. Thus in special provisioning, transparency, as an aspect of good governance principles, suffers limited appreciation.

Responsiveness: As noted above responsiveness assumes appreciation of interests of various social groups by leaders. Including IKS at the level of special provisioning is an indication that IKS bearers as a particular social group have their interests recognised. However such appreciation may not be considered as all-encompassing since it does not translate to actions geared towards making IKS being the main contributing sector to developments and decisions in other sectors.

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[55]. Note must be taken that enjoying of human rights at this level does not emanate from the local government public participation systems. Rather it is from statutory requirements related to human rights in general.

Consensus oriented: Consensus asserts that different social groups understand reasons why certain decisions are made. IDPs are based on decisions, ideas and developments from and for various sectors in the local government. Consensus in this case therefore concerns ensuring that role players from various sectors understand the whats, whys, wheres and hows concerning the entire IDP including aspects that are not specific to the sectors they belong. In special provisioning IKS is treated separately from others. In that way consensus may be only that which concerns the IKS sector itself. This may mean that IKS bearers have no opportunity to engage with the decisions and processes concerning other sectors, but may have bearing on their lives.

Equity and inclusiveness: In as far as IKS is given attention through special provisioning approach like all other sectors, one would say that IKS is treated with equity vis a vis other sectors. Special provisioning however, means that bearers of IKS are not included in decisions that concern other sectors. To this effect special provisioning is understood as bearing the potential of appreciating equity while simultaneously compromising on inclusiveness.

Accountability: From special provisioning perspective, accountability is only limited to the sector in question. Lack of involvement of IKS bearers in the affairs of other sectors means that the IKS bearers do not have a window to scrutinise on the extent to which other sectors appreciate their concerns. Thus special provisioning only provides for closed accountability.

In the final analysis, appreciation of good governance principles at the level of explicit or special provisioning for IKS is limited as it is confined to the IKS sector itself while IDPs are supposed to be plans that enjoy the interlacing of various sectors towards one direction. When sectors are appreciated, treated, consulted and included in decision-making and development processes in isolations from others it is impossible that their ideas, resources and values can make their way into the developments that concern other sectors.

In addition as indicated in Figure 9 above, aggregated analysis reveals that inclusion of IKS in IDPs at the explicit (special provisioning) level is low. This observation reinforces my conclusions about limited appreciation of good governance principles in relation to IKS in the context of IDPs. Thus limitation of IKS inclusion in the IDPs is brought about by the fact that special provisioning is inherit with limitations and further by the fact that special provisioning is an approach with limited potential to influence integration of IKS in IDP decisions and development processes beyond the IKS sector itself.

5.8.8. Explicit appreciation of IKS and relativism

Special provisioning or explicit inclusion of IKS provides room for communities to practice their beliefs, practices that are relative to their IKS. Integration of IKS into IDPs through special provisioning implies that recognition of relativist needs of the communities is recognised by their leaders. However, in as much as the recognition of IKS is at the special provision level I have every reason to claim that such recognition is lacking as there is limited room to apply the IKS in other sectors that are relative to the context to which the IKS resources and bearers belong.

Thus I conclude that the understanding that the special provisioning means inclusion of IKS in a confined and limited way also implies the recognistion of relativism in a confined and limited way[56].

5.8.9. Tacit inclusion of IKS in decisions and processes about HIV/AIDS in IDPs: an inferential observation

As observed above, general application of IKS at the tacit level is totally flawed due to the fact that structures and approaches used for participation such as ward committees, consultations and community needs surveys are top-down in nature.

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[56]. As our analysis of various sociological perspectives in chapter 3 has touched on issues related to disease and sickness, our reference to these sociological perspectives will be largely reflected upon in the next chapter where the main focus will be HIV/AIDS and IKS in IDPs.

In other words, they are designed and decided upon by government officials themselves and brought to the communities only at the level of either validation or implementation.

Thus by way of inference it is logically understandable that all sectors included in the local IDP processes are prone to suffer lack of IKS appreciation at the tacit level due to the fact that IDP design and implementation channels are inherently and largely devoid of IKS appreciation. Lack of IKS recognition cannot go without affecting HIV/AIDS issues presented in the IDPs. Within the IDP context and at the tacit level HIV/AIDS decisions and processes at the local government level do not enjoy the inclusion of IKS as one of the key instruments for effective response to the HIV/AIDS epidemic.

5.8.10. Explicit inclusion of IKS in decisions and processes about HIV/AIDS in IDPs

As observed above, explicit inclusion of IKS in IDP policy development and implementation processes are at different levels. This has included low, medium, mediocre and general. It is also observed that in some cases there is no evidence as to whether IKS is being embraced or not. The analysis at that level has been made in terms of IDP general policy development and implementation processes, but not specifically in terms of HIV/AIDS. It is however, learnt that the explicit inclusion of IKS has taken the angle of special provisioning. Thus IKS is treated in isolation from other sectors.

However, special provisioning means that HIV/AIDS as a sector may be treated separately from IKS. Thus in reasoning around the influence of IKS in IDP policy development and implementation processes that concern HIV/AIDS it is observed that special provisioning approach can make such influence impossible, since the two sectors would be separated from each other. There are, however, situations where specific areas of IKS can be taken as part of the wider sector to which HIV/AIDS may partially[57] belong.

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[57]. "Partially" because social science claims that HIV/AIDS does not belong to health sector alone. Other intervening factors related have resulted to assertions that it belongs to various social sectors.

For example, in situations where HIV/AIDS is regarded as a health issue social role players such as traditional healers may be incorporated through special provisioning in as much as they are seen to be part of the health sector. This kind of integration can also happen where sectors are seen as having potential for symbiotic support. For example we can assume that, in as much as IKS may be seen as useful in nature conservation issues, it makes senses to ask questions as to whether a similar connection can happen between IKS and issues about HIV/AIDS.

Thus I assume that at the level of special provisioning IKS can be incorporated to policy development and implementation of IDPs only when specific IKS aspects are seen as being inherently and symbiotically part of the sector to which HIV/AIDS belongs or having the potential to catalyse impact on the issues addressed for HIV/AIDS. In this case a dually combined special provisioning can be taken to have occurred. In other words, this cannot be taken as a total inclusion of IKS, since it is selective in the kind of sectors it incorporates to the policy developments and implementations in question. In this case general inference as to how decision makers incorporate IKS to HIV/AIDS may not be helpful since one needs to specifically isolate which IKS aspects and role players are treated as having a legitimate connection to issues related to HIV/AIDS.

It was therefore found to be important to go back to the IDP documents and study them to investigate if there are specific indications of some specially provisioned IKS aspects being part of policy development and implementation processes related to IDPs. Thus in the next Chapter I answered the question: In the studied local municipality IDPs, and especially those that have shown that they embrace IKS, are there situations where IKS is mentioned as instrumental in issues related to HIV/AIDS? What are the specific IKS aspects in the studied local municipality IDPs that are provisionally incorporated to HIV/AIDS issues? [58] Are there indications that IKS influences certain IDP policy development and implementation processes related to HIV/AIDS?

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[58]. The question of combined special provisioning could also be explored when we were studying the relationship between IKS and good governance in IDPs above. But this path has not been followed since this study treats good governance as a supportive issue in understanding decision making processes related to HIV/AIDS.

5.9. CONCLUSION

In this chapter I focused on the inclusion of IKS in IDPs with the aim of eventually reaching the point of understanding the extent to which IKS is instrumental in IDP decision and development processes related to HIV/AIDS. I have been guide by the understanding that integration of IKS inclusion in policy development and implementation processes can happen at the tacit and explicit level.

Analysis of the background of IDP confirmed that they are a constitutional requirement legislated in 2000 under Municipal Systems Act (MSA). They are used as local government tools for the realisation of democratic aspirations of the government as they are considered to be inclusive, pro-poor, and empowering to various stakeholders in the local development processes.

With reference to the principle of inclusiveness inherent in the IDPs design, I sought to study a third of all the IDPs in South African to understand the extent to which they incorporate the principle of community participation as a channel for the inclusion of IKS at the tacit level. I have further studied the same local municipality IDPs to understand the extent to which they explicitly embrace IKS.

What has followed from the analysis is a reflective discussion, which has led to conclusions about the extent to which IKS is included in IDPs at the tacit level and further at the explicit level. Incorporated to the reflective discussion have been the questions of good governance and appreciation of various sociological perspectives studied in Chapter 3 above in relation to the inclusion of IKS in IDPs. I have also reflected upon the question about the extent to which IKS is applied in policy development and implementation processes about HIV/AIDS in the context of IDPs.

This path of discussion has given us a number of conclusions in relation to the questions at stake. First, at the tacit level my analysis shows that, in terms of IKS inclusion, the principles of good governance and the sociological perspective about relativism are not incorporated in the IDPs.

Second, it has been noted that IKS inclusion at the special provisioning level in IDPs receives a low scale attention. Third special provisioning has been noted to also have limited good governance potential due to limitations inherit in it and due to the fact that systematic analysis has revealed IKS special provisioning in the IDPs to be at a low scale.

In the final analysis, I have looked at the inferential relationships between the conclusions above and the integration of IKS in IDP policy development and implementation related to HIV/AIDS. I have noted that there is no logical observation that can justify that at the tacit level IKS is instrumental in policy development and implementation about HIV/AIDS. At explicit or special provisioning level the inclusion of IKS in policy development and implementation related to HIV/AIDS can only happen where a combined special provisioning approach is employed. This is mainly because special provisioning approach means that HIV/AIDS and IKS are likely to be treated as separate sectors and can only be integrated where the two are observed to have the potential of being symbiotically part of each other. This is a selective inclusion of IKS since it implies the consumption of IKS for the policy development and implementation processes in question only happens when the leaders themselves see or believe that the HIV/AIDS sector will benefit from such combination.

This level of analysis left me with the need to engage in further reflection which attempted to answer the questions: In the analysed local municipality IDPs, are there situations where IKS is mentioned as instrumental in issues related to HIV/AIDS? What are the specific IKS aspects in the studied local municipality IDPs that are special provisionally incorporated to HIV/AIDS issues?[59] Are there indications that IKS influences certain IDP decisions and development processes related to HIV/AIDS? These questions guided the next chapter, which specifically focused on issues related to IKS inclusion in IDPs in relation to HIV/AIDS.

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[59]. The question of combined special provisioning could also be explored when we were studying the relationship between IKS and good governance in IDPs above. But this path has not been followed since this study treats good governance as a subsidiary issue in understanding decision making processes related to HIV/AIDS.

CHAPTER 6

INTEGRATION OF IKS TO HIV/AIDS IN THE CONTEXT OF IDPS

6.1. INTRODUCTION

In the previous chapter a number of limitations were observed in light of the appreciation of IKS in policy development and implementation processes undertaken in the context of IDPs. In summary, it was found that IKS can be incorporated in such processes at two levels namely tacit and explicit. At the tacit level opportunities for incorporation of IKS can be created through community participation. Through their participation in policy development and implementation processes communities can use their indigenous knowledge and resources to inform processes at hand. At the explicit level deliberate move is expected to be taken by policy development and implementation leaders to incorporate IKS through direct inclusion of IKS resources and stakeholders considered to be agents of IKS.

The fact that participation processes and mechanisms are controlled and designed by government leaders has however meant that such mechanisms are not congruent with the requirements of making IKS an important tacit instrument for policy development and implementation processes. At the explicit level it has also been noted that special provisioning has sought to isolate IKS so that it is dealt with as a stand-alone sector with no direct relationship to policy development and implementation related to other sectors.

I, however, observed at the end of my reflection, that dual provisioning can take place in situations where two sectors are given a symbiotic combination. In this context I assumed that there can be situations in which certain aspects of IKS can have a symbiotic relationship with one of the sectors to which HIV/AIDS belong – the health sector. This assumption led to the analysis of the IDPs again with the aim of investigating whether in the IDPs with some inclusion of IKS there are cases where IKS has been incorporated in the issues attempting to address HIV/AIDS.

In this chapter therefore, I examine the extent to which IKS is incorporated to issues addressing HIV/AIDS in the context of IDPs. Three questions are asked: Do the IDPs acknowledge HIV/AIDS as one of the key issues needing attention in their local municipalities? If they acknowledge the importance of HIV/AIDS what approaches do they find appropriate to address HIV/AIDS? Are there explicit indications that IKS is integrated to policy development and implementation attempting to address HIV/AIDS?

I have then reflected on each of the approaches to addressing HIV/AIDS presented in the IDPs to understand the extent to which they provide potential for inclusion of IKS at the tacit level, then proceed to conclusions about the extent to which IKS is incorporated in HIV/AIDS issues in the context of IDPs.

6.2. SETTING THE PACE: HIV/AIDS INTEGRATION, APPROACHES, AND IKS INTEGRATION IN IDPS

To clarify the extent to which the IDPs integrate HIV/AIDS, the approaches they seek to engage in to alleviate problems related to HIV/AIDS, and the extent to which such approaches can accommodate IKS, Table 12 is presented, detailing the IDPs, which have shown the appreciation of integrating HIV/AIDS issues in their programmes. Approaches presented in these IDPs are also included in the table with an indication of whether they are conventional or IKS related.

The table provides information from my analysis of various IDPs and further form the basis of my discussions which will bring me to conclusions about the extent HIV/AIDS interventions, through IDPs, incorporate IKS.

Note must be taken that the IDPs are not presented by names for confidentiality reasons. However, for reasons of easy reference codes have been provided for each IDP which aid easy identification of the actual names of the municipalities in question.

Table 12: Conventional and IKS related HIV/AIDS interventions in IDPs

Municipality (Actual names withheld)	HIV/AIDS is recognised as a key intervention area	Proposed/planned intervention approaches[60]	Conclusions: Relationship between IKS and HIV/AIDS
IDP2	Yes	VCT and HBC – *conventional*[61]	Not explicitly indicated
IDP3	Yes	HBC and awareness raising – *conventional*	Not explicitly indicated
IDP4	Yes	At planning stage –*no specific intervention mentioned*	Not explicitly indicated
IDP5	Yes	At planning stage – *no specific intervention mentioned*	Not explicitly indicated
IDP6	Yes	Not evident	Not explicitly indicated
IDP7	Yes	Awareness raising – *conventional*	Not explicitly indicated
IDP8	Yes	At planning stage – *no specific intervention mentioned*	Not explicitly indicated
IDP9	Yes	Partnership development with CBOs– *conventional*	Not explicitly indicated
IDP10	Yes	HBC – *conventional*	Not explicitly indicated
IDP11	Yes	OVC – *conventional*	Not explicitly indicated
IDP12	Yes	Not evident	Not applicable
IDP13	Yes	HBC, OVC, and awareness raising - *conventional*	Not explicitly indicated

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[60]. These are approaches presented in the IDP documents. They do not necessarily include the full range of activities and programs which the municipalities engage in, but only those presented in the IDP documents.

[61]. Conventional approaches are those known to be designed around conformity to generally accepted rules of engagement with issues in question (http://www.audioenglish.net/dictionary/conventional.htm)

Municipality (Actual names withheld)	HIV/AIDS is recognised as a key intervention area	Proposed/planned intervention approaches[60]	Conclusions: Relationship between IKS and HIV/AIDS
IDP14	Yes	To follow national guidelines - *Conventional*	Not explicitly indicated
IDP15	Yes	Awareness raising, ARV distribution, and establishment of partnership forums – *conventional*	Not explicitly indicated
IDP16	Yes	Mainstreaming - *conventional*	Not explicitly indicated
IDP17	Yes	VCT – *conventional*	Not explicitly indicated
IDP18	Yes	Male circumcision, awareness raising, drugs distribution, and testing – *hybrid (IKS and conventional)*	One relevant method – circumcision - indicated
IDP19	Yes	Treatment, care, VCT, awareness raising, referral systems, and mainstreaming - *conventional*	Not explicitly indicated
IDP20	Yes	Preventative measures, HBC, treatment, and OVC – *conventional*	Not explicitly indicated
IDP21	Yes	Awareness raising, VCT, HBC, and nutrition – *conventional*	Not explicitly indicated
IDP22	Yes	At planning stage – *no specific intervention mentioned*	Not explicitly indicated
IDP23	Yes	Awareness raising, promotion of condom use and VCT – *conventional*	Not explicitly indicated

Municipality (Actual names withheld)	HIV/AIDS is recognised as a key intervention area	Proposed/planned intervention approaches[60]	Conclusions: Relationship between IKS and HIV/AIDS
IDP24	Yes	Awareness raising and community health based care (HBC) – *conventional*	Not explicitly indicated
IDP25	Yes	VCT, awareness raising, work place programmes, mainstreaming, nutrition, and OVC - *conventional*	Not explicitly indicated
IDP26	Yes	Awareness raising and promotion of condom use – *conventional*	Not explicitly indicated
IDP29	Yes	VCT and Awareness raising - *conventional*	Not explicitly indicated
IDP30	Yes	VCT and awareness raising – *conventional*	Not explicitly indicated
IDP31	Yes	Treatment, awareness raising, and OVC – *conventional*	Not explicitly indicated
IDP32	Yes	Preventative measures, HBC, and OVC - *conventional*	Not explicitly indicated
IDP33	Yes	Not evident	Not clear
IDP34	Yes	OVC, awareness raising, HBC, and partnership building – *conventional*	Not explicitly indicated
IDP35	Yes	VCT, awareness raising, nutrition, and mainstreaming – *conventional*	Not explicitly indicated
IDP36	Yes	Work place programmes and awareness raising – *conventional*	Not explicitly indicated

Municipality (Actual names withheld)	HIV/AIDS is recognised as a key intervention area	Proposed/planned intervention approaches[60]	Conclusions: Relationship between IKS and HIV/AIDS
IDP37	Yes	Treatment and awareness raising - *conventional*	Not explicitly indicated
IDP38	Yes	At planning stage – *no specific intervention mentioned*	Not explicitly indicated
IDP40	Yes	Awareness raising, VCT, treatment, welfare grants and nutrition – *conventional*	Not explicitly indicated
IDP41	Yes	Not clear	Not explicitly indicated
IDP42	Yes	Treatment programme - *conventional*	Not explicitly indicated
IDP43	Yes	Awareness raising and condom distribution programmes – *conventional*	Not explicitly indicated
IDP44	Yes	Awareness raising, treatment, condom promotion, OVC, VCT, and work place programmes – *conventional*	Not explicitly indicated
IDP45	Yes	Awareness raising, treatment, and care programmes – *conventional*	Not explicitly indicated
IDP46	Yes	Awareness raising, VCT, and OVC – *conventional*	Not explicitly indicated
IDP47	Yes	Virginity testing, awareness raising, VCT and OVC – *hybrid (IKS and conventional)*	One relevant method – virginity testing
IDP48	Yes	Integrated plan development – AIDS Council – *conventional*	Not explicitly indicated

Municipality (Actual names withheld)	HIV/AIDS is recognised as a key intervention area	Proposed/planned intervention approaches[60]	Conclusions: Relationship between IKS and HIV/AIDS
IDP49	Yes	Awareness campaigns – *conventional*	Not explicitly indicated
IDP50	Yes	Awareness raising – *conventional*	Not explicitly indicated
IDP51	Yes	Clinic services, awareness raising, and condom use promotion- *conventional*	Not explicitly indicated
IDP52	Yes	Awareness campaigns – *conventional*	Not explicitly indicated
IDP53	Yes	Mainstreaming, treatment, VCT, work place policy, PMTC, and condom distribution – *conventional*	Not explicitly indicated
IDP54	Yes	HBC, Work place policy, VCT, Awareness raising, and care – *conventional*	Not explicitly indicated
IDP55	Yes	Not clear	Not clear
IDP56	Yes	Awareness raising, care, and work place policy- *conventional*	Not explicitly indicated
IDP59	Yes	Not clear	Not clear
IDP60	Yes	Awareness raising, care, treatment, condom promotion, and VCT – *conventional*	Not explicitly indicated
IDP61	Yes	Awareness raising, care, and OVC – *conventional*	Not explicitly indicated

Municipality (Actual names withheld)	HIV/AIDS is recognised as a key intervention area	Proposed/planned intervention approaches[60]	Conclusions: Relationship between IKS and HIV/AIDS
IDP62	Yes	Mainstreaming, condom distribution, HBC, Treatment, Spiritual counselling, and awareness raising – *conventional*	Not explicitly indicated
IDP63	Yes	Not clear	Not clear
IDP64	Yes	Not clear	Not clear
IDP66	Yes	VCT, treatment, awareness raising, care, and family planning – *conventional*	Not explicitly indicated
IDP67	Yes	Care	Not explicitly indicated
IDP68	Yes	Gender	Not explicitly indicated
IDP69	Yes	Not clear	Not clear
IDP70	Yes	Not clear	Not clear
IDP72	Yes	HBC, mainstreaming, and awareness raising – *conventional*	Not explicitly indicated
IDP73	Yes	Treatment, VCT, and awareness raising – *conventional*	Not explicitly indicated
IDP74	Yes	Not clear	Not clear
IDP75	Yes	Awareness raising, VCT, and care – *conventional*	Not explicitly indicated

SOURCE: LOCAL MUNICIPALITY IDPS

6.3. WHAT TABLE 12 ENTAILS: HIV/AIDS INTEGRATION APPROACHES AND IKS INTEGRATION IN IDPS

Table 12 above indicates plainly that there is a general recognition that HIV/AIDS is an important issue for the various IDPs, and that there are various approaches used to respond to the epidemic. However, there is not much variation in these approaches, and most of them are commonly included in many of the IDPs.

Presently, as my task is to understand the extent to which IKS has been integrated to HIV/AIDS issues in the context of IDPs, in the next sub-sections the approaches to addressing HIV/AIDS presented in the Table 12 are examined. This is meant to understand the extent to which they represent IKS integration. In the previous chapter I made a similar analysis at two levels, focusing on the global integration of IKS in the IDPs: First, consideration of the integration of IKS at an explicit level was taken. Secondly, analysis at the tacit level was conducted. Similarly, in this chapter both levels have been pursued.

First, I have looked at the explicit incorporation of IKS in the HIV/AIDS intervention approaches by examining those approaches assumed to be directly/explicitly IKS related. Second, I have examined those aspects which may not be considered as directly IKS related to investigate whether they provide room for IKS incorporation at the tacit level.

The general observation is that the intervention approaches which may not be considered directly IKS related are those found in the common practices within the HIV/AIDS development sector. Thus I ordinarily marked them as *conventional* to suggest their shared distinction as opposed to *indigenous* approaches.

In the final analysis I sought to answer my main question in this chapter about the extent to which IKS is incorporated in issues addressing HIV/AIDS in the context of IDPs. This eventually brought me to concluding section.

6.3.1. The explicit appreciation of IKS in addressing HIV/AIDS in the IDP context

Basing on the assumption that *male circumcision and virginity testing*[62] are predominantly among the practices which are characteristically related to IKS, I have indicated in Table 12 that at least two IDPs show explicit appreciation of IKS in their aspirations to engage in HIV/AIDS issues. I have spent a tad of time affirming the validity of the assumption that male circumcision and virginity testing are related to IKS by briefly referring to some of the discourses which have been carried out by practitioners and experts on these practices. Such affirmation has further helped me to assert whether the IDPs under which these practices are presented are indeed depicting inclusion of IKS through these approaches.

6.3.1.1. Male circumcision and IKS

A 2007 feature story on UNAIDS website indicates that about 670 million of the world's men are circumcised. This represents 30% of all men in the world. The story further states that

> Male circumcision is one of the oldest and most common surgical procedures known, traditionally undertaken as a mark of cultural identity or religious importance. Historically, male circumcision was practiced among ancient Semitic people including Egyptians and those of Jewish faith, with the earliest records depicting circumcision on Egyptian temple and wall paintings dating from around 2300 BC (www.unaids.org).

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[62]. Note must be taken that both male circumcision and virginity testing are highly discussed, and sometimes controversial issues, in South Africa and other parts of the world. Thus the study does attempt to enter into the wider debate or take any position as to whether these practices are ethically right or not, since though they have relevance to IKS, they do not form part of the main subject presented in this study. Our assertion in this study is limited to showing the reader that they are among the aspects relevant to IKS included in HIV/AIDS efforts presented in the studied IDPs.

The article further claims that while there has been a strong force from some of the Christian Churches, such as the Catholic Church, to influence communities to stop male circumcisions due to the belief that it is a pagan practice, most of the Sub-Saharan cultural groups have resisted the influence as they see it as an important part of their cultural practices. In other words, clinging to male circumcision by various cultural groups has been influenced by beliefs and myths which influence traditional communities at both social and psychological level.

> A psychological explanation for this process is that ambiguity in social roles creates tension, and a symbolic reclassification is necessary as individuals approach the transition from being defined as a child to being defined as an adult. This is supported by the fact that many rituals attach specific meaning to circumcision which justify its purpose within this context… For example, certain ethnic groups including the Dogon and Dowayo of West Africa, and the Xhosa of South Africa view the foreskin as the feminine element of the penis, the removal of which (along with passing certain tests) makes a man of the child.

> Tradition plays a major part for many ethnic groups. Among ethnic groups of Bendel State in southern Nigeria, 43% of men stated that their motivation for circumcision was to maintain their tradition. In some settings where circumcision is the norm, there is discrimination against non-circumcised men. For the Lunda and Luvale tribes in Zambia, or the Bagisu in Uganda, it is unacceptable to remain uncircumcised, to the extent that forced circumcisions of older boys are not uncommon. Among the Xhosa in South Africa, men who have not been circumcised can suffer extreme forms of punishment, including bullying and beatings. (www.unaids.org).

In the effort to find solutions to minimise HIV/AIDS infection rates, researchers and practitioners have found themselves affirming the importance of male circumcision due to the discovery that male circumcision reduces men's risk of acquiring HIV.

This affirmation has resulted in some role players, including governments, integrating male circumcision in their HIV/AIDS campaigns. In light of the background that male circumcision is essentially a cultural practice upheld by various indigenous social groups this integration has essentially meant incorporation of IKS. Thus I conclude that the IDPs which have included male circumcision as an approach to addressing HIV/AIDS, have, to a certain degree, incorporated IKS to their HIV/AIDS interventions.

6.3.1.2. Virginity Testing

Records about virginity testing as a cultural practice indicate that it was essentially a prenuptial tradition associated with marriage. In her article entitled *Like a Virgin? Virginity Testing as HIV/AIDS Prevention: Human Rights Universalism and Cultural Relativism Revisited,* Erika R. George states that

> In broad terms, virginity testing refers to the practice and process of inspecting young women and girls to determine if they are sexually chaste. The testing tradition among Zulus was originally intended to assure the purity of young brides who were required to prove their chastity before their parents and future in-laws settled on an amount to be transferred by the groom's family to the bride's family (*Ilobolo*) (George 2007: 8).

In the recent times the practice has been seen by some HIV/AIDS development practitioners as a way of promoting abstinence. However, reality has been that the practice has been associated with a number of controversies ranging from issues related to human rights to sexual security of young women.

Anti-virginity testing arguments based on human rights principles maintain that sexuality and virginity are private issues and do not need to be controlled and/or revealed to the public.

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Those arguing from the angle of young women's security refer to the observations and cases which have demonstrated that in some communities' people believe that having sex with a virgin can heal AIDS. The later belief is noted to have resulted in young women, known or thought to be virgins, sexually abused by HIV infected men.

Those supporting virginity testing as a practice to minimise HIV infection maintain that the practice promotes absolute abstinence. George quotes a South African virginity tester and traditional healer, Nomagugu Ngobese as saying:

> People say to me, 'Why, why are you doing this?' And I say to them, 'What have you done to stop AIDS, to limit abortion? We are going ahead with our virginity testing because we have nothing else (George 2007: 1).

Statements such as those made by Ngobese point to the fact that, while others are taking precautionary steps trying to reflect human rights and social security implications, there are social groups and individuals who have embraced the practice and integrated it to their strategic programmes and projects seeking to address HIV/AIDS. Such movements have indirectly or directly eventually influenced government leaders and officials to include the practice in strategic plans such as the IDPs.

In light of the current study, and understanding that the practice has an indigenous traditional background, those including virginity testing in their approaches to addressing HIV/AIDS can effectively be understood as explicitly recognizing IKS as an important resource for HIV/AIDS interventions. Thus the IDPs which have been indicated as including virginity testing in the efforts to address HIV/AIDS can be seen as explicitly appreciating IKS.

6.3.1.3. The extent of explicit inclusion of IKS in the IDPs

Analysis on male circumcision and virginity testing above has conclusively proved that the two practices (virginity testing and male circumcision) can be rated as practices under IKS; hence affirming the assumption I made when I categorised these HIV/AIDS intervention approaches as related to IKS in the two IDPs I have included in table 12 above. Thus I have securely claimed that at least two IDPs out of the 67 presented in the table show explicit appreciation of IKS in addressing issues related to HIV/AIDS.

The *two out of 67 IDPs observation* is an obvious indication that there is extremely limited explicit appreciation of relationships between IKS and HIV/AIDS in the IDPs being studied. Furthermore, while the two IDPs help to affirm the assumption from the previous chapter that there can be IKS areas which can symbiotically be incorporated in efforts of addressing HIV/AIDS through explicit and dual special provisioning, the fact that it is only two out of 67 IDPs means that assumption is proven to be generally not valid. In more specific terms, the assumption is only valid in light of 2.98% (approximately 3%) studied IDPs.

Thus by way of extrapolation only about 3% of South Africa's IDPs have an explicit inclusion of IKS as having a symbiotic relationship with issues related to addressing HIV/AIDS. Noting that in table 12 each of the identified IDPs with IKS and HIV/AIDS relationship presents only one IKS aspect I further, by inference, conclude that the significance of IKS incorporation as having a symbiotic relationship with HIV/AIDS, even in those IDPs where such relationship is explicitly pronounced, is minute.

Through observation, this study claims that integration of IKS to decision making and development processes cannot only exist at the level of explicit knowledge. It can also exist at the tacit level.

I have noticed that tacit level of IKS integration is also possible through other methods of policy development and implementation processes. However, it is not all other policy development and implementation approaches that provide room for tacit integration IKS. Some approaches may not provide enough room for tacit integration of IKS mainly because of the nature of mechanisms used to implement them. For example I noted that while the participation approach to development can provide opportunities for integration of IKS at a tacit level, the design and application of participation mechanisms can play a big role in either accommodating or alienating IKS.

6.3.2. Tacit integration of IKS in conventional HIV/AIDS interventions under IDPs

The observations above caused the researcher to reflect on the various approaches indicated in the IDPs in Table 12 to scrutinise on the extent to which they provide room for integration of IKS at the tacit level. I have engaged in such reflection by glancing through the main approaches presented by IDPs as channels to address HIV/AIDS. This reflection promoted an understanding of their conceptual and practical nature and probe into the question of the extent to which such nature can provide room for tacit inclusion of IKS.

6.3.2.1. *Awareness campaigns*

Awareness campaigns are one of the cross-cutting strategies seeking to reinforce the appreciation of various other strategies used to address HIV/AIDS. They may touch on issues related to OVC, safe sex, VCT, PMTC, and so on.

Awareness campaigns are developed and implemented from the premise of social development sciences and theories[63] which assert that activities must fall from projects and programmes designed around a cycle of stages[64]. The content and processes in each stage must be guided by predetermined goals, objectives and activities seeking to achieve certain targets defined through predetermined indicators. To ensure efficiency, effectiveness, success, and impact in achieving targets towards the goals and objectives each stage must be scrutinised through a process called monitoring. There must also be further targets to be achieved towards the objectives and further inform improvements in project/programme implementation processes.

Figure 10: Project Cycle Stages
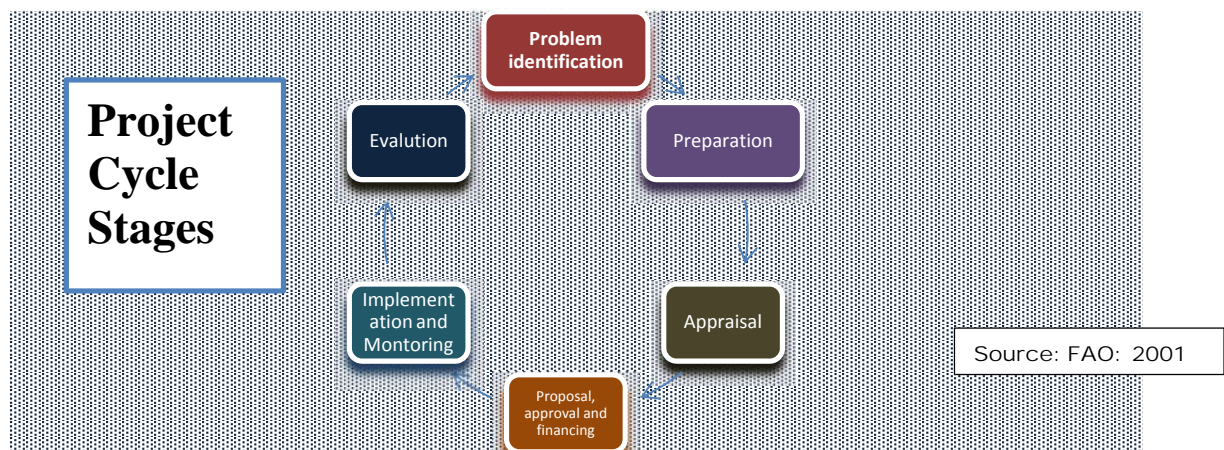
Structures of project cycles may be dependent on the nature of the project (e.g. in light of related future plans or the kind of partners involved in the project). However in general the stages include: Problem identification which involves development of an idea and initial design; detailed technical and operational design; appraisal for technical and social and economic aspects; proposal preparation and defining and seeking necessary resources; implementation and monitoring and; evaluation (FAO 2001: 11). Other project management scholars have summed up all stages into only four distinct stages.

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[63]. See Table 13 below
[64]. See figure 10 below

As noted in box four below, an example of this kind of summation is presented by Muriithi and Crawford (2002) in their article entitled, *Approaches to project management in Africa: implications for international development projects*

Table 13: Life Cycle Model of Project Management

Project management involves five processes: initiating, planning, executing, controlling and closing. This view follows closely on other approaches that address managing the project process (or project life cycle, as it is sometimes described). Though there are several versions of the life cycle, the most common in literature generally propose four distinct phases: initiation and concept, design and development, implementation, and commissioning and hand-over.

The project concept is developed during initiation. Project solutions are tested, appraised and one selected, during planning and development. The project plan is carried out during implementation and the completed facility commissioned and handed over to the owner in the fourth phase.

Source: Muriithi and Crawford 2002: *Approaches to project management in Africa: implications for international development projects*

Influenced by the principles propagated by the social development science and the theories above, development practitioners dealing with HIV/AIDS issues emphasise that awareness campaigns must be designed in the fashion of projects or programmes. Thus problems related to HIV/AIDS for each context must be defined; technical and operational modalities must be designed; appraisal of the social and economic context of the people or social group targeted for the campaign must be conducted to ensure ownership of the project and appropriate representation of stakeholders; proposals defining the problem, goals, objectives, activities and operation modalities and requirements must be developed and eventually an implementation process accompanied by monitoring of progress towards achieving goals must be followed and concluded by an evaluation exercise.

In the final analysis awareness campaigns must be given a tangible operational structure comprised of:

- Aims/objectives of the campaign : what the campaign seeks to achieve;
- Target: who the campaign is trying to win over, reach or involve;
- Slogan and message: the main slogan that will be used to give the campaign an identity projecting the theme to the target population; and
- Campaign methods: strategies used to implement the campaign to ensure its efficiency and effectives (www.etu.org.za).

At the activity level the campaigns may use various tools to strengthen impact. These may include wearing of ribbons, use of people who can act as role models to the target social group, running public education, organising awareness events, using affected and infected people to speak out about their situation, encouraging testing, organising volunteers to support those infected and affected and so on (www.etu.org.za).

Awareness campaigns are therefore structured processes, emanating from the theoretical principles, which further govern the way they are designed and implemented. They develop from and through a systematically controlled predetermined direction. The technical nature of their structure and implementation processes imply that only specialised people can take control of their content and process. Therefore, they may have limited room for intrusion and inclusion of other factors and role players, which may not suit the predetermined direction in place.

This, in essence, means that IKS can only be included in awareness campaigns where it is already part of the original plan for the campaigns, or when evaluation findings present the need to include them. This, by implication, tells us that awareness campaigns cannot be taken as processes that have inherent (tacit) inclusion of IKS.

It is concluded that the indication of awareness campaigns as one of the approaches to addressing HIV/AIDS in various IDPs presented above cannot in any way be taken as an opportunity for providing room for inclusion of IKS at the tacit level.

6.3.2.2. Voluntary Counseling and Testing

A presentation published by Heidi van Rooyen (www.hsrc.ac.za) under the sponsorship of the Human Sciences Research Council's, Ukwamukela Project and NIMH Project indicates voluntary counseling and testing as, "Confidential dialogue between client and care provider aimed at enabling the client to cope with stress and take personal decisions related to HIV/AIDS" (www.hsrc.ac.za). Van Rooyen points out that for those found to be HIV position, VCT provides emotional support in that it attempts to

> promote acceptance of HIV status, alleviates anxiety and depressive reactions, improves coping and facilitates disclosure, preparation for the future of children, …behavior change, [initiates] referral to social and peer support, [help to initiate] preventive therapy and reproductive care, [facilitates] early management of OI's and STI's and facilitates [dealing with] MTCT (www.hsrc.ac.za).

In the context of VCT, counseling takes place before and after testing. In some cases testing does not have to be preceded by counselling. For example where testing is conducted as part of diagnostic process and as a mandatory requirement, counseling may not be part of the process (www.patient.info).

According to the Commonwealth Regional Health Community Secretariat for East, Central, and Southern Africa, the US Agency for International Development, and the Regional Economic Services Office for East and Central Africa (2002), the general practice in Africa shows that VCTs are provided as stand-alone programmes or as part of a larger programmes run by institutions such as government hospitals, NGOs or private companies seeking to engage with their employees on issues related to HIV/AIDS.

At the practical level VCTs must be reinforced by "creating awareness and demand" for such services from the target communities or social groups; developing and "strengthening human resources and infrastructure through increasing training; and supervising staff responsible for executing VCT programmes. Furthermore, the programme must ensure high quality services are provided through standardisation of procedures, and measures of effectiveness and efficiency (www.patient.info).

Without going into detailed analysis, the observations above indicate that strategies to implementing VCT processes are by and large not based on the principles of initiating processes from grassroots and/or from the local context. Where VCT processes are implemented as part of other larger projects, those projects may have already predetermined the direction of how the VCT activities must be conducted. This may further be reinforced by standardisation principles propagated through training, supervisions, and coaching of officials entrusted with daily implementation of VCT processes.

VCT's cannot be seen in any way as having the potential to open room for tacit inclusion of indigenous knowledge. The design of VCTs as presented in the reflections above essentially suggests that indigenous people are recipients of the services rather than architects and implementers of the services.

This observation conclusively shows that the inclusion of VCT as a strategy to address HIV/AIDS cannot in any way be equated to opening room for tacit inclusion IKS in HIV/AIDS initiatives included in the IDPs.

6.3.2.3. OVC Initiatives

Care for Orphans and Vulnerable Children is probably one of the most complex areas in HIV/AIDS programmes. Orphaned children's needs are complex because of their physical, social and psychological vulnerability. Support to children, whether sick or not, is complex in all these aspects since children cannot make their own decisions.

The World Bank guide to OVC interventions is designed with the recognition of this complexity in mind. The guide is designed from the premise that interventions addressing the needs of orphaned and vulnerable children need to target family, education, religious and other relevant institutions. Among other development institutions, the United States President's Emergency Plan for AIDS Relief claims that "Much of the current research on OVC care and support identifies family environments as better able to meet the needs of OVC than more institutional models." In light of this assertion development institutions have tended to design and implement OVC projects in ways that involve communities and families. For example, between 2002 and 2007 the Human Science Research Council through its Social Aspects of HIV/AIDS Research Alliance programme implemented a project in South Africa, Botswana, Zimbabwe, Lesotho and Swaziland which attempted to understand community based OVC best practices (www.sahara.org.za).

Thus, due to poverty and high burden in providing care to orphaned children it is usually imperative that outside organisations such as NGOs and governments intervene to support families.

Practical interventions are partly informed by the Early Childhood Development principles and partly by particular needs based on the nature of vulnerability children are experiencing. Table 14 below shows different categories of orphanhood and vulnerability for children and proposed intervention approaches (www.info.worldbank.org).

As noted in Table 14, the strategies revolve around campaigns and interventions on issues such as fighting against stigma, provision of nutritional needs, counseling, training of OVC caretakers, placement of children under the care of adults other than biological parents through traditional or foster homes, provision of treatments where children are infected, integration of infected/affected children to ordinary Early Child Development (ECD) initiatives, addressing conflict related needs for children who have been affected by wars or any form of social and political conflict and needs related to disabilities of children where necessary.

Table 14: OVC Categories and the applicable intervention approaches[65]

OVC Category	Intervention type
All young OVC	• Campaigns to fight stigma in the community, in schools, to traditional and religious leaders, and through the media health, and nutritional support • Conditional transfers to improve access to ECD programs and health services Psycho social support/Counseling Cognitive stimuli • Support and training of caretakers
Project Design Features by OVC Category	
Young orphans	• When orphanhood is predictable, the following measures are paramount: Support the identification of other family caretakers or community-based foster care arrangements in advance of the death of parent, if possible. If the above proves impossible, support development of community based group homes (but be aware that this is much more expensive), consider conditional transfer programs related to health and nutritional check-ups, support and train caregivers (in particular older relatives and children head-of-household), set up monitoring/ home visit program
Young children affected by HIV/AIDS	• Prolong the life of seropositive caretakers of young children, offering anti-retrovirals and other primary health care services; Prevent mother-to-child transmission; Promote the inclusion of seropositive children in regular ECD activities and services; Consider waivers or

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[65]. www.info.worldbank.org.

	- conditional transfer programs related to health and nutritional check-ups - In communities heavily affected by HIV/AIDS, support community based daycare services
Young children affected by armed conflict	- Include atypical communities, like displacement and refugee camps, in regular ECD activities; Protect and shelter unaccompanied young children in crisis areas; Strengthen psychosocial and conflict prevention aspects of ECD programs; Support therapeutic components/interventions like drawing and role play; Support counseling for primary caretakers living with injury and trauma; If many war orphans, support family reunification initiatives, identification of family care takers and community foster care arrangements - When the above is not possible, consider supporting the development of community group homes (but be aware that this is much more expensive)
Young children living with a disability	- Support efforts to actively include children living with a disability in ECD activities; Combat stigma at the community level; Combat stigma among other children Support and train caretakers with young children living with disabilities - Include children living with disabilities among the prioritized beneficiaries in any targeted conditional transfer program (school, health)

Source: World Bank Guide to OVC

The observations in Table 14 are reinforced in the World Vision Guide to Mobilising and Strengthening Community-Led Care for Orphans and Vulnerable Children, under its HIV/AIDS Hope Initiative, which emphasises that practical action must include: Mobilising community individuals who may act as leaders for the community-led care, providing specific instructions and training to community facilitators on issues related to HIV/AIDS, counseling, psychological, and social economic needs of people affected and infected with HIV/AIDS; Human rights and legal issues related to HIV/AIDS; National government policies on HIV/AIDS in relation to OVC; and Provision of life skills for children and integration of OVCs to mainstream education systems (World Vision Guide to Mobilising and Strengthening Community-Led Care for Orphans and Vulnerable Children: 2005).

The assumption about these approaches is that a well-trained development agent would have to take charge of implementing them using principles of social and economic projects development and management. Thus, stages similar to those presented in Fig. 4 above are followed. The guidelines such as those presented in Table 14 and in World Vision Guide to Mobilising and Strengthening Community-Led Care for Orphans and Vulnerable Children above, therefore, become practical tools for situation-specific implementation of OVC projects. In its introductory statement for the tool the World Bank indicates:

> The OVC Toolkit is a resource guide on how to support Orphans and other Vulnerable Children (OVC) in sub-Saharan Africa (SSA). It is primarily developed to support World Bank project designers from different technical sectors, but could also prove useful to non-World Bank practitioners.

In light of these insights OVC projects are usually developed and implemented by external development agents. Local communities and families become participants in the process.

The extent to which local communities and families participate depends on the design of the projects, availability of resources for community involvement, and the developmental behavior and ethics of the agents and officers implementing the projects. The bottom line, however, is that the projects are designed and implemented by the development agents who may be trained and guided using preconceived theories, goals, objectives, and strategies.

In this nerve, unless OVC initiatives are designed and implemented by local communities and families, they cannot be taken as creating enough room for tacit inclusion of IKS. Thus in as much as the OVC programmes and projects integrated to IDPs may be seen as falling under the project structures presented by the World Bank, The United States President's Emergency Plan for AIDS Relief and the World Vision Guide to Mobilising and Strengthening Community-Led Care for Orphans and Vulnerable Children, they cannot be seen as a representation of IDPs efforts to integrate IKS in its HIV/AIDS initiatives at the tacit level.[66]

6.3.2.4. Condom promotion

Traditionally, prevention from STIs has been reinforced by instilling moral values and performing rituals. These include: circumcision and virginity testing that force young people to observe sexual moral values instituted by their cultures. In this context covering ones genitals with a foreign body during sexual intercourse has been seen as not compatible with natural and traditional sexual practices and the authenticity of sexual feeling at the point of intercourse.

Regarding the fact that condoms are used as a protective device some cultural notions would hold that protection is only necessary for promiscuous intercourse (Malawi National Condon strategy 2005: 12-15).

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[66]. Practice and experience in HIV/AIDS initiatives shows that the tendency is to design support to those affected and infected with HIV/AIDS in a form of projects and programmes. Thus there is limited chance that most of the initiatives would be far from the approaches presented from the World Bank and the United States President's Emergency Plan for AIDS Relief above.

Drawing from his interview with a sex worker, in Durban named Thandi, who confirmed that she used condoms only with sex customers, and not her boyfriend, Hunter confirms this point:

> This somewhat counterintuitive fact – that the most instrumental sex-money exchanges are likely to lead to condom use – has been noted elsewhere. For 'boyfriends'and 'girlfriends', in contrast, condomless sex can signal and be felt as love (Hunter 2010: 196 – 198).

These notions would therefore hold that using condoms is a sign of not following the social and cultural moral values one is expected to uphold. Those who follow them without engaging in any promiscuous sexual transactions, may have no association to promiscuity, they may as well have no need for condoms.

Further, this assertion leads to the belief that providing access to condoms, instead of following traditional and cultural values, encourages promiscuity since the condoms neutralise the deterrence factor of sex outside committed relationship.

The Malawi National Condom strategy outlines some of the cultural barriers to condom use promotion and distribution:

- It is often stated that condoms cannot be used by married couples;
- There is a belief that sperms have a fundamental role in the prevention of certain diseases; and that sperm gives strength to life and solves community problems;
- It is believed that sperm should not be wasted but put in its rightful place, i.e. woman's vagina; and
- Traditionally, there is lack of dialogue on sexual and reproductive health issues among couples which makes it difficult to initiate discussion about issues related to family planning, and condom use. (Malawi National Condon strategy 2005: 12-15).

Against these traditional assertions, proponents of condom use claim that condom distribution must be preceded with counselling and/or sensitisation for men to gain a sense of understanding and for women to acquire negotiation skills with their partners. Distribution is done by way of selling or free of charge provision in public places such hospitals, schools and office buildings of governments and private retail distribution outlets. Distribution strategies include social marketing as explained presently.

> Social marketing of condoms is aimed to remove the barriers to condom use by using commercial marketing techniques such as advertising and packaging to make the product accessible, affordable and attractive (Malawi National Condon strategy 2005: 16).

Because of tendencies by traditional communities to see use of condoms as against moral values and principles, tacit indigenous knowledge related to addressing issues about condom promotion and distribution tend to skew towards protesting against, rather than promoting for their use. This has forced governments, NGOs and other role players dealing with issues related to condom promotion to take aggressive moves towards promoting condom use. Marketing approaches employed tend to follow the patterns of limiting the impact of traditional and cultural beliefs about the promotion of condom use. Some of the strategies outlined in the Malawi example referred to above are:

- Political and religious support is [should be] available to support the programme;
- Government policy should be founded on the long-term goal of achieving sustainability in reproductive health services and condom logistics;
- Government should take a leading role in the collaborating with other stakeholders to ensure equitable distribution of condoms to all people who need them;

- HIV/AIDS prevention programmes should be based on behaviours that recognize risks and avoid exposure [Risk takes precedence of cultural beliefs]; and

- Use of condoms for dual protection should be promoted (Malawi National Condom Strategy 2005: 17).

Protesting tendencies and processes by traditional communities against condom use have resulted in the fact that IKS' responses to issues related to condom use tend to operate outside the standard development and institutional initiatives.

Applying this to the promotion of condoms as one of the conventional areas recognised and implemented by the IDPs in their efforts about HIV/AIDS, it goes without saying that indigenous tacit knowledge cannot be taken as an area of interest in the promotion of condom use appreciated in the IDPs. Thus recognition and/or implementation of condom promotions initiatives can in no way be taken as a justification for tacit appreciation of IKS through HIV/AIDS initiatives at the IDP level.

6.3.2.5. ARV Distribution

Approaches to distribution of ARVs can be seen as revolving around levels of equity and epidemiological factors which may have implications on the efficacy and efficiency of the drugs distribution programmes. Equity in this sense means that leaders and institutions entrusted with the responsibility of ARV distribution must ensure that citizens have equal access to ARVs regardless of their gender, colour, geographical location and any other attributes they may be known to have.

Thus ethics of equity are largely influenced by the need to reach every geographical area in the attempt to ensure that every eligible person has access to drugs and does not have to travel long distances to reach distribution centres. Distribution area is defined as catchment areas in reference to the radius from the distribution centres.

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This suggests that studies should be conducted to collect data on the distance that individuals with HIV are willing and able to travel for treatment" (Wilson & Blower 2005: 7). Distribution from the centres can be made either through having members of the community traveling to the centres and/or through mobile services deployed from the distribution centres. This approach is further substantiated with data of population densities. Population density is largely important in deciding the amount of resources to be provided for each centre and catchment area (Wilson & Blower 2005: 7).

At the level of epidemiological principles, experts and practitioners hold that efficacy and efficiency of drug procurement depend on a number of epidemiological factors including,

> HIV incidence and prevalence; emergence and transmission of drug-resistant HIV; treatment, acceptance, and effectiveness; mother-to-child HIV transmission by subtype [A, D, AD recombinant]; as well as behavioral, social, and demographic effects (behavioral disinhibition, use of HIV counseling and testing, use of other prevention services, contraceptive use, mortality, fertility, marital stability and orphanhood (www.jhsph.edu).

Effort must be made to follow certain standard procedures, which ensure that these factors are taken into consideration in the procurement processes. John Snow Inc presents a sample of these steps in their supply management diagram, which indicates that in the supply chain management there is a continuum of processes that need to be followed. The continuum starts from community awareness, and at its highest peak agents involved in the implementation of ARV distribution engage in monitoring the patients to understand the appropriate care needed, the extent of drug tolerance, efficiency and adherence (John Snow Inc 2005). The steps below illustrate what John Snow Inc. present in their diagram.[67]

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[67]. Some wording has been modified for clarity.

Table 15: Drug Logistics System (John Snow Inc.)

Step 1	Community awareness
Step 2	Identification of patients
Step 3	Identified patients enter care programme
Step 4	Confirming and verifying eligibility
Step 5	Clinical and lab assessment
Step 6	Education and support services to eligible patients
Step 7	Patient receives drugs
Step 8	Patient takes drugs
Step 9	Adherence support to patient
Step 10	Patient Monitoring

Distribution of ARVs is therefore a systematic process, involving a number of stages whose content requires scientific knowledge related to disease, human behavior, social context, and medicine intake compliance. This knowledge cannot be attained through tacit means, but through special and formal training and/or studies so much so that in some cases expert knowledge is required. ARV distribution is therefore not an exercise that can be undertaken by the use of tacit indigenous knowledge. Moreover, formal scientific and specialised processes intrinsically eliminate indigenous tacit knowledge.

Thus the recognition and implementation of ARV distribution programmes by the local municipalities through IDPs can in no way be taken as an opportunity for inclusion of tacit indigenous knowledge.

6.3.2.6. Home Based Care

A statement by the Tanzania Commission for Aids indicates that

> Home Based Care (HBC) is defined as provision of comprehensive services, including health and social services by formal and informal caregivers in the home. HBC includes physical, psychosocial and spiritual care (www.tacaids.go.tz).

Much as the central operation space for the HBC is the home where most of the activities are informal, HBC initiatives tend to be dominated by formal activities due to the fact that they are largely influenced by wider picture plans of development agents. Large organisations such as governments, NGOs, Faith Based organizations, private sector, and other forms of organisations have formalised HBC as one of the key strategies to realise their goals related to minimizing the effects of HIV/AIDS to individuals and the society in general.

The formalisation of home-based care has resulted in the introduction of various instruments designed to address the needs of patients in a more systematic and scientific way and with a strong emphasis on the involvement of the wider community. This has meant that Home Based Care is treated in its larger context as a "community" home based care (World Health Organisation 2002). The term "community" is added to the traditional "Home Based Care" to imply that other people beyond the family/home context can contribute in the activities taking place in the home to support the patients and the affected family as a whole. In its Community Home Based Care resource manual the World Health Organisation (2002) asserts,

> CHBC [Community Home Based Care] is defined as any form of care given to sick people in their homes. Such care includes physical, psychosocial, palliative and spiritual activities. Home care draws on two strengths that exist throughout the world: families and communities.

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Families are the central focus of care and form the basis of the CHBC team. Communities are places where people live and a source of support and care to individuals and families in need. The goal of CHBC is to provide hope through high-quality and appropriate care that helps family caregivers and sick family members to maintain their independence and achieve the best possible quality of life (World Health Organisation 2002).

Formalisation has meant that resources and expertise are invested in home-based care by development agents to create an appropriate environment for understanding the home context better and to be able to link the home context with other issues around the community such that problems are not addressed in consideration of home situation only, but also in consideration of external factors that may affect the home. UN agencies such as the World Health Organisation have therefore developed guidelines for policy and programme development in light of the formalisation of the HBC activities ((World Health Organisation 2002).

In the formalisation process, practitioners generally affirm that those providing HBC are not only experts expected to provide formal care. Traditional aspects come into play especially through the care and services rendered by the family members. In fact interventions from outside may have limitations in terms of time. For example, social workers may visit the home at a particular scheduled time and for the rest of the time, including night time, all the responsibilities may be handled by siblings.

The reality of the dichotomy between formal and informal services being provided in the context of HBC is well pronounced in the Tanzanian Commission for Aids' statement, "Caring for patients in the homes is traditional, but in relation to HIV/AIDS and chronically ill patients, formal HBC services by the health sector started in 1996 in eight districts."

This statement is further affirmed by a claim by Pathfinder International in its report entitled, *Mapping of Community Home-Based care services in five Regions of the Tanzania Mainland.* In the report Pathfinder International states,

> HBC relates well to the traditional African way of responding to both acute and chronic illnesses whereby a family member or neighbor—usually female—would move over to tend to the ill, sometimes for a protracted period of time. Such a person would then be responsible for seeing to the patient's feeding, personal hygiene, nursing care, and even spiritual care if needed (Pathfinder International 2006: 6).

Based on the understanding that, aside of the formal interventions, family members play a vital role in HBC using their day-to-day resources and knowledge, it is sensible to conclude that HBC has strong potential to integrate tacit indigenous knowledge in addressing HIV/AIDS issues. Thus the IDPs which have presented HBC as one of their focus for intervention in HIV/AIDS issues may be seen as creating some room for IKS at least at the tacit level.

6.3.2.7. The extent of tacit knowledge integration in IDP HIV/AIDS initiatives

There is an overt indication that the scope for manifestation of tacit knowledge through the main HIV/AIDS intervention strategies presented in the IDPs is very limited. Literature studied shows that the strategies are governed by principles of development structured around cycles of manipulation through critical scrutiny, specialized training and planning. In such processes external development agencies conduct assessments, engage in process designing exercises informed by the assessments combined with assumptions and theories drawn from experts.

Such trajectories have tended to treat indigenous knowledge as being not scientifically founded. Thus they have in general sought to alienate indigenous knowledge.

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Wherever inclusion of indigenous knowledge is made, special scrutiny is made to ensure that it does not contradict what expert knowledge seeks to assert. Thus indigenous knowledge remains in the periphery.

Investigation has indicated that tacit indigenous knowledge may have a greater opportunity for influence at least in one strategy namely the Home-Based Care. Home-Based Care provides room for individual families to attend to the sick with limited experts' intervention. I therefore conclude that among the strategies presented above tacit indigenous knowledge is only applicable in the Home-Based Care.

6.3.3. Are there indications that IKS influences certain IDP decisions and development processes related to HIV/AIDS?

The previous Chapter concluded with the question above, which was preceded by the following questions: In the studied local municipality IDPs, are there situations where IKS is mentioned as instrumental in issues related to HIV/AIDS? What are the specific IKS aspects in the studied local municipality IDPs that are special provisionally incorporated to HIV/AIDS issues?[68]

The questions were asked with the aim to set a pace to examine the studied IDPs to understand whether there are IKS aspects that are incorporated in decisions and plans related to addressing HIV/AIDS. I did so because I noted that, at the level of special provisioning, IKS can be incorporated to development and implementation of IDPs only when specific IKS aspects are seen as being inherently and symbiotically part of the sector to which HIV/AIDS belongs or having the potential to influence and catalyse impact on the issues addressed for HIV/AIDS.

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[68]. The question of combined special provisioning could also be explored when I studied the relationship between IKS and good governance in IDPs above. But this path has not been followed since this study treats good governance as a subsidiary issue in understanding decision making processes related to HIV/AIDS.

I claimed that such incorporation can be seen as a dual special provisioning, since IKS, as one social aspect, is incorporated to other social aspects. In this case it became paramount not to make general inference as to how decision makers incorporate IKS to HIV/AIDS, so that one specifically isolates IKS aspects and role players treated as having a legitimate connection to issues related to HIV/AIDS.

Guided by this insight various strategies presented by IDPs in their pronouncements about their commitment to addressing HIV/AIDS have been isolated. At explicit level I have found that it is only male circumcision and virginity testing which have been presented by the IDPs as having the potential to contribute in the efforts of addressing HIV/AIDS. In this case it is concluded that dual special provisioning between IKS and HIV/AIDS, in the context of studied IDPs, only takes place in light of circumcision and virginity testing, since these are the IKS aspects which have purposefully been isolated to respond to HIV/AIDS issues.

As this study revolves around both explicit and tacit knowledge there has been a further move into studying the IDPs to scrutinise various approaches to addressing HIV/AIDS to investigate whether there are indications that they have room for the infiltration of tacit IKS. Among a number of approaches studied under this examination I have been left with only HBC as an approach with the potential for intrusion of IKS at the tacit level.

Thus going back to my question: Are there indications that IKS influences certain IDP decisions and development processes related to HIV/AIDS? I conclude that theoretical evidence shows that IKS influences decisions related to HIV/AIDS in IDPs only through male circumcision, virginity testing and HBC. In essence this means that it is only those IDP, which have presented these areas, as forming part of their HIV/AIDS strategy, which this study has found to be appreciating IKS in their effort to addressing HIV/AIDS.

This does not, however, mean that there are no other IKS aspects that can influence HIV/AIDS decision-making at the IDP level. Though there can be other IKS aspects that can be integrated to HIV/AIDS, findings from this study have been influenced by decisions that are made by those developing and implementing the IDPs. In the previous chapter we saw that there are other means of appreciating IKS such as incorporation of traditional leadership and traditional healers to decision making processes. Despite the presence of these aspects in the wider social and economic development context of the IDPs, their appreciation at the level of addressing HIV/AIDS within the context of IDPs is not evident.

This means that dual special provisioning between HIV/AIDS and IKS at the IDP level has not managed to draw from the wider context of IKS recognised by the IDPs in general. Special provisioning at this level has limited itself to male circumcision and virginity testing and is further supplemented by tacit knowledge at the HBC level. Earlier in this chapter we noted that at least 3% of IDPs incorporate IKS at the explicit level through male circumcision and virginity testing. It is noted that some traces of IKS dynamics sneak into IDP HIV/AIDS initiatives through HBC.

Out of 67 IDPs presented in Table 12, twelve have presented HBC as one of the approaches of their interest in addressing HIV/AIDS issues. This represents about 18% of the IDPs studied resulting in an inferential conclusion that 18% of IDPs in South Africa appreciate HBC and therefore have opened room for infiltration of tacit IKS in the HIV/AIDS related policy development and implementation.

Figure 11: Levels of IKS appreciation in IDP HIV/AIDS intervention plans
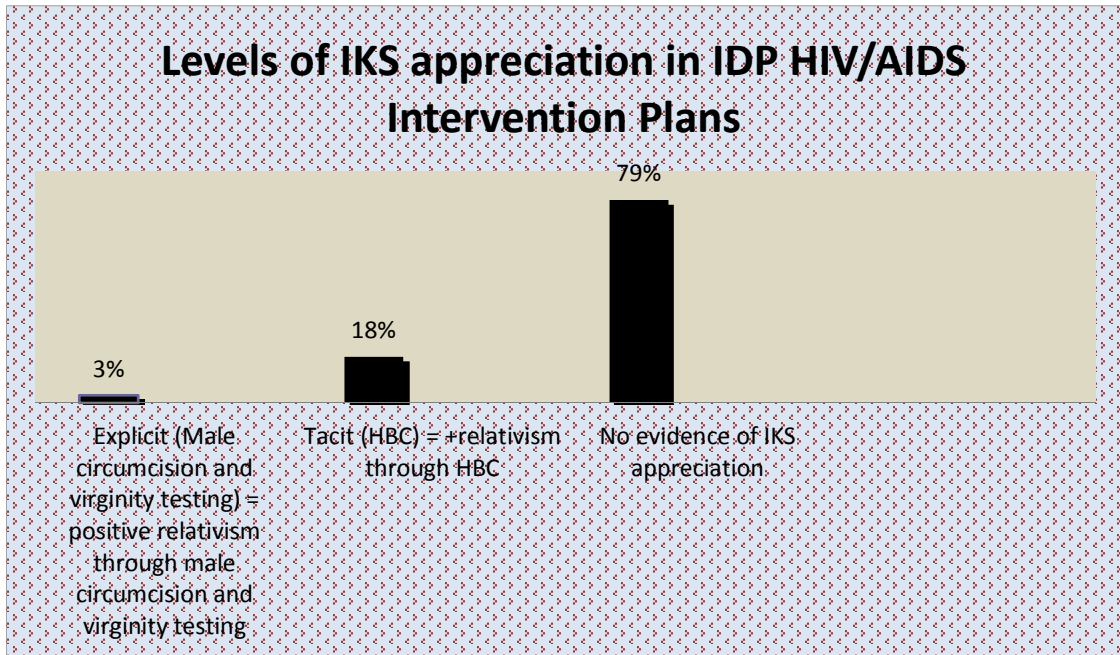
Source: Table 12 above

6.4. CONCLUSION

This chapter has confirmed the extent to which IDPs have integrated IKS in their HIV/AIDS commitments. This has been done by extracting the IDPs which have indicated commitment to addressing HIV/AIDS from those I studied in Chapter 5. Each of the extracted IDPs was analyzed to show the kind of HIV/AIDS interventions they are committed to engage in. A number of interventions were then identified as forming the IDPs' commitments to addressing HIV/AIDS. The identified commitments were further analysed with the aim to understand their potential to provide room for IKS contribution in addressing HIV/AIDS. This later analysis was made using the concepts of explicit and tacit knowledge as defined in chapter five.

In light of the explicit knowledge I identified interventions which have pure relationship with indigenous knowledge systems. Here I found that male circumcision and virginity testing are such interventions.

In terms of tacit knowledge the researcher examined the application of various conventional interventions. It was found that for all the conventional interventions there are specific formal project implementation principles that are followed. Such principles are influenced by standard social change processes such as education and provision of templates underlining steps and rules that need to be followed. Such processes are not locally devised. Rather, they are devised by experts who are generally not locally based, and are brought to the local people by development agents who may not have originated from the communities in question.

It was established that conventional interventions have no room for integration of tacit indigenous knowledge due to the fact that they are influenced by experts. However, only one form of conventional intervention was found to have the potential for inclusion of IKS. This is the home-based care, mainly because while experts are involved in the implementation of home based care programmes, family members, who may not largely be influenced by expert knowledge, take a larger part of implementing this form of intervention.

Through this analysis I have found and concluded that 3% of local municipality IDPs, explicitly, appreciates IKS as an instrument for engaging with HIV/AIDS, while 18% do tacitly appreciate IKS as an instrument for engaging with HIV/AIDS issues.

With these observations I went back to my original question for this chapter: Are there indications that IKS influences certain IDP policy development and implementation processes related to HIV/AIDS? I then concluded that theoretical evidence shows that IKS influences decisions related to HIV/AIDS in IDPs only through male circumcision, virginity testing and HBC.

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In essence this means that, it is only those IDPs which have presented these areas as forming part of their HIV/AIDS strategy, this study has found to be recognising IKS in their effort to address HIV/AIDS.

Though there may be many other ways of integrating IKS into such interventions the study only leaves in place these areas. In the final analysis the context of this study gives only those three areas as constituting the commitment of decision makers for IDPs to integrate knowledge relative to local communities in HIV/AIDS interventions. This further concludes that, as far as good governance is concerned, in the context of IKS incorporation to HIV/AIDS interventions through IDPs, I claim that 3% of IDPs observe good governance through male circumcision and virginity testing, while 18% of IDPs observe good governance through Home Based Care, and the remaining 79% do not show any evidence of observing good governance in this regard.

This essentially and conclusively means that only 3% of IDPs observes good governance in light of explicit appreciation of IKS and 18% observes good governance through tacit means of incorporating IKS, while the remaining 79% do not observe good governance both through explicit and tacit means of incorporating IKS.

Having made these conclusions, I was left wondering as to *whether IKS matters to the general citizenry, which form the main beneficiary of local government services in South Africa. And if IKS matters to them, to what extent is this case? And considering that there are up to as much as 79% of IDPs which this study found to be not taking any interest in incorporating IKS, does the informal pattern of policy orientation behavior of local municipality leaders and officials also reflect a lack of appreciation of IKS?*

Drawing from a general survey conducted in three local municipalities and some literature study to support this study, these questions form the crux of my discussion in the next chapter. The chapter provides an account of the observations made through the survey and literature study which tell us about the general South African citizenry situation in terms of incorporating IKS in dealing with HIV/AIDS. The chapter also attempts to provide information about the extent to which local municipality leaders and officials incorporate IKS and further leads to answering the questions above; and since I have already noted through the IDPs that there is limited incorporation of IKS in policy documents, in chapter eight, this analysis will be concluded by answering the question: *What are the factors which inhibit decision makers at the local municipality level to integrate IKS to their policies related to HIV and AIDS?*

CHAPTER 7

THE SIGNIFICANCE OF IKS TO THE GENERAL CITIZENRY AND THE LOCAL MUNICIPALITY LEADERS AND OFFICIALS

7.1. INTRODUCTION

In this chapter my focus is to provide some insights about the extent to which local communities and the local municipality leaders and officials embrace IKS. I have done this by referring to concrete behavior of communities and their local municipality leaders and officials in light to of their efforts to address HIV/AIDS. Thus in essence I have attempted to answer the questions presented at the end of the last chapter namely: *Whether IKS matters to the general citizenry which form the main beneficiary of local government services in South Africa. And if IKS matters to them, to what extent this is the case? And considering that there are up to as much as 79% of IDPs which this study found to be not taking any interest in embracing IKS, does the pattern of policy orientation behavior of local municipality leaders and officials also reflect a lack of appreciation of IKS?*

Largely these questions have been answered using the data drawn from a survey which was conducted in the three local municipalities (Umtshezi in KwaZulu Natal, Elias Motsoaledi in Limpopo, and Bushbuckridge in Mpumalanga). This has given a general picture about ordinary citizens' views concerning the importance of IKS in dealing with issues related to health and wellbeing – i.e. the sector to which HIV/AIDS itself belongs. During this survey local municipality leaders and officials also formed part of the key informant group. The purpose to talk to these leaders was to understand the extent to which the conclusions drawn from the chapters above on the level of appreciation of IKS at the local government level may be supported by the actual experiences and practices of the leaders and the officials themselves. Data from the survey was beefed up by the data from literature which was consulted on the issues covered in the survey.

I conveniently selected only one local municipality in three provinces namely: KwaZulu-Natal, Limpopo and Mpumalanga. These local municipalities were found to be convenient in the sense that they were found to have appropriate social conditions that would provide representative data for information and conclusions that would explain wider aspects related to the study. In addition local citizens interviewed in these local municipalities were randomly selected. However local municipality leaders and officials identified to be interviewed were purposefully selected on the basis of the importance of their roles and responsibilities in the field under study, especially in light of comparing the findings from the survey with the findings from the review of the policy documents, especially the IDPs which I have reflected on earlier in this study.

7.2. FINDINGS FROM THE SURVEY

The findings have been divided according to the information provided by the community respondents and the information provided by the local municipality leaders and officials. As seen on the list of the questionnaires presented in the Chapter 1, community respondents were ordinary citizens, traditional leaders and traditional healers and focus groups discussion participants. Local municipality leaders included the mayor's office representatives, the municipal development officials and the ward counselors.

Relevant literature has also been used to provide views from other researchers which are in line with the findings from the survey.

The survey and its accompanying literature review have helped to answer the questions I presented at the beginning of this chapter: *Whether IKS matters to the general citizenry which form the main beneficiary of local government services in the country. And if IKS matters to them, to what extent this is the case?*

And considering that there are up to as much as 79% of IDPs which this study found to be not taking any interest in embracing IKS, does the pattern of behavior of local municipality leaders and officials also reflect a lack of appreciation of IKS?

I used the questions above to guide the general structure of the report of the findings, and not the structure of the sub-sections of this chapter. Sub-sections are basically designed in line with key issues drawn from the survey. Thus in the sections that follow the report is structured in the following way: I have first provided findings from the survey combined with findings from literature review to indicate the extent to which IKS matters to the South African citizenry. This has been followed by a section presenting the information from local municipality political leaders and government officials about the extent to which they embrace indigenous knowledge.

In the final analysis I have brought to fore the observations about how the findings relate to the main theoretic parameters of relativism and good governance which have guided the theoretical rationale of the entire study.

7.3. DOES IKS MATTER TO THE GENERAL CITIZENRY OF SOUTH AFRICA?

In their article entitled "Use of indigenous and indigenised medicines to enhance personal well-being: a South African case study," Cocks and Møller (2002: 387-397) point out that there are more than 27 million[69] people in South Africa using indigenous medicines. Indigenous medicines are generally provided through traditional pharmacies.

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[69] The Statistics South Africa population Census of 2011 indicates that the country has 52.98 million people. This means the 27 million people mentioned here is more than half of the total population of the country. In percentage terms it is about 52% of the total population. The percentage could be higher since the Statistics South Africa figures are not of the same year as those of the authors.

Traditional medicines form part of the general traditional remedy systems which include: *spiritual*, which is mainly manifested through the tendency to use magical powers to deal with encounters related to misfortunes or intentions to create fortunes; *natural materials medicines*, which come in the form of herbs, or *animal parts* or any other materials, which are mainly used to cure sicknesses, remove evil spirits or remove possibilities of misfortunes.

In the article referred to above, Michelle Cocks and Valerie Møller present the following statistics of various use of herbal medicines from their study conducted among Xhosa Chemists in Eastern Cape:

> The herbal medicines made use of different parts of the plant including bulbs (6), leaves (5), roots (4), tubers (3), stems (2), bark (1) and the whole plant (1). Some of the medicines were prepared for use in several ways including as a body wash (14), emetic (vomiting mixture) (9), smoke or steam (7), enema (2), to be sprayed or planted around the house (2), or smeared on the whole body or body parts (2). Multiple uses to which the medicines were put included: for good luck/good fortune or to chase away or cleanse bad luck (11), specifically to bring good luck in court cases (5) and in love (2), and to protect from, chase away, ward off or smoke out evil spirits and protect from lightning (9) (Cocks & Møller 2002: 387-97).

In terms of dealing with HIV/AIDS as one of the social and health phenomena requiring remedies in our society, various practitioners and academics come to a common view that traditional medicine plays a significant role as one of the alternatives in addressing HIV/AIDS. Writing for the Fred Hutchinson Cancer Research Center's HIV Vaccine Trials Network (HVTN), Deborah Bach quotes Nomampondo Barnabas, the community liaison manager at the Perinatal HIV Research Unit in Soweto, Johannesburg saying, "Traditional healers play an integral role on the HVTN's community advisory boards (CABs)" (Fred Hutchinson Cancer Research Center's HIV Vaccine Trials Network 2014).

Thus there is significant evidence in almost all local communities of South African that traditional healers are taken by the general citizenry as key players in the effort seeking to address HIV/AIDS. This evidence was also shown from my survey. Asked what the communities can do on their own to address HIV/AIDS without the help of government clinics and hospitals a respondent was quick to say: "Communities must assist those who are sick to feel better. They must not only take them to the clinics. They must take them to *Sangomas* or give them traditional herbs" (KI – 8).

At an aggregated level, the survey indicated that out of 651 responses on the question of the kind of remedies local communities use[70] when they are sick, 183 respondents indicated the appreciation for traditional remedies, 408 indicated appreciation for western remedies, while 60 responses displayed appreciation for religious remedies. In terms of number of respondents the surveys showed that the 183 responses came from 89 respondents, the 408 western remedy responses came from 124 respondents while the 60 religious remedy responses came from 57 respondents.

The respondents differed from individual to individual in terms of the levels of their emphasis on the appreciation of indigenous remedies. Levels of emphasis differed in that some respondents mentioned more than one indigenous remedy they use when sick, while others mentioned only one.

Both the number of responses and the actual citizen representation show that the figures of those appreciating indigenous remedies are less than those appreciating conventional remedies. However, the statistics presented show that the representation for appreciation of indigenous remedies is so significant that it cannot be ignored.

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[70]. This evidence is drawn from a random sampling questionnaire on the question: Please give me any 5 remedies you use when you are sick.

The findings as presented above are well illustrated in Table 16 below.

Having the people appreciating indigenous remedies in such significant numbers brings me back to the point quoted from Michelle Cocks and Valerie Møller at the beginning of this section. It is noted that these authors indicate that about 27 million South Africans (about 52% basing on 2011 Statistics SA figures) use indigenous medicines.

Without having to dwell on the disparities between Michelle Cocks and Valerie Møller's figures and those drawn from the survey, a conclusion can be drawn that *both figures represent an indication that IKS matters to the general citizenry of South Africa*. In other words both figures represent an indication that the phenomenon of IKS in South Africa is so significant that it does not make sense for policy makers to ignore it on critical issues such as HIV/AIDS.

Table 76: Number of responses and preferred types of remedies for sicknesses

Types of remedies	Number of Responses			
	KZN	MP	LIMP	Totals
Western Remedies	174	234	0	**408**
Traditional Remedies	108	59	16	**183**
Religious	1	56	3	**60**
Totals responses	**283**	**349**	**19**	**651**

Table 17: Number of respondents and preferred types of remedies for sickness

Types of remedies	Number of Respondents			
	KZN	MP	LIMP	Totals
Western Remedies	45	79	0	**124**
Traditional Remedies	35	49	5	**89**
Religious Remedies	1	54	2	**57**
Total Number of Respondents	**81**	**182**	**7**	**270**

Source: Survey Conducted in three local municipalities in KwaZulu-Natal, Mpumalanga and Limpopo Provinces

Based on the foregoing, conclusive remarks are that both literature review and the survey indicate that there is a significant number of the South African population which appreciates the use of indigenous remedies for sicknesses. Adding to the statistics we have shared above various informants during the survey made statements such as:

The community can use roots and leaves of different trees [that are traditionally known to be of medicinal nature), that we have because even those medicines in the hospital are made from trees and roots. Or [communities must] go straight to the traditional healers (KI – 9).

And

People must use natural resources because here in the rural areas we have everything in terms of natural resources to cure diseases. They can also consult traditional healers since we have many in this area (KI – 10).

These comments confirm the statement made by some notable leaders in the support for IKS. I have noted, for example in Chapter 2 that a former president of Tanzania asserted his support of IKS by stating that

> Indigenous Knowledge (IK) is a resource that can help to solve local problems, a resource to help grow more and better food, to maintain healthy lives, to share wealth, to prevent conflict, to manage local affairs, and thus contribute to global solutions. Indigenous Knowledge has contributed to building solidarity in communities affected by globalization and shielded them against some of its negative impacts. There is not one of the Millennium Development Goals to whose achievement Indigenous Knowledge cannot contribute (www.africahistory.net).

In spite of the evidence that communities have a strong inclination towards using indigenous remedies, the study of IDP documents before conducting the survey, noted that a significant number of these documents do not show that policy makers have made an effort to include IKS in the policy documents as a significant part of their policies to address HIV/AIDS. This has been observed in a significant way when I studied one third of the South African local municipality IDPs.

The researcher is therefore left with the understanding that policy makers have ignored the general inclination of their communities towards IKS. But before placing emphasis on this understanding, it is recalled that the survey included the participation of policy makers as key respondents - the local municipality leaders and officials. Their participation was included with the intention to collect their direct views about the inclusion of IKS in decision making processes and to understand the extent to which their behaviour reflects their appreciation for IKS. In other words, the researcher sought to answer the question: *Considering that there are up to as much as 79% of IDPs which this study found to be not taking any interest in embracing IKS, does the pattern of behavior of local municipality leaders and officials also reflect a lack of appreciation of IKS?*

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7.4. DESPITE THE LIMITED INCLUSION OF IKS IN POLICY DOCUMENTS, DO THE LOCAL MUNICIPALITY POLICY MAKERS THEMSELVES APPRECIATE IKS AS A SIGNIFICANT PHENOMENON IN THEIR WORK?

In pursuing this question, local municipality leaders and officials were used as key informants. It was understood that the local municipalities' inclination towards the appreciation of IKS would be signified by their efforts to involve communities, traditional leaders and traditional healers in various development activities of the local municipalities through some established structures. Thus I particularly asked questions about the existing structures, then made an analysis of which of those structures would be appropriate settings for discussions and sharing of information related to HIV/AIDS.

In addition, the survey investigated the extent to which the local municipality leaders and officials recognised the roles and responsibilities traditional leaders and traditional healers play in their communities. I also investigated whether the leaders and the officials integrated IKS related practices to their programmes on HIV/AIDS. Finally, by looking at the historical status of social belonging (i.e. whether the leaders and the officials were born and stayed in the communities they worked), I investigated the extent to which the leaders and the officials informally interacted with the communities they led or worked with.

In addition to the areas of investigation above, the traditional leaders and traditional healers were also asked to indicate whether they form part of the key players in the local structures. This was done to verify as to whether interaction indeed takes place between the local municipality leaders and officials and the traditional leaders and traditional healers and their communities.

7.5.   PARTICIPATION THROUGH LOCAL STRUCTURES

In Chapter 5, public participation was used as the yard stick to measure the levels of inclusion of IKS by the local municipality leaders. It was also noted that in Chapter 5 I analysed different forms of public participation and gave an evaluation of the extent to which each one of them creates room for effective incorporation of IKS. Evidence from all the questions asked indicates that public participation in the practical activities, and not in the development of documented policies, takes place through various structures. This finding asserts that in the local communities certain structures, where communities meet and discuss issues of local concern, exist as an indigenous resource to address issues of local concern. The finding further supports an observation recorded in Chapter 2 from Monaheng which asserts that:

> Participation also implies some form of organization. … Community based organizations (CBOs) are the vehicle through which community participation takes place … These CBOs can take different forms, such as farmers' unions, women's associations, church groups, youth clubs, development committees and project committees … (Monaheng 2000: 127-128).

During the survey, the list of structures mentioned by local municipality leaders and officials, traditional leaders and traditional healers as central points of meetings and engagement included:
1. Farmers committees
2. Land claims committees
3. **Clinic committees**
4. **Traditional healers committees/House of traditional healers**
5. Schools committees
6. **Burial societies**
7. Community development forums and projects
8. Community policing forums

9.   Budget and planning forums

10. **Youth structures**

11. **Water and sanitation forums**

12. **Home-based care**

13. **Lovelife**

14. Business forums

15. Arts and culture

16. Football teams

17. **House of traditional healers**

18. COSATU

19. **Moral regeneration**

20. Disaster management forums

21. Ward committees

22. **Disability forums**

23. Political party meetings

24. Stockvel

25. **Theatre groups**

26. **Women empowerment groups**

27. **Church groups**

28. **Local AIDS Councils**

The list is probably clear evidence that there is significant interaction between local municipality leaders and officials as decision and policy makers, on one the hand and the traditional leaders and healers and the general citizens as custodians of the IKS on the other. In reflecting on the same list against the opportunities to incorporate issues related to HIV/AIDS, it may be difficult to say exactly whether the HIV/AIDS issues feature prominently in these structures. However, comments from the respondents during the survey show that the following as explicit forums where HIV/AIDS issues are naturally given attention. These may include:

1.   **Clinic committees**

2.   **Traditional healers committee/ House of traditional healers**

3.   **Burial societies**

4. **Youth structures**
5. **Water and sanitation forums**
6. **Home-based care**
7. **Lovelife**
8. **Moral regeneration**
9. **Disability forums**
10. **Theatre groups**
11. **Women empowerment Groups**
12. **Church groups**
13. **Local AIDS Councils**

Thus, it can be argued that about half of the 28 structures collected during the survey show potential that, on HIV/AIDS, there are engagements taking place between local municipality leaders and officials as decision makers and implementers on the one hand and traditional leaders and traditional healers and general citizens as custodians of the IKS on the other.

In the subsections below, further information to this claim using literature and some comments given by informants is added. This is done to strengthen our claim that the selected 13 structures above could form part of critical forums where HIV/AIDS issues are discussed at the local level, thereby creating an opportunity to share IKS related issues and approaches by the traditional leaders, traditional healers and the general community members.

7.5.1. Clinic committees

It is generally known that clinics are central points where HIV/AIDS preventative and treatment activities take place throughout the country. This is a general phenomenon across the world.

This recognition accorded to is, therefore, a justification that the engagement of local municipality leaders and officials and traditional leaders and healers and the general community through Clinic Committees may be one of the effective ways to incorporate IKS. In a focus group discussion conducted in Bushbuckridge local municipality in Mpumalanga, participants commented:

> People have stigma and when it comes to testing they are still afraid. There are no support groups [for those affected and effected with HIV/AIDS], but in these [clinic] committees we discuss how these issues can be tackled (Focus Group 3).

7.5.2. Traditional healers committees

A study conducted by the Human Science Research Council and the University of Limpopo in 2006 indicates that there is a significant recognition of and participation in issues related to HIV/AIDS by traditional healers. In terms of STI/HIV management the study indicated that,

> The majority of the traditional healers (74%) knew and 26% did not know where to obtain VCT. More than half of the healers (56%) indicated that they had referred a patient for HIV testing in the past three months. Two-thirds (66%) conducted an HIV/ STI risk behaviour assessment (e.g. ask about risky sex) in the past three months, 61% integrated partner referral in their STD management, and 82% conducted HIV/STI risk reduction counselling (e.g. advise on condom use, abstinence, fidelity and partner reduction) in the past three months. However, only 27% of the healers had distributed condoms to their patients in the past three months, and only 19% reported that they had a container with condoms in stock. Many healers (58%) are involved in home-based care of patients, 36% conduct community HIV/STI education, and 24% had been keeping record of their patients in the past three months (Peltzer, Mngqundaniso & Petros 2006: 608-613).

The study cited above indicates that generally HIV/AIDS is considered as an important phenomenon by traditional healers. Thus in considering its importance, traditional healers are likely to bring HIV/AIDS in their committee discussions. Some of their experiences and discussions from their forums may be shared with other sectors. A traditional healer interviewed in Limpopo during the survey indicated that he was a member of the local AIDS Council and headed the traditional healers committee.

> [As a representative of the traditional healers] I take matters that concern us [traditional healers] to the AIDS Council. In our work we meet a lot of these patients [HIV] patients. We can share a lot to the leaders of this municipality (KI: 13).

In addition, to seeing their role as contributors in the efforts of addressing HIV/AIDS in multi-sectorial forums such as AIDS Councils, some evidence shows that the healers also understand themselves as a particular interest group that must uphold certain values of business discipline in protecting intellectual property. Thus the committees act as a platform where they strengthen their sector and provide mutual support to each other in addressing issues such as HIV/AIDS. During a briefing discussion, a field worker from KwaZulu-Natal reported,

> Traditional healers were reluctant to answer some of the questions. They said that most of the issues concerning HIV/AIDS are discussed in their [traditional healers] forums. They do not give information to anyone [because that is their intellectual property]" [Survey field worker: KZN).

7.5.3. Burial societies

In their article entitled *South African HIV/AIDS programming overlooks migration, urban livelihoods, and informal workplaces,* Jo Vearey, Marlise Richter, Lorena Núñez, Khangelani Moyo emphasize the importance of the burial societies in addressing HIV/AIDS in urban areas.

They claim that Burial Societies are one of the important settings through which poor urban citizens try to address their issues of livelihood and can make an important point of entry for HIV/AIDS programming (Vearey, Richter, Núñez, & Moyo: Abstract). Burial societies are known to have provision of mourning support as one of their key objectives. The prevalence of HIV/AIDS has meant that this psycho-social support is of great benefit for the families which have lost their loved ones from AIDS. During the survey a respondent commented:

> The burial societies encourage us to understand how serious this problem (HIV/AIDS) is. Sometimes people say the truth about their status. Sometimes people hide, but we have these old people who will advise us about living a good [moral] life. They sometimes say it openly that some of our friends died from this disease. Even at home, you find parents who use examples from people in the burial society when they advise their children (KI: 9).

It therefore can conclusively be argued that the burial societies are one of the central points where HIV/AIDS issues are discussed. Such discussions may be informed by the people's general knowledge, part of which may be indigenous. Such discussions may also provide opportunities for local leaders who are part of the community to understand key issues that may be integrated to their policy decisions. Funeral services which the burial societies provide can be a great source of reflection about HIV/AIDS, which can bring new knowledge and new ways of encouraging policy makers to incorporate indigenous knowledge to the policies seeking to address the disease.

7.5.4. Youth structures

There is quite a significant amount of literature and programmes targeting the youth on issues related to HIV/AIDS.

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A discussion group in Bushbuckridge Local Municipality in Mpumalanga Province, indicated that "we have a campaign going to schools, clinics and some public meetings to educate the youth about this [the epidemic]" (Group discussion 2). These have made so much influence that in most of their groupings the youth do directly or indirectly engage in activities that contribute to addressing the epidemic. Thus youth structures could be seen as among the key local structures where HIV/AIDS issues and ideas that can inform policy are shared. Such ideas may come from the youth's general knowledge, part of which may be IKS.

7.5.5. Water and sanitation forums

The relationship between water, sanitation and HIV/AIDS has been well articulated by development practitioners and scholars in terms of the burden that those affected and infected with HIV/AIDS are encountering due to limited water supply in rural areas. Living with the disease and caring for the sick poses a serious challenge in situations where the sick and those taking care of them have to fetch water far away from their homes. There is also an observation that those carrying the HIV virus usually suffer from diarrhea and this results in serious sanitation problems in rural communities, where households do not have reliable toilet facilities. Citing an article entitled HIV/AIDS and water, sanitation and hygiene by Kamminga, E. and M. Wegelin-Schuringa (2003), The Mvula Trust point out that,

> In the first place, people infected and affected by HIV / AIDS suffer more as a result of deficient water and sanitation services than healthy people. In communities where people still rely on river water, those infected may not have the strength to go and fetch water, and depend on relatives (often children) to do this. Home-based care volunteers cannot dedicate all the time they would like to in caring for the sick as they spend so much time fetching water. In extreme cases, people infected have no other solution than to buy water from those who have their own boreholes, at high costs.

In addition, children often do not want to fetch water at rivers as they are vulnerable to being assaulted and / or raped. Equally, sanitation is of major importance for those who are sick. They often suffer from opportunistic diseases such as diarrhoea. Some who do not have proper toilets may use their neighbors', but also might use the bushes. This creates extreme discomfort for people, and also poses a huge public health risk (Mvula Trust 2003).

Recognition of these and other related factors would mean that HIV/AIDS could be one of the critical subjects discussed in water and sanitation forums. Ideas shared in such forums could emerge from the participants' own indigenous knowledge and could provide a reasonable resource for policy development.

For example, a local municipality official commented:

When we teach [communities] about public health, we don't leave the issue of HIV/AIDS out. We have realized that sanitation problems affect people affected with HIV/AIDS a lot. In rural communities like here, people do not have toilets in their houses – they have toilets outside the house. For traditional reasons some houses do not have toilets at all – they have to use the bush. People with AIDS suffer a lot in such situations as sometimes they get diarrhea. So we tell these families that when they have an AIDS patient in the family having a toilet is a must. … In water and sanitation forums we also encourage them to discuss these issues (KI: 16)

7.5.6. Home-based care

There was reflection on home-based in Chapter 6. The concept was defined "…provision of comprehensive services, including health and social services by formal and informal caregivers in the home. HBC includes physical, psychosocial and spiritual care" (www.tacaids.go.tz).

Here, it was further noted that this is one of the strategies used and promoted by development practitioners to address HIV/AIDS. A respondent indicated that "families can assist their siblings living with HIV by giving them traditional medicines or call pastors to pray for them" (KI – 22). Thus, it goes without saying that Home-Based Care structures are one of the central points where issues about HIV/AIDS are discussed by the local people who use their indigenous knowledge. Home-based care structures have therefore the potential to provide information for policy decision-making.

7.5.7. Lovelife

Launched in 1999 Love Life is the largest South Africa's HIV/AIDS campaign initiative, which uses various media channels to educate communities about the epidemic. One of their key strategies is to work with the youth in the local communities in order to strengthen the outreach of the campaign. On its web site Lovelife claims that its campaigns reach about 500 000 young people through face - to - face interactions (www.lovelife.org.za). In short HIV/AIDS campaigns are the full-time business of Lovelife. Thus Lovelife groupings in local communities provide a critical opportunity for access to information generated by the local people about HIV/AIDS. Such information may be informed by the citizens' own experiences from indigenous knowledge. In some cases when Lovelife programmes started communities had already started their own project on different subject. For example a respondent commented:

> When Lovelife came in this village we had already started our own HIV/AIDS awareness group. A [certain] pastor and another woman from his church started to bring the youth together at their church. They would read the Bible, then told them discuss what the Bible says about HIV. Then [the pastor and the woman] would ask the youth speak from their own experiences and share stories about what they see in their communities. When they talk about what they experience some people could even cry.

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> Then Lovelife came and saw that these people are communitted so
> they decided work with them and now the project is known as i-
> Lovelife. Now, even our politicians are using this programme to show
> that they municipality is doing something (KI: 17).

Involvement in Lovelife initiatives by policy makers can be an opportunity for them to access indigenous knowledge ideas that can be incorporated to their policy decisions.

7.5.8. Moral regeneration

The relationship between HIV/AIDS and sexuality is one aspect commonly known in not only the experts' and scholars' circles, but also in the general community settings and structures. Other aspects attached to this include irresponsible and accidental sexual behaviuors and incidents that can result in HIV infection. During the survey some of the informants referred to the church and prayer as one place and social facet where communities can learn good behaviours that can minimise chances of contracting HIV. A respondent stressed,

> The community has the responsibility to give hope to those who are sick
> and encourage them to live positively. The community must also pray
> for the youth to refrain from bad behavior. They must ask God to help
> them [to deal with this epidemic] (KI – 31).

Thus HIV/AIDS is one of the critical diseases and social developments, which have forced society to seriously reflect about human morality. In some cases development practitioners have dedicated their time to focus only on moral issues as a way of influencing preventive behaviour.

In light of the connection between HIV/AIDS and human morality, local structures established to deal with moral regeneration issues can be a critical opportunity to discuss issues about how to address HIV/AIDS from the moral angle, and by using indigenous knowledge and values. Thus moral regeneration structures can provide access to indigenous knowledge, which can be incorporated into policy decisions.

7.5.9. Disability forums

Literature on the relationship between HIV/AIDS and disability claims that people with disabilities have "higher risk of exposure to HIV". An informant living with physical disabilities in one of the focus groups during the survey commented:

> Disabled women are usually raped in our communities because they are helpless. Sometimes the very same people who are supposed to take care of them, abuse them. Awareness-raising about their rights is needed. We also have to condemn the traditions that make the disabled people to be treated as useless (KI: 15).

Physical conditions and limited information about prevention has been cited as among the reasons for the vulnerability of this social group to HIV infection:

> Women and girls with disabilities are especially vulnerable to sexual assault or abuse. Persons with intellectual impairments and those in specialized institutions are also at particularly high risk. Around the world, children with disabilities are a large proportion of the children and persons with disabilities not enrolled in school, which results in their exclusion from vital sexual and reproductive health education that is often provided in school settings. Low literacy levels and a lack of HIV prevention information in accessible formats, such as Braille make it all the more difficult for persons with disabilities to acquire the knowledge they need to protect themselves from being infected (www.un.org).

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The same literature also claims that the conditions of people living with HIV make them susceptible to permanent to episodic disability (www.un.org).

Realisation of this relationship indicates that HIV/AIDS is one of the critical and potential issues that may receive attention in the forums established for people with disabilities. Thus disability forums can create space to unearth indigenous knowledge to address HIV/AIDS. Interaction between decision makers and these forums can therefore be meaningful for incorporation of indigenous knowledge into policy decisions.

7.5.10. Theatre groups

Throughout the world drama has been applied in many initiatives aimed at educating people about health issues. HIV/AIDS has specifically received attention in these efforts at both the formal (e.g. through the digital media) and the informal (community) levels. For example, The United National, Educational, Scientific and Cultural Orgnisation (UNESCO) developed

> The manual for theatre groups entitled "AIDS and Theatre: How to use theatre to respond to HIV/AIDS" … to give practical guidance on how to use theatre in HIV & AIDS using participatory communication methods based on lessons-learned and the experiences of theatre groups in different geographical regions (www.unesco.org).

Messages depicted through drama can provide significant indigenous information about people's lifestyles, behavior, world views and thinking patterns. During the survey a respondent commented on the work of Lovelife said:

> Our Lovelife activities are not only about lifestyle. They are also about good behavior. We draw from the local traditions, from people's experiences and general human values to teach people about AIDS and how to treat people living with AIDS.

We have that theatre is an effective way of doing this since drama draw people, especially here in rural areas where there are no cinemas (KI: 13).

Thus theatre groups can be seen as one of the important channels through which key players in policy development at the local level can access knowledge, some of which can be indigenous in nature that can be incorporated to decision making processes.

7.5.11. Women empowerment groups

The World Health Organisation (WHO) and the United Nations AIDS Programme (UNAIDS), estimate that 50% of people living with AIDS in the world are women. In some societies "women constitute 60% of people living with AIDS" (www.who.int). Gender roles, norms, lifestyles and social inequalities between men and women are among the key factors contributing to vulnerability of women to HIV infection. In the midst of these imbalances women have become conscious about their vulnerability so much so that HIV/AIDS issues have in most communities been integrated to their empowerment efforts.

During the survey, a female respondent who was asked whether they discussed issues about HIV in their church women groups, commented:

Nowadays, we cannot talk about how our men behave without thinking about the consequences about AIDS. In fact, when we talk, AIDS becomes the first thing we are concerned about. So teaching a woman about sexuality goes hand in hand with teaching them about AIDS. … Our grannies, traditional leaders and traditional healers talk about how women are vulnerable to AIDS (KI: 14).

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The WHO points out that "HIV/AIDS programmes that promote and invest in gender equality contribute to both MDG 6 on combating HIV/AIDS, TB and malaria and to MDG 3 on promoting gender equality and women's empowerment" (www.who.int)

With this background in mind, it goes without saying that women groupings can form an ideal environment for discussions about HIV/AIDS in local communities. Such discussions may enjoy a strong backing from women's own indigenous knowledge. Thus through their participation in such groups, policy makers can collect indigenous knowledge which can be useful for their policy decisions.

7.5.12. Church groups

In his Master of Sociology Degree thesis Bernard Likalimba concludes that HIV/AIDS is one of the social phenomena receiving serious attention in religious institutions. Likalimba further points out that the institutions use their traditional systems as a vehicle to address the epidemic:

> Some integrate HIV/AIDS issues into other social interventions such as a general ministry to the sick. Some integrate their interventions into their religious educations. For others HIV/AIDS is only found in core spiritual activities such as prayers and sermons (Likalimba 2001: 70).

While it may be claimed that religious institutions have their own traditions that sometimes may be different from the traditions of the local communities, it may also be claimed that indigenous knowledge plays a critical role in the way people participate in the activities of these institutions. Practices of locally established religious organisations are actually rooted in the culture of the local people, while some practices of main line religious organisations are generally known to embrace local knowledge and traditions through efforts of enculturation and contextualisation.

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Further, there are religious groups, such as those of African religions whose practices are rooted in the cultural practices such as praising the ancestors. A respondent commented:

> People [in my village] praise the ancestors. Some of the people we know to be AIDS patients come to us [Traditional healers] at the advice of the church leaders in African churches. Some think that AIDS is a curse from the ancestors and therefore they need to go and plead for their healing (KI: 13).

It can, therefore, be claimed that religious institutions are among the locally based institutions rich in indigenous knowledge. Efforts to address HIV/AIDS by religious institutions may therefore not discriminate indigenous knowledge, but rather embrace it and use it as part of their important resource. Thus policy makers can access indigenous knowledge from these institutions to inform their decisions.

7.5.13. Local AIDS Councils

AIDS Councils are known to be multi-sectorial entities through which the government, at the national, provincial, and local levels, identifies key issues related to HIV/AIDS and develop appropriate policies and programmes. They are legislated entities and local municipalities are legally required to establish them. In this light the entire business of AIDS Councils is to deal with HIV/AIDS issues. Thus those who participate in them can make no other contributions than inputs related to HIV/AIDS.

At the local municipality level, the participation of various sectors in these entities includes the traditional leaders, traditional healers and some key individuals and organisations from the local communities who are significantly influenced by their indigenous knowledge. Thus:

> [As a representative of the traditional healers] I take matters that concern us [traditional healers] to the AIDS Council.

> In our work we meet a lot of these patients [HIV] patients. We can share a lot to the leaders of this municipality (KI: 13).

The interaction between the local municipality leaders and officials and their communities through the AIDS Councils can provide a significant opportunity to access and share indigenous knowledge, which can further be used to improve various HIV/AIDS decisions and initiatives.

7.6. CONCLUDING REMARKS ON THE FORM OF PARTICIPATORY ENGAGEMENT THAT INFLUENCE SHARING OF IKS IN THE STRUCTURES ABOVE

As indicated earlier in this section, the structures presented above were cited, during the survey, by the respondents from the sample, as central points where they meet with communities. In these structures, ideas about various issues of concern are discussed and shared and sometimes common and locally relevant solutions to address such issues are developed. The local people use their indigenous knowledge in such structures to participate in developing solutions concerning their local needs. By using participatory development as a yardstick to assess whether local communities contribute in developing solutions concerning their life, it is concluded that local municipality leaders and officials do show that they appreciate indigenous knowledge (which form part of local knowledge) by interaction with the custodians of that knowledge through the structures presented above.

This, in other words, can be understood as a form of public participation. We, however, need to assess the kind of participations being depicted in such interactions in light of the Chapter 5 analysis of various kinds of participation. Quoting from Moses Katane Local Municipality IDP Review of 2011 – 2012 (Moses Kotane Local Municipality Draft IDP Review 2011/2012: 20), in Chapter 5 (Table 10) I presented the following kinds of participation.

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Self-mobilization: People participate by taking initiatives independently of external Institutions for resources and technical advice they need, but retain control over how resources are used;

Interactive participation: Groups take over local decisions and determine how available resources are used, so they have a stake in maintaining structures or practices. People participate in:

- Joint analysis;
- Development of action plans; and
- Formation or strengthening of local institutions;

Functional participation: Participation seen by external agencies as a means to achieve project goals, especially reduced costs. People may form groups to meet predetermined objectives related to the project;

Participation for material incentives: Participation by contributing resources, for example:

- Labour in return for food or cash or other material incentives;

Participation by consultants: People participate by being consulted and answering questions. External agents define problems and information gathering processes, and so control analysis. The process doesn't concede any share in decision making; Professionals are under no obligation to take on board people's views;

Passive participation: People participate by being told what has been decided or have already happened. It involves unilateral announcements by an administration or project management without any listening to people's responses; and

Manipulative participation: Participation is simply pretense, "people's" representatives on official boards are not elected and have no power.

My reflection in Chapter 5 on these types of participation was based on the attempt to find out the extent to which local communities participate in developing IDPs. It was noted that communities are usually consulted when the IDPs are being developed, hence their participation is by *consultation*. Then I argued that such participation does not provide room for incorporation of IKS since it is top-down in nature - communities are asked to make commentaries on the agendas, which have already been set by their authorities.

At this point, the importance of whether the type of participation in question provides room for incorporation of IKS to policy decisions brings me to reflecting about the kind of participation being observed in the structures that I have presented above. After reflecting on those structures it was indicated that they could provide a reasonable environment for policy makers to access indigenous knowledge which can be integrated with policy decisions. This assertion is made with the understanding that the structures are locally formed by the communities in collaboration with their leaders. They are also locally run by the communities and their leaders. It is at structures where the local municipality leaders and officials interact with the communities on a continuous basis. The recognition of the fact that the local communities with their leaders such as traditional leaders and traditions healers, have specific roles to play, leads to ensuring that the communities make contributions in running the structures; hence the observation of *Interactive participation*.

7.7. RECOGNITION OF THE ROLES OF TRADITIONAL LEADERS AND TRADITIONAL HEALERS BY THE LOCAL MUNICIPALITY LEADERS AND OFFICIALS

The survey pursued the question as to whether the local municipality leaders appreciate the fact that traditional leaders and traditional healers have specific roles to play in the communities. A comment from a ward counselor related to this question noted:

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> Government and traditional leaders must work hand in hand to assist their communities about HIV/AIDS as people are still afraid to get tested and take treatment to reduce the death of people living with HIV. (KI – 1)

The survey further asked the following specific questions to probe about the roles played by traditional leaders and traditional healers:

- What are the roles played by traditional leaders in addressing HIV/AIDS in this community?
- What are the roles played by traditional healers in addressing HIV/AIDS in this community?

Below are the results recorded from the survey on these questions?

Roles played by traditional leaders:
- Making sure that initiation schools are safe and registered;
- Giving advice to communities on traditional issues;
- Assisting in [running and establishing] community structures;
- Supporting the services provided by people from outside the community (e.g. people coming to talk about HIV/AIDS to the community);
- Identifying and assessing community needs;
- Planning and working with government officials;
- Conducting awareness and education campaigns; and
- Teaching community about testing and prevention.

Roles played by traditional healers:
- Advising traditional leaders and the community in general on issues concerning their work in the community;
- Assisting community with traditional medicine;
- Teaching communities about HIV/AIDS issues;
- Initiating the formation of [appropriate] forums;

- Making sure that patients take their medicines;
- Assisting in community awareness initiative issues (e.g. speaking to the public during special community events);
- Supporting the infected and affected individuals [to cope with the disease];
- Taking part in clinic committee meetings and workshops;
- Making suggestions about how to collaborate with other stakeholders;
- Making input on community development and human health issues; and
- Providing sexual education.

At this stage it is argued that the existence of local structures where the local municipality leaders work with their communities and the appreciation of the roles played by traditional leaders and traditional healers by the local municipality leaders and officials are the empirical indications I have so far from the survey proving that local municipality leaders do recognise the importance of indigenous knowledge. Commenting on the importance of the traditional healers, a ward counselor commented,

> We involve them [the traditional healers] in our meetings. We give them a slot to speak to the community. They have an important role in our community since they help us to use our natural resources for the benefit of the sick people (KI – 35).

However, it makes sense to argue that just interacting with the communities through the structures and appreciating the roles that traditional leaders and traditional healers play may not be enough to prove that local municipality leaders and officials concretely appreciate indigenous knowledge to the extent that they may incorporate it to their local initiatives and policies. During the survey I asked about the kind of traditional practices that the local municipalities have recognised and incorporated into their programmes.

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7.8. TRADITIONAL PRACTICES THAT LOCAL MUNICIPALITY LEADERS INCORPORATE INTO THEIR PROGRAMMES

In trying to understand the traditional practices local municipalities appreciate and incorporate to their HIV/AIDS related programmes, the following question was asked to the municipal officials and ward counselors during the survey:

What are the traditional practices included in HIV/AIDS activities in this community?

Understanding that there could be traditional activities supported by the local municipality, but not yet incorporated into the local activities, the same question was rephrased thus:

What other traditional practices do you think can be useful in addressing HIV/AIDS in your community and why?

C*ircumcision, establishment of initiation schools*, *virginity testing and use of traditional medicine and herbs* were readily mentioned by the local municipality leaders and officials as the main traditional practices incorporated into their programmes. Comments from some respondents emphasized:

They [Circumcision and Initiation] are good for our youth as they reduce the risk of getting HIV. The best is circumcision, it is safe and helps reduce the risk of HIV/AIDS and most people [have] done it and are happy (KI – 1).

It [traditional medicine] is good. Since we were young we have been using the traditional medicine and herbs (KI – 2).

> Traditional healing process is much cheaper and safer than Western medication. They are recommendable and [one] can get them anytime, anywhere (KI – 3).

> Initiation schools are safer nowadays compared to the past as we also involve not only traditional healers, but also medical doctors. During initiation schools we teach children about HIV/AIDS and [to live with a sense of responsibility] (KI – 11).

Still in emphasizing the importance of traditional medicine, a municipal official gave general comments by citing two cases she encountered:

> A young woman was suffering from AIDS. She was weak and lost too much weight. A traditional healer gave her *Aloe vera* and *magaba (traditional tea)* and she came back to a person we all used to know (KI – 4).

> An old man who got sick, and could not find help at [the local] hospital, was taken to one of our traditional healers and given traditional herbs to steam and sniff. The man is alive even today (KI – 4).

In line with traditional medicine, *steam, smoke* from some traditional herbs, *traditional immune boosters, aloe vera, herbal tea, African potatoes, morinka*, were mentioned as among the key healing practices that the municipal leaders and officials were familiar with and attempted to promote. In addition, some mentioned that *traditional and organic food* should also be encouraged as one of the things that can minimise the worsening of sickness from AIDS.

While recognising the importance of traditional medicine and practices in alleviating HIV/AIDS, some key informants indicated that traditional leaders and traditional healers needed also to be educated about the epidemic.

In line with this thinking one informant indicated that there are traditional healers who did not accept that HIV/AIDS exist. He said traditional healers believed that what is known as HIV/AIDS is actually *the dirt in human blood*.

> Traditional healers don't believe in HIV/AIDS. They say during the olden days there was no such a thing. They believe that [HIV/AIDS) is a problem called *Makgoma* (dirty blood of a widow) (KI – 2).

In addition some local municipal officials commented that some traditional practices do encourage the spread of HIV. A traditional practice called *Ukuthwalwa kwezintombi kungavunyelwa,* (taking a woman for marriage without her consent and without the consent of her parents) was mentioned by one of the municipal officials as a traditional practice which should be discouraged when educating traditional leaders and traditional healers about HIV/AIDS.

Asked how they integrated the medicines with their practices, they mentioned that it was "through the traditional leaders, traditional healers and the old people" (KI – 3). One key informant had this to say, "Traditional healers take part in making sure that the community follows procedures [of using HIV/AIDS medicines]" (KI – 4).

7.9. OTHER METHODS USED BY THE LOCAL MUNICIPALITY LEADERS AND OFFICIALS TO ADDRESS HIV/AIDS

While emphasis was on finding out the extent to which the local municipality leaders and officials appreciated indigenous knowledge, through general comments from survey it was observed that the local municipality leaders and officials do not only appreciate IKS, but also appreciate conventional methods of dealing with HIV/AIDS. For example a ward counselor commented:

> Government and Traditional leaders must work hand in hand to assist communities about HIV/AIDS as people are still afraid to get *tested* and *treatment* to reduce death from AIDS (KI – 1).

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Another ward counselor remarked:

> All the villages which I represent as a counselor always invite me to
> participate especially in the following activities: World Aids Day,
> *Awareness* in schools, *Home based care* and Youth Centre talks (KI –
> 6).

A municipal official commented:

> As I am working in Hluvukani Region in the environmental section,
> usually when we have campaigns we all partner together and educate
> people regarding HIV/AIDS issues. Traditional people were not using
> protection, but now due to this virus, they have to… Even though people
> hide their status we always encourage them to test (KI – 8).

As noted in Chapter 6, Voluntary Counselling and Testing, Use of condoms
(protection), Awareness Campaigns, Home Based Care are among the main
approaches promoted by the proponents of the conventional methods of
addressing HIV/AIDS. The mention by the local municipality leaders and officials
of these methods is an indication that they support is not limited to IKS related
approaches, but also support conventional methods.

7.10. ACCESS TO IKS THROUGH BELONGING

Adding to the fact that the appreciation of indigenous knowledge by local
municipality leaders and officials is influenced by their interaction with the
traditional leaders and traditional healers through the structures observed earlier
in this chapter, the survey also noted that the leaders and the officials have a strong
access to indigenous knowledge through informal interactions with the local
communities.

The survey confirmed this by finding whether the local municipality leaders and officials, partially or totally spent their lives or were born in the communities for which they were leaders. In light of this question Figure 12 below shows that out of the 14 local municipality leaders and officials interviewed:

- 11 were born in the communities for which they were leaders or officials;
- 12 were resident in the same communities; and
- 7 had stayed in those communities the whole of their lives.

Figure 12: Historical status of belonging to the community where current leadership is held

Source: Indigenous Knowledge Systems Survey: 2014

This provides an insight that the local municipality leaders and officials are not only leaders in their communities, but also part of the general membership. In that sense they participate in the daily formal and informal social practices and events taking place in those communities.

7.11. CONCLUSIVE REMARKS: CONFIRMING THE LEVEL OF APPRECIATION OF IKS BY LOCAL MUNICIPALITY LEADERS AND OFFICIALS

At this point the survey confirms that appreciation of IKS by local municipality leaders and officials is well manifested through the following aspects:

- That there is an existence of local structures through which the local municipality leaders and officials interact with local communities and their traditional leaders and traditional healers;
- That the local municipality leaders and officials do recognise the fact that the traditional leaders and traditional healers have specific roles to play in the efforts aimed at addressing HIV/AIDS;
- That the local municipality leaders and officials have ensured that traditional practices and players are incorporated into their programmes; and
- That the local municipality leaders and officials are largely part of the communities for which they are leaders.

A combination of these findings leads to the conclusion that the local municipality leaders and officials are in no way against the incorporation of IKS into their programmes aimed at dealing with HIV/AIDS. In fact they are part of the community systems and dynamics which design and define the path of IKS integrations to HIV/AIDS development processes. In that way, they have an ability to listen to and sympathise with the local communities in their quest to utilise IKS as one of the key resources to address HIV/AIDS.

7.12. ALIGNING THE SURVEY FINDINGS TO THE THEORETICAL PARADIGMS OF EXPLICIT AND TACIT FORMS OF INDIGENOUS KNOWLEDGE, GOOD GOVERNANCE, AND RELATIVISM

In this section an elaboration of how the findings align with the main theoretical paradigms which guide the rational pattern of the main arguments is made. I have sought to briefly indicate the angles through which the findings from the survey support the principles of good governance, relativism and the two types of IKS namely: explicit and tacit.

7.12.1. Relevance to extraction of explicit and tacit knowledge

In Chapter 5 when the terms *explicit* and *tacit* knowledge were introduced a brief indication of how these terms are used in the study was made.

> The approach employed in this chapter is guided by the thinking that IKS inclusion in decision making and development processes can be at the levels of tacit and explicit knowledge. Inclusion at the level of *tacit knowledge* can be within the general processes where people are not proactively cajoled to share their ideas. They contribute their IK spontaneously by responding to prevailing situations and opportunities. At the *Explicit* level initiatives are deliberately undertaken by those in control of processes to ensure that IKS takes precedence and/or drives processes (cf chapter five).

It will be recalled that when the findings were presented, there was no specific categorisation of the four different areas through which the local municipality leaders and officials appreciate, access, and integrate IKS into their programmes in terms of *tacit and explicit knowledge*. However, in following the definitions of *tacit* and *explicit* knowledge above, the following is noted:

The traditional leaders, the traditional healers and the citizens involved in the local structures were not necessarily be cajoled to make input related to their indigenous knowledge. But because the indigenous knowledge forms one and probably the main part of their sub-conscience the traditional leaders and traditional healers may spontaneously find themselves providing their input mainly influenced by IKS. In this light IKS makes contributions in the issues related to HIV/AIDS at the *tacit* level.

Such spontaneous sharing of IKS may also take place as the local municipality leaders and officials interact with the communities at the informal level.

Thus it can be concluded that my survey has shown that *tacit knowledge* is shared through the local structures and through the informal interactions between the local municipality leaders and officials and their communities.

The definitions above are a reminder that in Chapter 5 it was noted that "At the *Explicit* level initiatives are deliberately undertaken by those in control of processes to ensure that IKS takes precedence and/or drives processes" (cf chapter five). Here, it can be argued that the fact that local municipality leaders and officials take a specific interest to recognise the roles that traditional leaders and traditional healers can play in their initiatives is an *explicit* indication of appreciation of IKS. This entails that the survey has noted that *explicit* IKS is observed by the local municipality leaders and officials through their recognition of the roles traditional leaders and traditional healers play in society in relation to addressing HIV/AIDS.

The appreciation of IKS by the local municipality leaders and officials at the *explicit* level is further demonstrated by the finding that the leaders and officials have also appropriated some aspects of IKS into their programmes.

The dichotomy between *tacit* and *explicit* IKS as demonstrated from our survey is summarised in Table 18 below:

Table 88: Reference to Tacit and Explicit Knowledge from the survey

Medium of IKS Extraction and Use	Type of IKS
Local Community Structures	*Tacit Knowledge*
Roles played by traditional leaders and traditional healers	*Explicit Knowledge*
Integration to local programmes by local municipality leaders and officials	*Explicit Knowledge*
Informal interactions between the local municipality leaders and their communities	*Tacit Knowledge*

Source: Thesis Survey Findings

7.13. CONCLUSION

In this chapter the findings from the survey and data drawn from literature review have largely confirmed that IKS is one of the most critical social aspects enjoying significant incorporation into daily activities by the local communities and their traditional leaders and traditional healers, in their efforts to address HIV/AIDS. From the literature study it has been noted that a majority of South Africans have the inclination to follow traditional healing approaches in addition to the modern ones. Findings from the survey have confirmed this by indicating that in the studied local municipalities, a significant number of ordinary citizens showed that when they get sick, or when they render support to the sick, they use traditional remedies in addition to the modern remedies.

At the beginning of this chapter, one of the questions was *whether IKS matters to the general citizenry, which form the main*[71] *beneficiary of local government services in the country*. In light of the understanding that the black bantu- speaking population is the most dominant ethnic group in South Africa the field study focused on collecting data on this group. This was guided by the fact that the size of the population for this ethnic group in South Africa is so large that it would not make sense in any way to ignore it in policies and decision-making processes. Thus it is argued that this group is the most appropriate one to use in my quest to find out whether local municipality leaders and officials appreciate indigenous knowledge in their decision making and development processes.

The findings that this group indeed appreciates indigenous knowledge in healing processes, leads to the conclusion that IKS matters to them. Thus Yes, IKS *matters to the general citizenry, which form the main beneficiary of local government services in the country*.

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[71]. Here the word "main" refers to the group which has the largest population in the country.

In addition to the question above, this chapter also sought to answer the question: *Considering that there are up to as much as 79% of IDPs which this study found to not be taking any interest in embracing IKS, does the pattern of general behavior of local municipality leaders and officials also reflect lack of appreciation of IKS*? Through the survey I attempted to answer this question by collection data from my key informants, the local municipality leaders and officials. It was found that the leaders and officials significantly make effort to work with traditional leaders, traditional healers and the general community members through structures designed to implement various policies. I have found that through these structures there is a *tacit* appreciation and attainment of IKS by the leaders and the officials.

It was also established that *tacit* incorporation and acquisition of IKS by the leaders and the officials is observed through informal interactions between the local municipality leaders and officials and the traditional leaders and traditional healers and the general communities. The latter assertion is deduced from the finding that most of the local municipality leaders and officials have strong backgrounds of belonging to the communities in which they lead or work with.

At the level of *explicit* inclusion of IKS, findings from the survey have shown that there is significant recognition of the roles and responsibilities that traditional leaders and healers play in communities by the local municipality leaders and officials. In this nerve, the findings have shown that the local municipality leaders and officials are able to identify these roles and responsibilities and incorporate them into their programmes and activities accordingly.

The local municipality leaders and officials do also show *explicit* appreciation of IKS by integrating various traditional practices into their programmes. Findings from the survey have shown that traditional practices such as *circumcision* and *virginity testing* are incorporated into HIV/AIDS programmes by the local municipality leaders and officials.

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Deducing from these findings I am compelled to conclude that the findings from the survey have challenged our findings from the analysis of the IDPs that 79% of the local municipalities do not appreciate IKS. In essence the survey reveals that while policy documents do not reflect significant inclusion of IKS by the local municipality leaders and officials, the behavior of these leaders and officials on the ground proves a conflicting observation - that incorporation of IKS is actually an integral part of the decision-making and policy implementation at the local level.

In the next chapter focus shifts to making the final arguments regarding this dichotomous observation that: *while policy documents do not reflect significant inclusion of IKS by the local municipality leaders and officials, the behavior of these leaders and officials on the ground proves a conflicting observation - that incorporation of IKS is actually an integral part of the decision making and policy implementation at the local level.* I have endeavoured to reflect on this gap by attempting to answer the question: *What are the factors which inhibit decision makers at the local municipality level to integrate IKS to their documented policies related to HIV/AIDS?*

CHAPTER 8

FACTORS INHIBITING LOCAL MUNICIPALITY LEADERS AND OFFICIALS TO INTEGRATE IKS TO THEIR DOCUMENTED POLICIES

8.1.   INTRODUCTION

The objective of the present chapter is to discuss factors that inhibit local municipality leaders and officials from integrating IKS to documented policies. Earlier, an assumption was given that local municipality leaders do not include IKS in their policies because of being influenced by forces beyond their own communities. These forces included decision makers at the national and provincial levels, who, themselves are also influenced by international and other intellectual forces.

Pursuing this assumption at the legislative, policy and strategic planning levels, evidence in all the chapters above, showed that the assumption is not true in an absolute sense. Legislative documents have obviously shown no mention of IKS as an area of critical importance in policy development and implementation. Policy documents such as the IDPs have shown that there is some level of IKS integration in strategic plans of local municipalities through areas such as inclusion of traditional leaders in decision-making and implementation processes.

At this level I also noted some level of *tacit* inclusion of IKS, which by proxy, could be deduced from the level of contribution made by grassroots communities in decisions making and implementation processes. The level of contribution of grassroots communities in the decision-making processes has not been deduced from numerical evidence in terms of the number of people who participate, but by specific analysis of approaches of participation.

Specifically, in Chapter 5 I found that participation approaches such as, *participation for material incentives*, *functional participation*, *participation by consultation*, *passive participation* and *manipulative participation* have limited contribution to decision-making and implementation, while participation forms such as *self-mobilisation* and *interactive participation* imply comprehensive contribution in decision-making and implementation by grassroots communities.

In policy documents such as IDPs the level of inclusion of IKS at the *tacit* level will depend on the kind of participation that is employed in the policy development process. Notably, in these documents, *consultation* has been found to be the main approach used to facilitate participation of grassroots communities. Thus, in essence, the conclusion that there is limited inclusion of *tacit* IKS in these decision-making and implementation processes becomes inescapable.

However, as noted in the previous chapter the picture changed with concrete evidence on the ground. We are reminded at this stage that evidence, from the survey conducted as part of our study, has shown that local municipality leaders and officials have significant interactive relationship with their communities which enhances self-mobilisation and bottom up contribution in some of the affairs of the local municipalities. For example from the survey presented in chapter seven above, a respondent in the Bushbuckridge local municipality in Mpumalanga Province comments that her contribution in local decision making processes involved participation in about 10 local [public participation] meetings organized by local NGOs and wards counselors. She further commented:

> I always inform leaders in these meetings that in order to deal with AIDS effectively, we cannot only depend on the support from the government. We must use our own local resources and go to *Sangomas* (KI – 12).

From the same survey 70% of the respondents selected randomly from the local communities indicated that they had been attending five or more local public participation meetings.

In this context evidence about interaction between local municipalities and their communities leaves me with the conclusion that the limited inclusion of IKS in the legislative and policy documents is entirely not reflective of the reality on the ground. In other words, while the legislative and policy documents show limited inclusion of IKS, local politicians and officials have found themselves encountering situations which force them to utilise IKS in their policy implementation processes.

There are many questions that can form the basis of diversity and difference of opinions as to why there is a gap between the inclusion of IKS in the formal policy documents and the way the local municipality leaders and officials include the IKS, through interactively involving local communities, in their daily life and tasks. For example, one could ask: Is such a difference based on a lack of clarity about the inclusion of IKS? This question is based on that IKS may be considered as implicit in the other social parameters measurable and relevant at higher level of policy definitions and guidance. Is it because IKS is not considered as important by decision makers at that level? Is it because policy makers at the local level do not give enough information to those drafting legislative documents?

It is important to pursue the question of why the leaders and officials at the local municipality level do not demonstrate such an influence as to get IKS comprehensively and explicitly included in legislative documents, while their own behaviours at the local level demonstrate strong inclusion of IKS in their policies implementation, needs to be pursued. This interrogation is critical in light of the fact that even if the leaders at the national level were willing to include IKS in legislative documents in a comprehensive manner, the onus would be in the hands of the local municipality leaders and officials themselves to ensure that such inclusion is authentic by providing appropriate information during the development of the legislative documents.

The answer to the question why the leaders and officials at the local municipality level do not demonstrate such influence as to get IKS comprehensively and explicitly included in legislative documents, while their own behaviors at the local level demonstrate strong affinity to IKS will be pursued by revisiting my final question in the last chapter: *What are the factors which inhibit decision makers at the local municipality level to integrate IKS to their documented policies related to HIV/AIDS?*

In answering this question a combination of conclusions has been reached by deducing evidence from the survey shared in Chapter 7 and claims and findings that other scholars have made in the literature on policy analysis. We are also guided by the Weberian Theory of rational legal bureaucracy which claims that division of labour is defined by specified "spheres of competence" (Weber (in Thompson and Tunstall 1971: 71) and the state of affairs in which "the organisation of offices follows the principles of hierarchy: that is, each lower office is under the control and supervision of a higher one" and "the member of the administrative staff should be completely separated from ownership of the means of production and administration" (Weber 1922).

This is made with the appreciation that policy development is a technical process since it requires translation of ordinary life observation into constant variables that can guide development in response to different contexts of time and place. In other words, it is a technical process which, within the context of division of labour, seeks to condense daily and ordinary life into official normative life for public consumption. There is no doubt that such a process requires critical thinking, hence a process of technical nature. Community members themselves have noticed that they are sometimes sidelined from taking part in developing documented policies. In the survey whose findings were shared in Chapter 7 an informant who was asked to comment on what he thought communities could do on their own to support policy implementation in relation to the use of IKS in HIV/AIDS issues, remarked:

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> The community must provide the leaders with information about their health [so that] they [leaders] can make proper decisions and [conduct] awareness campaigns, so that the community should know what to do when they are sick. But you will find that most of these policy documents are written by consultants who have no clue of what is happening in the communities (KI – 17).

Another respondent commented:

> If leaders listen to what communities tell them, they can make policies that assist them [people] to use indigenous medicine that they used in the past to heal diseases and wounds (KI – 14).

Noting the reality of the dominance of technical interventions in policy development and analysis I have examined the issue of the professionalisation of policy development and analysis. This is presented in detail in section 8.2 below. It is notable that the professionalisation of policy development and analysis in itself may not be a strange phenomenon to the reader. Thus my interest in this discussion is about how such professionalisation becomes critical in limiting the inclusion of IKS in formal policy documents such as IDPs. The reader is advised to pay attention to this connection, and not to the issue of professionalisation as a stand-alone phenomenon.

Knowing that political leaders have a strong interest in policy development and its consequential results, interest was taken in interrogating the role power dynamics between the local municipality leaders and their superiors play in influencing patterns of decision-making at the local municipality level. I have therefore answered the question above against the literature about the technical and power dynamics involved in policy development. Here as noted above, the Weberian theory of rational legal bureaucracy has aided this study in understanding the

theoretical underpinnings behind the power dynamics between the local municipality leaders and their superiors.

8.2. POLICY DEVELOPMENT AS A PROFESSIONAL OR TECHNICAL PROCESS

Presented from different angles literature demonstrates that policy development is a technical process. This observation is also notable in grassroots statements such as the one made by KI-17 above. The informant shares his observation stating, "But you will find that most of these policy documents are written by consultants who have no clue of what is happening in our communities" (KI–17).

Professionalisation[72] of policy development has largely been influenced by social and economic changes such as urbanisation, Industrial Revolution and other forms of social civilisation which have made human society so complex that rules to govern human life and development have become indispensable. Wissik quotes Dunn (1981: 11-26) as asserting that:

> The evolution of policy analysis is closely related to various changes in society. One of the major changes was the growth of urban settlements in Mesopotamia and later in India, China and Greece. In the Medieval period (600 – 1500AD) urban civilization became more complex, with an attendant differentiation and specialization of policy analysis roles, particularly in the areas of finance, war and law, followed by a major transformation in the production of policy-relevant knowledge during the Industrial Revolution.
>
> The Industrial Revolution (1750 – 1850 AD), a highly significant historical event brought about a variety of social, political and economic changes (Wissik 2000: 58).

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[72]. Term coined by the author to mean changing ordinary social phenomena into extra-ordinary by application scientific manipulations to it.

The influence of historical and social developments in the professionalisation of policy development and analysis has also been explained by some scholars as defined by "paradigmatic" developments of society. Wissik (2000: 59-64) notes that these developments have gone through a number of phases namely:

First Phase: This phase had the "elimination of strife and confusion in human society in favour of an orderly administration of things" as its primary objective. Thus instead of managing development and social trends through speculative means such as those influenced by "theological dogmatism", authorities started to engage in exercises that would define the direction and predictability of their administration objectives.

Second Phase: At this stage of social and economic evolution, questioning of prevailing models and beliefs embedded in policy development and analysis became an element in the advancement of policy development and analysis profession. In other words, this was a stage of interrogation about whether objectives and models used in development and analysing policy were relevant. Seen from the lenses of policy development and analysis as a technocratic enterprise, emerging academics claimed that "conventional policy analysis with its technocratic orientation, was blind to political reality" (Wissik 2000: 61).

Third Phase: This phase sought to bring about a balanced approach. Scholars observed that defining direction and predictability could be complemented by interrogation and provision of empirical information that justify the direction under pursuit. This proposition asserted that research and/or collection and interpretation of informative data had to precede policy development and analysis.

Fourth Phase: Wissik notes that this phase is also known as "pragmatic phase … also known as a quick and simple methodology for policy analysis". It proposes a number of methodological steps including: identification of key problem and policy action, use common sense, logical and experience in understanding social trends,

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improvising means to work around uncertainties, use statistics to build up a case, inform the client effectively enough to have them give meaningful feedback or input, check facts, advocating for identified issues effectively, allow client analysis, but not decision, think about other factors beyond immediate issue and accept some level of imperfection.

While the history and paradigmatic developments above tell more about the evolution of policy development and analysis, they also confirm that since social and political leaders started observing the importance of keeping social order intact, policy development and analysis has more and more been treated as a professional enterprise and there has never been a point of turning back. The developments also mean that policy development and analysis has become a formal field requiring both intellectual training and qualification.

Accompanying these developments has been the creation of models and theories of how to engage in policy development in a creative, effective and adaptive manner so much so that professionalism in the field of policy development and analysis is not only about developing policies as such, but also about developing policies that are demand driven. Thus, experts emerge for different forms of policies for different social groups.

In addition, the professionalisation of policy development and analysis is confirmed by the fact that standards have been created to prescribe the stages that policy development and analysis processes should follow. According to De Coning and Cloete (2000: 31), this is evident in a policy development model, proposed by Dye (1987:27), called "rational model" (see diagram below). Adding to these standards other scholars have seen policy development as a linear process that goes through stages namely: "initiation, design, analysis, formulation, dialogue and advocacy, implementation and evaluation" (Wissik 2000:3).

Figure 13: Rational Model for policy development and analysis

Input **All resources needed for pure-rationality process**	Establishment of complete set of operational goals with weights	Preparation of complete set of predictions of benefits and costs for each alternative
	Preparation of complete set of alternative policies	Calculation of net expectation for each alternative
All data needed for pure rationality process	Preparation of complete set of alternative policies	Comparison of net expectations and identification of alternative(s) with highest net expectation
		Output **Pure-rationality policy (policies)**

Source: Dye (1987: 27) in Cloete and Wissik (2000: 31)

Drawing from the reflections above it can be argued that the changes of various social and political systems in the historical trajectories have resulted in the evolution of policy development and analysis into a technical field. In the present day, policy development is therefore a scientific field controlled by specially trained or experienced experts, which have very well been observed by grassroots communities as consultants, who have taken over the space they (grassroots communities) would have filled to make contributions, in the policy, which are in line with the IKS inclinations (cf KI – 17 statement made above). Like every scientific field, policy development and analysis has become a field confined to specific modern science language and methodologies owned by a specially trained minority. However, as we shall see later in this chapter, when policy making and analysis is used to consolidate the power of those in leadership, scientific knowledge may either be sidelined or skewed to suit the agenda of those who are in power.

Modern science follows the dictates of institutionalised education. It has been argued by the sociologists who have attempted to analyse the roots of the principles of institutionalised education that such principles are determined by dominant individuals and institutions of society. In his article entitled "Some Comparative Principles of Education Stratification", Randall Collins argues that even though "functionalist or social-order perspectives" may

> explain education by citing its contribution to the integration or productivity of society… Alternatively, education may be explained as a weapon in the struggles for domination that make up the phenomenon of stratification, whether considered from the view point of Marxist theory, Weberian Theory, or some mixture of the two (www.foundations301.files.wordpress.com).

Further reflections consistent with this theory assert that education is a social phenomenon with tendencies to push groups and individuals into "common arena" (www.foundations301.files.wordpress.com) and inculcates social belonging and membership into certain social groups. Thus the professionalisation of policy development and analysis has pushed those who have been specially trained for policy development and analysis into a common arena thereby excluding others from their systems. The use of experts in this context has become a norm so much so that even local civil society organisations which have taken the mandate of representing the interests of the local people have sometimes put aside the local indigenous knowledge and use experts in their campaigns. For example, in a group discussion conducted in Bushbuckridge as part of the survey presented in Chapter 7, informants commented,

> We always follow environmental calendar and celebrate those days [Days of Special HIV/AIDS Campaigns]. Usually we invite experts … to come and give a presentation" (Focus Group 2).

The logic is that, *professionalisation* of certain social phenomena through education and experience leads to exclusion of individuals and groups from others. The *Professionalisation* of policy development and analysis has therefore led to the isolation of those specially trained from the general populace. Hence, policy development and analysis have become an enterprise owned by few minorities called policy analysts or policy development technocrats who have isolated themselves from the general populace.

This observation resonates well with what Max Weber observes in his analysis of bureaucratic systems. In his reflection about *rational legal bureaucracy* Weber informs us that division of labour is defined by specified "spheres of competence" (Weber (in Thompson and Tunstall 1971: 71).

Thus in case of technocrats taking the responsibility of policy development and analysis, constitutes their sphere of competence within the context of the division of labour in the structures responsible for deciding and driving the policies of the sector in question – in this case, HIV/AIDS sector.

Policy analysts and technocrats use principles of institutionalised education whose main objective is to promote *professionalisation,* which at the level of bureaucratic systems turns into competence for the division of labour, rather than harmonisation of society. In the process of *professionalisation*, indigenous communities find themselves excluded, hence their knowledge is also excluded resulting in the exclusion of IKS in policy documents developed by policy technocrats or analysts.

With these observations the discussion can be summed up by saying that one of the reasons IKS is not prominent in policy documents such as IDPs, on the issues about HIV/AIDS, in spite of its prominence among the local municipality leaders and officials and their communities, is that policy development and analysis is an enterprise which is controlled by those who have been trained through institutionalised education as policy development technocrats and analysts. Because of the influence of principles of institutionalised education such technocrats and analysts have not developed skills or interest to appreciate IKS and include it in policy documents such as IDPs.

This is, however, not the only reason why the local municipality leaders and officials are not able to influence the inclusion of IKS in policy documents such as IDPs. In the discussions below, I have probed further by analysing the dynamics related to other aspects, which fall into play in policy development and analysis processes.

8.3.   THE INFLUENCE OF DEVELOPMENT THEORIES

Both scholars and international institutions, such as the World Bank, agree that the behavior of decision makers in developing policies is, to some degree, influenced by the changes in development theories. In the 1950s and 1960s the economic growth at a global level and in the West led to Third World policies leaning towards GDP.

> It was assumed that the scale and pattern of economic growth experienced by the West could be reproduced in the Third World by means of foreign aid and capital investment (Goulet 1983: 611; Todaro 1994:14 & 15; World Bank 2000a:15). The result was that development theory in the 1950s and 1960s focused chiefly on the stimulation of economic growth. It was assumed that economic growth and industrialisation would eradicate the poverty problem and these two processes were consequently regarded as the primary development criteria. The proponents of the modernization school assumed that the benefits of economic growth would trickle down to the poor (Unisa Development Policy and Strategies Study Guide for DVA3703).

The macro-economic development theory continued to influence policy decisions up to the 1970s. It was then realised that the assumption that economic growth at the GDP level would lead to the economic growth at the local level, was being challenged by increasing inequalities, poverty, more imports than exports and "serious environmental degradation" (The South Centre 1993: 6, in Unisa Development Policy and Strategies Study Guide for DVA3703) encountered by Third World countries. At this point heavy reliance on science and technology coupled with development aid from the West led to unsustainability of the developments that had been taking place in the Third World.

Alluding to the fact that cultural trends of the West were inconsistent with the cultural systems and trends of the Third World, this state of affairs is put in a more succinct way as the Unisa Development Policy and Strategies Study Guide for DVA3703 mimics remarks from The South Centre that,

> …the cultural dimension of development did not receive sufficient attention and the imitation of Western models failed to derive advantage from the South's reserves of traditional knowledge, culture, creativity and entrepreneurial spirit (The South Centre 1993: 6, in Unisa Development Policy and Strategies Study Guide for DVA3703).

Back in the 1960s it had already been realised by some developing states that "non-economic aspects (political, social and environmental aspects) (Conyers & Hills 1984: 33, in Unisa Development Policy and Strategies Study Guide for DVA3703) would have significance in addressing some development obstacles. According to this thinking, a new development dubbed "basic needs approach" (Todaro 1977: 156; 1990:620 in Unisa Development Policy and Strategies Study Guide for DVA3703) emerged in the 1970s. Aspirations of this development theory tended to lean towards "raising material standards of living of the poor masses, promoting human dignity and increasing people' freedom of choice". At this point,

> Economic growth remains an indispensable prerequisite for the development of any country, but economic growth per se is not the solution. … the declaration focused on far more than mere material needs and included the right to freedom of opinion, participation, self-determination, voting and self-actualisation (Korten & Klauss 1984: ix and 3, in Unisa Development Policy and Strategies Study Guide for DVA3703).

A new dimension that followed these developments in the development theory was one of the "people-centred" approach. People-centred approach sought to put more emphasis on participation in development processes by the people concerned.

This aspired to challenge the belief that decisions are to be made by those in power and be imposed on their subjects. In practical terms this meant that decision-making had to be decentralised – detached from "centralisation, manipulation and top-down development [that] lead to dependency, inequality, isolation and disempowerment" (Jennings 2000:2, in Unisa Development Policy and Strategies Study Guide for DVA3703).

In the contemporary social and economic trajectories, aspirations of inclusiveness have led to the theoretical advancements emphasising on the multidimensional nature of development. Focus has been on what theorists, practitioners and policy makers have come to know as integrated development. This trend of thought looks at society as made of a composite of social and economic facets. It is held in this approach that development efforts can only be effective if rational policies and programmes that logically integrate these facets together are developed. Such integration needs to take the angles of both enhancement and appropriation. This means enhancements by empowering them to contribute to the common development agenda and appropriation by harnessing and exploiting their potential in enhancing development.

In essence such *modus operandi* requires that principles of participatory or people centred development should not be ignored. In other words, skills, technologies, principles and values related to various social aspects are owned by certain social groups, and it is only by bringing such groups on board that the objectives of integrated development can be achieved. This trend has also entailed the tendency for decentralisation of decision-making processes. It is assumed that coordination of decision-making at macro-level, can leave limited, if not no space, for the participation of other groups whose contribution would otherwise be beneficial for the common good, more especially in the current society, dominated by the impetus to globalise knowledge, skills and resources emerging from the grassroots.

Integrated development, decentralisation and participatory development have all resulted in the creation of structures aimed at coordinating decision-making and development at the local level, hence the emergence and popularity of the local government structures in contemporary governance structures. The current South African governance structure which, from the top to the bottom, cascades through the national, the provincial, the district, and the local government is effectively contingent with contemporary development theory. As observed above, contemporary development theory is actualised by applying the principles and strategies of integration, decentralisation and participation.

The idea of participation and its application by the local government structures in South Africa has been reflected upon a great deal in this thesis. Thus, at this point, I need not go into detail questioning the depth and modalities of participation being applied in decision- making and policy development in the South African local government. All that can be said is that as long as the contemporary development theory includes the principles of participation, integration and decentralisation it has opened the window for the local municipality leaders and officials to include the grassroots people in their decision-making and development processes.

Drawing from the issues about the professionalisation of policy development and analysis shared in Section 8.2. it can be argued that, the professionalisation of policy development and analysis has effectively negated the inclination of the contemporary theory. Trends of leaving policy development and analysis in the hands of technocrats and consultants, as observed by some of the respondents quoted above from the survey, have effectively left grassroots communities with limited participation in documented policies, thereby creating limited or no space for one of the most important principles of contemporary development theory namely, participation.

This state of affairs is also observable in the reflection about IDPs, in Chapter 5, where it was noted that *consultation* is used as the main approach to implementing public participation in the processes of IDP development. It was noted that consultation, does not create enough room for inclusion of IKS both at the *tacit* and *explicit* level.

However, the only positive aspect that has been borrowed from the contemporary development theory is that local municipalities have been created and they are, at least at the legislative level, known to be responsible for local policy development and implementation. For example, I have already, in the previous chapters, seen that in terms of policy documents the local municipalities have developed IDP documents. Results from the survey indicated that in addition to the IDP documents, local municipality leaders and officials significantly interact with local communities through local structures. This observation confirms that the contemporary development theory is well observed by the local municipality leaders and officials. The question then is: Should we blame the contemporary development theory for the limited inclusion of IKS in documented local government policies such as IDPs? We should not.

By opening the door for participation, integration and decentralisation contemporary development has opened the door for everyone who may be affected and concerned with decisions and their implementation. This participation, integration and decentralisation can be extended to the IKS. But, despite this reality things have gone wrong at the point of how the leaders, who drive the development of policies, apply the principle of *public participation* itself. In this light, I noted in Chapter 5 that "participation of communities in the development of IDPs is approached at the level of *consultations* and objectives related to enhancing participation on communities in IDPs are leaning towards top-down principles and approaches" (cf: Chapter 5). Thus contemporary development theory cannot be blamed for the limited inclusion of IKS in documented policies and their implementation processes.

What can be blamed is the fact that instead of using effective ways, such as *self-mobilizsation* and *interactive* approaches of public participation, local municipality leaders and officials tend to use *consultation*.

It can, therefore, be concluded that while development theories drive the behavior of policy makers, in our contemporary times, they cannot be taken as one of the *factors inhibiting local municipality leaders and officials to integrate IKS to their documented policies.* In this respect I only remain with *professionalisation* as observed in the previous section. In the spirit of trying to probe further my next section has looked at whether dynamics in agenda setting, decision making and top-down power dynamics could also be taken as one of the factors inhibiting local municipality leaders to integrate IKS to their documented policies.

8.4.   THE POLITICS OF AGENDA-SETTING, DECISION MAKING AND TOP-DOWN CONTROL

For any issue to be identified for a policy agenda a decision has to be made on whether the issue is significant enough to form a policy agenda or not. This stage is considered as crucial because it is a point where issues that might be considered as critical by some citizens can be eliminated from the policy making processes and eventually from the relevant programmes. Quoted in the Unisa Development Policy and Strategies Study Guide for DVA3703, Howlett and Ramesh (2003: 120) remark,

> …what happens at this stage has a definite impact on the entire policy
> formulation process and its subsequent results. The manner and form
> in which problems are acknowledged and identified determine how they
> will be addressed by policy makers.

The question then is: What is the criterion for identifying issues for policy agenda? For an issue to be identified for policy agenda, it has to be in line with the specific development goals and objectives of the government or its leaders.

Leaders need to be clear about what, where and how they will utilise the identified issues for development purposes. Since policies are instruments to solve problems related to the development objectives, an issue becomes a policy agenda only if it is seen, in the eyes of leaders, as having the potential to solve specific problems in the specific development agenda. Howlett and Ramesh (in Unisa Development Policy and Strategies Study Guide for DVA3703) state that:

> After a problem has been recognized and the need to take action has been acknowledged, policy makers need to decide on what action they are going to take. Formulating a course of action is the second stage in the policy cycle.

Once a policy agenda issue has been identified it enters into a formal stage where concerned officials make an announcement about the fact that the issue will enter policy formation process. This is called the decision-making stage. According to Howlett and Ramesh :

> The decision making phase is a political process that creates winners and losers even when it is merely decided to retain the status quo and not to take any action. It is important to note that the decision making phase is influenced by the political system involved and the constraints under which policy actors or decision makers operate (Howlett & Ramesh, Unisa Development Policy and Strategies Study Guide for DVA3703 2003: 50).

Much can be said about agenda setting and decision-making phases of policy development. The question relevant to this study is: Why do some issues or social aspects enjoy stronger recognition for policy agenda than others? As noted above this depends on whether an issues is in line with development goals and objectives which are identified by leaders.

This brings me further to the question: Why IKS is not included in the documented policies?

Is it because it is not in line with developmental objectives of the local governments? Thus much as the institutional structure of policy agenda setting as presented above and discussed in the paragraphs below, may be of common knowledge to the reader, my interest here is to understand how such agenda setting and the power structures associated to it (e.g. relationships between the local, provincial and national tiers of the government) affect the inclusion of IKS in decision making processes such as those related to HIV/AIDS.

Drawing from the survey, it may not make sense to say that IKS does not have significance for development goals and objectives of local governments. I have noted that at both *explicit* and *tacit* level IKS is used by the local government leaders and officials in their quest to pursue developmental goals related to addressing HIV/AIDS. This provides confidence that IKS is not *all that bad* that it cannot receive any appreciation to enter into the policy agenda setting and decision-making processes.

Thus, in as far as IKS is appreciated and utilised by the local municipality leaders and officials in development processes related to HIV/AIDS and other diseases, it can be said that there is no evidence that local leaders and officials would have any reason to underestimate the importance of IKS to be included in documented policies. It is logical to say that IKS is so much in the favour of the local municipality leaders and officials that it would easily form a strong candidate for policy agenda and decision making for the development goals and objectives of local municipalities.

However, going back to imperatives of decision making and agenda, it is important to ask the question: Do the local municipality leaders and officials decide what goes into their documented policies or is there some other power beyond them that makes decisions?

Opinions from some of the participants in the survey presented in Chapter 7 indicated that the choice of the leaders on what to include in the policy agenda depends on what they consider popular issues in the context they are dealing with. In this case, issues that are not seen as of popular nature may be sidelined from the policy agenda. For example, in a discussion group in KwaZulu-Natal participants commented on the way HIV/AIDS issues tend to be sidelined at the expense of putting too much attention on issues related to crime by political leaders:

> Councilors must take part in community forums and engage with issues about HIV/AIDS issues. We do not have community forums which focus specifically on HIV/AIDS issues. We only have community forums that talk about crime. All they talk about every day is about crime (Focus Group 2).

Schaeffer and Lamm state that,
> The ability to define social reality clearly reflects a group's power within society. Indeed, one of the most crucial aspects of the relationship between dominant and subordinate groups is the ability of the dominant or majority group to define society's values (Schaefer & Lamm 1992: 132).

On cultural integration Shaeffer and Lamm further claim that:
> Cultural integration is not always the result of agreement by all members of a culture. Often this process is enforced from the top; less powerful members of society have little choice but to accept the dictates and values of those in control. Conflict theorists emphasise that while cultural integration may exist in certain societies, the norms and values perpetuated are those favourable to the elites and the powerful (Schaefer & Lamm 1992: 82).

Noting these three arguments about power dynamics of defining policy agenda, social reality, and social integration brought me to a critical question of who exactly sets the agenda and decides what goes into documented policies of local municipalities. Recalling from my reflections in the previous chapters the point of participation of the local people in the development of documented policies such as IDP has been eliminated as a tool to ensure that local concerns and IKS are included in these documented policies. For example it was argued in Chapter 5 that local municipality leaders and officials tend to follow *consultation*, instead *of self-mobilization* and *interactive participation*; and it was noted in the same chapter that *consultation* is not an effective way of enhancing people's voice in the policy documents such as IDPs. These observations confirm the thesis of dominance of the elite. In other words, they confirm the observation that "less powerful members of society have little choice but to accept the dictates and values of those in control" (Schaefer & Lamm 1992: 82).

However, this argument concerns how local people – the beneficiaries of local municipalities – themselves are marginalised from the processes related to the development of the documented policies. A question may then be asked: What about the local municipality leaders and officials? If the local municipality leaders and officials integrate IKS in their general activities and recognise the importance of key role players in the *explicit* IKS, such as the traditional leaders and traditional healers, as noted in the survey in chapter seven above, surely, they should have every reason to integrate IKS in their policy agendas and decision-making processes related to documented policies such as IDPs.

The confusion about why the local municipality leaders and officials do not seem to make an effort to integrate IKS in the documented policies in spite of the fact that they are well integrated to IKS systems in their communities, raises the question of whether they are really the ones who set policy agenda and make decisions about what goes into the documented policies such as the IDPs.

In other words one needs to answer the questions: Who controls the development of documented policies such as IDPs?

The point of departure to answer this question should probably be the understanding of the background of the IDPs. It is a well-known fact that IDPs, though developed and implemented at the local level, are part of a national programme, whose aspirations are for the wellbeing of the whole country. Looking at things from the lenses of the principles of aggregation one would say that social and economic growth at the local municipality level is a contributing factor to the national social and economic growth. It is, therefore, a reality that those who control social and economic growth at the national level feel obliged to also control the social and economic growth processes at the local level with the interest of promoting the national social and economic growth agenda.

There is a common phenomenon in the political governance structures known as *political appointee.* In his account about the trend of political appointees in the United States of America's politics Ingrahan and and Ketti (1992: 49) state that "recent presidents have come to the office with distrust and hostility towards career bureaucracy and … this attitude has been reflected initially in their political appointees". Political appointees have stricter ethics than their elected counterparts. In essence the ethical restrictions relate to their obligations to serve the agendas of those who have appointed them to take the positions in question. The behaviour of the political appointees is also driven by the intentions to make their mark quickly and with the hope that should the leaders they serve remain in power, they may keep their positions or be promoted to higher positions. Such behaviour can also be driven by the simple commitment to make a mark that will destroy the *status quo* of the past leaders or render their leadership memorable for a long time. Ingrahan and Ketti (1992: 55) comment:

> Political appointees are in-and-outers. That is, they are recruited to serve a particular president and rarely stay longer than a president, usually much less.

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… This rapid turnover is often motivated by the desire of presidential appointees to make their mark quickly and move on, either to higher position in the government or back to the private sector to make more money. Much of the appointees' agendas are driven by the mandate to reelect a president or leave a good record to run on for the partisan heir-apparent.

During the survey presented in chapter seven above, a local counselor commented,

As human beings and people who are part of the local community, we have our own opinions and beliefs which we think are important to for our situation. But we cannot just do what we want because our comrades will start questioning our loyalty to structures that have appointed us into our positions. We are political appointees. We have to do what we are expected to do [by those who appoint us into power].

Therefore, it makes sense to say that where local municipality leaders and officials fall in the category of political appointees, there is limited opportunity for such leaders to exercise their power in line with the prevailing needs of the local people, unless addressing such needs will in turn serve to address the needs of those who have put them in power. A study on IDPs conducted by Corrine Cash and Larry Swatuk in Dwars River Valley in Stellenbosch, Western Cape Province, reports that

Respondents … described the role that political will plays in the IDP process. A politician may demand funding for an item that is politically popular in their ward, despite whether or not the desired project is necessary or urgent. It may get placed in the IDP simply because it appeals to voters. For instance, as one decision maker described, health clinics may be very popular in communities because they tend to win votes (www.academia.edu).

Relating this state of affairs to the potency of electoral systems, it is known that the South African electoral systems use *Proportional Representation.* In this system the electorate in a constituency vote for the political party and the winning political party chooses the MPs to represent them in the constituency. Thus elections are not primarily about winning of individuals as it would be with the case of *Constituency – based electoral system*. The current South African electoral system, denotes that local municipality leaders are essentially political appointees elected through the agency of their political parties. Their ethical restrictions are limited to the policy agendas of their political parties, which in the main is defined by that which will bring votes from the electorate.

In this context, matters receiving attention from the decision makers for policy agendas will depend on the popularity of such matters to appeal to the needs of the local populace so much as to influence their voting behaviour. This resonates with the statements made from the current survey group discussion participants shared above:

> Councilors must take part in community forums and engage with issues about HIV/AIDS issues. We do not have community forums which focus specifically on HIV/AIDS issues. We only have community forums that talk about crime. All they talk about every day is about crime (Focus Group 2).

In this context the question that may still need to be answered is about *the popularity to influence votes* of the IKS as a tool for addressing HIV/AIDS. Does the situation of freedom to use IKS really pose a threat in terms of popularity to influence votes?

In the past few decades local conflicts have sometimes been influenced by the establishment of local municipalities. This has sometimes been seen as a threat to the traditional leadership. Government leaders have had to change laws and regulations to ensure influence while limiting such conflicts at the same time.

A similar spate of conflicts has been in the form of traditional healers or traditional medicines versus western medicine. Traditional healers have seen the western practitioners as not only taking their space, but also taking their property rights. Adding to these have been activities fighting for the human rights of the indigenous peoples and communities all the world which are well documented by scholars. These forms of conflicts are well documented in various writing such as Mukuka (2010), ("*Reap what you have not sown": Indigenous Knowledge Systems & Intellectual Property Laws in South Africa (Mukuka 2010*); Boko (2002), (*Integrating Basarwa the under Botswana Remote Area Development Programme: Empowerment and Marginalisation);* Indigenous Peoples and Sustainable Development (*Indigenous Peoples and the World Summit on Sustainable Development*) and others*.*

The influence of these writers and the activism of the indigenous peoples have influenced policy changes at different levels. However, these changes have been isolated from sector to sector (e.g. traditional medicine or traditional leadership) or from community to community (e.g. in the example of Basarwa people and other indigenous communities in the Southern Africa). There is no an overall effort by different social groups to fight for IKS as a blanket policy issue. Thus the fight for IKS by the local communities themselves is limited. The reason is that while core issues of traditional IKS such as traditional leadership, traditional healing and traditional heritage remain issues of political contestation, the general policy environment allows the local people to practice their IKS.[73]

In the previous chapter it was noted that a majority of people in South Africa are using traditional remedies to address HIV/AIDS.

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[73]. As indicated earlier this study understands IKS as to mean "The knowledge of the citizens of a specific locality achieved through a mixture of experience, interaction with external forces and inclination to ancestral values and practices" (Mbingi 2006: 18).

While there is limited inclusion of IKS in the IDPs, the right to the freedom of self-expression, in South Africa at all levels, does not stop citizens from using IKS in whatever situations they deem appropriate unless such use is going to impinge upon the rights of other citizens. This socio-political environment in itself has made it possible for communities to use IKS in areas, including those, related to HIV/AIDS, freely. Such freedom is so prevalent that even the local municipality leaders and officials themselves form part of the population pool using IKS for various purposes.

We will recall that in chapter seven it was noted that,

> The survey indicated that out of 651 responses on the question of the kind of remedies local communities use[74] when they are sick 183 of the responses indicated the appreciation for traditional remedies, 408 indicated appreciation for western remedies, while 60 responses displayed appreciation for religious remedies. In terms of number of respondents the surveys shows that the 183 responses came from 89 respondents, the 408 western remedy responses came from 124 respondents while the 60 religious remedy responses came from 57 respondents (cf chapter seven).

From the 183 responses recorded above, it was noted that informants tended to mention consulting of *sangomas* and use of *traditional herbs* as key remedies of their choice in addressing HIV/AIDS.

While the figure of 183 is noted here as signifying the extent to which communities use traditional remedies, it also signifies that there is a great deal of freedom in the use of *explicit* IKS among citizens.

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[74]. This evidence is drawn from a random sampling questionnaire on the question: Please give me any 5 remedies you use when you are sick.

Thus in line with my discussion about agenda setting and decision-making, at this point it is noteworthy that the reason why IKS does not reach the popularity for influencing votes; and consequently influencing its inclusion in documented policies such as IDPs is threefold: First, as long as the ethical responsibility of the local municipality leaders and officials are restricted to the policy agendas of the parties they represent, their choices of what goes in the documented policies such as IDPs will only be that which has been identified by their political parties as crucial to influence the minds of the electorate for votes. Second, in some contexts the local communities are able to exercise their general freedom to use IKS whenever and wherever they find necessary. Thus they have little reason to engage in activist tendencies to demand the inclusion of IKS in the policy documents such as IDPs – after all no one demands that which s/he already have. Third, issues about the use of IKS, whether in the explicit or tacit form; and whether they are contested or not, are context based. They are of relativist nature.

Essentially, IKS is a fragmented phenomenon, because of its very nature of being a relative social facet. Retrospectively, activism for the inclusion of IKS in policy documents and implementation is fragmented. Inclusion of IKS in policy documents and implementation does not therefore feature as a common issue that can influence votes and policy agenda at a macro level. Thus, I conclude that despite that IKS, as one of the aspects of our common social interactions, forms an important subject for social analysis, IKS is not given significant attention in documented policies such as the IDPs because there is no common societal movement that influences decision makers at the national and provincial level who control what goes into these documents.

In general policy trends at the level of inclusion of explicit IKS have shown that even such inclusion is fragmented and on specific issues that seem to receive general national and/or international attention such as traditional leadership,

traditional healing and indigenous communities – and not around issues of IKS as a product of the interaction of human beings with their eco-system.[75]

Recalling that this line of thought comes from the understanding that "Conflict theorists emphasise that while cultural integration may exist in certain societies, the norms and values perpetuated are those favourable to the elites and the powerful", it is worthwhile, for the sake of giving this level of discussion some degree of comprehensiveness, to highlight other ways in which "the elite and the powerful perpetuate" (Schaefer & Lamm 1992: 82) the norms and values on their agenda.

Looking at the guidelines on the development and implementations of the IDPs one discovers a systemic process involved in devolving the principles and procedures of IDPs from the national level to the local municipality level. These principles and procedures essentially form systemic processes through which political appointees at the local municipality level *are told what to do* by the agents who put them into the positions they hold. They also form what my schematic analysis of different types of participation, observed in Chapter 5, would call *manipulative participation* (cf chapter five).

It is important to note that this *manipulative participation* is structured as follows: First the IDPs are developed by the local municipalities as a constitutional requirement. Second, this requirement is justified by the fact that the local municipality is mandated by the constitutional requirements to act as an agent for the government's responsibilities with regard to the democratic accountability, provision of services, promotion of social and economic development and involvement of local communities in decision making and development processes (IDP Guide: 2).

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[75]. The reader is reminded of the definition of IKS in this study: The knowledge of the citizens of a specific locality achieved through a mixture of experience, interaction with external forces and inclination to ancestral values and practices" (Mbingi 2006: 18)

Knowing that this is a constitutional/legal mandate begs the question of how the local municipalities would have undertaken their responsibilities if they were just left to exercise their power without constitutional requirements. However, they would have behaved in such a context remains anybody's guess; but the state of affairs as they manifest themselves now raise no doubt that the behavior of the local municipality leaders and officials is driven by these constitutional requirements, which in essence are *powers from the above*.

This is, therefore, another fact in terms of the relationship between the local municipalities leaders and officials and the national and provincial leaders and officials. It confirms that what goes into the IDP documents is a product of power dynamics, which essentially denote that the leaders and officials at the local municipality level do what the agents who have appointed them into power require them to do.

This state of affairs is what Max Weber (1922) sees as a *modus operandi* in the structural dynamics of what he calls *rational legal authority in the context of bureaucratic administrations*. For this kind of authority Weber states that some of the characteristics are:

- The organization of offices follows the principles of hierarchy: that is, each lower office is under the control and supervision of a higher one; and
- … it is a matter of principle that the member of the administrative staff should be completely separated from ownership of the means of production and administration.

In light of these observations I argue that even though the local municipality leaders and officials find themselves attached to the IKS aspects in their communities, they are forced to follow trends of bureaucratic dynamics within the institutions they politically represent. In other words, they are under the *control* of the agents who have appointed them in the positions they hold– a reasonable proof that the ownership of political decisions (*means of administration*) is separated

from them (the local municipality leaders and officials), and belongs to the agents they represent.

Another factor worth mentioning in the context of the prevailing *manipulative participation* is the fact that the process of developing and implementing the IDPs incorporates educational and capacity building processes which are essentially designed to influence local municipalities to develop and implement IDPs in a particular way. In the IDP guide it is stated that one of the responsibilities of the provincial government for the local municipality IDPs is to *coordinate trainin*g (IDP guide: 7). The provincial government is also entrusted with the provision of guidance on how to develop and implement the IDPs. Shaeffer and Lamm observe that "As a social institution, education performs a rather conservative function – transmitting the dominant culture". He further points out that "The education system of each society reflects its distinctive culture and the influence of other social institutions, including government and economy" (Shaeffer & Lamm 1992: 480 – 481).

It may be argued that Shaeffer and Lamm are referring more to the traditional education (primary, secondary and tertiary – e.g. universities and colleges) than other forms of educations provided by institutions such as NGOs. However, the point they make can also be applied to all kinds of education. Education projects, whether in the form of skills transfer training or academic training, are framed to suit direction of certain prescribed forms of social, economic or political aspirations.

In the context of the provincial governments providing training to the local municipalities, it would be argued that such trainings are framed to suit certain prescribed aspirations incorporated in the government's IDP project. This argument may also be applicable to the fact of provincial government's responsibility to provide guidance to the local municipalities on how to design and implement the IDPs.

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It is noteworthy that according to the IDP guidelines the national government is also responsible for providing the training framework. This in essence implies that the training provided by the provincial government to the local municipalities is within the framework provided by the national government. Thus IDP agenda setting and decision- making are controlled right from the national government.

In a nutshell, it can be concluded that local municipality leaders and officials are not able to include IKS in the documented policies because, as political appointees, they are required to follow the agendas set by the agents who put them in the positions they hold. The main agenda of these agents concerns winning of votes and consolidating their positions within the political parties which they represent. Thus issues that do not amount to the threat to lose votes or to lose one's position in the party may not be considered in the political agenda setting and therefore may not be considered in the documented policies such as IDPs. Communities themselves take limited interest in influencing the leaders to put IKS on the policy agenda since the principles of right to expression have paved way for them to put their IKS into practice freely, except in isolated cases where some quarters of IKS such as traditional leaders or healers would fight for recognition of their influence and not necessarily recognition of the IKS in general. In this context the national and provincial tiers of the government have sought to push the local municipality leaders and officials in *manipulative participation* in policy development at the IDP level by setting schematic processes designed as technical and educational support, so that IDPs are structured in such a manner that responds to the national agenda.

In the context of bureaucratic dynamics existing between the local municipalities on the one hand, and the provincial and national governments on the other hand, local municipalities have lost ownership of documented political decisions to the point that they are not able to include IKS aspects in the documented policies, though in the daily tasks they are able to use IKS.

8.4.1. The power of money: Financial support from the provincial government and national government

It was noted in Chapter 4 that The Municipal Finance Bill (2002) seeks to regulate the financial management of municipalities. In particular, it regulates municipality processes related to budgeting, financial accounting, auditing, reporting and borrowing. (Davids 2003: 38)

In addition to this Bill, the IDP Guidelines indicate that both the provincial and national governments provide financial support to the local municipalities for the development and implementation of the IDPs. And both the national and provincial spheres of the government have the responsibility of monitoring the implementation of the IDPs. It is also a legislative responsibility of the national and provincial spheres of the government to prescribe conditions on how the funds they provide to the local municipalities should be used. Thus, local municipalities are monitored by the national and provincial government on the basis of the conditions provided for the implementation the IDPs and for the use of funds provided. Experience has shown that in some cases findings from monitoring processes have resulted in interventions of the national governments to take control of managing the local municipalities found to be mismanaging the funds and development programmes.

It is argued that the combination of the monitoring of the local municipalities and the provision of the funds by the provincial and national spheres of government put the local government leaders and officials in so much pressure that their decisions can hardly come from the authentic aspirations of the grassroots communities, unless such aspirations have some greater bearing in winning votes. As noted above, social aspects related to IKS have not become so prominent that they can command winning of votes.

8.4.2. The politics of agenda-setting, decision making and top-down control

Looking at the dynamics related to agenda setting, decision-making and top-down control shared above it can clearly be claimed that there are four institutional dynamics that fall into play in terms of the relationships between the local municipalities on the one hand, and the national and provincial spheres of the government, on the other.

First, the fact that leaders at the local municipality level are politically appointed means that they are compelled to set the agendas and make decisions that are congruent with the expectations and political aspirations of those who have put them in power. Thus local municipality leaders and officials may not find any need to include IKS in the formal policy documents, such as IDPs, unless IKS was one of the social issues and aspects forming part of the consolidation of the power of the political agents which the local municipality leaders and officials represent.

Second, the custodians of the IKS themselves have not elevated their IKS related interests to the point that these issues can command winning of votes. Issues presented by custodians of IKS are diverse (e.g. traditional leadership, traditional medicine, rights of the indigenous communities and so on). This diversity has not been consolidated by the general populace to form one compound story of IKS which includes both traditional and other forms of IKS. Lack of this consolidation is influenced by the fact that there is a general freedom for communities to exercise their practices despite their limited inclusion in formal policy documents.

Third, the *educationalisation* of IDP development and implementation through training that the provincial and national spheres of the government provide has acted so much to manipulate the behavior of the local municipality leaders and officials to develop and implements IDPs in line with certain frameworks.

Though the frameworks may look at issues such as participation of the grassroots communities, they are basically not an agenda of the local people themselves – they are *top-down* – and not *bottom-up*.

Fourth, in the effort to promote good governance and compliance to the constitutional requirements the role of monitoring the development and implementation of the IDPs by the provincial and national spheres of the government on the local municipalities, also acts as a limiting factor for the local municipality leaders and officials to act according to the issues they instinctively relate to such as the IKS. Having been trained and given guidelines on how formal policies such as the IDPs should be designed and implemented, these leaders and officials become concerned with only the requirements provided in the guidelines and the training they receive with the anxiety that if they behave otherwise monitoring processes from the two upper spheres of the government may catch up with them. As long as IKS is not included in the monitoring processes as an indicator of success, the local municipality leaders and officials will not see any importance of including it in the formal policy documents.

Fifth, the fact that the local municipalities partly depend on the funds from the provincial and national spheres of government acts as a limiting factor on the autonomy of the local municipalities. Lack of autonomy at this level is aggravated by the conditions which the national and provincial leaders and officials attach to the funds they provide to the local municipalities. Thus, even though they have so much attachment to the IKS, the local municipality leaders and officials cannot transfer such attachment into policy documents such as IDPs due to the inclination and obligation to fulfill such conditions.

This invokes the critical insight that local municipality leaders and officials are controlled from the provincial and national government spheres. This has made them to lose their freedom to decide what to include in the formal policy documents such as IDPs.

Power from those who have appointed them to be in the positions they are has undermined their freewill to exercise their traditionalistic tendencies or their inclination to sympathise with the IKS practices and needs of their communities by including IKS aspects in the documented policies such as IDPs. Thus, despite the fact that they sympathise with the IKS of the local communities, the local municipality leaders and officials agenda setting and decision-making processes are influenced by their observation and instincts about what will be approved by the agents that have appointed them and the government leaders and officials at the provincial and national levels. This observation further leads to the argument that if the leaders at the provincial and national level have dissident[76] tendencies in responding to HIV/AIDS, as our assumption attempted to argue in chapter one, the local municipality leaders and officials would be prone to have dissident tendencies in their behavior towards developing documented policies such as IDPs.[77]

8.5. CONCLUSION

In this chapter I attempted to answer the question: *What are the factors which inhibit decision makers at the local municipality level to integrate IKS to their documented policies related to HIV/AIDS?*

I did so with the intention to move the discussion to root causes of the limited inclusion of IKS in the policy documents such as IDPs. In other words, my attempt was to move the discussion to the level of comparing reality and the assumptions presented at the beginning of this thesis.

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[76]. As noted in chapter one, the term dissident has particularly referred to individuals or leaders who are in denial of the existence of HIV/AIDS or some aspects related to it.

[77]. Note needs to be taken that we are not necessarily claiming that the local municipality leaders and officials are displaying any dissident tendencies. The study has specifically focused on the extent to which IKS is incorporated to policy development and implementation processes.

The assumption of the study was that local municipality leaders and officials do not include IKS in their decision-making processes because they are influenced by the powers and systems above their authority. This chapter examined three areas that concern policy making namely: Policy development and analysis as technical process; the influence of development theory; and the politics of agenda setting.

In looking at policy development and analysis as a technical process I have discovered that the professionalisation of policy development and analysis has left the grassroots communities and their leaders excluded in processes of formalising social and economic issues into policies. According to the comment made by a respondents during the survey reported in Chapter 7, "… you will find that most of these policy documents are written by consultants who have no clue of what is happening in the communities" (KI – 17). This is because the evolution of the *professionalisation* of policy development and analysis has leaned towards the belief that policy development and analysis is a field for only those trained in the appropriate technicalities. This has meant that grassroots communities and their leaders are not able to appropriate their own knowledge and experiences into policy development. Issues concerning the grassroots communities can find their way into documented policies only if those with technical competencies to develop and analyse policies find those issues necessary to form a policy agenda. This state of affairs has led to the marginalisation of IKS in the policy development processes, more especially in terms of dealing with HIV/AIDS issues.

My reflection on development theories has shown that society has moved through the trajectories of macro-economic theory which emphasises on the GDP as an indicator of social and economic growth; and the people-centred theories, whose main thrust was the participation of the concerned population groups in development processes. This trajectory further shows that the contemporary development theory puts emphasis on integrated development, decentralisation and the participation of various stakeholders, including the grassroots communities in decision-making and implementation.

Consideration was given to contemporary theory considering the fact that it is the theory of our time – the time when we are concerned about the integration of IKS in policy making and implementation. I reflected on the extent to which this theory could have the bearing on influencing the political behaviours of the local municipality leaders and officials in deciding what to include in the formal policy documents such as the IDPs. It was established that integration, decentralization and participation, as characteristics of the contemporary development theory, should serve more to influence the inclusion of IKS in policy development and implementation than to repel against such inclusion. Thus I have concluded that the contemporary development theory cannot be blamed for a lack of inclusion of IKS in the policy documents such as IDPs by the local municipality leaders and officials. But as noted in Chapter 5, the problem is about how the leaders who drive the development of policy documents such as IDPs facilitate public participation. Particularly, it was noted that "participation of communities in the development of IDPs is approached at the level of consultations and objectives related to enhancing participation on communities in IDPs are leaning towards top-down principles and approaches" (cf. Chapter 5).

Some dynamics related to agenda setting, decision-making, and top-down control between the local municipality leaders and officials, on the one hand, and the provincial and the national spheres of the government, on the other were examined. It was learnt that the status of the local municipality leaders as political appointees, the urge to win votes, the legal and educational manipulative mechanisms included in the policy development and implementation processes, and the authority to provide funds and create and provide conditions for and monitor the development and implementation of the policies such as IDPs play a great role of influencing the behavior of the local municipality leaders and officials on the issues they select to be included in their formal policy development and implementation processes. Thus the relationship between the local municipality leaders and officials on the one hand, the provincial and national leaders and officials on the other, is of manipulative nature.

The leaders and officials at the provincial and national levels manipulate the leaders and officials at the local municipality level. Such manipulation has manifested itself in the form of power to undermine the will of the local municipality leaders and officials to exercise their traditionalistic or empathetic tendencies towards including IKS in the formal documents such as IDPs.

Within the context of this discussion it has also been argued that issues of IKS do not find themselves in the formal policy development and implementation because the grassroots communities do not pose a common demand for such inclusion, hence the IKS, as a general issue does not qualify as issues that can influence winning of votes. The issues of IKS are so isolated that each IKS sector tends to fight for their rights separately, especially in the area of traditional IKS. In some IKS areas there is a general freedom for grassroots communities to exercise their IKS practices, even though those practices are not necessarily included in the formal policies such as the IDPs. Such freedom is also manifest in the use of IKS to address issues related to HIV/AIDS.

It is argued that there could be other aspects that influence the local municipality leaders and officials to eliminate the inclusion of IKS in formal documents such as IDPs. The path of my discussion in this thesis has been guided by my theoretical assumptions. In the main these assumptions have sought to claim that pressures of top-down tendencies of the provincial and the national spheres of the government determine the way local municipality leaders and officials behave in terms of policy development and implementation. In this respect, it is claimed that channeling my discussion through issues and aspects about technicalities of policy development, the development theory, and the power dynamics between the local municipality leaders and officials, on the one hand, and the provincial and national government leaders on the other, there is reasonable justification for the extent to which to which my assumption can be claimed to reflect reality.

Based on the above the following question remains pertinent: *What are the factors which inhibit decision makers at the local municipality level to integrate IKS to their documented policies related to HIV/AIDS?* Yes, this thesis has discovered that the factors which inhibit decision makers at the local municipality level to integrate IKS to their documented policies related to HIV/AIDS include *professionalisation* of policy development and analysis; the tendency by the local municipality leaders to select only issues identified for winning the votes; the educational manipulative mechanisms on the local municipality leaders and officials, attached to the support of the provincial and national spheres of government in the processes of developing and implementing policies; policy development and implementation control systems, such as monitoring mechanisms and conditions for providing funds to the local municipalities posed by the provincial and national spheres of the government; and the authority to provide funds to the local municipalities by the provincial and national spheres of the government.

Blending these factors has rendered the local municipality leaders and officials so powerless that despite the instinctive appreciation and inclusion of IKS in their private life, and in their local social interactions, they cannot find themselves making any headway to including IKS in their formal policy documents such as the IDPs, even on pertinent issues such as HIV/AIDS. Thus the blend of these factors *inhibits decision makers at the local municipality level to integrate IKS to their documented policies related to HIV/AIDS?*

Looking back at this situation in reference to my concepts of *explicit* and *tacit* IKS one recalls the observation in the last chapter that local municipality leaders and officials include their *explicit* and *tacit* knowledge only at an informal level (i.e. at the level of undocumented policy activities such as daily interactions with their communities). The documentation aspects of policy guidance have remained a terrain of major interest and influence for the national and provincial spheres of the government to protect and promote their agendas.

Thus the *relativistic* nature of IKS inclusion in policy formulation and implementation of the local municipality leaders and officials observed in my last chapter is only manifest at an informal level. Documented policies such as IDPs are outside the arena of *relativistic* inclusion of IKS in policy formulation and implementation since they are controlled by forces and interests outside the local context (i.e. the context relative to the concerned citizenry) – the provincial and national spheres of the government.

As noted in all the chapters above, this thesis has specifically manifested this state of affairs in reference to the way decisions makers incorporate their policy decisions and implementation in issues related to addressing HIV/AIDS. My next chapter will aspire to summarise my discourse in this thesis up to this point so as to remind the reader the key observations I have made which have led to this conclusion.

CHAPTER 9

CONCLUSION: A SUMMARY OF THE GENERAL FRAMEWORK, SCOPE, ARGUMENTS AND CONCLUSIONS PRESENTED IN THE STUDY

9.1.   INTRODUCTION

This chapter presents main points from this study and suggestions of issues that could still be pursued in future in order to expand from the findings of this study. The chapter reflects on what has been presented above. Reflections have been on the following: the background of the study; the hypothetical statements of the study; the main areas of investigation and findings; and the final conclusion on how the study has responded to its hypothesis.

9.2.   BACKGROUND OF THE STUDY

This study was guided by the theories of Durkheim's Structural Functionalism and the theory of Relativism. In terms of Durkheim's Structural Functionalism, I claim that the aspects of social structures, cultural norms and values, which are among its main components, are also among the main components of IKS. In line with Relativism, this study argues against Durkheim's claim that social structures, and cultural norms and values determine human choices and behave. It was claimed that social structures, cultural norms and values are relative aspects, because they change and differ from context to context even if their carriers are the same and human choice in different times and places plays a vital role in determining decisions.

Max Weber's Theory of rational legal bureaucracy has helped me to explain the essential roots of power dynamics between the local municipality leaders and officials and their superiors at the provincial and national level of governance in dealing with IKS.

There is limited inclusion of IKS in documented policy documents, due to the fact that local municipality leaders and officials are compelled to follow the instructions of their superiors at the provincial and national level.

This is in line with Weber's observation which asserts that Rational Legal Bureaucracy stifles participation of the lower ranking citizens in bureaucratic processes. In these processes, division of labour is defined by specified "spheres of competence". Outcomes and decisions are driven from rationalization of the bureaucratic systems so much so that "nature, society, and individual actions are increasingly mastered by an orientation to planning, technical procedure and rational action" (Morrison 2006: 279). Bureaucratic market systems are operated using methodical systems, controlled by higher ranking authorities. Through the spheres of different competences, calculation and reasoning are used to control all the outcomes and decisions. In this light Rational Legal Bureaucracy explains how the higher ranking bureaucratic leaders make decisions, basing on desired and calculated outcomes, on behalf of those at the bottom of the bureaucratic hierarchy. In this study, the higher ranking authorities are the provincial and national leaders, while the lower ranking authorities are the local municipality leaders and officials and their communities.

Time was dedicated to understanding the extent to which IKS is incorporated in the policy development and implementation processes. The investigation has been undertaken in the thematic context of HIV/AIDS. In more specific terms, I have investigated the extent to which IKS is incorporated into policy development and implementation processes related to HIV/AIDS. The study emanated from the researcher's own interest in the issues of IKS and governance in the context of HIV/AIDS interventions.

Interest has not been on policy development and implementation in undefined scope of political governance structures.

It was limited to the political governance at the local municipality level in the South African social and political environmental. Focus was on Category B of the local municipalities. As noted in Chapter 1, this category is classified as the local municipalities that share municipal executive and legislative authority in their area with category C municipalities within whose they fall. Category C municipalities are generally known as District Municipalities.

The role of district municipalities has not been explored in this study. Noting that district municipalities are generally known to hold the responsibility of supporting the strengthening of the capacities of the local municipalities, *future studies could embark on a question of how the district municipalities could be instrumental in creating a meaningful incorporation of IKS into policy documents such as the IDPs, specifically with the aim to contribute in addressing HIV/AIDS.*

Motivated by the need to understand key issues related to HIV/AIDS, before embarking on fully fledged reflections, about how the local municipality leaders and officials engage in applying IKS for their responses to the epidemic, I made a brief reflection on the conceptual and situational factors of HIV/AIDS in South Africa. Having informed the reader that the study has identified HIV/AIDS as its main thematic area due to its importance in the current social and economic context of South Africa, the study brought to fore a brief reflection which depicted the meaning of HIV/AIDS and its prevalence in the South African context.

Different responses to the epidemic have put to light the observation that there are orthodox and dissident views among scholars and practitioners who have taken time to reflect on the implications of the epidemic to their policies, mandates and social and economic interventions. The orthodox – dissident dichotomy has resulted in debates and different reactions and interventions on HIV/AIDS, which in some cases have stood on the opposing sides.

But the difference in reactions and interventions to HIV/AIDS has not only been influenced by the orthodox – dissident view dichotomy. Social and political mandates and ideologies have also played a great role in the way scholars and practitioners have reacted to the epidemic. During the apartheid era for example, the South African government had no policies related to its response to HIV/AIDS; while in the later days when the South African democratic government was established, responses were significantly influenced by the advocacy agendas and messages from the civil society. In this light, I have, for example, noted that the newly established democratic South Africa Government adopted NACOSA's strategic plan and made it a point of entry into policy development and implementation for the epidemic.

This sheds light on the power of civil society to influence change. Activities such as those of NACOSA and the Treatment Action Campaign leave the impression that civil society organisations have a potency to influence change. The question is: *Would the civil society organisations be of help to influence the incorporation of IKS in the policy documents such as the IDPs? Apart from the citizens some of whom were interviewed during the survey presented in Chapter 7 above, are there civil society organisations which could be instrumental in influencing local municipality leaders and officials to incorporate IKS in the formal documents such as IDPs? If there are such organisations, what is their mandate and what have they achieved so far in influencing policy makers to influence the incorporation of IKS in policy documents such as the IDPs?*

Developments in reflecting and designing appropriate policies also tapped on the international experiences from countries such as Thailand, Philippines, Uganda, France, and Britain. At the centre of these experience, was an impetus to design HIV/AIDS national strategies and programmes around multi-sectorial approaches, which in the main, sought to emphasise that different role players in the society have the responsibilities to address the epidemic in congruent with their lines of business.

The multi-sectorial approaches to addressing HIV/AIDS have been instituted in South Africa and some parts of the world in the form of Aids Councils. Records show that these bodies were introduced in the local municipalities in the early years of the last decade. Civil society organisations such as IDASA engaged in training projects seeking to help local municipalities to establish and strengthen local municipality AIDS Councils in ways that seek to respect the roles and responsibilities of each represented sector. *Contemporary studies seeking to understand how the local municipalities are dealing with the issue of HIV/AIDS should therefore aspire to take stock of the extent to which the AIDS Councils have been instrumental in supporting local municipalities to find solutions for the problems related to HIV/AIDS. Such enquiry should further seek to understand how the councils have grappled with issues of incorporating IKS into policy about HIV/AIDS.*

The study took the position aligned to the orthodox views about HIV/AIDS. This biased position was an intended one. It was influenced by the understanding that issues and knowledge gained from a study of this nature may not only be useful for one type of disease. As claimed in Chapter 1,

> …knowledge gained about political commitment and indigenous systems for HIV/AIDS may also be employed to facilitate political commitment and use of IKS to address other forms of sickness and development issues. HIV/AIDS therefore becomes simply a channel through which wider issues are addressed (cf chapter one).

This may compel future scholars to extra some issues reflected upon in this study and engage in an analysis that seek to understand how such issues relate to other aspects of social economic development the South Africa society. For example Table 5 in Chapter 2 above, has presented various efforts that have been made in different countries on how IKS has been used to address different kinds of social and economic issues. *Future scholarly effort should seek study how IKS is incorporated in the various sectors of social and economic development.*

Such enquire could also include efforts of analyzing IKS in such a manner that aspects that may have negative impact on social and economic development are isolated from those that may have positive impact.

9.3. THE HYPOTHETICAL PROBLEM STATEMENT

The quest to define the scope and the theoretical framework was further pursued by defining the problem and its related issues in the field of good governance at the local municipality level. I presented a hypothetical problem statement, which in the researcher's view, highlight a picture of how political leaders and officials at the local municipality level are influenced by their superiors at the provincial and national level to respond to HIV/AIDS issues in a particular way. **The hypothetical problem statement** also noted that an ideal situation in which relationships between the local municipality leaders and officials with their superiors at the national and provincial level use the IKS as the basis for policy development and implementation, can exist. This path generally noted that there are knowledge building systems, imposed from the provincial and national level on the local municipality leaders and officials, which tend to result in a lack of political commitment of the local municipality leaders and officials in addressing HIV/AIDS issues. In summary, these knowledge building systems were presented in the form of the following hypothetical problem statement scenarios:

- *Scenario one (cf Figure 3 in Chapter 1):* The international organisations, national structures, and academic institutions are the definers of the accepted principles and values of human existence and behaviours. The principles and values they stand for are organised into documents that act as guiding principles for policies and programmes at the local level. This scenario shows that while the leaders and officials at the national and provincial level are able to utilise the documented guidelines for policy development and implementation, the local municipality leaders and officials are not competent enough to utilise the same guidelines for their local policy development and implementation.

This gap of competency between the national and provincial leaders and officials on the one hand, and the local municipality leaders and officials on the other, is to blame for a lack of local municipality politicians to effectively incorporate IKS to HIV/AIDS related policies and programmes.

- *Scenario two (cf figure 4 in Chapter 1):* The arguments denoted that the communications among stakeholders are misshapen by pessimism influenced by dissident views, which in the main originated from the international, national and provincial role players. The influence of the national and provincial structures on the local municipality leaders and officials is stained by denialism. Denialism therefore becomes an *objet d'art* of the local municipality leaders and officials in terms of general behaviour, and policy and programme development.

- *Scenario three (cf Figure 5 in Chapter 1):* This scenario explains the hypothetical postulation that the formulation of the local policies and programmes is a product of collaborated efforts. Principles and values for the policies and programmes are defined by the indigenous knowledge. This happens through a process of mutual interaction and respect between the local communities and the local municipality leaders and officials; between the local municipality leaders and officials, and the provincial leaders and officials. In this process the knowledge that local municipality leaders and officials draw from the communities is used in their communication with the provincial politicians to draft policies and programmes that are relevant to prevailing knowledge systems in the communities.

With this hypothetical problem statement in mind the research took a relativistic theoretical position which claims that effective policy development and implementation is that which is based on the knowledge, resources and direct

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participation relative to the primary beneficiaries of the policy development and implementation processes – the local people – the grassroots citizens.

Reflecting on the relationship between the hypothetical problem statement and the theoretical framework, effort to provide a distinctive hypothetical framework gave me the following hypothesis:

> *Power dynamics between the provincial and national spheres of government on the one hand, and the local municipality leaders and officials on the other, have influence on the extent to which IKS is incorporated in policy formulation and implementation.*

Rephrased in a more direct way the hypothesis can be presented as follows:
> *Political leaders at the national and provincial spheres of the South African government exert influence on the local municipality leaders and officials to exercise their power with limited response to the IKS needs of the local communities.*

This hypothesis was further broken down into the following global operational sequential questions:

1. What are the key indigenous knowledge and value treats in the local municipality under study that have featured as having the potential to make positive contribution in addressing HIV/AIDS?
2. To what extent has the exercising of powers and functions of the local municipal politicians leaned towards the inclusion of IKS?
3. What conclusions can be made from the study about the potential of the local municipality leaders and officials related to the appropriation of IKS in order to address HIV/AIDS?

In pursuing this hypothesis the study embarked on an investigation guided by the key questions seeking to understand the meaning of key terms such as IKS; governance and its relationship to IKS; the powers and functions of the local municipality structures; and the extent to which the local municipality leaders and officials exercise their powers and function to incorporates IKS in their policy development and implementation with specific reference to HIV/AIDS issues. This investigation involved literature review and a survey in selected local municipalities in KwaZulu-Natal, Limpopo, and Mpumalanga Provinces of South Africa.

The relationship between the international, national, provincial and local political forces has been one of the subjects of reflection throughout this this study. However, it cannot be assumed that this question has been reflected upon in an exhaustive manner. A linear approach of looking at the relationship between these levels of policy development may be lacking an appreciation that there are factors other than allegiance to one's political affiliation that may influence certain decisions by the local municipality leaders and officials. *Questions of compelling future scholarly enquiry may include: the impact of multiparty political systems in the behavior of leaders at the local municipality (e.g. Does the influence of other political parties at the local level influence the way ruling political parties behave? And how would that influence the incorporation of IKS in issues such as HIV/AIDS?); the impact of personal interests and beliefs on the way local municipality leaders and officials incorporate IKS to their policy work (e.g. Would local political leadership running local businesses behave different from those not having local businesses? Would political leaders who are also religious leaders in their localities behave differently from those who are not religious leaders?); the impact of donors agencies which interact directly with the local municipality leaders (sometimes through civil society organisations); and the impact of civil society organisations themselves in influencing the local municipality leaders to incorporate IKS to their decision making processes (e.g. A comparative study looking at the similarities between the influence of civil society organisations at the*

national level such as the Treatment Action Campaign and the influence of their counterparts or branches at the local municipality level).

9.4.   MAIN AREAS OF INVESTIGATION AND FINDINGS

The point of departure was to understand the theoretical and conceptual meanings of the key terms, which formed the nucleuses of analysis. I made a reflection on the key terms including: governance and good governance, development, relativism, and IKS. Details regarding the actual meanings of these terms as drawn from literature and the researcher's own reflections are presented in chapters 2 and 3.

The researcher specifically reflected on the meaning of good governance and gathered that a contemporary view of good governance defined around the social and political values of *participation*, *rule of law*, *transparency*, *responsiveness*, *consensus oriented*, *equity and inclusiveness*, *effectiveness and efficiency*, and *accountability* prevails among the major social, economic and political scholars and practitioners. It was specifically noted that the concept of good governance defined around these principles has been at the centre of the United Nations' reflections and advocacy efforts related to influencing ethical, political, and social economic development leadership across the globe.

While this definition has been instrumental in guiding my arguments about how local municipality leaders and officials can address HIV/AIDS using IKS, the study has not touched the question of how these principles are understood by the indigenous communities themselves. The influence of the indigenous people in policy development and implementation has reflected these principles on the basis of the technical meanings attached to them. *Future studies could benefit a lot from investigating the IKS interpretations of these principles.*

Such studies could help to define how policy makers and implementers should use these principles, not on the basis of their technical meaning, but on the basis of the way indigenous people understand them. In that way, the messages brought by the indigenous people into policy processes will be brought in an indigenous way; hence synchronising process (indigenous governance) and end result (indigenous knowledge incorporated in the policy development and implementation processes). For such work of inquiry one question could be asked: How can IKS related to HIV/AIDS be incorporated into policy development and implementation using indigenous approaches?

The investigation established that the appreciation of the principle of community/public participation in good governance and community development enhances the inclusion of IKS. This is mainly because communities participate on the basis of their own knowledge, which in the main is IKS. This conclusion was supported by the core definition of IKS held by this study (see Section 2.2.2).

My understanding of the key concepts as underlined above brought me to the point of investigating the social and political systems in South Africa in terms of how they have incorporated IKS in the policy development and implementation processes. Thus Chapter 4 briefly shaded light on the reforms that have taken place after the apartheid government was abolished to engender social, political and economic values of public participation in decision making process and their implementation. This was done by way of studying some of the legislative documents.

It was noted that The 2005 Draft Public Participation Framework is probably the most concise legislative document which clarifies what public participations means and practical ways in which it can be approached, thereby opening the door for the incorporation of IKS in policy development and implementation processes. But at the end of Chapter 4 a question about whether the propositions made in the 2005 Draft Public Participation Framework were followed, in developing and implementing local policies, lingered in my quest.

Chapter 5 was therefore dedicated to studying various IDP documents in order to understand the extent to which the principle and practice of participation of grassroots communities is incorporated in the policy development and implementation policies.

The study of the legislative documents came with the assumption that these documents have a compelling force for decision-making processes. The observation that despite that these documents do not show a direct appreciation of IKS the local government leaders and officials (cf. Chapter 7) have displayed a strong affinity to IKS, leaves me with the question as to whether the assumption that these documents have a compelling force for decision making processes, is a correct one. *Future studies could seek to challenge this assumption by understanding scholarly inquiries seeking to understand, in a comprehensive manner, what, apart from the legislative documents, the determining factors for decision making by the local municipality leaders and officials are. Studies of this nature could further answer the question: At what point of policy development and implementation do the local municipality leaders and officials find it critical to use legislative documents? Does the use of such documents, a matter of free will or a matter of persuasion and force?*

In Chapter 5, focus was on investigating whether the participation processes followed by the local municipalities as they develop and implement IDPs opened enough room for the inclusion of IKS. I noted that only 3% of the local municipality IDPs studied have, *explicitly*, indicated that IKS forms part of their appropriation of the local knowledge and resources through implementing the principle of participation in the areas of *virginity testing* and *male circumcision*.

During the past decade, under the leadership of Aaron Motsoaledi, the ministry of health has been advocating for male circumcision as one of the remedies to minimize HIV infection.

The question of how these campaigns have been effective and how the indigenous leaders and communities have been contributing in this campaign is of practical interest. Future studies could therefore seek to study this question with the aim to contribute, not only to the world of knowledge, but also to bring to fore the scientific evidence which explains the advantages and disadvantages of male circumcision in addressing the spread of HIV.

The study has noted that knowledge is not acquired only through *explicit* appropriation, but also through *tacit* appropriation. Therefore, the terms *explicit* and *tacit* knowledge were used to understand further the extent to which IKS is incorporated to the policy development and implementation. "With tacit knowledge, people are often not aware of the knowledge they possess or how it can be valuable to others" (cf Chapter 5). Thus though about 97% of the studied local municipalities did not explicitly indicate that they incorporate IKS in their policy development and implementation processes, the design of the participation processes themselves could have opened room for the local people to make meaningful contributions based on their IKS without their knowledge that they are doing so – and without the knowledge of the political leaders and officials that the incorporation of IKS is actually taking place.

This observation brought me to the stage of investigating different models of participation and their potential in enhancing *tacit* incorporation of IKS in policy development and implementation processes. Models of participation analysed at this stage were: *Self-mobilization, Interactive participation, Functional participation, Participation for material incentives, Participation by consultation, Passive participation*, and *Manipulative participation* (cf Table 10). Here, I also reflected on whether the use of ward committees to develop and implement IDPs could be taken as an effective way of incorporating IKS to the HIV/AIDS development processes.

The study found that among the forms of participation presented above, only *self-mobilisation* and *interactive participation* create enough room for the local communities to make their IKS related contributions to the policy development and implementation processes. By and large, the development and implementation of the policies tend to use the *consultation method of participation* and this method does not create enough room for the inclusion of IKS in the policy documents.

The argument about contribution of tacit knowledge is only compelling in as much as it is understood that indigenous people respond to their situations according the knowledge they acquire through their daily efforts of addressing social and economic issues. They are then able to share that knowledge tacitly in situations structured in the form of *self-mobilisation* and *interactive participation*. Local communities encounter social and economic challenges in different forms and thus IKS is required and attained in different forms and from different sources. *This study has not provided a reflection of different channels through which IKS is generated. Future work of inquiry on the similar subject could therefore seek to investigate different channels through which IKS is generated. Applying such an enquiry to the subject of HIV/AIDS could lead the enquiry into the question: How do indigenous communities generate their IKS which they use to contribute in the efforts of addressing HIV/AIDS?*

The investigation of how IKS is incorporated to the development and implementation of IDPs was further reflected in Chapter 6. Here I analysed different conventional HIV/AIDS intervention approaches recorded, in the IDPs, on the way the local municipalities respond to HIV/AIDS through the implementation of the IDPs. *Awareness Campaigns*, *Voluntary Counseling and Testing*, *OVC Initiatives*, *Condom promotion*, *ARV Distribution*, and *Home-Based Care* are the main approaches, which had been discovered as constituting HIV/AIDS interventions for most of the IDPs. Chapter 6 presented an analysis of each one of these so as to find out whether they had the potency to *tacitly* influence the incorporation of IKS in the implementation processes of the IDPs.

I found that only *Home-Based Care* has such potency. 18% of the studied IDPs were found to include Home-Based Care in their policy programmes. Thus it has been found that 18% of the studied IDPs have IKS incorporated at the *tacit* level.

Both Chapters 5 and 6 noted that development of policy documents such as IDPs has taken the direction of top-down approaches, which in essence do not provide much room for the incorporation of IKS at both *explicit* and *tacit* level. These chapters led to the conclusion that 3% of the IDPs include IKS at the *explicit* level, 18% include IKS at the *tacit* level and the remaining 79% do not include IKS at all.

The finding that Home-Based Care is one aspect with potential to incorporate IKS in addressing HIV/AIDS is one interesting discovery that future studies could pursue further. Here the question of scholarly enquiry could be: *What are the key aspects of IKS that are used in the HIV/AIDS Home-Based Care interventions? Considering that IKS differs from community to community, this would need to be contextualised. For example, it could be asked: What are the key IKS aspects of the Zulu Communities of Eshowe (Eshowe being the name of the community in question) that are used in the HIV/AIDS Home-Based Care intervention in that community?*

The study scrutinised whether IKS matters to the general citizenry, the main beneficiary of local government services in South Africa. If IKS matters to them, to what extent this is the case? And considering that there are up to as much as 79% of IDPs which this study has found to be not taking any interest in embracing IKS, does the informal pattern of policy orientation behavior of local municipality leaders and officials also reflect a lack of appreciation of IKS? An investigation around these questions was conducted in Chapter 7. A survey was conducted in three local municipalities namely: Umtshezi in KwaZulu Natal, Elias Motsoaledi in Limpopo, and Bushbuckridge in Mpumalanga. Findings from the survey were reinforced with a literature review designed to probe into the same questions.

Both literature review and the survey have revealed that there is a significant number of the South Africa population which appreciates the use of indigenous remedies for sicknesses. In other words, they have shown that IKS matters to the general citizenry which form the main beneficiary of local government services in South Africa. The interaction between the local municipality leaders and officials and their communities through various structures, which are formed by the communities in collaboration with their local municipality leaders and officials, has provided room for the local communities to share their IKS with the local municipality leaders and officials. Thus the local municipality leaders and officials are able to *tacitly* and informally render a sympathetic ear to the IKS; thus they have an affinity with the IKS context. Such affinity has led them to include IKS in their daily tasks.

Considering that the survey in the three municipalities mentioned above was supported by existing literature and did not reach the level of understanding the degree of appreciation of IKS, it may be of scientific interest if future studies could attempt to look at how the picture presents itself in a quantitative study that does not draw from the literature. While my survey, presented in the Chapter 7, has helped to draw the conclusion that IKS is appreciated in the local communities of similar nature such as the three communities included in the survey, a detailed quantitative study could provide knowledge and information about the actual degree of appreciation of IKS by the indigenous communities in question.

Considering that the study on the IDPs shows that up to 79% of the IDPs do not *explicitly* or *tacitly* incorporate IKS, the study has revealed that there are constraints in the ability and power of the local municipality leaders and officials to put their affinity to IKS into practice to the point of including it in the policy documents such as IDPs. Probing the constraints experienced by the local municipality leaders and officials in this respect was therefore the task undertaken in Chapter 8.

Guided by the understanding that the development of documented policies is a technical, political, developmental, and bureaucratic process, Chapter 8 has explored various institutional forces that determine the extent to which the local municipality leaders and officials are able to exercise their mandate. Thus:

- At the technical level, the study has noted that policy development and analysis has been left in the hands of consultants and technocrats who use the principles of institutionalised education to develop and analyse policies. It has therefore been argued that IKS is not prominent in policy documents such as IDPs because policy development and analysis is an enterprise which is controlled by those who have been trained through institutionalised education as policy development technocrats and analysts. Influenced by principles of institutionalised education, such technocrats and analysts have not developed skills or interest to appreciate IKS and include it in the policy documents such as IDPs.

- At the developmental level, contemporary development theory shows that policy development and implementation is an enterprise, which should incorporate participation of grassroots communities. Thus the theory itself does not account for the limited incorporation of IKS in the policy documents such as IDPs. Noting that the participation model followed in developing the IDPs is largely the one of *consultation*, Chapter 8 has argued that while contemporary development theory cannot be blamed for the lack of IKS inclusion in documented policies such as IDPs, the way decision makers implement the principle of participation is deficient of enough room for the inclusion of IKS in the documents.

- At the political level, Chapter 8 has noted that the local municipality leaders and officials are political appointees. A definition of the term political appointee confirmed that the leaders are appointed to carry the mandate and the agenda of the agents they represent.

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In the main, the agenda of winning votes and promoting the national political and government strategic plans has dominated the *modus operandi* of how the local municipality leaders and officials relate to their superiors at the provincial and national level. In essence the local municipality leaders and officials follow what their superiors at the provincial and national levels require them to do.

- The political dynamics between the local municipality leaders and their superiors at the national level as underlined above happen in the context of bureaucracy. This context has been well described by Max Weber:

  - The organization of offices follows the principles of hierarchy: that is, each lower office is under the control and supervision of a higher one; and
  - … it is a matter of principle that the member of the administrative staff should be completely separated from ownership of the means of production and administration (cf Chapter 8).

Chapter 8 has confirmed that this context involves manipulative systems designed around educational, monitoring and evaluation, and provision and management of funds. In more specific terms the development of IDPs is designed in such a manner that provincial and national leaders and officials train, fund, monitor and evaluate the development and implementation of the IDPs so that they fulfill a prescribed pattern which eventually fulfills the national agenda and political intentions of the agents that have appointed the local municipality leaders and officials into their positions.

The four factors above have constituted the constraints in the ability and powers of the local municipality leaders and officials to put their affinity to IKS into practice to the point of including it in the policy documents such as IDPs.

Thus the *relativistic* nature of IKS affinity by the local municipality leaders and officials observed in Chapter 7 is only manifest at an informal level. Documented policies, such as IDPs, are outside the arena of *relativistic* inclusion of IKS in policy development and implementation since they are controlled by the forces and interests outside the local context - the provincial and national spheres of the government.

While the bureaucratic systems underlined above are an institutional *modus operandi*, it is important to note that activism in the fight for the freedom of indigenous people has sometimes not only focused on the political freedom. Indigenous communities have also at times fought for their rights to include their IKS in the policy development and implementation processes. *This study has not dug deep into how the indigenous communities themselves fight for their rights to include issues about IKS in the policy making and implementation processes related to HIV/AIDS. Future scholarly inquiry could therefore seek to answer the questions: How do indigenous communities take initiatives to fight for rights to include their IKS in the policy development and implementation processes related to HIV/AIDS? What are key examples related to this?*

9.5. THE RESPONSE OF THE STUDY TO HYPOTHESIS: A CONCLUSIVE STATEMENT

The course of investigations, findings, and arguments presented above formed my quest to prove the validity of hypothesis presented in the first chapter, namely:

> ***Power dynamics between the provincial and national spheres of government on the one hand, and the local municipality leaders and officials on the other, have influence on the extent to which IKS is incorporated in policy formulation and implementation.***

The final analysis in response to this hypothesis can be stated, in concrete terms, with reference to the dichotomy revealed from the study of the IDPs in chapters 5 and 6 on the one hand, and the findings from the survey reported in Chapter 7 on the other. This dichotomy reveals two lines of reality:

First, basing on their closeness to the custodians of IKS – the local communities - the local municipality leaders and officials have an *affinity* and *empathy* to the use of IKS in addressing HIV/AIDS.

Second, despite their affinity and empathy, to the use of IKS in addressing HIV/AIDS, the local municipality leaders and officials have largely failed to incorporate the IKS aspects for addressing HIV/AIDS into policy documents:

- First, because development of policy documents is dominated by specialised policy development experts; and
- Second, as a result of the allegiance of the local municipality leaders and officials to follow what the agents that have put them in power require them to do. The agents which have put the local municipality leaders and officials into power are represented by the leaders and officials at the provincial and national levels of government.

Thus notwithstanding other issues for future scholarly inquiry presented in this conclusive chapter, this study has indeed discovered that:

> *Political leaders at the national and provincial spheres of the South African government exert influence on the local municipality leaders and officials to exercise their power with limited response to the IKS needs of the local communities.*

REFERENCES

Books

Adjibolosoo, SK. 1999. Rethinking development theory and policy: A human factor critique. London: Praeger.

Akokpari, J & Zimbler, DS. (eds). 2008. *Africa's human rights architecture.* Auckland Park: Centre for Conflict Resolution, Fanele.

Babbie, E. and Mouton, J. 2011. *The practice of social research.* Oxford University Press.

Baghramian, M. 2004. Relativism. Oxfordshire: Routledge.

Bank, A. 2013. Introduction. In Eds. A. Bank and L. J. Bank (eds.) *Inside African Anthropology: Monica Wilson and her interpreters.* Cambridge: Cambridge University Press: 1—34.

Battiste, M. and Henderson, J.Y. 2000. Protecting Indigenous Knowledge and Heritage:A Global Challenge. Saskatoon: Purich Publishing Ltd.

Bellenir, K & Dresser, PD. 1995. Food and Animal Borne Diseases Sourcebook. Detroit: Omnigraph- ics, Inc.

Blythe, JM. 1992. *Ideal government and the mixed constitution in the middle ages.* New Jersey: Princeton University Press.

Cloete, F & Wissink, H. 2000. *Improving public policy.* Pretoria: Van Schaik.

Crewe, M. 2005. *Buckling: The impact of AIDS in South Africa. Pretoria:* The Centre for the Study of AIDS , University of Pretoria.

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David, PW & Blower, SM. 2005. *Designing equitable antiretroviral allocation strategies in resource constrained countries.* Los Angeles: University of California, Department of Biomathematics and UCLA AIDS Institute, School of Medicine.

de Beer, F & Swanepoel, H. 2000. *Introduction to development studies.* Cape Town: Oxford University Press.

Development Cooperation Forum. 2002. *Human security and the future of development cooperation.* Atlanta: The Carter Centre.

de Villiers, S. 2001. *A people's government. The people's voice: A review of public participation in the law and policy making process in South Africa.* Pretoria: Institute for Democracy in Southern Africa.

Doke CM. 1951. The Southern Bantu Languages. London, New York, Cape Town: Oxford University Press.

Dasgupta, B. 1998. Structural Adjustment, Global Trade and the New Political Economy of Development. London: Zed Books.

Fage J.D.,and Tordoff W. 1995. A History of Africa. London: Routledge Press.

Feldman, R. 1990. *Culture and Aids.* Florida: Praeger

Finer, SE. 1999. *The history of government Vol. 1: Ancient monarchies and empires.* New York: Oxford University Press.

Finer, SE. 1999. *The history of government Vol. 2: The intermediate ages.* New York: Oxford University Press.

Finer, SE. 1999. *The History of government Vol. 3: empires, monarchies and the modern state.* New York: Oxford University Press.

Geffen, N. (2010) Debunking Delusions: The Inside Story of the TAC (Sunnyside: Jacana).

Giddens, A. 1978. Durkheim. Sussex: The Harvester Press.

Giddens, A. 1997. *Sociology: Third Edition.* Cambridge: Polity Press.

Gilder, B. 2015. 20 Years of South African Democracy: So where to Now? Johannesburg: Real African Publishers.

Gunson, D. 1998. Michael Document and the Theory of Meaning. Aldershot: Ashgate.

Hales, S.D. (edt). 2011. A Companion to relativism. Oxford: Willey-Blackwell.

Hardiman, TP & Mulreany, M. 1991. *Efficiency and effectiveness in the public domain.* Dublin: Institute of Public Administration.

Holtz, S. & Havens, J.C. 2009. Tactical Transparency: How leaders can leverage social media to maximize value and build their brand. San Francisco: Jossey-Bass.

Hopper, CAO. 2002. *Indigenous Knowledge and the integration of knowledge systems.* Claremont: University of Pretoria.

Human Science Research Council. 2004. *Human Science Research Council Report.* Pretoria: Human Science Research Council.

Human Science Research Council 2012. South African National HIV Prevalence,Incidence, and Behavior Survey, 2012. Cape Town. HSRC Press.

Hunter, M. 2010. *Love in the Time of AIDS: Inequality, Gender and Rights in South Africa* Bloomington, IN: Indiana University Press.

IDASA. 2005. *Training manual for Aids Councils.* Pretoria: Institute for IDASA.

IDASA. 2001. *A practical guide to local government in South Africa.* Pretoria: IDASA.

Ingraham, P.W. & Ketti, D.F. 1992. Agenda for Excellence: Public Service in America. NewJerey: Chatham House Publishers, Inc.

Institute of American Indian Arts Museum. 2006. *Relationships: Indigenous dialogue.* Athens: Central Plains Book Manufacturing.

Kalberg, S. 2005. *Max Weber: Readings and commentary on modernity.* Oxford: Blackwell Publishing Ltd.

Kamminga, E & Wegelin-Schuringa, M. 2003*. HIV/AIDS and water, sanitation and hygiene: Thematic overview paper.* Delft: IRC International Water and Sanitation Centre, the Netherlands.

Kooiman, J. 2003. *Governing as governance.* London: SAGE Publications.

Kollock S, and Alegbe P. 1961. The Historical Facts about Africa. New York: Carlton Press.

Kotze, DA. 2010. *Only study guide for DVA3703.* Pretoria: University of Pretoria.

Kraut, R. 2002. *Aristotle.* New York: Oxford University Press.

Kumar, K. 2013. Evaluating Democracy Assistance. London: Lynne Rienner Publishers.

Likalimba, B. 1999. *The impact of the state and the donors on second generation NGOs: a study on the conflict of interests between the state, the NGOs and the donors in the civil society: Masters dissertation.* Pietermaritzburg: University of Natal.

Malawi (Republic). Ministry of Health of Malawi. 2005. *Malawi National Condon strategy 2005.* Lilongwe: Government Printer.

Monaheng, T. 2000. Community development and empowerment, in *Introduction to development studies,* edited by F de Beer and H Swanepoel. Oxford: Oxford University Press.

Morrison, K. 2006. Marx, Durkheim, Weber: Formations of modern social thought (2nd edn.). London: SAGE Publications.

Moulakis, A. 1985. *The Promise of history: Essays in political philosophy.* Berlin: Walter de Gruyter.

Mwanza, A. 1999. *Social policy in agricultural economy.* Harare: Sapes Books.

Nabudere, DW. 2012. *Afrikology and transdisciplinarity: A restorative epistemology.* Pretoria: Africa Institute of South Africa.

Nattrass, N. (2007) Mortal Combat: AIDS Denialism and the Struggle for Antiretrovirals in South Africa (Scottsville: University of KwaZulu-Natal Press).

Nürnberger, K. (edt.) 1991. *A democratic vision for South Africa.* Pietermaritzburg: Encounter Publications.

OECD. 2001. *Economic Outlook.* Paris: OECD Publications Service.

Oliver, R. (ed.) 1977. The Cambridge History of Africa Vol. 3 from c 1050 to c. 1600. London: Cambridge University Press.

Parker, G. & Pfukani. 1987. History of Southern Africa. London: Unwin Hyman.

Pathfinder International. 2006. *Mapping of community home-based care services in five regions of the Tanzania mainland, Tanzania*. Dar es Salaam: Pathfinder International.

Quashigah, EK & Okafor, OC. (eds) 1999. *Legitimate governance in Africa: International and domestic legal perspectives.* London: Kluwer Law International.

Ritzer, G. & Stepnisky, J. 2014. Sociological Theory. New York: McGraw-Hill.

Ritzer, G. 1988. Contemporary Sociological Theory (Second Edition). New York: Alfred A. Knopf.

Ritzer, G. 1992. Contemporary Sociological Theory (Third Edition). New York: McGraw-Hill, Inc.

Ritzer, G. 2008. Modern Sociological Theory (Seventh Edition). Boston: McGraw-Hill Higher Education.

Schaeffer, RT. & Lamm, RP. 1992. *Sociology.* New York City: McGraw-Hill.

Semali, L. M. and Kincheloe, J.L. (edts) 1999. What is Indegenous Knowledge? Voices from the Academy. London: Falmer Press.

Skidmore, W. 1979. *Theoretical thinking in sociology (Second edition).* London: Cambridge University Press.

Skidmore, W. 1979. *Theoretical thinking in sociology.* Cambridge: Cambridge University Press.

Snow, J.Inc. 2005. "Supply Chain Management", in *The World Bank. World Bank training programme on management procurement and logistics of HIV/AIDS drugs and related supplies, Beirut, Lebanon, 21 June – 1 July, 2005.*

Sparks, A. 2003. Beyond the Miracle: Inside the New South Africa. Johannesburg: Jonathan Ball Publishers.

South African Local Government Association. 2008. *Country Guideline on HIV and AIDS for Local Government.* Tshwane: SALGA.

South Africa (Republic). 2005. *Draft National Policy Framework for Public Participation.* Pretoria: Government Printer.

South Africa (Republic). Statistics South Africa P0302 Mid-year population estimates, 2015)

Strode, A & Grant, KB. 2003. *Understanding the institutional dynamics of South Africa's response to the HIV / AIDS pandemic.* Pretoria: Institute for Democracy in South Africa.

StrÖm, M. 2005. *Citizens at the centre: AIDS Councils as catalysts for unlocking citizen power.* Pretoria: Institute for Democracy in South Africa.

Swilling, M & Russell, B. 2002. *The size and scope of the non-profit sector in South Africa.* Tshwane: Human Science Research Council.

Thompson, K & Tunstall, J. (eds) 1987*. Sociological perspectives.* Harmondsworth: Penguin Books.

Thornton, R. 2008. *Unimagined community: Sex, networks and AIDS in Uganda and South Africa.* Oakland, CA: University of California Press.

Tulchinsky, T. & Varavikova, E. 2009. The New Public Health (3rd Edition). Amsterdam: Elsevier.

UNIAIDS Global and AIDS Update 2016

van de Fliert, E. 1994. Indigenous peoples and international organisations. Austin: Universiry of Texas.

van Gerven, W. 2005. *The European Union: A policy of states and peoples.* Oxford and Portland: Hart Publishing.

Webster C. 1950. The Congress of Vienna: 1814-1815. London: G.Bell & Sons Ltd.

Wilson, M. 1964. *Reaction to conquest: Effects of conquest with Europeans on the Pondo of South Africa.* Cambridge: Cambridge University Press.

Wilson, M and G. Wilson. 1954. The analysis of social change in Africa: Based on observations in central Africa (YEAR*).* Cambridge: Cambridge University Press.

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World Bank. 2003. *Local government response to HIV/AIDS: A handbook.* Washington: World Bank.

World Bank. 2004. *Indigenous knowledge: Local pathways to global development.* Washington: World Bank.

World Health Organisation. 2002. *Community home-based care in resource limited settings: A Framework for action.* Geneva: Appia.

Journal articles

Davids, I. 2003. 'Developmental local government: The rural context and challenges', in *Intefund development update* 4(1): 31-54.

Ellis, F & Biggs, S. 2001. 'Evolving Themes in Rural Development 1950s-2000s', in *Development Policy Review* 20(4): 437-448.

Henri, L. 2000. 'Aiding Democracy? Donors and Civil Society in South Africa', in *Third World Quarterly* 21(5): 815-830.

Mbingi, L. 2006. Convergence. *IKS Training Material* 3(4):18**.**

Muriithi, N & Crawford, L. 2002. 'Approaches to project management in Africa: Implications for international development projects', in *International Journal of project management* 21 (2003): 309–319.

Peltzer, K, Mngqundaniso, N & Petros, G. 2006. 'HIV/AIDS/STI/TB knowledge, beliefs and practices of traditional healers in KwaZulu-Natal, South Africa', in *AIDS care*, 18 (6): 608 – 613.

Quashigah, EK & Okafor, OC. 1999. 'Legitimate governance in Africa', in *Kluwer Law International*: 21-40.

Vearey, J, Richter, M, Núñez, L & Moyo, K. 2011. 'South African HIV/AIDS programming overlooks migration, urban livelihoods, and informal workplaces', in *African Journal of Aids Research*. 10 (3). Available at: *http://www.ncbi.nlm.nih.gov/pubmed/25865514* (accessed on 15/09/2014).

Web sites

Alliance of Mayors and Municipal Leaders. 1997. Abidjan Declaration by African Mayors and Municipal leaders on STDs/AIDS. Available at: *https://ihm.nlm.nih.gov/luna/servlet/detail/NLMNLM~1~1~101454799~1972 72:Abidjan-Declaration-by-African-Mayo* (accessed on 12/07/2008)/

African Indigenous Science and Knowledge and Systems. African indigenous knowledge systems. Available at: *http://www.africahistory.net (accessed on 12/06/2009).*

Audio English.org. Convetional. Available at: http://www.audioenglish.net/dictionary/conventional.htm. (accessed on 05/10/2011).

AVERT 0215. HIV and AIDS in South Africa. Available at: *http://www.avert.org/professionals/hiv-around-world/sub-saharan-africa/south-africa * (accessed on 16/09/2015).

Bach, D. *Miriam*. Available at: *http://www.hvtn.org/en/participants/volunteer-profiles/mirriam.html* (accessed on 24/06/2014).

BBC (British Broadcasting Cooperation). Geography, measuring development*.* Available at: *http://www.bbc.co.uk/bitesize/standard/geography/international_issues/contrasts_development/revision/1/ (*accessed on 18/08/2011).

Cash, C & Swatuk, L. 2010. Integrated development planning in South Africa: Lessons from the Dwars River Valley. Available at: *http://www.academia.edu/384839/Integrated_Development_Planning_in_So uth_Africa_lessons_from_the_Dwars_River_Valley* *(accessed on 16/04/2015).*

Cheibub, JA. 2002. Systems of Government: Parliamentarism and Presidentialism. Available at: *https://www.hks.harvard.edu/fs/pnorris/Acrobat/stm103%20articles/Cheibub _Pres_Parlt.pdf* (accessed on 24/02/2009).

Cocks, M & Møller, V. 2002. Use of indigenous and indegenised medicines to enhance personal well-being: A South Africa case study. Available at: *http://www.pubfacts.com/detail/11824915/Use-of-indigenous-and-indigenised-medicines-to-enhance-personal-well-being-a-South-African-case-stud* (accessed on 12/08/2014).

Collins, R. 1977. Some comparative principles of educational stratification. Available at: *https://foundations301.files.wordpress.com/2009/09/some-comparative-principles-of-educational-stratification.pdf* (accessed on 18/05/2015).

Commonwealth Regional Health Community Secretariat for East, Central, and Southern Africa, the US Agency for International Development, and the Regional Economic Services Office for East and Central Africa. 2002. HIV/AIDS Voluntary Counselling and Testing: Review of Policies, Programmes and Guidelines in East, Central and Southern Africa. Available at: *http://www.who.int/hiv/topics/vct/toolkit/components/policy/review_of_policie s_programmes_and_guidelines.pdf* (accessed on 12/05/2012).

ETU. HIV and AUDS campaign guide. Available at: *http://www.etu.org.za/toolbox/docs/organise/webaids.html* (accessed on 07/03/2012).

Food and Agriculture Organisation. 2001. Project cycle management technical guide. Available at*: http://www.fao.org/docrep/012/ak211e/ak211e00.pdf* (accessed on 17/08/2012).

George, E. 2007. Like a virgin? Virginity testing as HIV/AIDS prevention: Human rights universalism and cultural relativism revisited. Available at: *https://works.bepress.com/erika_george/1/* (accessed on 17/08/2012).

Global Health Sciences. 2015. Profile: Global Fund. Available at: *http://globalhealthsciences.ucsf.edu/global-health-group/evidence-to-policy-initiative-e2pi/smarter-aid/organizational-structures-and-g-0* (accessed on 12/11/2015).

HSRC. 2012. Siyakwamukela Project. Available at: *http://www.hsrc.ac.za/Document-1644.phtm*l (accessed on 07/06/2012).

Institute for Democracy in South Africa (IDASA). State of local government in South Africa. Available at: *http://www.idasa.org.za* (accessed on 04/07/2008). .

International Centre for Not-For-Profit Law. 2004. ICNL Co-Organizes Comparative Seminar on International Charity Law in Beijing, China. Available at: *http://www.icnl.org/news/2004/15-Dec.html* (accessed on 15/05/2009).

John Hopkins Bloomberg School of Public Health. Adolescent health research project. Available at: *http://www.jhsph.edu/research/centers-and-institutes/center-for-adolescent-health/research/project* *(*accessed on 12/05/2012).

Lovelife. About Lovelife. Available at: *http://www.lovelife.org.za/corporate/about-lovelife/ (accessed on 27/09/14).*

MacLachlan, M & Amin, M. 2012. Core concepts of human rights and inclusion of vulnerable groups in the Namibian policy on orthopaedic technical services. disability. CBR and inclusive development (DCID). Vol 23, No. 3. (2012). Available at: *http://www.un.org/disabilities/default.asp?id=1560 (accessed on 12/06/2014).*

Malan, M. 2014. SA has highest number of new HIV infections worldwide – survey. Available at: *http://bhekisisa.org/article/2014-04-01-sa-holds-highest-number-of-new-hiv-infections-worldwide-survey* (accessed on 17/07/2015).

Morita, S & Zaelke, D. 2007. Rule of law, good governance, and sustainable development. Available at: *www.inece.org/conference/7/vol1/05_Sachiko_Zaelke.pdf* (accessed on 22/06/2007).

Mvula Trust. HIV/AIDS and water, sanitation and hygiene. Available at: *http://www.themvulatrust.org.za/* (accessed on 26/06/2014).

New World Encyclopaedia. 2012. Bantu. Available at: *http://www.newworldencyclopedia.org/entry/Bantu#Definition*

Patient. Counselling. Available at*: http://patient.info/doctor/hiv-counselling* (accessed on 29/06/2012).

Routio, P. 2007. Exploratory Research. Available at: *http://www2.uiah.fi/projects/metodi/177.htm#explor* (accessed on 08/11/2007).

Sahara. 2011. Strategy for the care of orphans and vulnerable children. Available at: *http://www.sahara.org.za/activities/strategy-for-the-care-of-orphans-and-vulnerable-children-ovc* (accessed on 09/04/2012).

Seek, J. 2009. South Africa. Available at: *http://www.luventicus.org/maps/africa/southafrica.html* (accessed on 25/03/2009).

Smith, T. 2008. The role of ward committees in enhancing participatory local governance and development in South Africa: Evidence from six ward committee case studies. Community Law Centre. Available at: at: (Accessed on 17/05/2010).

South African History Online. The first farmers in Southern Africa. Available at: *http://www.sahistory.org.za/topic/bibliography-and-further-reading-first-farmers-southern-africa* (accessed on 23/03/2010).

Tanzania Commission for AIDS. 2007. Tanzania public expenditure review: Multi-sectoral review: HIV/AIDS December 2007. Available at: *http://www.tacaids.go.tz/thematic-areas/care-and-treatment/home-based-care-hbc.html* (accessed on 12/05/2012).

UNAIDS. 2007. Feature story male circumcision: context, criteria and culture
(Part 1). Available at:
http://www.unaids.org/en/resources/presscentre/featurestories/2007/februar
y/20070226mcpt1 (accessed on 18/08/2011).

UNAIDS: HIV and AIDS estimates (2015):
http://www.unaids.org/en/regionscountries/countries/southafrica (accessed on
16/01/2017)

UN-ESCAP (United Nations Economic and Social Commission for Asia and the
Pacific): What is good governance? Available at: *http://www.gdrc.org/u-*
gov/escap-governance.htm (accessed on 23/11/2009).

UNESCO (United Nations Educational, Scientific and Cultural Organization). 2014.
AIDS and theatre: How to use theatre to respond to HIV/AIDS. Available at:
http://www.unesco.org/new/en/hiv-and-aids/our-priorities-in-hiv/human-
rights/culturally-appropriate-responses/promoting-arts-and-
creativity/theatre-and-performing-arts/ (accessed 12/06/2014).

United Nations. 1948. The universal declaration of human rights: Available at:
http://www.un.org/en/documents/udhr (accessed on 02/04/2009).

United States President's Emergency Plan for AIDS Relief. 2009. Orphans and
vulnerable   children.   Available   at:
http://www.pepfar.gov/strategy/prevention_care_treatment/133367.htm
(accessed on 24/05/2012).

Western Cape Government. 2013. HIV/AIDS programme. Available at:
http://www.westerncape.gov.za/service/hivaids-programme (accessed on
12/06/2014).

Wilson, DP & Blower, SM. 2005. Designing equitable antiretroviral allocation strategies in resource-constrained countries. Available at: *http://www.ncbi.nlm.nih.gov/pubmed/15737005* (accessed on 27/10/2012).

World Bank. 2005. Children and youth (Second Edition August). Available at: *http://info.worldbank.org/etools/docs/library/162495/index.htm (accessed on 09/04/2012).*

World Health Organisation. 2009. Political leadership against HIV/AIDS in Africa. Available at: *http://www.who.int/inf-new/aids2.htm* (accessed on 07/11/2009).

World Health Organisation 2014. Gender, equality and human rights. Available at: *http://www.who.int/gender/hiv_aids/en/ (accessed on 15/06/2014).*

World Vision. 2005. World Vision guide to mobilising and strengthening community-led care for orphans and vulnerable children, HIV/AIDS hope initiative. Available at: *http://www.crin.org/docs/ovc%20care%20guide.pdf* (accessed on 18/11/2013).

Integrated Development Plans[78]

South Africa (Republic). Tsantsabane Local Municipality. 2005. *Tsantsabane Local Municipality reviewed IDP: 2005*. Postmasburg: Government Printer.

South Africa (Republic). Dikgatlong Local Municipality. 2006. *Dikgatlong Local Municipality IDP: 2006/2007 – 2010/2011*. Barkly West: Government Printer.

---

[78]. To ensure anonymity, the order of IDPs presented here is not according to the one presented in Table 9.

South Africa (Republic). Kannaland Local Municipality. 2006. *Kannaland Local Municipality IDP Final Review: 2006-2012*. Ladismith: Government Printer.

South Africa (Republic). Mjindi Local Municipality. 2006. *Mjindi Local Municipality IDP: 2006-2011*. Barberton: Government Printer.

South Africa (Republic). Dlambe Local Municipality. 2007. *Dlambe Local Municipality final DP review: 2007- 2011*. Bathurst: Government Printer.

South Africa (Republic). Emfuleni Local Municipality. 2007. *Emfuleni Local Municipality IDP: 2007/2012.* Vanderbijlpark: Government Printer.

South Africa (Republic). Mafube Local Municipality. 2007. *Mafube Local Municipality IDP: 2007-2012*. Frankfort: Government Printer.

South Africa (Republic). Phokwane Local Municipality. 2007. *Phokwane Local Municipality IDP: 2007 – 2011*. Hartswater: Government Printer.

South Africa (Republic). Richtersveld Local Municipality. 2007. *Richtersveld Local Municipality IDP review: 2007.* Port Nolloth: Government Printer.

South Africa (Republic). Tswaing Local Municipality. 2007. *Tswaing Local Municipality Adopted/Amended IDP document: 2007 – 2011.* Delareyville: Government Printer.

South Africa (Republic). Thulamela Local Municipality. 2007. *Thulamela Local Municipality IDP: 2007/2008 – 2011/2012.* Thohoyandou: Government Printer.

South Africa (Republic). Delmas Local Municipality. 2008. *Delmas Local Municipality IDP: 2008/2009.* Delmas: Government Printer.

South Africa (Republic). Dipaleseng Local Municipality. 2008. *Dipaleseng Local Municipality reviewed IDP: 2008.* Balfour: Government Printer.

South Africa (Republic). Gert Sibande District Municipality. 2008. *Gert Sibande District Municipality IDP: 2008.* Ermelo: Government Printer.

South Africa (Republic). Govan Mbeki Municipality. 2008. *Govan Mbeki Municipality IDP review: 2008/2009.* Secunda: Government Printer.

South Africa (Republic). Jozini Local Municipality. 2008. *Jozini Local Municipality IDP review: 2008/2009.* Jozini: Government Printer.

South Africa (Republic). Lekwa Local Municipality. 2008. *Lekwa Local Municipality IDP review: 2008-2011.* Standerton: Government Printer.

South Africa (Republic). Makhuduthamaga Local Municipality. 2008. *Makhuduthamaga Local Municipality adopted IDP: 2008/2009.* Jane Furse: Government Printer.

South Africa (Republic). Maluti –a – Phofung Local Municipality. 2008. *Maluti –a – Phofung Local Municipality IDP integration phase report: 2008/2009.* Phuthaditjhaba: Government Printer.

South Africa (Republic). Mbombela Local Municipality. 2008. *Mbombela Local Municipality IDP draft review: 2008 – 2011.* Nelspruit: Government Printer.

South Africa (Republic). Mkhondo Local Municipality. 2008. *Mkhondo Local Municipality IDP revised report: 2008-2009.* eMkhondo: Government Printer.

South Africa (Republic). J.S. Moroka Municipality. 2008. *J.S. Moroka Municipality IDP: 2008/2009.* Siyabuswa: Government Printer.

441

South Africa (Republic). Msukaligwa Local Municipality. 2008. *Msukaligwa Local Municipality IDP: 2008-2011*. Ermelo: Government Printer.

South Africa (Republic). Nongoma Local Municipality. 2008. *Nongoma Local Municipality IDP final report: 2008.* Empangeni: Government Printer.

South Africa (Republic). ixley Ka Seme Local Municipality. 2008. *Pixley Ka Seme Local Municipality IDP: 2008 – 2012.* Amersfoort: Government Printer.

South Africa (Republic). Ratlou Local Municipality. 2008. *Ratlou Local Municipality IDP: 2008/2009.* DelarayVille: Government Printer.

South Africa (Republic). Albert Luthuli Local Municipality. 2009. *Albert Luthuli Local Municipality IDP, reviewed: 2009/2010.* Carolina: Government Printer.

South Africa (Republic). Endumeni Local Municipality. 2009. *Endumeni Local Municipality IDP review: 2009.* Dundee: Government Printer.

South Africa (Republic). Inkwanca Local Municipality. 2009. *Inkwanca Local Municipality IDP: 2009.* Molteno: Government Printer.

South Africa (Republic). Kai !Garib Local Municipality. 2009. *Kai !Garib Local Municipality IDP final draft: 2009.* Kakamas: Government Printer.

South Africa (Republic). Karoo Hoogland Local Municipality. 2009. *Karoo Hoogland Local Municipality IDP: 2009 – 2011.* Willston: Government Printer.

South Africa (Republic). Lephalale Local Municipality. 2009. *Lephalale Local Municipality IDP review: 2009/2010.* Lephalale: Government Printer.

South Africa (Republic). Matzikama Local Municipality. 2009. *Matzikama Local Municipality IDP review: 2009/2010.* Vredendal: Government Printer.

South Africa (Republic). Overstrand Local Municipality. 2009. *Overstrand Local Municipality IDP: 2009/2010.* Hermanus: Government Printer.

South Africa (Republic). Setsoto Local Municipality. 2009. *Setsoto Local Municipality IDP: 2009 – 2010.* Ficksburg: Government Printer.

South Africa (Republic). Umzimvubu Local Municipality. 2009. *Umzimvubu Local Municipality IDP draft review: 2009/2010.* Mount Frere: Government Printer.

South Africa (Republic). Umzumbe Local Municipality. 2009. *Umzumbe Local Municipality IDP: 2009/2010.* Hibberdene: Government Printer.

South Africa (Republic). Bushbuckridge Local Municipality. 2010. *Bushbuckridge Local Municipality IDP: 2010 – 2011*. Bushbuckridge: Government Printer.

South Africa (Republic). Drakenstein Local Municipality. 2010. *Drakenstein Local Municipality IDP: 2010/2011.* Paarl: Government Printer.

South Africa (Republic). eMadlangeni Local Municipality. 2010. *eMadlangeni Local Municipality final IDP: 2010/2011.* Utrecht: Government Printer.

South Africa (Republic). Emalahleni Local Municipality. 2010. *Emalahleni Local Municipality final IDP: 2010/2011*. eMalahleni: Government Printer.

South Africa (Republic). Ezingoleni Local Municipality. 2010. *Ezingoleni Local Municipality IDP: 2010/2011.* Izingolweni: Government printer.

South Africa (Republic). Fetakgomo Local Municipality. 2010. *Fetakgomo Local Municipality draft IDP/budget review: 2010/2011.* Apel: Government printer.

South Africa (Republic). Impendle Local Municipality. 2010. *Impendle Local Municipality IDP review: 2010/2011*. Impendle: Government Printer.

South Africa (Republic). Intsika Yethu Municipality. 2010. *Intsika Yethu Municipality IDP draft review: 2010/2011.* Cofimvaba: Government Printer.

South Africa (Republic). Mantsopa Local Municipality. 2010. *Mantsopa Local Municipality IDP review: 2010/2011.* Ladybrand: Government Printer.

South Africa (Republic). Maruleng Local Municipality. 2010. *Maruleng Local Municipality IDP: 2010-1015.* Hoedspruit: Government Printer.

South Africa (Republic). Matjhabeng Local Municipality. 2010. *Matjhabeng Local Municipality First draft IDP review: 2010/2011.* Welkom: Government Printer.

South Africa (Republic). Modimolle Local Municipality. 2010. *Modimolle Local Municipality final IDP: 2010/2011*. Modimolle: Government Printer.

South Africa (Republic). Mogalekwena Local Municipality. 2010. *Mogalekwena Local Municipality IDP review: 2010/2011*. Mokopane: Government Printer.

South Africa (Republic). Mohokare Local Municipality. 2010. *Mohokare Local Municipality IDP review: 2010/2011.* Zastron: Government Printer.

South Africa (Republic). Molemole Local Municipality. 2010. *Molemole Local Municipality IDP: 2010/2011*. Mogwadi: Government Printer.

South Africa (Republic). Nketoana Local Municipality. 2010. *Nketoana Local Municipality IDP review: 2010/2011*. Reitz: Government Printer.

South Africa (Republic). Nyandeni Local Municipality. 2010. *Nyandeni Local Municipality IDP review: 2010/2011*. Libode: Government Printer.

South Africa (Republic). Okhahlamba Local Municipality. 2010. *Okhahlamba Local Municipality IDP review: 2010/2011*. Bergville: Government Printer.

South Africa (Republic). Port St. Johns Local Municipality. 2010. *Port St. Johns Local Municipality IDP review: 2010/2011.* Port St Johns: Government Printer.

South Africa (Republic). Steve Tshwete Local Municipality. 2010. *Steve Tshwete Local Municipality IDP planning process: 2010/2011.* Middelburg: Government Printer.

South Africa (Republic). Thembisile Hani Local Municipality. 2010. *Thembisile Hani Local Municipality IDP: 2010/2011*. eMpumalanga: Government Printer.

South Africa (Republic). Tokologo Local Municipality. 2010. *Tokologo Local Municipality IDP: 2010/2011*. Boshoff: Government Printer.

South Africa (Republic). Bitou Local Municipality. 2011. *Bitou Local Municipality IDP: 2011-2012*. Plettenberg Bay: Government Printer.

South Africa (Republic). Cederberg Local Municipality. 2011. *Cederberg Local Municipality IDP annual review: 2011/2012*. Clanwilliam: Government Printer.

South Africa (Republic). Emakhazeni Local Municipality. 2011*. Emakhazeni Local Municipality IDP: 2011-2016*. Belfast: Government Printer.

445

South Africa (Republic). Lepelle-Nkumpi Local Municipality. 2011. *Lepelle-Nkumpi Local Municipality IDP review: 2011-2016.* Chuenespoort: Government Printer.

South Africa (Republic). Mbhashe Local Municipality. 2011. *Mbhashe Local Municipality Draft IDP: 2011/2012.* Dutywa: Government Printer.

South Africa (Republic). Moses Nkotane Local Municipality. 2011. *Moses Nkotane Local Municipality IDP: 2011/2012*. Mogwase: Government Printer.

South Africa (Republic). Mthonjaneni Local Municipality. 2011. *Mthonjaneni Local Municipality IDP review: 2011/2012*. Melmoth: Government Printer.

South Africa (Republic). Naledi Local Municipality. 2011. *Naledi Local Municipality final IDP: 2011/201*. Vryburg: Government Printer.

South Africa (Republic). Nama Khoi Local Municipality. 2011. *Nama Khoi Local Municipality IDP: 2011/2012*. Springbok: Government Printer.

South Africa(Republic). Ngwathe Local Municipality. 2011. *Ngwathe Local Municipality IDP review: 2011/2012*. Parys: Government Printer.

South Africa (Republic). Nkomazi Local Municipality. 2011. *Nkomazi Local Municipality IDP: 2011/2012 – 2015/2016.* Malalane: Government Printer.

South Africa (Republic). Nxuba Local Municipality. 2011. *Nxuba Local Municipality IDP review: 2011/2012*. Port St Johns: Government Printer.

South Africa (Republic). Sundays River Local Municipality. 2011. *Sundays River Local Municipality IDP: 2011-2016*. Kirkwood: Government Printer.

South Africa (Republic). Tlokwe Local Municipality. 2011. *Tlokwe Local Municipality draft IDP: 2011 – 2016*. Potchefstroom: Government Printer.

South Africa (Republic). Ulundi Local Municipality. 2011. *Ulundi Local Municipality IDP: 2006/2007 – 2011/2012*. Ulundi: Government Printer.

South Africa (Republic). Westonaria Local Municipality. 2011. *Westonaria Local Municipality IDP 4th review: 2011/2012.* Westonaria: Government Printer.