Speaking for the People:

Representation and Health Policy in the Brazilian Amazon

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SUMMARY

This thesis examines representation, a key but relatively neglected issue in contemporary democratic theory, through an ethnography of engagements between indigenous representatives and the state in the Brazilian health sector, which has pioneered the adoption of participatory and deliberative "new democratic spaces". Part I, "Locating Representation", argues that contemporary debates that privilege the creation of new democratic spaces as a response to the shortcomings of representative democracy ignore the importance of these spaces' own issues of representation. The section goes on to outline the context for the research (which was conducted at the national level and in two sites in the Amazon region), describing the process of action research and multi-sited ethnography. The main body of the thesis makes the case for developing a situated understanding of three dimensions of representation: the representation of issues for political debate and policy deliberation; the representation of different social groups in relation to the state; and the representation of the process of democratic engagement itself. Part II, "Representing Health" examines the contrasting understandings of health expressed by two groups of policymakers and bureaucrats – those managing Brazil's national health system, the SUS, and those responsible for the Indigenous Health Subsystem of the SUS – and by shamanic practitioners and other indigenous health experts. Part III, "Representing People" examines the discourses and mediation roles of indigenous representatives operating in new democratic spaces, and the contrasting representation strategies of two regional indigenous movement organisations who took on management of outsourced services within the Indigenous Health Subsystem. Part IV, "Representing Democracy", examines three cases of indigenous representatives' engagement with the state through new democratic spaces in the health sector, and concludes by analysing the potential for new approaches to representation to contribute both to the political inclusion of marginalised minorities and to the broader reinvigoration of democracy.

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List of Acronyms

AAISARN: *Associação dos Agentes Indígena de Saúde do Alto Rio Negro*, Upper Rio Negro Association of Indigenous Health Workers (indigenous organisation – profession-based)

AIS: *Agente Indígena de Saúde*, Indigenous Health Agent (category of paraprofessional analogous to Community Health Worker)

AMARN: *Associação das Mulheres Indígenas do Alto Rio Negro*, Upper Rio Negro Indigenous Women's Association (indigenous organisation – gender-based)

ANAI: *Associação Nacional de Ação Indigenista*, National Association for Indigenist Action (Brazilian NGO)

APIB: *Articulação dos Povos Indígenas do Brasil*, Articulating Body for Brazil's Indigenous Peoples (indigenous social movement organisation – national)

APIWTXA: *Associação Ashaninka do Rio Amônia*, River Amônia Ashaninka Association (indigenous organisation – community-based)

ASAREAJ: *Associação dos Seringueiros e Agricultores da Reserva Extrativista do Alto Juruá*, Rubbertappers' and Smallholders' Association of the Upper Juruá Extractive Reserve (non-indigenous forest-dwellers' organisation – community-based)

ASKARJ: Associação dos Seringueiros Kaxinawá do Rio Jordão, Kaxinawá Rubbertappers' Association of the River Jordão (indigenous organisation – community-based)

ATESG: *Associação dos Técnicos em Enfermagem de São Gabriel da Cachoeira*, São Gabriel da Cachoeira Association of Nursing Technicians (indigenous organisation – profession-based)

CAPOIB: *Conselho de Articulação dos Povos e Organizações Indígenas do Brasil*, Coordinating Council for the Indigenous Peoples and Organisations of Brazil (indigenous social movement organisation – national)

CCPY: *Comissão pela Criação do Parque Yanomami*, Commission for the Creation of the Yanomami Park (Brazilian NGO)

CEBRAP: *Centro Brasileiro de Análise e Planejamento*, Brazilian Centre for Analysis and Planning (independent research institute)

CERCI: *Centro de Estudos e Revitalização da Cultura Indígena*, Centre for the Study and Revitalisation of Indigenous Culture (indigenous organisation – shamanic practitioner-led)

CIMI: *Conselho Indigenista Missionário*, Indigenist Missionary Council (agency of the Brazilian Catholic Church)

CNPI: *Comissão Nacional de Política Indigenista*, National Commission on Indigenist Policy (Brazilian government participatory policy forum)

CNS: *Conselho Nacional de Saúde*, National Health Council (Brazilian government participatory policy forum)

CNSI: *Conferência Nacional de Saúde Indígena*, National Conference on Indigenous Health (Brazilian government participatory policy forum)

COIAB: *Coordenação das Organizações Indígenas da Amazônia Brasileira*, Coordinating Body for the Indigenous Organisations of the Brazilian Amazon (indigenous social movement organisation – regional)

COICA: *Confederación de las Organizaciones Indígenas de la Cuenca Amazónica*, Confederation of the Indigenous Organisations of the Amazon Basin (indigenous social movement organisation – international)

COITUA: *Coordenadoria das Organizações Indígenas do Tiquié e Baixo Uaupés*, Coordinating Body for the Indigenous Organisations of the Tiquié and Lower Uaupés (indigenous social movement organisation – sub-regional)

COMIN: *Conselho de Missão entre Índios*, Council for Missionary Work among Indians (agency of the Brazilian Lutheran Church)

CONDISI: *Conselho Distrital de Saúde Indígena*, District Indigenous Health Council (district-level participatory policy forum)

CONTAG: *Confederação Nacional dos Trabalhadores na Agricultura*, National Confederation of Agricultural Workers (union organisation – national)

COSAI: *Coordenação de Saúde do Índio*, Coordinating Department for Indians' Health (department of FNS)

CPI-AC: *Comissão Pró-Índio do Acre*, Acre Pro-Indian Commission (Brazilian NGO)

DENERu: *Departamento Nacional de Endemias Rurais*, National Department of Rural Endemic Diseases (Brazilian government agency)

DENSP: *Departamento de Engenharia de Saúde Pública*, Department of Public Health Engineering (department of FUNASA)

DESAI: *Departamento de Saúde Indígena*, Department of Indigenous Health (department of FUNASA)

DNSP: *Departamento Nacional de Saúde Pública*, National Public Health Department (Brazilian government agency)

DSEI: *Distrito Sanitário Especial Indígena*, Special Indigenous Health District (territorial management unit for Brazilian government indigenous health service)

FAAO: *Faculdade da Amazônia Ocidental*, Western Amazon University (private university in Acre)

FEPI: *Fundação Estadual dos Povos Indígenas*, State Foundation for Indigenous Peoples (agency of the Amazonas state government)

FIOCRUZ: *Fundação Instituto Oswaldo Cruz*, Oswaldo Cruz Foundation Institute (public health training and research institute of the Ministry of Health)

FNS: *Fundação Nacional de Saúde*, National Health Foundation (agency of the Ministry of Health, later rebranded as FUNASA)

FOIRN *Federação das Organizações Indígenas do Rio Negro*, Federation of Indigenous Organisations of the Rio Negro (indigenous social movement organisation – regional)

FUNAI: *Fundação Nacional do Índio*, National Foundation for Indians (Brazilian government agency)

FUNASA: *Fundação Nacional de Saúde*, National Health Foundation (agency of the Ministry of Health)

FSESP: *Fundação Serviço Especial de Saúde Pública*, Special Public Health Service Foundation (Brazilian government agency)

GMI/UNI: *Grupo de Mulheres Indígenas da UNI*, UNI Indigenous Women's Group (indigenous organisation – gender-based)

HAY: *Hutukara Associação Yanomami*, Hutukara Yanomami Association (indigenous organisation – community-based)

HU: Health Unlimited (London-based international NGO, now Health Poverty Action)

IBAMA: *Instituto Brasileiro do Meio Ambiente e dos Recursos Naturais Renováveis*, Brazilian Institute of the Environment and Renewable Natural Resources (Brazilian government agency)

IBGE: *Instituto Brasileiro de Geografia e Estatística*, Brazilian Institute of Geography and Statistics (Brazilian government agency)

IECLB*: Igreja Evangélica de Confissão Luterana no Brasil*, Evangelical Church of the Lutheran Confession in Brazil (religious organisation)

MAMA: *Movimento de Mulheres da Amazônia*, Amazonian Women's Movement (gender-based social movement organisation)

MORHAN: *Movimento de Reintegração das Pessoas Atingidas pela Hanseníase*, Movement for the Reintegration of People Affected by Hansen's Disease (leprosy-focused social movement organisation)

MSA/UFMA: *Mestrado em Saúde e Ambiente / Universidade Federal do Maranhão*, Health and Environment Masters' Programme / Federal University of Maranhão (public university teaching programme in Northeastern Brazil)

OIBI: *Organização Indígena da Bacia do Içana*, Içana Basin Indigenous Organisation (indigenous social movement organisation – sub-regional)

OPIN: *Organização dos Povos Indígenas do Acre, Sul do Amazonas e Noroeste de Rondônia*, Acre, Southern Amazonas and Northwestern Rondônia Indigenous Peoples' Organisation (indigenous social movement organisation – regional)

OPIRJ: *Organização dos Povos Indígenas do Rio Juruá*, River Juruá Indigenous Peoples' Organisation (indigenous social movement organisation – sub-regional)

PAC: *Programa de Aceleração do Crescimento*, Growth Acceleration Programme (Brazilian government policy initiative)

PCdoB: *Partido Comunista do Brasil*, Communist Party of Brazil (political party)

PMDB: *Partido do Movimento Democrático Brasileiro*, Brazilian Democratic Movement Party (political party)

PSF: *Programa Saúde da Família*, Family Health Programme (Brazilian government policy initiative)

PT: *Partido dos Trabalhadores*, Workers' Party (political party)

RAISG: *Red Amazónica de Información Socioambiental Georreferenciada*, Amazonian Network for Geo-referenced Social and Environmental Information (international NGO consortium)

REAJ: *Reserva Extrativista do Alto Juruá*, Upper Juruá Extractive Reserve (federal protected area in Acre)

RAICES: *Red de las Américas Indígenas para el Empoderamiento en Salud*, Indigenous Americas Network for Health Empowerment (international NGO consortium)

SAS: *Secretaria de Atenção à Saúde*, Health Care Secretariat (department of Ministry of Health)

SEPI: *Secretaria de Estado dos Povos Indígenas*, State Secretariat for Indigenous Peoples (agency of the Acre state government)

SESACRE: *Secretaria de Estado da Saúde do Acre,* Acre State Health Secretariat (agency of the Acre state government)

SITOAKORE: *Organização das Mulheres Indígenas do Acre, Sul do Amazonas e Noroeste de Rondônia*, Acre, Southern Amazonas and Northwestern Rondônia Indigenous Women's Organisation (indigenous social movement organisation – gender-based)

SPI: *Serviço de Proteção aos Índios*, Indian Protection Service (Brazilian government agency)

SSL: *Associação Saúde Sem Limites*, Brazil Health Unlimited Association (Brazilian NGO)

SUCAM: *Superintendência de Campanhas de Saúde Pública*, Public Health Campaigns Superintendency (Brazilian government agency)

SUDAM: *Superintendência de Desenvolvimento da Amazônia*, Amazon Development Superintendency (Brazilian government agency)

SUS: *Sistema Único de Saúde*, Unified Health System (Brazilian national health service)

UNI (Acre): *União das Nações Indígenas do Acre e Sul do Amazonas*, Acre and Southern Amazonas Union of Indigenous Nations (indigenous social movement organisation – regional)

UNI (Nacional): *União das Nações Indígenas*, Union of Indigenous Nations (indigenous social movement organisation – national)

UNIFESP: *Universidade Federal de São Paulo*, Federal University of São Paulo (Brazilian public university, formerly São Paulo Medical School)

VIGISUS: *Projeto de Estruturação do Sistema de Vigilância em Saúde*, Disease Surveillance and Control Project (World Bank-funded programme of the Ministry of Health)

PART I

LOCATING REPRESENTATION

Prologue   Bringing Democracy Home

Flight BA 246 from São Paulo to London, 4 June 2007. I am flying back to the UK for a family wedding, after which I will be returning to Brazil for what is supposed to be my last round of fieldwork in the Amazon. I'm aware of an uncomfortable mix of emotions seeping through the torpor of the 11-hour flight. I'm also aware that I should be working on the report of my initial fieldwork findings, ahead of the meeting with my supervisor which I'll be having when I'm back in Sussex. Right now, though, I want to switch off my thoughts, so I switch on the video screen in front of me. A taped BBC News bulletin is showing. The main story seems to be about protests in Rostock ahead of the G8 summit. Suddenly an image appears that startles me out of my torpor, and has me reaching for my laptop and struggling in the cramped seat to find a position in which I can write. The image is of a crowd of mostly young, mostly white people, facing off against the German riot police. They are carrying banners and placards with messages for the leaders who are meeting several miles away, behind a specially built steel wall. In the forefront, surrounded by smaller printed placards, is a big hand-painted banner. It reads, in English, "YOU DON'T REPRESENT US".

On going back through the mass of scattered notes, field journal entries and fragments of writing that I accumulated while doing the research for this thesis, the note I wrote on that flight stood out for many more reasons than its relevance to the theoretical concerns that I was seeking to address through my research topic. I recalled the mixed emotions that permeated my fieldwork, and seemed to be coming to a head on that trip in mid-2007. I remembered that as I sat on that plane, I experienced a sense of division between the country I had just left and the one to which I was headed.

A couple of weeks after returning from the trip to the UK I was due to go back to Acre, in the Western Amazon, for a workshop with indigenous leaders in whose struggles for health rights and accountability I had become deeply involved. This part of my research had felt like coming home: I had worked with the same Brazilian NGO colleagues and many of the same indigenous leaders when I first lived in Brazil, over a decade ago. At this workshop we would be attempting to build on the findings of our previous action research to help the leaders to frame their demands in ways that the non-indigenous politicians and bureaucrats of Acre could understand, and we were trying to get people from the

state and federal governments to come to the workshop and listen to what the indigenous representatives had to say.

We were optimistic that some at least would come: we had developed good contacts with key people working on health and indigenous affairs inside the administrations in Acre and Brasília. This was helped by the fact that both governments were in the hands of coalitions led by the Workers' Party (PT), one of the most important forces in the remarkable process of democratisation that Brazil has undergone in recent years, and were publicly pledged to support efforts to give greater voice to the excluded.

Of course, the picture was a little more complicated than that: the research had revealed some deeply problematic issues of representation among indigenous peoples' movement organisations in Acre, as well as plenty of less than democratic practices on the part of the state and federal governments. Then there were my own issues of legitimacy, as a white foreigner engaged in processes that often threatened to cross the line between helping people speak out and speaking for them. Complications notwithstanding, though, the work in Acre felt real, and worthwhile: trying to broker a genuinely meaningful engagement between representatives of a marginalised minority and a democratising state, harnessing insights from research to the struggle for social justice.

I had never felt that sense of immediacy and political possibility in my own country. Although the fact of British birth gave me every right as a citizen to engage with the democratic process, without any of the legitimacy issues that dogged my work in Acre, I had never felt drawn to engage in the same way; to me, the political life of the rich world in general and Britain in particular felt utterly sterile by comparison with Brazil. Less than two years earlier a man had blown himself up on a bus just 200 metres from my wife's workplace in London, and a few days after that the panicked Metropolitan Police had murdered a Brazilian electrician on the Tube. We left England for Brazil shortly afterwards, but it seemed from talking to people back in the UK that after the initial shock most of the population had just floated away from the blood and bodies in the City-inflated bubble of prosperous early 21st century British life. The Iraq war dragged on; the voices of the thousands who marched to stop it had been totally

ignored, and most of our elected representatives in the House of Commons had voted for it despite our protests and their own misgivings. Now Tony Blair had announced that he would be stepping down, but my friends in England seemed to think that wouldn't really change anything – the politicians were all as bad as each other anyway, so it was better to concentrate on worrying about house prices.

Having felt so powerfully engaged in Brazil, once my fieldwork was over would I really be able to face returning to live in a Britain so thoroughly pervaded by political apathy? The worst of it was the impression of a rich world numbed by prosperity to the point that even where people perceived the depth of the political crisis, few if any seemed prepared to engage seriously and try to do something about it – and when they did they targeted single issues, rather than questioning the political system as a whole and asking why it was failing. In Acre, Amazonas and other sites across Brazil I had been trying to understand what it takes for representation to work for marginalised people in a democratic but deeply unequal state that understands inclusion as both a moral imperative and a political necessity. I doubted whether, beyond a small corner of academia, anyone in the UK or elsewhere in the Global North would be much interested in my research: no one there seemed to see that failures of representation were at the heart of so many contemporary political issues.

Barely two years have passed, but concatenating economic and political crises have already left the English summer towards which I was heading on that plane feeling very remote. As well as crisis, there is now a new sense of political possibility in the air, with the feeling of renewal that accompanied the election of the first non-white American President and a chastened mood of moral and political seriousness that has encouraged the media to replace at least a small part of their coverage of consumerist trivia with serious discussion of big issues. Most of the talk, though, is still of crisis rather than opportunity; in the economic arena despite the initial signs of recovery most commentators remain gloomy, and in politics despite the "Obama effect" few people are pointing to "green shoots" of democratic recovery.

In the summer of 2007, like most people, I had no idea that any of this was just over the horizon – though the roots of crisis were of course already quite visible to those who knew where to look for them and chose to do so. The Rostock G8 protestors had already picked out one set of roots: the loss of a sense of legitimate representation. This is a dimension of the crisis that has grown exponentially in visibility since then, provoking an explosion of debate – but apparently little progress towards a renewal of representation that could in turn help to regenerate democracy.

This is the starting-point for the first part of this thesis, in which I briefly examine contemporary debates on representation, participation and democracy, before explaining why I believe that we need a new and more holistic theory of political representation in order both to understand and to move beyond the current crisis. I present an outline of what I hope could form such a theory, along with some of the relevant literature. I then set out the rationale for the focus of my empirical research, which centres on engagements between indigenous representatives and the state over health policy and health system management in Brazil, with particular reference to the Amazon region.

After describing the research methodology and the ethical and positionality issues that arose from my decision to take an action research approach in the light of my prior entanglements with the regions, issues and actors I was studying, I go on to describe the historical, geographical, political and policy context of the research. This description covers the recent institutional history of Brazilian democracy and the particular trajectories during the democratisation process of the two key social movements in my field of study: the movement for health system reform and the movement for indigenous peoples' rights. It goes on to locate the detailed case study research that I carried out in two regions of the Amazon, briefly outlining the history of indigenous movement-state engagements in each region. Each of the following three parts of the thesis is organised around a broad theme drawn from my conceptual framework under the headings "Representing Health", "Representing People" and "Representing Democracy". These themes – the representation of objects and issues, the representation of people and their identities, interests and perspectives and the representation of the

spaces and practices that make up contemporary democracy – are used to organise my research material within the logic that is explained in Chapter 1.

At the start of several of the chapters and sections of this thesis, I introduce key themes with a narrative drawn from my own interviews and observations, like the one with which I opened this Prologue. These sections are extracted directly from my field notes or reconstructed from memory with the aid of transcripts, voice recordings, videos, photographs or whatever other records I was able to collect as I went through the research process. I hope that these sections will also help the reader to follow the stories on which this thesis draws, as well as providing some insights into the roles in which I found myself, as those stories developed and I moved along the continuum of positions between observer and participant.

Chapter 1   You Don't Represent Us

1.1   Representation, participation and democracy

1.1.1   Representation crisis

As I work on the final draft of this thesis in the summer of 2009, Britain is experiencing a spasm of public revulsion at the news that elected politicians have abused the expenses system that is supposed to compensate them for the costs they must incur in order to represent us in Parliament. Those representatives who have not abused the system struggle to be heard above the barrage of incensed commentators and "vox pop" interviews with the electorate, whose overriding theme is "they're all at it, they should all go". Under the headline "Shoot them or jail them – public is after revenge against greedy MPs", the newspaper has a picture of a young man digging up the lawn of a Conservative MP who claimed nearly £5,000 for gardening costs. The young man doing the guerrilla gardening seems familiar – I take a closer look, and checking the caption confirms that it is my cousin, a recent University of Sussex graduate.[1]

In public debate, the MPs' failings as representatives are described in two different ways: they breached the implicit social contract that underpins representation by acting in their own interests rather than those of their taxpaying constituents, and they used the money to make lifestyle choices that highlighted the fact that they had become socially distanced from their constituents. As one blogger put it, "questions are now being asked of how representative MPs and other elected politicians truly are, when they lead such cushioned lifestyles... do some of these people really share the concerns and priorities of their voters who can't rely on the taxpayer to meet their next mortgage payment?".[2] The discussion in Section 1.2 will show that understandings of representation as a social contract (associated with concepts such as "mandates" and "authorisation") and as a process of identification (based on "symbolic" or "descriptive" criteria, or on

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[1] *The Guardian*, 16 May 2009.

[2] Patrick Corrigan, posting on http://www.opendemocracy.net/ourkingdom, 13 May 2009.

"affinity") are perennial features of representation debates in political theory, with different authors arguing for the primacy of one or the other. The salient point here is that both dimensions are equally present in the current representation crisis in the UK – and, as I hope to demonstrate in this thesis, in the wider context of contemporary democracy. Both dimensions interact to generate responses that are emotional as well as rational, social-cultural as well as legal-institutional, collective as well as individual – from "Not In My Name" to "You Don't Represent Us".

In the UK, the crisis has triggered an outpouring of denunciations of the failings of "representative" democracy and an upsurge of debate on the best ways to overcome them. Despite the claims of the British institution at the heart of the crisis to be the "Mother of Parliaments", in this debate the UK is not breaking new ground but rather catching up with trends that have long been under way both elsewhere in the global North and in the newer democracies of the South. Particularly in Germany and the US, democratic theorists have been able to link up with activists and stir public debate thanks to a wider and more longstanding perception that established democracies in the North are feeling the effects of what Jürgen Habermas famously described as a "legitimation crisis".[3] As John Gaventa (2002) notes, a similar trend is also apparent in Southern societies, where there is evidence that the perception of a growing distance between citizens and the powerful institutions that affect their lives is becoming increasingly widespread. As awareness of this "legitimation crisis" has grown, its association with representative democracy has turned it into a "representation crisis". The search for responses has now become polarised between those who want to overhaul representation and those who want to replace it with something else.

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[3] Some commentators, even on the Left, have argued that the fact that Britain has lagged behind other established democracies in the North in engaging with these issues is due to some inherent national characteristic. For example, Henry Porter claims that "we are not, despite our convictions to the contrary, a particularly democratic nation... we like our governments to get on with it and decide most things for us even if they represent a minority of voters" (*The Observer*, 31 May 2009). At the very least, this sits oddly with a radical democratic tradition that historians have traced back to the republican movements of the 17th century via the 18th-century writings of Thomas Paine, and that Paine himself traced back to Anglo-Saxon institutions of collective governance.

In an ambitious recent history of democracy, John Keane (2009) argues that this replacement is already happening. Keane asserts that "for a variety of reasons that are traceable to the devastating effects of World War Two, and that now include mounting public pressure to reduce corruption and foolish abuses of power, representative democracy is morphing into... the emerging historical form of 'monitory' democracy". Keane describes "monitory democracy" as 'a "post-Westminster" form of democracy in which power-monitoring and power-controlling devices have begun to extend sideways and downwards through the whole political order' (2009: xxvii), in the democratic states of both the North and the South.

Keane's label for the proliferating new democratic devices is novel (as is his argument that their sole *raison d'être* is to monitor and control power), but his claim that this proliferation heralds a new type of democracy is not. More commonly than "monitory", attempts to label this emerging type of democracy have tended to use either or both of the concepts of "deliberative" and "participatory". Keane's insight that the sources of this new type of democracy are to be found in the South as well as the North is not novel, either. Activist-researchers have claimed to be observing the emergence of "participatory democracy without end" (de Sousa Santos 2006: 45) and "a new, participatory approach to political power" (Wainwright 2003: x) in both North and South – with Brazil frequently featuring as a particular source of inspiration.[4]

Within the academic field of Development Studies, various authors have similarly sought to bridge South and North in documenting the multiplicity of experiments with "deliberative inclusionary processes" (Holmes and Scoones 2000; Leach and Scoones 2005), the shift in the focus of work on participation from effectiveness and efficiency in projects to voice, rights and citizenship in governance (Cornwall and Gaventa 2000; Goetz and Gaventa 2001), and the proliferation of "new democratic spaces" (Cornwall 2004) across the spectrum from localised co-management to large-scale policy deliberation (Shankland 2006). This burst of activity has brought with it important insights, but also a good

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[4] For reasons that I explore in the Brazilian case in Chapter 2, its Southern protagonists tend just to call it "democracy" without bothering with labels such as "monitory", "deliberative" or "participatory".

deal of confusion about what is actually going on in contemporary democracy –
to the point where most observers have failed to note that although the hegemony
of a single model of "representative democracy" is indeed over, reports of the
death of representation itself have been greatly exaggerated. In the next section, I
will try to clarify the picture by highlighting the disjunctions between key
literatures on "old" and "new" democratic spaces, before going on to propose a
conceptual framework that allows us to understand representation in relation to
both types of space, seen as integral parts of the continuum of diverse forms that
make up contemporary democracy.

1.1.2   *Representation and new democratic spaces: the missing link*

The themes of participation, deliberation and representation in democracy have,
of course, generated an immense international literature. Much of this literature
includes a revisiting of much older debates and the perspectives of their
protagonists – from Plato and Demosthenes to Burke and Paine – as well as
engagement with the more recent contributions of authors such as Jürgen
Habermas (1989; 1998) or Nancy Fraser (1993; Fraser and Honneth 2003). In
political philosophy, important recent strands of work have engaged with the
"legitimation crisis" in contemporary democracy through the lenses of inclusion –
a central concern for Iris Marion Young (1990; 2000) as well as for writers on
"democracy and difference" (Benhabib 1996) and "the politics of presence"
(Phillips 1995) – and deliberation or communicative action – dominated by
followers of Habermas but with important recent contributions on "discursive
democracy" (Dryzek 2005) and "empowered participatory governance" (Fung and
Wright 2003). While many of these authors address issues of inclusion and
deliberation together, there are also disjunctures. For the purposes of my analysis
here, I will concentrate on one key aspect: the tendency to make very different
assumptions about the locus and nature of democratic activity.

   One of the most important concerns for theorists who see the challenge of
political *inclusion* as central has been the composition (most often analysed in
terms of race and gender) of national legislatures – based on an assumption that

they, along with other institutions associated with (electoral) representation, form the locus of democratic activity. This risks ignoring the explosion of new democratic spaces noted above. By contrast, much of the literature that emphasises *deliberation* – particularly that focusing on "empowered participatory governance" (Fung and Wright 2003) – is overwhelmingly concerned with alternative sites of participation and deliberation, whether at the local level or in national deliberative processes designed to substitute for or complement existing elected legislatures and the internal policymaking processes of executive branches.

These sites are most frequently located outside the state in the "public sphere", conceptualised either as something akin to a state of mind (in Habermas's original formulation), as a coherent entity, or as a constellation of diverse "publics" (Habermas 1989; Fraser 1993; Young 2000). It is only recently that conceptualisations have emerged that locate the new democratic spaces either in a distinct "participatory sphere" (Cornwall and Coelho 2006) or within the sphere of government itself (Fung and Wright 2003). The latter two models are particularly relevant to Brazil's model of "hybrid democracy", which I discuss in Chapter 2.

However, even models that locate deliberative spaces in the sphere of government (as Fung and Wright do) can fail to establish clearly how the results of deliberations can be made *binding* upon the agents of the state. There is a general assumption among deliberative democrats that the legitimacy of the process will imbue decisions with moral and political force, but not often much clarity about mechanisms for guaranteeing implementation in the absence of the statutory force which the outcomes of deliberation in conventional representative instructions generally possess. This question of bindingness is a key issue which I explore in depth in Chapters 9 and 10; here, I will simply note that one peculiarity of Brazilian new democratic spaces (as discussed in Chapter 2) is that their decisions *do* often have statutory force – although in a polity where different notions of legality and legitimacy collide, this in itself is by no means sufficient to guarantee bindingness.

While they may have a hazy view of the "participatory sphere" or even ignore it entirely, writers on political inclusion like Jane Mansbridge (1998; 1999; 2000; 2003) are very clear that the *nature* of democratic activity includes representation. By contrast, the clarity of exponents of "empowered participatory governance" (Fung and Wright 2003) on the potential of new democratic spaces within the state or participatory sphere to provide a locus for democratic activity is marred by a tendency to ignore the whole issue of representation within in those spaces.

In their haste to move beyond the conventional institutions of representative democracy, these authors tend to leave the *problematique* of representation to one side as if it were something that was only relevant to the old-fashioned representative institutions within that sphere. But who, in the last analysis, is doing the participating and deliberating in these new democratic spaces? It cannot – except at the very smallest social scale – be the whole population, and yet the idea is that the results of the deliberations should be a legitimate reflection of the wishes of the whole population. In other words, what is happening in such new democratic spaces is not just participation but representation – of some people by others, and of the general will by the results of a specific deliberative process.

This presents a problem for anyone seeking insights into the nature of representation in new democratic spaces: the first group of authors tends to ignore the existence of these spaces, while the second tends to assume that what goes on in them is simply "citizen participation". This assumption is highly problematic, given that debates in new democratic spaces occur in the absence of some (indeed most) citizens and with the presence of others who may be speaking in their name. As John Keane points out, "all of the new power-scrutinising experiments in the name of 'the people' or citizens' empowerment rely inevitably on *representation*" (2009: 699, emphasis in the original). Keane argues that these proliferating "monitory institutions", or new democratic spaces, "point to a world where the old rule of 'one person, one vote, one representative' – the central demand in the struggle for representative democracy – is replaced with... 'one person, many interests, many voices, multiple votes, multiple representatives'"

(2009: 691). Conflating the fact that representatives who happen to be citizens (or women, or indigenous people) are present in new democratic spaces with "direct citizen participation" (or "women's participation" or "participation of indigenous people") risks ignoring fundamental questions about who is being represented and how in contemporary forms of democracy that provide for multiple modes and channels of representation.

Peter Houtzager and Adrián Gurza Lavalle have attributed this lack of attention to the importance of representation in new democratic spaces to a "strong normative commitment to direct participation [which] hides an important empirical reality – that a large share of participants in participatory institutions are leaders of civil organisations who represent particular groups, values or identities" (2009: 10). This normative commitment to direct participation – conceived as the idealised opposite of government by representatives – has led to a tendency for contemporary pessimism about the state of "representative democracy" to elide into pessimism about representation in general, among theorists as well as activists. A version of this pessimism has led the legendary theorist of representation Hanna Fenichel Pitkin, whose classic study of the topic is discussed in Section 1.2.1, to argue in her most recent article not only that "despite repeated attempts to democratise the representative system, the predominant result has been that representation has supplanted democracy instead of serving it", but also that (on the basis of arguments that I discuss below) contemporary conditions are deeply unfavourable for attempts to reverse this trend (2004: 339).

For all her pessimism, Pitkin follows Hannah Arendt in arguing that "genuinely democratic representation is possible... where the centralized, large scale, necessarily abstract representative system is based in a lively, participatory, concrete direct democracy at the local level... [so that] local direct democracy undergirds national representative democracy" (2004: 340-1). Even though she concludes that the odds are stacked against the realisation of this potential, by arguing that larger-scale representation can be redeemed by local participation, Pitkin aligns herself with optimists like Hilary Wainwright and Boaventura de Sousa Santos who claim to have seen the future of a global movement towards

participatory democracy in Brazil's new local democratic spaces. Like them, however, she risks assuming that being "local" and "participatory" is enough to wish away the *problematique* of representation.

Although in her historical overview she quotes Jean-Jacques Rousseau's view that representation is incompatible with freedom and by extension with democracy, Pitkin does not discuss the work of the other great radical-democratic thinker of the 18th century, Thomas Paine – who, by contrast with Rousseau, was so much of an optimist with regard to the link between democracy and representation that he came close to equating the two. John Keane draws in his own discussion of the historical shift between "assembly democracy" and "representative democracy" on Paine's explanation of how "the simple democratical form" practised in "the commonhall of the ancients" at the local level "became unwieldy and impracticable" with population and territorial growth, thereby justifying the adoption of a new form capable of providing for democratic governance in much larger-scale democracies: "By engrafting representation upon democracy, we arrive at a system of government capable of embracing and confederating all the various interests and every extent of territory and population" (Thomas Paine, cit. in Keane 2009: 165).

Paine's argument that increasing scales of social organisation make it inevitable for direct participation to be superseded by representation has subsequently been echoed by many other democratic theorists (the majority of whom are both less radical and less optimistic than Paine), and is particularly relevant to my thesis. This is because the focus of my empirical work is on the political participation of indigenous Brazilians, who as "people without history" (Wolf 1982) are assumed still to practice the forms of direct participation associated in the West with "the commonhall of the ancients". As I seek to show in this thesis, the experience of indigenous representatives in the same Brazilian new democratic spaces that are extolled by the optimistic proponents of "empowered participatory governance" (Fung and Wright 2003) demonstrates that the *problematique* of representation does not simply disappear when we resize democracy to the "local" scale. At the same time, I argue that their experience shows that it is possible (though by no means easy) to link local and larger scales

and combine old and new forms of democracy in ways that confound Pitkin's pessimism – and that the key to this is reinventing representation, not replacing it.

In order to undertake this analysis, however, we need first to equip ourselves with an adequate framework for understanding the concept of representation – one that takes account of the multiple interests, perspectives, identities, spaces and modes of representation that have featured in the discussion of contemporary democracy above. This is the task of the next section.

1.2   Representing Representation

1.2.1 Political theory, political science and representation

Talking about representation in the context of democracy – that is, the representation of democratic representation – has long been the preserve of political scientists and political theorists. It seems to be *de rigueur* for their discussions of the topic to begin with a homage to Hanna Fenichel Pitkin, whose book *The Concept of Representation* (1967) remains a key work on the subject more than four decades after its original publication – just as Pitkin and many of her predecessors and contemporaries found it to be *de rigueur* to begin with a discussion of the work of Thomas Hobbes. Pitkin's treatment of the topic is wide-ranging. It includes discussion of the etymological origins of the word "representation" and its correlates in English. It contains several acute observations on the parallels and disjunctures between the application of the concept to cultural manifestations such as painting and theatre and its application to politics (observations that are relevant to the uses of the term in cultural studies and semiotics that I discuss below). It considers modes of political representation – formalistic, descriptive and symbolic – in which the role of interests and the construction and renegotiation of mandates are not significant considerations. However, her purpose in covering all this ground is to discard various alternative approaches to the concept of representation in order to advance her own definition of "political representation" as "acting substantively for others",

qualified by the statement that this should be done "in a manner at least potentially responsive to their wishes" (1967: 213).

In this thesis, I follow Pitkin in taking "acting substantively for others" as a valuable definition, and in agreeing that actual or potential responsiveness to constituents is a key issue. But I diverge from her in that I do not think that it can be taken as the only form of political representation worthy of consideration when we reflect on the representation challenges of contemporary democracies. Pitkin dismisses as "questions of social psychology" issues around whether or not people feel represented (1967: 9), but as the examples with which I began my Prologue and this chapter show, this is an issue whose real political consequences may be far more significant than debates over the appropriate institutional machinery for "representative government". If our task is to construct a conceptual framework for understanding representation in actually existing democracies rather than a normative structure for arranging it in ideal ones, we cannot afford to follow Pitkin in discarding the cognitive dimensions of representation, whether they refer to its symbolic forms or to "feeling represented".

In recent years, Pitkin's exclusion of these aspects of representation has been questioned by other political scientists and theorists. Particularly worthy of note are the efforts by Jane Mansbridge (2000) and Melissa Williams (1998) to rehabilitate "descriptive representation" as a politically important form in polities marked by class, gender, racial, ethnic, religious or other divisions that have been aggravated by historical injustice and that are marked by "uncrystallised interests" where constituents' positions cannot be assumed at the moment representatives are chosen. However, although they introduce important considerations of power and highlight the symbolic value to historically disadvantaged groups of securing inclusion in representative institutions (a factor whose relevance to the case of indigenous Brazilians I discuss in Chapter 9), as I noted above these authors concentrate overwhelmingly on the issue of representation in national legislatures, and their failure to acknowledge the role of new democratic spaces means that their work has its limitations when it comes to analysing the diversity of forms and understandings of representation that are present in the rapidly-expanding participatory sphere that marks contemporary democracies like Brazil.

One of the most sustained and empirically-grounded attempts to extend analysis into the field of representation in new democratic spaces has been made by Peter Houtzager, Adrián Gurza Lavalle and colleagues. In a recent discussion of findings from their work in Brazil (part of a larger programme of research that has included studies in India and Mexico), Houtzager and Lavalle outline a typology of six notions of representation identified among a sample of 229 civil society organisations in the city of São Paulo, defining these notions as "electoral", "membership", "identity", "proximity", "mediation" and "service" (2009: 19-22). They observe that the most commonly-deployed of these among respondents in their sample was "mediation" – though it should be noted that their use of the term is very different from its use in the "anthropology of the political" approach discussed in Section 1.2.2 below.

In Houtzager and Lavalle's analysis, "mediation" is understood in essentially functionalist terms, as a form of representation that "works" because it links groups who are excluded from or disadvantaged in conventional political representation with a democratic state that seeks to be responsive but often lacks the mechanisms to enable it to ensure that these groups' interests and perspectives are incorporated into policy processes. Houtzager and Lavalle describe it as a notion that is "exceptional in that it focuses not on the actor's relationship with the represented public, but on its relationship with the locus of representation", and that as a result "the actor's relationship to its public, the represented, is left unclear or unspecified" (*ibid*.).

Leonardo Avritzer, one of the most influential Brazilian researchers working on participation and democracy, has taken issue with Houtzager and Lavalle's claim that mediation and other forms of "assumed representation" in new democratic spaces do not carry a notion of democratic legitimacy. Critiquing what he describes as an attempt to revive the ideas of Thomas Paine's conservative opponent Edmund Burke on "virtual representation", Avritzer proposes instead the concept of "representation by affinity" (2007: 458).[5] He associates this concept with two distinct forms of representation, "advocacy" and

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[5] In this and all other cases where I cite literature written in languages other than English, the translation is my own unless otherwise specified.

"civil society representation". In the former, there is no authorisation of representation because the affinity is one-way, as for example when a feminist NGO defends the rights of a group of women who may not even be aware of the NGO's existence, or an environmental campaign group argues for the rights of nonhuman animals or unborn human generations. In the latter, there is authorisation but this does not come through formal electoral processes, deriving instead from "representatives' legitimacy among other actors who act in the same manner as them". Both forms of representation by affinity are in turn differentiated from "electoral representation", authorised by voting (*ibid*.).

Avritzer's argument, like Houtzager and Lavalle's, suggests that representation can legitimately operate through multiple channels, linking conventional institutions of representative democracy with new democratic spaces in ways that involve complementarity as well as (often) competition, and moving beyond a Hobbesian (or post-Rousseauian) model of delegated sovereignty that assumes monopolistic mandates within a given geographical territory towards something closer to Keane's model of "one person, many interests, many voices, multiple votes, multiple representatives".

The problems arise when Avritzer moves from the normative to the analytical, in proposing a classificatory schema of forms of representation. This distinguishes his three forms on the basis of the nature of representatives' relations with the represented, on their sources of legitimacy and on the objects of their representation. "Electoral representation" is authorised by voting, legitimated by process and has the representation of people as its object. "Advocacy" is based on advocates' identification with the represented, legitimated by the ethical ends sought and has the representation of discourses and ideas as its object. "Civil society representation" is authorised by two-way affinity, legitimated by both the ends sought and the process followed and has the representation of "themes and experiences" as its object (*ibid*.). Much like other attempts to propose such schemae (including the work by Houtzager and Lavalle that he critiques), Avritzer's founders on the evidence that in actually existing contemporary democracies these forms run concurrently, traversing the public, participatory and state spheres and interacting not only across institutions but within them, as

elected representatives channel discourses and ideas, advocates claim to represent people and civil society representatives are chosen by election.

It is my argument in this thesis that we can only adequately analyse the complex and multivalent nature of contemporary democratic representation if we abandon reductive attempts at defining rigid either/or categories of representation and shift the focus from abstracted notions and normative prescriptions to actually represented people, issues, discourses and practices. In order to construct a theoretical basis for this examination, we need to move beyond political science and seek insights from other disciplines in which the concept of "representation" has a richer and broader set of meanings.

1.2.2 Towards a cultural-political theory of representation

Within cultural studies, semiotics and their parent disciplines of anthropology and sociology, "representation" is not about making mandates but about making meaning: it is essentially concerned with signification and the "signifying practices" through which human societies construct the stories and artefacts they use to make sense of their pasts, presents and possible futures (Hall 1997). While such studies frequently seek to politicise representation – that is, to bring a critical awareness of power relations to the "signifying practices" that they examine – they tend to look at its operation in the diffuse arenas of the media, the internet or cultural production rather than in the specific arenas or assemblies in which what political scientists understand as "representation" takes place. As a result, the neglect of "signifying practices" by political science has been matched by a corresponding neglect of mandates, assemblies, deliberation and the procedures and institutions of decision-making in cultural studies.

This disjuncture was brilliantly pinpointed by Bruno Latour in his introduction to *Making Things Public*, the companion book to a groundbreaking exhibition on democracy and representation which he co-curated with Peter Wiebel at the at the Karlsruhe Zentrum für Kunst und Medientechnologie (ZKM) in 2005. Given that his analysis speaks to some core issues in my conceptual framework for this thesis, it is worth quoting at length:

From Hobbes to Rawls, from Rousseau to Habermas, many procedures have been devised to assemble the relevant parties, to authorize them to contract, to check their degree of representativity, to discover the ideal speech conditions, to detect the legitimate closure, to write the good Constitution. But when it comes down to *what* is at issue, namely the object of concern that brings them together, not a word is uttered... Procedures to authorize and legitimize are important, but it's only half of what is needed to assemble. The other half lies in the issues themselves, in the *matters* that matter, in the *res* that creates a *public* around it... What we call "object-oriented democracy" tries to redress this bias in much of political philosophy, that is, to bring together two different meanings of the word *representation* that have been kept separate in theory although they have always remained mixed in practice. The first one, so well known in schools of law and political science, designates the ways to gather the legitimate people around some issue. In this case, a representation is said to be faithful if the right procedures have been followed. The second one, well known in science and in technology, presents or rather *represents* what is the object of concern to the eyes and ears of those who have been assembled around it. In this case, a representation is said to be good if the matters at hand have been accurately portrayed. Realism implies that the same degree of attention be given to the two aspects of what it is to represent an issue. The first question draws a sort of place, sometimes a circle, which might be called an assembly, a gathering, a meeting, a council; the second question brings into this newly created locus a topic, a concern, an issue, a *topos*. But the two have to be taken together: *Who* is to be concerned; *What* is to be considered? (Latour 2005: 15-16, emphases in the original)

Latour goes on to distinguish "a third meaning of the ambiguous and ubiquitous word 'representation', the one with which artists are most familiar" (2005: 16) as central to answering another challenge: how the assembly itself is to be represented. His examples of representations of the "Body Politik", beginning with the famous frontispiece to the first edition of Hobbes' *Leviathan*, are overwhelmingly from the visual arts. While this is unsurprising in a text written to introduce an art exhibition, it does lead Latour to miss the parallel with what is probably a more apposite case of representation from the world of the arts: the assembly as theatre.

As Hanna Pitkin points out (1967: 26), Hobbes himself described the situation of the political representative as analogous to that of a stage actor. In this case, the analogy was with an individual performance. But political representation is also a collective performance: the parallels between politics and the stage have long been commented upon, as has the theatricality of parliamentary debate and

of other democratic encounters. In instances of political representation, we see individual actors playing their specific roles, but we also see the company (or assembly) as a whole engaged in a collective representation. In this thesis, I argue that what such assemblies are mostly doing is *representing democracy*: that is, they are developing and reproducing the *practices* that give meaning to the interactions of *people* around issues and objects of concern – or as Latour would put it, *things*.

We can get most of the conceptual tools for analysing the representation of people from political science and political theory, and most of the conceptual tools for analysing the representation of things from cultural studies and science and technology studies (Latour's own field of origin). Neither set of fields, however, is particularly well-equipped to help us understand the representation of democracy itself through its "performance" in assemblies and other deliberative and decision-making encounters. Hanna Pitkin (1967: 93) notes that political theorists have long recognised and analysed the role of performance in legitimating the roles of sovereigns or other authority figures. However, this analysis has not been extended to democratic assemblies.[6] As Melissa Leach and Ian Scoones point out, science and technology studies has in common with development studies an effort by some of its theorists to conceptualise ostensibly rational sets of practices, whether in laboratory work or agriculture, as "performances" (2005: 19). However, these fields have not so far systematically extended this to analysing as performances the assemblies (parliamentary debates, public hearings, citizens' juries or others) at which the "things" – that is, the objects and issues – produced by science and technology come to be debated.

If we are going to analyse representation in political assemblies as collective performance and collective practice, then, we are going to need insights from other disciplines – above all, from anthropology. Despite the existence of a rich and longstanding tradition of analyses of political dynamics inside "societies without a state", relatively little work has been done by political anthropologists on democratic engagements in established or emerging democracies. In recent

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[6] Indeed, Pitkin goes on to point out that such symbolic representation has often been perceived as essentially anti-democratic, given its usefulness to creeds such as fascism (1967: 107).

years, however, work has begun to emerge on the "anthropology of politics" – with "politics" understood as the contested allocation of authority in democratic polities, usually by means of elections. One of the leading exponents of this approach in Brazil is Márcio Goldman, whose influential book *Como Funciona a Democracia* or "How Democracy Works" (2006), based on an ethnography of Afro-Brazilian movement associations' engagements with municipal politics in the Northeast Brazilian city of Ilhéus, is subtitled *Uma Teoria Etnográfica da Política*, or "An Ethnographic Theory of Politics".

Goldman follows his colleague Moacir Palmeira in taking as the starting-point for defining his subject the vernacular usage of *a política*, understood as a "native category" that refers both to party politics in general and to the period of intense mobilization that precedes Brazilian elections (2006: 41). While this has undoubtedly yielded a rich series of ethnographic studies, it could only be considered to form the basis of an "ethnographic theory of politics" if we accepted this restricted definition of "politics". This would still leave us looking for an "ethnographic theory" applicable to other political arenas – above all, given the focus of this thesis, the new democratic spaces of the "participatory sphere".

The same sense of the "anthropology of politics" as a promising field frustratingly limited to what either researchers themselves or their subjects define as "politics" – almost invariably electoral competition within representative democracy – has led another group of Brazilian anthropologists to propose an alternative approach, defined as the "anthropology of the political", which would focus instead on the processes by which particular issues and identities become politicised through "mediation practices" operating in many different "political" arenas. In the article in which they set out this position, Paula Montero, José Maurício Arruti and Cristina Pompa argue that "an anthropology of the political... addresses the problem of the production and reproduction of differences and the way in which they form the basis for controversies around identities... [and] brings a renewed approach to tackling the question of relations between 'cultures' left open by political anthropology" (2009: 40).

This focus on the political representation of differences has a very immediate relevance both for my research subject in this thesis and for the broader challenges of contemporary democracy, since, as Latour puts it, "for politics to be able to absorb more diversity… it has to devise a very specific and new type of representation" (2005: 38). Thus, the "anthropology of the political" admirably fits my purpose in this thesis: although this is not a work of anthropology, it has borrowed extensively both from ethnographic method (as I discuss in Section 1.4) and from anthropological concepts – and the "anthropology of the political" has provided me both with key concepts (including the concept of representation as mediation presented in Chapter 7) and with an ethnographic approach to the politics of representation that extends well beyond the conventional boundaries of representative democracy.

These, then, are the building-blocks of my conceptual framework; a framework which, as I hope to demonstrate in this thesis, could potentially serve as the starting-point for developing a cultural-political theory of representation that might be capable of addressing the multi-dimensional representation challenges of contemporary democracy. Such a theory would need to understand that democratic representation is about both inclusion and power, both legislation and implementation, both the political sphere and the participatory sphere, both speaking for and acting for, both making mandates and making meaning, both representing people and representing things – and that the representation of people and the representation of things come together in the practices that constitute the representation of democracy itself.

In the next section, I set out how this conceptual framework links to the issues I seek to investigate, and how it serves as the basis for the organisation of this thesis. After outlining the material that is covered in each of the different Parts and Chapters that make up the thesis, I go on to address the question of why my choice of subject for empirical investigation – interactions between indigenous representatives and the state around health policy and health system management at the national level and in two regions of the Brazilian Amazon – should be expected to yield useful insights into the questions and challenges outlined in the chapter thus far.

1.3   Representing Health, Representing People, Representing Democracy

1.3.1 From the conceptual framework to the structure of the thesis

As if it wasn't complicated enough that processes of representation in contemporary democracies are conducted by an ever-broader range of actors in an ever-expanding plethora of assemblies and arenas (as discussed in Section 1.1), the discussion in Section 1.2 above has demonstrated that analysing representation requires a framework that conceptualises it as consisting of many elements that interact simultaneously in several different fields. For the purposes of making this analysis workable, we are going to need to establish some categories.

Based on the preceding discussion, the elements that make up representation can be categorised as social-psychological *perceptions*, political and power *relations* and cultural *practices*. Each element clearly influences the others (perceptions underpin or undermine political and power relations, political and power relations are reproduced through practices, practices shape perceptions, and so on), but each also has its own specific shape in different processes of representation.

The fields in which these processes take place can be categorised according to what is being represented: *things* (understood in Latour's sense as the objects and issues around which debate and decision-making are organised); *people* (understood as individuals and collectivities, and their interests, identities, discourses and perspectives); and *assemblies* (understood as the encounters of representatives in new and old democratic spaces with their rules, rituals and behaviours that collectively comprise contemporary "ways of doing democracy").

The presentation of the material I have brought together in this thesis is organised according to these fields. In keeping with this approach, while this first Part of the thesis is entitled "Locating Representation", the three remaining Parts are called "Representing Health", "Representing People" and "Representing Democracy". For each field, I combine theoretical discussion, analysis of secondary data and presentation of my own research findings to cover the ways in which the three elements of social-psychological perceptions, political and power

relations and cultural practices operate within that field – or at least the specific parts of it that are the focus of my research.

"Representing Health" consists of three chapters. Chapters 4 and 5 focus on the discourses and practices of two different groups of policymakers and bureaucrats: those managing Brazil's national health system, the SUS, and those responsible for the Indigenous Health Subsystem of the SUS. Chapter 6 focuses on the discourses and practices of shamanic practitioners and other indigenous health experts. Taken together, the three chapters seek to show how despite their different understandings of what constitutes "health" and what practices are likely to preserve or promote it, all three groups perceive the health system in a similar way: as a source of resources for the pursuit of other ends, including the reproduction of those actors' own power.

"Representing People" consists of two chapters. Chapter 7 examines the role of descriptive and symbolic representation of indigenous people, and analyses the discourses and mediation roles of indigenous representatives operating in new democratic spaces at the local, regional, national and global levels. Chapter 8 focuses on political representation in Hanna Pitkin's sense of "acting substantively for others", presenting and analysing the contrasting representation strategies of two regional indigenous movement organisations who took on management of outsourced services within the Indigenous Health Subsystem and claimed to be doing so on behalf of their grassroots constituents.

The final Part, "Representing Democracy", also consists of two chapters. Chapter 9 includes ethnographic "thick description" of three episodes in which indigenous representatives engaged with the state through new democratic spaces in the health sector. It interrogates the perceptions, practices and political and power relations in evidence in these episodes and the broader processes of which they formed a part, to assess the extent to which they constituted a representation of democracy that favoured inclusion and/or transformation. Chapter 10 concludes the thesis by reviewing my findings in the light of the overall conceptual framework, and analysing the potential for new approaches to representation to contribute both to the political inclusion of marginalised minorities and to the broader reinvigoration of democracy.

1.3.2   Why Brazil? Why Amazonia? Why health? Why indigenous peoples?

In presenting my overview of current debates around representation and my outline of a conceptual framework for analysing it, I have not highlighted any "special cases", preferring to propose general themes and principles that should apply across different democratic settings whether in the global North or South. Why, then, choose such an apparently extreme "special case" for the fieldwork in which I sought to apply this conceptual framework?

As suggested in the Prologue, part of the answer is personal, and has to do with my prior engagement with many of the issues and actors concerned and my desire to renew this engagement as part of a broader intellectual and political project. Personal considerations aside, however, I believe that the decision to study indigenous representatives' engagements with the state around health policy and health system management nationally in Brazil and at the regional level in the Amazon provides a genuinely important case study for drawing out more widely applicable lessons. This is not because the case is "typical", but precisely because it is extreme. It is extreme in the sense of including an unusual preponderance of certain factors – but those factors are themselves among the most crucial for the study of representation in contemporary democracies.

As discussed in Chapter 2, Brazil is an extreme case of abundance of the enabling factors of institutional design, political will and civil society and citizen mobilisation that recent studies have suggested are necessary for the success of new democratic spaces (Cornwall, Romano and Shankland 2008). If representation via new democratic spaces runs into difficulties here, we should be able to rule out the cause being the absence of one or another of these factors, and home in on what else might be coming into play. Brazil is also an extreme case of a rights-based social policy regime that emphasises the achievement of equality through the delivery of a standardised package of services, coexisting with a pluriethnic and extremely unequal polity shot through with demands for equity based on the right to difference and differential treatment. Questions of representation are fundamental for efforts to address such tensions, which also apply in very different settings such as European welfare state democracies with

large immigrant populations or ethnically-divided Southern nations dealing with tensions and conflict over scarce state and other resources. The challenge of establishing effective forms of representation for culturally distinct minorities within multiethnic societies is one of the most important facing contemporary democracies whether in Britain or France, Canada or Mexico, South Africa or Botswana, India or Sri Lanka.

Amazonia is an extreme case of a region that is at one and the same time thoroughly globalised and pervasively "othered" as a site of "marginality in an out of the way place" (Tsing 1993).[7] If representation via new democratic spaces seems to be working here, then it might be possible to envisage it working under some circumstances in other hyper-marginalised settings, for all the necessary caveats about the export of "one-size-fits-all" democratic models (Shankland 2006). If indigenous representatives from such a remote region are successfully engaging both with the community "commonhall" and with politics and policy at the regional, national and global levels, it might also be possible to discard one of Hanna Pitkin's reasons for pessimism about the prospects for revitalising representation by linking it to local participation: the extent to which "the conditions that trouble people's lives are – more and more – large scale... [and] cannot be locally handled" (2004:341).

In a world where policymaking is divided into sectors, each framed by its own historically accumulated institutional arrangements and populated by its own constellations of actors making specific claims and deploying different bodies of lay and expert knowledge in support of them (and where most of the new democratic spaces that have emerged in recent years have a sectoral focus), health is an extreme example of a policy sector where very different representations of the "things" under consideration must be brought into dialogue if deliberation is to become meaningful. This is particularly challenging in the

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[7] As Fernando Santos-Granero wrote of the Peruvian Amazon, "if the politics of boundary making consist in 'peripheralizing' and 'othering' the Amazon and its people, the magic of boundary making resides in the discursive sleight of hand through which contemporary agents conceal the fact that the Amazon has long ago been incorporated into the nation-state" (2002: 545). As I discuss in Chapter 3, the Brazilian Amazon has been incorporated into the nation state through a similarly problematic and longstanding process, but it has been incorporated into global commodity markets for longer still – longer, in fact, than the Brazilian nation-state has even existed.

health sector given the diversity of cultural practices and understandings that constitute the field of health (Good 1994) and the intimate relationship between these practices and understandings and the reproduction of different forms of expert power (Bloom, Edström, Leach et al. 2007). It is also a sector that can throw up politically charged issues capable of challenging to the limit the problem-solving capacity of democratic processes – as is evident from the current furore over President Obama's attempt to introduce health system reform in the United States.

Finally, indigenous peoples are an extreme example of the challenges of ensuring democratic representation in pluriethnic polities; although they collectively number over 350 million people worldwide, this broad and contested category includes perhaps 5,000 culturally and/or linguistically distinct groups who frequently (as is the case in Brazil) account for only a tiny fraction of the population of a given nation-state (Stephens, Porter, Nettleton et al. 2006: 2021). Their representation within those polities is rendered more problematic by the fact that they generally perceive themselves as "micro-polities" in their own right rather than as "mini-publics" – but despite the fears of nationalists in Brazil and elsewhere and Jürgen Habermas's assertion that "ethnically and linguistically homogenous groups" seeking to develop "a capacity for political action" necessarily see themselves as "a people forming a nation" (1998: 212), they do not aspire to form nation states of their own. As "societies against the state" (Clastres 1989), they prefer to express their "capacity for political action" in other ways. The importance of ensuring that these ways can both guarantee their inclusion and enable the transformation of the policies and services that are supposed to benefit them is demonstrated by the fact that their health status is "behind everyone, everywhere" (Stephens, Nettleton, Porter et al. 2005) and that in many regions – including Latin America – they represent the poorest segment of society (Hall and Patrinos 2006). The dangers of failure can be seen both in the evidence of continued deterioration in indigenous peoples' health and life chances worldwide (Survival International 2007) and in incidents such as the recent bloody conflicts between police and indigenous protestors in the Peruvian Amazon (Vidal 2009a).

This section has outlined the structure of my thesis and the rationale for studying the specific processes of representation on which I have chosen to focus. In the final section of this chapter, I will describe the methodological choices that I made in designing and carrying out the research, and the ethical and positionality issues with which I found myself having to engage during the research process.

1.4   The research process

1.4.1 "Our friend Alex": methodology, positionality and ethics

Seminar Room of the Hotel Lake Side, Brasília, 8 March 2007. *As the debate heats up and the assembled participants in the meeting of the National Forum of Indigenous District Health Council Presidents argue about legitimacy, accountability, representation and political strategy, I scribble away furiously in my notebook – and allow myself to feel a flush of self-satisfaction at the thought of how all this invaluable research material is really demonstrating the success of my strategy of "engaged ethnography". I have come to Brasília at the invitation of the Forum – a curious body that is sponsored by the federal government agency FUNASA but composed entirely of indigenous leaders – to work as co-facilitator on a training course commissioned by its members to help strengthen their efforts to secure accountability and responsiveness in the "Indigenous Health Subsystem" of the Brazilian national health service. The course has now finished, but the indigenous leaders have invited me to stay on as an observer for the Forum meeting that is taking place after it – a gratifying signal that by working with them I have won enough trust to be allowed into the spaces that I need to observe for my research.*

The invitation to help with the training course followed a cooperation agreement that I helped to negotiate between the Forum and Saúde Sem Limites (SSL), the health rights NGO with which I am collaborating during my fieldwork. This agreement, which committed me and some SSL colleagues to providing unpaid training and consultancy support in exchange for access to Forum documentation and opportunism to interview its members, seemed to fit everyone's needs and interests. SSL wanted to broaden its work on accountability in indigenous health policy at the national level, after many years of supporting district-level health services in the Amazon and Northeast, and expected the connection with the Forum to give it more credibility for future attempts to secure donor funding for a national-level project. The Forum wanted training and strategic planning support to help it to become more effective and thereby strengthen its legitimacy with the wider indigenous peoples' movement, many of whose leaders have criticised it for being over-friendly with FUNASA, the agency to which the Ministry of Health has delegated responsibility for managing the Indigenous Health Subsystem. I wanted data for my PhD thesis, and a strategy for generating it that was a good fit for my ethical and political principles. So far, everyone seems very happy with their part of the bargain.

When the last session of the training course ended and preparations began for the start of the Forum meeting, I positioned myself unobtrusively in a corner at the back of the room, took out my notebook and shifted into observer mode. Now, after an hour or so of the Forum's discussions, I have made plenty of notes already. This is great material for my thesis: the indigenous leaders have been debating the need to strengthen the Conselhos *(oversight councils) that are supposed to ensure accountability in the DSEIs, discussing ways of improving the representation skills of the elected* conselheiros *and arguing about the best*

strategy for engaging with the wider indigenous peoples' movement in seeking to hold FUNASA to account for its management of the Indigenous Health Subsystem, after a recent series of corruption scandals.

The discussion is interrupted by a dramatic entrance from Issô Truká, who is one of the two indigenous representatives on Brazil's National Health Council, and a political ally of the Forum's Chair, Carmem Pankaruru. Issô has just come from a meeting where the National Health Council has agreed to hold a special debate on the Indigenous Health Subsystem, and excitedly tells Carmem that this is a chance for the Forum to raise its public profile. "We need to make a strong statement", he says, turning to the assembled leaders. He suggests writing an open letter that the Forum can present to the National Council and also release to the press. There is broad agreement, but there are also some murmurs of unease; many of the leaders are not comfortable writing in Portuguese, and they don't want their limited literacy skills to diminish the impact of their political statement.

In the corner where I am observing the discussion, I am thinking what a great opportunity this is to observe the translation of indigenous political discourse into a non-indigenous form – and how useful it will be to be able to quote from and analyse the text of the open letter in my thesis. Then Issô catches sight of me, and sees a way of responding to the leaders' fears that they will be unable to produce a text that will be acceptable to the media. "I know", he says, "our friend Alex used to be a journalist – he can draft our letter for us".

This section is about my methodology and positionality in researching this thesis; two issues that are always hard for any "engaged" researcher to separate, and which became inescapably entangled for me. This entanglement was an inevitable consequence of my decision to take an approach that centred on action research and included some elements of "participative enquiry" (Reason and Bradbury 2008). As I describe below, the research process was continually negotiated with a range of actors, many of whom knew me from other contexts and saw me as an ally of their political projects – a position with which I frequently self-identified. However, although this thesis owes many of its ethical and political aspirations and some of its techniques to the participative or participatory research tradition, it cannot claim to be "participatory research", given that only some of the research questions were co-designed with research participants and that the overall shape of the research followed my own design (and responded to my own overriding need to accumulate data for a thesis).

In fact, the overall approach of this thesis is closer to the "socially responsible ethnographic journalism" advocated by Norman K. Denzin (1997: 281). My preference for the term "ethnographic journalism" over Denzin's own

alternative formulation "journalistic ethnography" (*ibid.*) is personal and instinctive: as Issô reminded me that day in Brasília, I originally worked in journalism, and many of my instincts as a researcher remain those of a socially critical investigative journalist. In researching and writing this thesis I have been guided not only by my conceptual framework and my political commitments, but also by my journalist's instinct to "follow the story".

"Following the story" proved an invaluable research technique, but it did not add up to a methodological strategy. That was provided by the "ethnographic" part of Denzin's "ethnographic journalism"; specifically, by my adoption of a strategy of "multi-sited ethnography" (Marcus 1995). Although my research training is interdisciplinary, this placed me firmly within the methodological field that is most closely associated with anthropology. Within this field, the key tool is of course that old anthropological stalwart "participant observation". The incident narrated above brought home the impossibility of separating the status of "participant" from that of "observer" in research of this kind.

So why did I adopt the strategy of multi-sited ethnography that led to me using participant observation in the first place? As I signalled in Section 1.2 above, many of the questions I was seeking to research were first posed by political theory, but in answering them the tools of political science have generally proved inadequate, and as a result I decided to seek both concepts and methods from other social sciences, and in particular from anthropology. John Keane suggests that this has become a relevant option for the study of democracy more generally, since the "sea change" that saw the emergence of new democratic forms in postcolonial settings across the global South:

> The mutation of democracy in environments radically different from the earlier parent democracies... had an important implication. More than at any other moment in its long and fascinating history, the meaning and practice of democracy became implicated in local everyday sentiments, languages, institutions and shifting and contested forms of power. The consequence was that single-minded, *a priori* definitions of democracy lost their meaning. It was as if democracy itself had finally begun to be democratised – to the point where anthropologists rather than political scientists were better equipped to grasp its ways. (2009: 687)

In fact, as much by necessity as by design, my methodological approach from the outset was closer to the "observant participation" proposed by Bruce Albert, a French anthropologist who has worked for decades with the Yanomami of the Brazilian Amazon. In a brilliant discussion of "post-Malinowskian fieldwork", Albert argues that the new "ethnographic situation" created by the rise of indigenous movements and the demands that these movements place upon researchers working with them means that

> the social engagement of the ethnographer can no longer be seen as a personal political or ethical choice, optional and foreign to his scientific project. It clearly becomes an explicit and constituent element of the ethnographic relationship. The anthropologist's 'observation' is no longer merely 'participant'; his social 'participation' has become both the condition and the framework of his field research. This situation shows, in contrast, the extent to which the ideology of ethnographic neutrality depends on dodging the relationship of domination which makes possible the anthropologist's intrusion – whether forced or bought. (1997: 57-58)

My "intrusion" both into the internal political spaces of the indigenous peoples' movement and into semi-official, semi-public spaces such as the Forum was not and could not have been "forced", since I was dealing with a decidedly post-colonial balance of power where for all the advantages with which I had been endowed by an unjust world order – as a white, male, European, middle-aged, middle-class, university-trained, publicly-funded researcher – I could not simply appeal to a "relationship of domination". Throughout my fieldwork I had to negotiate carefully and from a position of relative weakness with bodies that were suspicious of (and in some cases hostile to) outsiders – especially, in the case of government institutions, *gringo* outsiders who wanted to work in the Amazon. My right to intrude therefore had to be "bought"; in every case I negotiated formal (usually written) agreements with the institutions in whose spaces I wished to carry out research (whether official bodies, NGOs or movement organisations), that generally included a commitment to provide something (usually training and/or advisory and consultancy services) in return for access to those spaces. In my local research sites in Acre and Amazonas, these negotiations took particular forms that were shaped by my past and present links with the health rights NGO *Saúde Sem Limites* (SSL) and my formal role as a

researcher attached to SSL's projects in those regions; the background to these negotiations, their content and their implications for my research are discussed in detail in the sections on those field sites in Appendix A.

In general, these arrangements for negotiating access suited me fine, since I was actively seeking ways to ensure that my research made a useful contribution during fieldwork and not only at some hypothetical future post-publication moment. This does not mean, however, that I avoided having to confront some serious dilemmas in incidents such as the one narrated at the start of this section. In the case of the Forum meeting, Issô's challenge/invitation risked making me an actor in a process that I wished to observe and a potential co-author of a text that I wished to analyse – which in positivistic terms would mean irredeemably contaminating my data. Although I had read enough postmodernist writing not to be too hung up on the purity of the text, I was reluctant to move centre-stage in a story from which I needed to extract observational data for my thesis, but it was ethically and politically impossible to refuse outright a request for help from the indigenous leaders with whom I had declared myself to be in solidarity. In the event, I secured a messy compromise that preserved at least the semblance of authenticity for the text but did require me to become involved in the process that generated it.[8]

I have found myself dealing with ethical challenges not only during the process of fieldwork, but also in the writing of this thesis. Here, again, I have been guided by Denzin's "ethnographical journalism", whose ethical principles he summarises as "stories should be accurate (do not lie) and balanced, reporting should avoid harm (nonmaleficence), readers have the right to know certain information, and writers have a moral obligation to make public the course of action they favor... truth-telling (the need to know) must constantly be balanced

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[8] In responding to Issô, I argued that I could not write the text because the indigenous leaders' political enemies might discover that I was its author and denounce them as mere tools of foreign NGO troublemakers. However, I recognised that it would be legitimate for an outsider to help the assembled leaders to draw out the ideas which they wanted to include in the text, so I agreed to facilitate an initial brainstorming session. The points recorded in this session were then put into letter format by one of the most literate of the Forum's members, the Rio Negro Indigenous Health District Council chair André Baniwa (with whose movement organisation, FOIRN, I was working in Amazonas State), advised by a subcommittee of three other leaders (including Issô). As soon as it was finished the letter was distributed to the press jointly by André himself and by the SSL office in São Paulo, to whom I e.mailed a copy – thereby leaving my fingerprints on the document.

against the principle of nonmaleficence, the amount of harm that will be done to an individual or an oppressed group" (Denzin 1997: 280). This has been particularly relevant to my reflections on two specific dilemmas: whether or not to use real names, and how to address politically sensitive topics such as corruption within indigenous movement organisations.

My decision has been to use real names in every case except where a person specifically requested anonymity (an option given to every interviewee at the pre-interview discussion and signing of the consent form) and where I judged that identifying "an individual or an oppressed group" would put them at risk of harm. In this I have followed the example of the "anthropologist of politics" Márcio Goldman, who points out that the use of fictitious names serves first and foremost to protect the anthropologist rather than her/his research subjects, since once the research setting is identified anyone familiar with it can quickly identify the individuals concerned, while leaving the setting unidentified would lead to an "absolute loss of analytical context" (2006: 46). Where I identified a risk of harm, rather than using a fictitious name I have either excluded the material altogether or sought to anonymise and decontextualise it to the point where its source should be unidentifiable ("one of my interviewees in the Amazon..."), even where this has meant a loss of analytical potential.

It is worth pointing out that I have used a narrower definition of "harm" for individuals who do not belong to oppressed groups and with whom I do not feel an obligation of political solidarity (such as the senior FUNASA manager who features in the stories narrated in Chapter 4). Here, I have simply restricted myself to the minimal journalistic requirement to avoid libel, which is the same as Denzin's criterion of "truth-telling" since libel is necessarily untrue – though in proper journalistic fashion I have left out some particularly scabrous stories of institutionalised corruption that I believe to be true but for which I have insufficient evidence to avoid the possibility that reporting them might be construed as libel.

The case of corruption and other illegal or otherwise politically damaging behaviour among leaders of indigenous movement organisations is more complex, because although they are individually powerful figures, they represent

(in all the senses explored in this thesis) a genuinely "oppressed group", and the political consequences of their actions can bring serious damage to this group by legitimating the racist stereotypes that are used to perpetuate their oppression (as I discuss in Chapter 8). As Linda Tuhiwai Smith (1999) points out, contemporary ethnographers bear an obligation to apply particular ethical rigour to their dealings with and writings about indigenous peoples because of the historical association of ethnography with colonial exploitation and control of these peoples and their lands. Indigenous movement representatives in Brazil are quick to remind people of this by referring to the "500 years of oppression" they have suffered since Europeans first set foot in the country. I am not interested in using oppression as an excuse to protect corrupt representatives or cover up for behaviour that runs counter to my own ethical and political principles (after all, one of Denzin's principles is that "writers have a moral obligation to make public the course of action they favor"), but I do take the fact of oppression seriously and agree that it places specific ethical obligations on those who engage with the oppressed.

In such cases, I have decided to restrict myself to briefly reporting "the facts" as recorded in publicly available documentary evidence and analysed in existing secondary sources, while giving greater emphasis to analysing different actors' perceptions of those facts, based on interviews, workshop reflection sessions and study of different online and print media sources. In other words, I have avoided the temptation to indulge in investigative journalism in an attempt to uncover the "real" extent of corruption in the cases reported, and focused instead on interpreting perceptions of the evidence already in the public domain in order to tease out the implications of these perceptions for my research focus on representation.

1.4.2   Phases, moments, sites and sources

In his discussion of "post-Malinowskian fieldwork", Bruce Albert notes that for researchers involved in such fieldwork, "the time of observation, abandoning the photograph-like monographic fieldwork, converges towards the kinetic time of

long-term involvement" (1997: 61). My own "long-term involvement" is reflected in the fact that the data on which this thesis is based was collected in three phases – only one of which actually corresponded to my "official" fieldwork period. In the other two, "thesis-relevant" data collection (documented in personal diary notes, correspondence, newspaper articles and NGO and consultancy project reports) was an unintended consequence of what I was actually supposed to be doing.

The first and longest of these phases, from 1989 to 2004, covers the period between my first visit to the Amazon (as a very young and inexperienced would-be campaigning journalist looking for both a story and a cause) and the end of the last project on which I worked in the region before officially starting my DPhil (a DFID-funded study of participation and citizenship in Brazil that included a case study of the indigenous healers' movement of the Rio Negro region of Amazonas, one of my future DPhil study sites). Over the course of this 15-year period, for over half of which I was actually living in Brazil, I developed the personal and professional connections that shaped the possibilities of my DPhil fieldwork, particularly those with SSL (of which I became a founder member in 1994), with SSL's partners among the Acre and Rio Negro indigenous movement organisations and with my SSL friends and colleagues and future co-researchers Renato Athias, Elvira Toledo, Maria Bittencourt and Hélio Barbin. It was also during this period that I started to reflect on the issues that are addressed in this thesis, and became convinced that I needed to dedicate a period of my life to studying them in depth.

The third and shortest phase was a consequence of the fieldwork and proved to be something of an extension to it, though it required me to engage with different actors and work in a very different way. In April 2008 I became the project manager for a large piece of consultancy work on the Indigenous Health Subsystem, commissioned by FUNASA as part of the World Bank-funded "VIGISUS II" health sector reform project. This came about as a result of a request from SSL, which was seeking international partners to form a consortium and bid for the FUNASA consultancy contract. I convinced IDS Fellows Gerry Bloom and Henry Lucas and Vera Schattan Coelho of the São Paulo-based think-tank Cebrap (a friend and colleague with whom I had previously worked on an IDS-convened

international research programme on citizenship, participation and accountability) to join the bid, which we won after forming an IDS-SSL-Cebrap consortium.

My work with the consortium involved bringing together a team of two dozen Brazilian and international consultants to carry out a situation analysis of the Subsystem and prepare proposals for new "models" for health care, management, organisation, financing, monitoring and evaluation. Our approach combined desk-based analysis with an ambitious programme of multi-stakeholder workshops and field visits that involved over 400 indigenous representatives, district managers and health professionals across every region of Brazil. This project generated a lot of the background data used in this thesis; where this data was previously unpublished, I have been able to use it thanks to FUNASA's decision to publish our reports in April 2009, as this placed their contents in the public domain and released me from the confidentiality requirements of the consultancy contract. Working on the consultancy also generated some of the observation data used in this thesis, particularly in Chapters 4 and 9, and gave me insights into the workings of FUNASA which I had never expected to acquire – and which have ended up significantly shaping my overall analysis.

In between these two phases was my "official" fieldwork itself, which took place between September 2005 and March 2008. This extended period of two and a half years (rather than the eighteen months I had originally planned) was the result of interspersing my fieldwork with two periods of intermission and one period as a visiting fellow at Cebrap in São Paulo. Each period had a specific purpose – in the case of the intermissions to work directly on SSL projects, and in the case of the visiting fellowship to write a paper based on the Acre part of my fieldwork – but along with working towards these purposes I continued to "do fieldwork" by taking every opportunity to observe the ongoing policy processes that I was seeking to understand and to interview key informants who crossed my path.

This was in keeping with the broadly opportunistic and episodic nature of my research, which soon came to combine broad-brush investigation of representation processes with an in-depth exploration of particular "representation

episodes" or "critical incidents"[9] in which I was a direct observer or an "observant participant". These episodes have provided many of the stories that I have woven into the structure of this thesis, and much of my ethnographic data. They ranged from encounters with individuals to mass meetings, village gatherings to national policy conferences, internal indigenous movement discussions to state-sponsored "invited spaces" (Brock, Cornwall and Gaventa 2001).

Given that these were spaces as well as moments, I attempted to explore the "tracks and traces" (Cornwall 2002: 52) that had shaped the stories taking place in them as well as recording those stories as they unfolded. Thus, my ethnographic approach was both "multi-moment" and "multi-sited". The option to include multiple sites was a deliberate element of my research design, given my intention of tracking representation across different scales from the ultra-local to the supra-national, and my commitment to privileging sites associated with health policy processes that in Brazil are predicated on the movement of propositions and representatives from the local to the municipal to the state to the federal level. It was also a necessity in view of the "intense multilocality" (Andrello 2006) of the lives of the indigenous representatives whose stories I was seeking to observe; I had initially planned to accompany them from the village to the district and/or national level and back again, but instead often found that even among representatives who were not the hyper-visible "usual suspects", these journeys were punctuated both by long periods staying in regional administrative centres or larger cities and by a surprising amount of international travel, all of which was supported by extremely extensive social, political and kin networks.

Studying these episodes and spaces took me to a lot of different places, both within my two local case study sites of the Alto Juruá DSEI (*Distrito Sanitário Especial Indígena*, or Special Indigenous Health District) in Acre and the Middle Tiquié sub-region of the Alto Rio Negro DSEI in Amazonas. Although I describe them as "local", both of these sites are larger than the average English county and include several dozen indigenous villages (as well as towns with a partly or wholly non-indigenous population), scattered over hundreds of square miles of

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[9] I am indebted to Anne-Marie Goetz for pointing me in the direction of critical incident analysis in her comments after my Research Outline presentation at IDS in May 2005.

rainforest where access is mostly or exclusively by boat or small plane. These two sites, and the towns and villages in which I spent time during my fieldwork in each of them, are discussed in detail in Appendix A. Their general locations within Brazil are marked on the map in Figure 1.1 below, along with the geographical locations of a selection of the spaces and moments that featured in my research. These locations are superimposed on a FUNASA map showing the territorial division of the Indigenous Health Subsystem into Special Indigenous Health Districts (DSEIs) along with the administrative division of Brazil into the 26 States (including Acre and Amazonas) and the Federal District (the region around Brasília).

Figure 1   Brazil: Special Indigenous Health Districts and research sites

Médio Tiquié
DSEI Alto Rio Negro
(local fieldwork site)

São Gabriel da Cachoeira
*(DSEI centre and indigenous
organisation HQ: interviews,
workshops, movement assemblies)*

Manaus
*(Amazonas state capital:
interviews, FUNASA workshop)*

Cruzeiro do Sul
*(DSEI centre and indigenous
organisation HQ: interviews,
FUNASA meetings)*

Marechal Thaumaturgo
DSEI Alto Rio Juruá
(local fieldwork site)

Rio Branco
*(Acre state capital:
interviews, SSL workshop, State
Health Conference)*

Belém
(FUNASA workshop)

Recife
*(Indigenous Health Council
Forum planning meeting)*

Brasília
*(FUNASA and Ministry of
Health HQ, location of
Federal Senate: interviews,
meetings, workshops,
National Health
Conference, National
Indigenous Health
Seminar)*

Caldas Novas
*(National Indigenous
Health Conference)*

São Paulo
*(SSL headquarters and my
home base in Brazil:
interviews, seminars,
meetings, workshops,
library research)*

Map source: FUNASA 2005a

The settings in which the interactions I sought to document took place were extremely diverse – from the classic ethnographic location of a thatched hut in a remote village to the familiar development industry environment of a conference centre seminar room – and in the story excerpts in the text I have tried to give a sense of place as well as space and time for each episode. I considered including some of the thousands of photographs that I accumulated during the research, and

even finding a way to include some of the videos (both "participatory" and "non-participatory") that I and others made during the research process, as well as other visual and written artefacts – but in the end I decided to stick with "writing stories" rather than branching out into visual or other literary manifestations of what Denzin describes as "ethnopoetics" (1997: 227].

If my strategies for presenting my data have in the end been quite conservative, my strategies for collecting it have been eclectic, as "following the story" has required me to imitate other researchers who have used a strategy of "methodological hybridity" to deal with the unease that arises from shifting between analysing the story itself as a set of representations and treating it as something that has explanatory power and carries some elements of empirical truth. As James Fairhead and Melissa Leach put it, "one response to this inescapable unease is to accumulate multiple sources, and multiple perspectives, on any given issue, comparing them for their mutual support or inconsistencies, and interrogating them iteratively for the clues to 'facts' or representations which can be discerned" (1996: 16). This accumulation of sources makes it easier to practice what journalists call "fact-checking" and qualitative and participatory researchers call "triangulation" – described by Robert Chambers as "crosschecking and progressive learning and approximation through plural investigation" (Chambers 1994: 1254).

In Fairhead and Leach's case, the "multiple sources" used in their hybrid research strategy included "archival documents, the writings of colonial anthropologists and Guinean scholars, policy documents and reports, old and new aerial photographs and maps, oral accounts, interview data in villages and policy circles, participant observation, and village resource and vegetation surveys" (1996: 16). In my case, the sources also included many of those on their list: archival documents such as *Conselho* meeting minutes and internal FUNASA memoranda; Brazilian and international ethnographic writings on the indigenous peoples of Acre and Amazonas; policy documents and reports; oral accounts; village- and policy-level key informant interviews; and "observant participation". I

also made extensive use of online resources (databases[10], blog postings and newspaper articles) and of a number of participatory/rapid rural appraisal techniques (institutional mapping, social mapping and timeline/time trend analysis), as well as developing and applying two sets of questionnaires.

For the first of these surveys, I had the valuable assistance of my SSL colleagues Andrea Giberti and Nilda Rodrigues in applying a short (two-page) questionnaire with a sample of 38 "service user representative" delegates to the National Indigenous Health Conference in March 2006 (which is described in Chapter 9). This was used to generate the quantitative data on delegate profiles that is reported in Chapter 5. For the second, I used a much longer (seven-page) questionnaire with a total of 23 Local and/or District Indigenous Health Council representatives in Acre and Amazonas. Despite its structured appearance, this was not used to generate a quantitative dataset but rather to serve as a semi-structured interview guide, since I followed each group of "closed" questions with conversational prompts, and systematically encouraged interviewees to elaborate on their responses and complement them with narratives.

I took this approach after realising in my first few interviews that – contrary to my prior assumption that they would find a formal questionnaire more intimidating than a conversational interview – this group (all of whom were Portuguese-speakers and most of whom were literate) actually responded very positively to the air of "officialness" and transparency that the use of a questionnaire gave to the proceedings. This in turn helped them to engage with the conversational part of the interview, in settings where conversational interviewing is as artificial as questionnaire application: for people in remote and marginalised indigenous communities, there is absolutely no "normality" in white people simply turning up and trying to engage them in conversation.

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[10] The Brazilian government puts a remarkable amount of data online, including not only the survey and cartographical output of the excellent *Instituto Brasileiro de Geografia e Estatística* (IBGE) but also a mass of epidemiological information collected by the DATASUS system and detailed records of intergovernmental financial transfers down to the municipality level – a model of transparency that puts the UK to shame. Newspaper and magazine archives (especially *Veja* and the *Folha de São Paulo*) are another extremely valuable resource, and NGOs like *Conselho Indigenista Missionário* (CIMI) and *Instituto Socioambiental* (ISA) have comprehensive and easily-searched collections of reporting on indigenous people's issues – with the georeferenced indigenous territories database of ISA's *Povos Indígenas no Brasil* programme (pib.socioambiental.org) standing out as one of the best resources of its kind anywhere in the world.

In their dealings with "white" officialdom, indigenous representatives quickly become accustomed to form-filling; despite my lack of government affiliation this seems to have produced a perception of "officialness" for questionnaire-based interviews. Thanks to the questionnaire, the interview became a formal and structured interaction with a representative of white society, rather than a slippery and perplexing intercultural encounter with an unclear (and therefore suspicious) purpose. The sense of transparency came from the use of a written prior consent form[11] to give interviewees a clear "story" about what I was doing there and why I was asking those questions, as well as from the fact that they could see which boxes I was ticking and what comments I was noting down (as I tried to sit close to them and keep the questionnaire in plain view throughout each interview[12]).

The most common response among interviewees to being asked for consent was an insistence on their desire to put their experiences and opinions on record, both via the questionnaire form and also via audio recording of the interview, to which over 90% of them consented. This undoubtedly indicates that they regarded the interview as an opportunity for somewhat ritualised "public performance" of their role as representatives – literally public, in most cases, since privacy is virtually nonexistent in indigenous villages and just about every interview soon attracted a curious crowd. Fortunately, this is exactly what I wanted: my expectation was not that they would reveal their innermost thoughts to a visiting white researcher, but rather that they would help me to gain some insights into how they represented their work of representation.

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[11] The form contained an explanatory text agreed with the regional movement institution (FOIRN in the Rio Negro and OPIN in Acre), as well as boxes for interviewees to tick stating whether or not they agreed to the use of their names and to the recording of the interview. If the interviewees themselves could not read the form, I read through it with them in the presence of a literate community member. After we had both signed (or marked) it, I gave each interviewee a copy of the form as a record of the interview; I noticed that in most cases these copies were carefully filed away in the boxes or folders where the *conselheiros* kept the official papers that they had accumulated during their work as representatives engaging with officialdom.

[12] Though of course the English comments I scribbled in the margins of the questionnaire sheet beside the formal answers were not really "open" to them, and sometimes they did ask me to read back what I had written down – which required some fine judgement calls in balancing honesty and diplomacy.

This chapter has begun the task of "Locating Representation" by situating the concept in relation to contemporary political and theoretical debates, proposing a conceptual framework for understanding it and outlining my methodological, political, ethical and practical approach to researching it across different episodes, spaces and settings in Brazil. In the next two chapters I will seek to locate both the debates on representation and the sites of representation covered by my research in relation to the history of social movement-state engagements around health, rights and citizenship in democratic Brazil and to the specific dynamics of these engagements in Brazilian Amazonia.

Chapter 2. The Most Democratic Country in the World

2.1 Brazil's hybrid democracy: institutions and origins

Academia de Tênis Conference Centre, Brasília, 11 December 2003*. It is after 9pm, but the final plenary session of the 12th National Health Conference is still in full swing. After a day of introductory presentations followed by another day of intense discussion in almost 100 separate working groups, the 5,000 participants – including over 3,000 elected delegates from across Brazil – have converged on the cavernous main hall to vote on the final set of Conference resolutions. The session chair carefully reads out the propositions that have emerged from the working groups, couched in the language of parliamentary debate with their references to "clarificatory subclauses" and "suppressive amendments", before calling for speakers to propose and oppose them and finally for a vote – a show of hands in which delegates hold up their distinctive red badges (observers like me are given green badges, which makes it easy to spot any attempt to exceed our privileges and vote on the propositions). As it is read out, each proposition is projected on display screens beside the stage, which is dominated by a huge banner reading* Aqui É Permitido Sonhar *– "Here It Is Permitted to Dream".*

*The hall lies at the centre of the Academia de Tênis ("Tennis Academy"), Brasília's most prestigious country-club complex, a weekend playground for the city's élite and a weekday base of operations for regional politicians in town to do the rounds of the centres of federal power. In 1990, the Academia de Tênis served as a post-election headquarters for the government-in-waiting of Brazil's first directly-elected president after two decades of military rule: Fernando Collor de Mello, a scion of the traditional oligarchy and champion of neoliberal modernisation who was impeached for corruption two years into his mandate. Today, it has seen the recently-elected Luiz Inácio Lula da Silva, Brazil's first President of working-class origins, receive a rapturous response from National Health Conference delegates after a speech in which he praised their commitment to the struggle to build a decent health service for all Brazilians. But when Lula leaves and a hack from his Workers' Party (*Partido dos Trabalhadores, *or PT) tries to seize the opportunity to propagandise on behalf of the new government, he is drowned out by shouts of "*Plenária! Plenária!*" as delegates clamour to return to the debates of the final plenary session.*

There is a lot still to debate: literally dozens of motions on which the previous day's small-group discussions failed to find consensus, usually because they served as flashpoints for the latent tensions between different entrenched interests or ideological positions. One such motion condemns a bill currently under consideration in the Senate, which seeks to enshrine in law the doctors' monopoly of the right to prescribe medicines and to coordinate local health teams under the rapidly-expanding Family Health Programme (PSF). Despite vocal opposition from some of the doctors present, the motion is passed overwhelmingly, thanks to the votes of the hundreds of Conference delegates who work as nurses or community health workers in PSF teams.

Another controversial motion calls for abortion to be treated as a public health issue; it is still illegal in Brazil except in highly restricted circumstances, and

unsafe terminations are the single greatest factor in the country's scandalously high maternal mortality levels. The well-organised feminist health movement has fought hard for the motion and mobilises some eloquent speakers, but as they take their turn at the microphone I can see a flurry of activity on the floor of the hall being orchestrated by a Catholic priest who is standing in front of me in the observers' area. He shouts hurried instructions to a relay of delegates, who fan out through the hall to pass on the word.

When the vote comes, the motion is roundly defeated, with many of the same community health worker delegates who had pushed through the earlier motion to condemn the doctors' closed-shop legislation enthusiastically waving their red badges to demonstrate their opposition to the feminists' proposal. These delegates – mostly working-class women from the poorer regions of the country – are fervent believers in the cause of public health, but they are also dutiful Catholics, and many of them got their first training from the child health programme of the Catholic Church's Pastoral da Criança *(Pastoral Commission for Children). The padre's acolytes rush to the front of the hall to celebrate their victory over the feminists, and mill around next to the stage, where the session chair is trying to move the discussion on to another motion. He takes the microphone and addresses them sternly:* "Companheiros, *by standing at the front like this you are blocking the view of our other* companheiros *who are in wheelchairs... I must reprimand you for your anti-democratic gesture".*[13]

Brazil is, famously, a country where democracy doesn't stop at the ballot-box. Article 1 of the Constitution states that "all power emanates from the people, and is wielded either through elected representatives or directly, in the forms established by this Constitution" (Brazil 1988: 13). The Constitution does provide for direct democracy as conventionally understood, in the shape of referenda and "popular initiatives" that can be passed into law if they obtain sufficient support. However, these mechanisms have played a relatively insignificant part in the post-1988 development of Brazilian democracy, which has instead been dominated by an extraordinary proliferation of new democratic spaces (Cornwall 2004; Shankland 2006). The National Health Conference is just one of a vast array of spaces for the practice of what is variously described by international observers as associative democracy, participatory democracy, popular democracy, deliberative democracy or empowered participatory governance[14].

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[13] Part of this account of the 12th National Health Conference and some of the discussion of the origins of the SUS and its social oversight institutions has previously been published in two articles co-authored with Andrea Cornwall (Shankland and Cornwall 2007; Cornwall and Shankland 2008).

[14] See, for example, (Chalmers 1997; Fung and Wright 2003; Wainwright 2003; Coelho and Nobre 2004; de Sousa Santos 2006; Avritzer 2009; Houtzager and Gurza Lavalle 2009).

This chapter sets these new democratic spaces in context by giving a brief outline of Brazil's post-dictatorship redemocratisation process and the role played in it by social movement rights-claiming. It then provides an overview of the two processes of social movement-state interaction that have most strongly shaped the engagements analysed in this thesis. The first of these is the relationship between the *Movimento pela Reforma Sanitária*, or Movement for Health System Reform, and the development of Brazil's national health service, the *Sistema Único de Saúde* (SUS). The second is the relationship between the *Movimento Indígena*, or Indigenous Peoples' Movement, and the reshaping of *Indigenismo* – the set of policies, institutions and practices through which the Brazilian state and the organisations of non-indigenous civil society relate to indigenous peoples. I argue that each of these processes carries embedded within it a particular notion of democracy, one that emphasises either *democracy as inclusion* or *democracy as transformation*, and that analysis of both the affinities and the contradictions between these notions is essential if we are to understand the nature of Brazil's democratisation and the role of representation within it.

2.1.1 (New) democratic spaces in Brazil

Brazilian new democratic spaces exist at every level, from neighbourhood participatory budget meetings to the National Council for Social and Economic Development; some are mandated by national laws, while others have emerged from local political processes or ad hoc central government initiatives. The most widespread type of new democratic space is the sectoral policy council, or *conselho gestor de políticas públicas*, an oversight institution for policy implementation and planning with guaranteed representation of service users and "organised civil society" (Melo and Rezende 2004; Avritzer 2009). These *Conselhos* are complemented by *Conferências*, large-scale sectoral fora like the 12th National Health Conference, that are supposed to debate and agree the general direction of policy in that sector.

While the *Conselhos* and *Conferências* may appear to follow the logic of incorporating "deliberative democracy" as an alternative to "liberal democracy",

or "participatory democracy" as an alternative to "representative democracy", unlike the outside observers who frame such oppositions, most Brazilians do not classify what goes on in these spaces as a specific alternative form of democracy. They call it *participação popular* (popular participation), *participação da comunidade* (community participation), *participação da sociedade civil organizada* (organised civil society participation) or *controle social* (social oversight). They don't classify it as a specific form of democracy because for them it refers to a set of "participation" or "oversight" processes that take place inside institutions which are themselves an indivisible part of the country's democratic fabric.

The *Conselhos*, *Conferências* and other new democratic spaces such as public hearings (*Audiências Públicas*) are both parallel to and intimately bound up with the directly-elected legislatures and executive branches that exist at each of the three tiers of Brazilian federalism: the nation state (*União*), 27 states (*Estados*)[15] and 5,564 municipalities (*Municípios*), all of which are considered to be e*ntes federados*, or "parties to the federation" and are classified by the Constitution as "autonomous" (Brazil 1988: 29). The new democratic spaces are organised according to the same municipal-state-national hierarchy as the federation itself, and also largely mirror its sectoral organisation, since they are generally established around the same policy areas ("health", "education", "environment", "agriculture", "social assistance", etc.) as the municipal, state and federal secretariats and ministries. They often find themselves in tension with both the legislative and the executive branches at their level of government (even though they are themselves formally classified as part of the executive branch) – but they are hardly unique in this, since democratic governance in Brazil is marked by frequent clashes both between legislature and executive and between each of these branches and the judiciary (including the powerful oversight apparatus administered by the autonomous Attorney-General's Office, the *Ministério Público*). Although they are distinct from them in a number of significant ways –

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[15] Technically, there are 26 *Estados* and one *Distrito Federal*, as the Federal District surrounding Brasília has the political status of a state (including the right to elect *Senadores* and *Deputados Federais*) but the functions of a municipality, and does not include any *municípios* within its territory.

including their discourses and practices of representation, the principal focus of my analysis in this thesis – I would contend that the new democratic spaces are no less an integral part of Brazilian democracy than these other bodies.

The fact that "new democratic spaces" should considered to be part of the established apparatus of democratic governance rather than elements of a radical alternative to it is less surprising when we reflect that they are not recent add-ons to the existing system of Brazilian representative democracy but in fact are more or less contemporaneous with it. The first national *Conferência* to include large-scale participation of delegates from civil society and popular organisations was the 8th National Health Conference of 1986, held a year after military rule ended and almost three years before the first direct Presidential elections to take place since the 1964 coup. Participatory budgeting was first introduced in 1989, just a few months after the promulgation of the Constitution which enshrined the principle of autonomous municipalities run by a directly-elected mayor. Many of the municipalities that sent delegates to the 12th National Health Conference in 2003 didn't even exist at the time of the 8th National Health Conference in 1986, having emerged from the post-1990 wave of "bottom-up" local political restructuring (Souza 1997). Two of the state health secretaries at the 12th National Health Conference were representing the directly-elected governments of regions which until 1988 had been run from Brasília as Federal Territories. In Brazil, the contemporary forms of the country's directly elected municipal, state and even federal executives and legislatures are, relatively speaking, "new democratic spaces".

Leonardo Avritzer and Maria Pereira classify Brazil's new democratic spaces as "hybrid forms", on the grounds that they "involve a sharing of deliberative processes between state and social actors or civil society associations" (2005: 14). I would extend this argument to propose that Brazil's simultaneous institutionalisation of interlinked democratic spaces in the "political sphere" and the "participatory sphere" (Cornwall and Coelho 2006) has given it the characteristics of a "hybrid democracy". Just as Brazil's new democratic spaces cannot be understood in isolation from the context of electoral democracy and party politics in which they originated and within which they operate, the

institutions of Brazilian representative democracy cannot be adequately analysed unless they are seen as part of a larger constellation of institutional arrangements through which citizens engage with the state – or rather, as I argue in this thesis, through which both citizens and the state are *represented*. I argue that the overall outcome of Brazil's adoption of a "hybrid" form of democracy is deeper, broader and more effective representation at the societal level, but this is not a simple consequence of multiplying the number of available democratic spaces. Representation is both a strength and a challenge for new democratic spaces, and both an input and an output in their intricate and complex political relationships with the other spaces that make up Brazil's hybrid democracy.

Many of these relationships and their complexities were evident at the 12th National Health Conference, described at the start of this chapter. As the final plenary session vividly illustrated, participatory and deliberative-democratic spaces are permeated by party politics, but not simply subordinated to it: a plurality of delegates to that Conference may well have been PT members, and those who belonged to other leftist parties (probably a majority) may well have supported Lula, but attempts to hijack the session for government propagandising were roundly rejected in favour of a return to debates where participants' positions cut across party lines. At the same time, self-conscious echoes of formal representative democracy were present in everything from the phrasing of amendments to the use of majority voting, and appeals to democratic values were on the lips of delegates and organisers alike – possibly in response to the challenges to the political legitimacy of *Conselhos* and *Conferências* that have come from elected politicians at every level throughout the history of these new democratic spaces. Lula's new Minister of Health was marking a departure from the posture of his predecessor in the Cardoso government – who was notorious for refusing to be bound by the decisions of the National Health Council – when he indicated that he regarded the deliberations of the 12th National Health Conference as both legitimate and binding on government policy, telling

delegates that the forthcoming National Health Plan would be based on the *Conferência*'s final report (Shankland and Cornwall 2007: 185)[16].

While Brazilian citizens hold politicians in low regard and complain that they feel distant from their elected representatives in Congress (Latinobarómetro 2007), participants in the 12th National Health Conference emphasised its legitimacy in "representing Brazil". This claim was based on the inclusiveness of the process; it was the culmination of a sequence of local, municipal and state conferences that had taken six months and mobilised over 300,000 people from every corner of the country, 3,000 of whom had finally been elected as delegates. Andrea Cornwall, who also attended the Conference, reports that one delegate turned to her excitedly in the lunch queue and said "this is Brazil – all of Brazil is here!". As she and I have reported elsewhere, "data gathered by the Ministry of Health on participants reveal that close to 50% were women, and over 40% self-identified as black. Less than 30% of the health service user representatives had university education, and some 71% of all delegates had never attended a national health conference before" (Cornwall and Shankland 2008: 2177).

It is this inclusionary ideology, and the extraordinary level of energy and resources which state and citizens alike commit to putting it into practice, that marks contemporary Brazil's hybrid form of democracy out as exceptional. It is an ideology that has contributed hugely to the remarkable efforts to broaden representation in the country, at the same time as it has generated some of the tensions between inclusion and difference whose consequences for the representation of indigenous peoples are analysed in this thesis. These tensions, in turn, reflect others that are deeply rooted in Brazil's history and its enduring legacy of inequality.

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[16] In event, this was never put to the test, because the debates over controversial issues in the final plenary proved so intractable that the Conferência failed to vote on all the outstanding motions before it ran out of time on the final day; by the time its final report was concluded almost a year later, after a tortuous process of regional ratification meetings, the Ministry had already gone ahead and drawn up the National Health Plan without it. This example of *non-bindingess* mirrors a wider trend among new democratic spaces whose deliberations are supposedly binding, which I analyse in Chapter 9.

2.1.2 Representation and inequality

If the commitment to inclusion that marks contemporary Brazilian "hybrid democracy" is exceptional in terms of international comparisons, it is even more so in terms of the country's own history, which is deeply marked by the legacy of genocidal colonial conquest, four centuries of slavery and massive social and economic inequalities. The state's role in entrenching these inequalities has frequently provoked a violent popular response: for most of the period between the arrival of the Portuguese in 1500 and the post-military Constitution of 1988, the characteristic form taken by reactions of the marginalised, excluded and oppressed against the extension of state power was not democratic mobilisation but armed revolt.

In addition to acts of violence against representatives of the state and of the landowning élite (who were generally the same people), in every part of Brazil the most significant revolts – from the *Cabanagem* in the Amazon in the 1830s to the *Contestado* in the South in 1912-16 – included the creation of separate, self-governing polities. Indeed, it could be argued that some of the "revolts" that have the strongest grip on the Brazilian popular imagination, such as the great Afro-Brazilian *quilombo* of Palmares ruled by Zumbi in the 17th century or the "New Jerusalem" of Canudos founded by Antônio Conselheiro in the 1890s, were not in fact insurrections directed at changing the governance of the state, but attempts to constitute a separate political space where its writ did not run at all.

A quick scan of the country's history is therefore sufficient to bring into perspective the enormous historical significance of the social movement engagements with the state that emerged in the closing years of the dictatorship and have continued to shape Brazil's hybrid democracy ever since, in what Anthony Bebbington and Willy McCourt have described as the successful institutionalisation of a "burst of social energy" (Bebbington and McCourt 2007: 240). The mobilisations giving rise to these engagements have sought not to break off relations between state and people but to reshape them, and this aim has largely been pursued by non-violent means – two characteristics that mark these

movements out as almost unprecedented in the history of popular mobilisation and state response in Brazil.

The significance of the fact that social movement-state engagements have privileged non-violent practices is magnified still further when we consider not only Brazil's violent past but also its violent present: the country's extraordinarily high murder rate, the "gun law" that prevails in sizeable areas of the country (most notoriously the Amazon frontier) and the fact that in the cities daily acts of violence "generate a constant underlying fear, which pervades people's daily lives to different degrees and in different ways" in both middle-class neighbourhoods and *favelas* (Wheeler 2009: 94). Despite the fact that violence is undoubtedly a pervasive presence in contemporary Brazilian life, and despite the continuing (albeit slowly declining) incidence of police violence and political murder during land conflicts and the threat of violent action deployed in some popular mobilisations (including those of indigenous people, as explored in this thesis), armed violence is *not* a general characteristic of social movement-state engagements in Brazil. Equally surprisingly, despite the death threats that politicians in "authoritarian enclaves" (Fox 1994) still make against civil society critics or opposition-party challengers, the electoral contests of Brazilian representative democracy are remarkably free of violence. Elsewhere in Latin America, as well as in both "new" and "established" democracies from Sub-Saharan Africa to South Asia, political contests in highly unequal polities are associated with widespread armed violence – but not in Brazil, where for all the "fighting talk" deployed at election time, electoral violence and the assassination of political rivals are relatively rare even in the most lawless parts of the country.

I argue that the fact that the deep inequalities that have generated extreme violence in Brazil's past and that continue to contribute to a pervasive "violence of everyday life" (Scheper-Hughes 1993) in Brazilian society have not led to a predominance of violence in either social movement-state engagements or electoral contests is a highly significant indicator that Brazilian "hybrid democracy" is getting something right – and that that something has to do with both managing and reducing inequality. At an IDS seminar in 2003, Zander Navarro remarked that "to understand Brazil, you must realise that it is the most

democratic country in the world, and also one of the most unequal". This thesis examines the relationship between specific aspects of Brazilian democracy and of Brazilian inequality, and in Chapter 10 I ask whether the former has simply evolved into a means of enabling the élite to manage the social tensions associated with the latter, or whether democratisation has *in and of itself* reduced inequality.

My argument does not presume a direct causal link between greater democracy and reduced income inequality. After all, the celebrated recent fall in Brazil's Gini coefficient did not begin until more than a decade after the country's return to full democracy, and has been convincingly attributed to the combined effects of a relatively small number of redistributive policies and some underlying trends in the labour market – factors that have no intrinsic relationship with the political system and that have also played a part in lowering income inequality in undemocratic settings such as post-war East Asia (Paes de Barros, de Carvalho, Franco et al. 2007). Nor does it focus only on the relationship between participation and redistribution that has been identified by some authors writing on Brazil (Avritzer and Navarro 2003), though it does seek to explore some of the micropolitical dynamics of this relationship as they affect access to services. My argument centres, instead, on the reconfiguration of representation that has taken place in, through and alongside the proliferation of new democratic spaces in Brazil, and its role in shifting what may be termed "inequality of voice" (Skocpol 2004). In Chapter 8, I give a detailed account of two cases in which a reduction in "inequality of voice" in favour of indigenous representatives contributed to a reduction in material inequalities of access to services between indigenous and non-indigenous Brazilians – though not directly, not evenly and not without presenting those representatives, their organisations and their *Movimento* as a whole with some difficult and even existential challenges.

Brazil's turning away from violence and institutional rupture as strategies for responding to inequality and onto the path of hybrid democracy had its symbolic foundational moment: the shaping of the post-military "Citizen Constitution" in 1987-88. In the next section, I examine the implications of this moment for the social movement-state engagements that I analyse in this thesis.

2.1.3 New democratic language, new democratic rights, new democratic spaces

Marcus André Melo has described the 1987-88 Constituent Assembly as "a key episode in the transition to democracy" because it "encompassed the redesign of many political institutions, and also new social and political rights" (Melo 2007: 36). It was also the moment at which a new democratic language became institutionalised, centred on *democracia* (democracy) and *cidadania* (citizenship). These two concepts were to become inextricably interwoven in subsequent social movement-state engagements in Brazil, to the point where they acquired a rich and complex range of meanings-in-practice, with nuances unique to the Brazilian context (Cornwall, Romano and Shankland 2008).

According to Evelina Dagnino, this apparently universal language began to acquire its layers of specifically Brazilian meaning in the 1980s, as part of a process of redefinition of the notion of citizenship that "pointed in the direction of a society that was more equal at every level, based on the recognition of its members as *subjects endowed with rights*, including the right to participate effectively in the management of society" (2002: 10, emphasis in the original). This active notion of citizenship linked it directly with democracy through the notion of citizen engagement with the emerging new democratic spaces. Although these spaces were formally created by federal legislation (such as the Basic Health Law discussed below) or by subnational governments (such as the Workers' Party municipal administration that introduced Participatory Budgeting in Porto Alegre in 1989), the "social energy" responsible for their creation and for securing the Constitutional provisions that made them possible originated in civil society. Evelina Dagnino links the emergence of these new democratic spaces to a wider effort on the part of civil society towards the "construction of *public spaces*, both those seeking to promote broad debate within civil society on issues / interests hitherto excluded from the public agenda, and those established as spaces for broadening and democratising the management of the state" (*ibid.*, emphasis in the original). One legacy of this origin is the marked Brazilian tendency to conflate "citizen participation" with "participation of civil society organisations", a tendency that is present both in everyday discourse among state

and social movement actors and in the Constitutional and legal framework that governs the new democratic spaces (Houtzager and Gurza Lavalle 2009). This has obvious implications for the framing of representation in new democratic spaces – an issue to which I return at various points in this thesis.

If the proposals for new democratic spaces that Brazilian social movements took into the Constituent Assembly reflected a particular notion of citizenship deriving from the "process of redefinition" that took place during the 1980s, they also reflected the experiences of these movements in their confrontations with the military régime over the preceding decades. The popular movements' quarrel with the "bureaucratic-authoritarian" state was that it was both too exclusionary and too invasive: the military's development model systematically excluded large segments of the population from benefits and services, while at the same time impinging on the lives and livelihoods of ordinary Brazilians without either consulting them or giving them any scope for redress. The challenge, therefore, was to promote inclusion – thereby expanding the reach of the state – while at the same time guaranteeing enough social accountability to ensure that an increase in state responsibility did not equate to an increase in unfettered state power. Out of this tension came the notion of *controle social*. Generally translated as "citizen oversight", *controle social* evokes the idea of control not of society by the state, but of the state by society.

The interplay between inclusion and *controle social* came in turn to permeate social movement understandings of both *democracia* and *cidadania*: in the context of social rights struggles, "democratisation" came to mean both broadening access to services and redistributing power over them, while "citizenship" came to mean both acquiring the full range of social and political rights and participating actively in the struggle to uphold them. In the next section I examine this interplay in detail in the context of social movement-state engagements in the field of health policy, which became the epitome of "democracy as inclusion" and which pioneered both the ideology and the institutions of *controle social*.

2.2 Democracy as inclusion: the SUS

2.2.1 From the Movimento Sanitarista to Controle Social

For most of the second half of the 20th century, poor Brazilians' experiences of the public health system were characterised by exclusion from regular access to curative services, coupled with sporadic interventions by vertical disease control programmes. Access to medicines was dependent either on ability to pay or on client relationships with the political patrons who controlled the public supply. Because the official public health service was centred on large hospitals in major urban centres, in practice it excluded the rural poor and residents of smaller towns. Because it was contribution-based, it excluded the urban and peri-urban poor, who were jobless or worked in the informal sector (Costa 2007: 134). Where sporadic outreach initiatives did extend some state curative services into rural areas, they tended to be driven by geopolitical and economic considerations rather than by any notion of a citizen right to health care. As I discuss in detail in Chapter 4, it was the logic of preserving workforce productivity in the Amazon rubber estates that drove the creation in the 1940s of Fundação SESP (the Public Health Services Foundation), the first public health institution to develop a regular presence in the country's remote interior – not any notion of a citizen right to health.

The process of mobilisation and "state-society convergence" (Fox 1996) that shifted policy away from this centralised and selective logic towards decentralising and rights-based health reform has been widely recognised as one of the most successful and durably influential of all the social movement-state engagements which marked Brazil's democratic transition[17]. Monika Dowbor has pointed out that although it reached its triumphant high point in the late 1980s, it origins go back before the democratic "opening" (Dowbor 2008). As the deepening economic crisis of the late 1970s and early 1980s weakened both the

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[17] This section draws extensively on material which I contributed to a paper co-authored with Andrea Cornwall, "Realizing Health Rights in Brazil: The Micropolitics of Sustaining Health System Reform" (Shankland and Cornwall 2007), published in *Development Success: Statecraft in the South*, edited by Anthony Bebbington and Willy McCourt (Basingstoke: Palgrave Macmillan 2007).

military dictatorship's grip on power and the state's ability to fund even the limited existing public health services, policymakers began to cast around for alternative models (Coelho, Andrade and Montoya 2002: 66). This provided an opening for reformers who had been involved in piloting more inclusive "community health" approaches in local projects sponsored by universities or the Catholic Church to begin to occupy key positions in the federal and state-level health bureaucracy, while maintaining their links with the emerging grassroots health movement (Melo 1993; Weyland 1995; Costa 2007).

This movement had gathered strength under the dictatorship as health emerged as one of the few arenas where popular mobilisation was not met with immediate repression and where middle-class professionals were able to engage with communities without attracting the attention of the secret police. One of its key centres was in the East Zone of São Paulo, where community activists set up the first *Conselhos* as popular spaces for demanding health service accountability. Though they were initially created outside the health system's legal framework, these *Conselhos* were to prove highly influential in shaping the provision for participation and accountability in later Constitutional and sectoral reforms (Costa 2007: 139). As I noted above, the struggle for democratisation in the concluding years of the military dictatorship was marked both by deep mistrust of the "bureaucratic-authoritarian" state among social movements and by the desire on the part of reformers aligned with these movements to maintain the centrality of the state in the implementation of policies to tackle the country's profound social and economic inequalities. This led to the framing of participation both as a right in itself and as a mechanism for *controle social* of state-implemented social policies in health system reform proposals, which in turn came to influence the wider turn towards the incorporation of new democratic spaces into Brazil's process of redemocratisation.

During the 1980s, ad hoc alliances between community activists and progressive professionals coalesced into the *Movimento pela Reforma Sanitária* (Movement for Health System Reform). The movement became known more colloquially as the *Movimento Sanitarista* (Public Health Movement), as a result of the prominence of public health specialists (notably those based at the FIOCRUZ

National School of Public Health in Rio de Janeiro) among its leading figures. Marcus André Melo has described the movement as the paradigmatic case of an 'issue network' led by technically-minded reformists, while recognising that health reform had also become a "key demand of the popular sectors" (Melo 1993: 149-150). As leading *sanitaristas* increased their penetration of the redemocratising state and secured key posts in the Ministry of Health, they were able to open new spaces for the "Popular Health Movement" and other non-élite actors (such as CONTAG, the rural workers' confederation) to voice their demands for reform. Through this process, the movement took on the characteristics of what Jonathan Fox describes as "state-society convergence" (Fox 1996).

This convergence was evident in the symbolic high point of the *Movimento Sanitarista*, the 8th National Health Conference of 1986. Orchestrated by *sanitaristas* based at FIOCRUZ and in the Health Ministry and attended by thousands of community activists from across the country, the Conference proclaimed health to be "the duty of the state and the right of the citizen" and enshrined key principles of universality, decentralisation and participation as the normative basis of health system reform. Two years later these principles were written into the Constitution, and in 1990 the framework for operationalising them was established by the *Lei Orgânica da Saúde*, creating the SUS – the *Sistema Único de Saúde*, or Unified Health System – as the mechanism for universalisation of services.

2.2.2   New democratic spaces and the SUS epistemic community

For most of its two decades of life, the SUS has faced a deeply hostile macropolitical and macroeconomic environment, including a prolonged fiscal squeeze and an ascendant "neoliberal" tendency in federal government policymaking between 1990 and 2002. Despite this unpromising context, it has not only survived but become hegemonic, to the point where just fifteen years after its creation Marta Arretche could conclude that its institutionalisation was in effect irreversible, evidence of a "paradigm shift [that] replaced a centralized

health care system based on contributory principles with one in which the *legal right* of free access to health actions and services at every level of complexity is universal and in which service provision is organised through a decentralised hierarchy" (2003: 332, emphasis in the original). As Brazilians say, the SUS had ceased to be a *política de governo* (a government policy, vulnerable to changes in political fortunes) and become a *política de estado* (a policy of state, backed by a broad political consensus and embedded in the country's institutional structures).

Why this should be so calls for some explanation – especially as this success was achieved despite the fragmentation of the *Movimento Sanitarista*, which by the mid-1990s had ceased to operate as a unified political force, as the many leading *sanitaristas* who had been drawn into SUS administration became absorbed in bureaucratic turf wars, and their allies in the Popular Health Movement turned from demands for broad health system reform to emphasising localised claim-making (Weyland 1995). In an article which we wrote while I was doing the research for this thesis, Andrea Cornwall and I reviewed the possible claims of different macropolitical and micropolitical factors (including the bargains the SUS struck with the private sector and subnational governments and the role of political leadership) and argued that a strong case could be made for recognising the institutionalisation of *controle social* as one of the most important drivers of the system's survival and growth (Shankland and Cornwall 2007).

This process of institutionalisation began with the *Lei Orgânica da Saúde*, whose legal framework included a requirement for municipalities to establish *Conselhos* with 50% user representation and extensive powers of service and spending oversight, as a condition for federal transfers of funding for health services. While the first *Conselhos* had emerged as a result of bottom-up mobilisation, it was this centrally-imposed "participation conditionality" which spurred a massive proliferation of *controle social* institutions at the municipal level throughout the 1990s – with no fewer than 98.5% of municipalities having established a health *Conselho* by 1999 (Melo and Rezende 2004: 46).

There is a large and growing literature on Brazil's health councils, but most of it has focused on what they *don't* do. In particular, many authors have pointed

out that they do not guarantee the inclusive deliberation processes for which deliberative democrats advocates would hope, the reconfiguration of power relations that the campaigners for *controle social* who created them had in mind or the binding decisions that their statutory status as part of the machinery of executive government would lead us to expect. Despite the strength of formal provision for *controle social*, a number of studies have drawn attention to the limitations of the *Conselho* system in ensuring accountability and pro-poor targeting of health spending. These failings have been attributed to the persistence of authoritarian social relations and the attempts by mayors to pack *Conselhos* with their own political clients (above all in smaller, more rural municipalities), as well as to the tendency of bureaucrats and health professionals to privilege 'technical' discourses, excluding traditional and popular knowledge from Councils' deliberations (Coelho, Andrade and Montoya 2002). As Marta Arretche (2003) points out, a recurrent conclusion of these studies is that the scope for effective *controle social* is strongly dependent on the commitment of local politicians and technical staff to making participation work – in other words, on the kind of 'state-society convergence' which the *Movimento Sanitarista* initially fostered but whose operation at the local level has been extremely uneven across Brazil. This, in turn, is a key ingredient in achieving the *bindingness* to which new democratic spaces aspire when their legal status is classified as *deliberativo* – which in the Brazilian sense means "statutorily empowered to make binding decisions" – an issue to which I return in Chapters 9 and 10.

My research has certainly generated plenty of evidence to support claims that the *Conselhos* built into the architecture of the specific "subsystem" of the SUS responsible for indigenous health (described in detail in Chapter 5) do not do much of what they are supposed to do. Rather than dwelling on these shortcomings in relation to normative aspirations for *controle social*, however, in this thesis I have tried instead to concentrate on working out what they *do* do, at least in the specific context of the Subsystem.

This represents a continuation of the effort I began with Andrea Cornwall in the article mentioned above, when we tried to work out why the *controle social* architecture of the SUS was perceived as so important by so many of the people

we interviewed when it was clearly failing to deliver on many of its supposed functions of ensuring accountability and responsiveness. We came to the conclusion that *Conselhos* and *Conferências* in fact made an enormous contribution to ensuring the survival of the "SUS Project" despite the hostile macroeconomic and macropolitical context and the fragmentation of the social movement which gave rise to it, because they functioned as spaces for the reproduction of SUS ideology and the recruitment of new adherents, operating at the interface between citizens and the state in a way which is distinct both from the "invited spaces" (Brock, Cornwall and Gaventa 2001) promoted by progressive bureaucrats in Jonathon Fox's model of "state-society convergence" (1996) and from the outside-the-state building of popular pressure which is the conventional model described in the social movement literature.

As I noted above, the SUS participation institutions, the *Conselhos* and *Conferências*, operate at the local, municipal, state and federal levels. While their density tends to be significantly higher in wealthier, more urbanised regions with a history of civil society organising, they exist in some form or another in virtually every municipality in Brazil. This gives them an extraordinary capillary reach. As the example of the 12th National Health Conference illustrates, their deliberations have involved literally hundreds of thousands of citizens, many of whom had never before been given the chance to have a say in the governance of any of the services on which they depend. The statutory status of municipal, state and federal *Conselhos* as *deliberativos* may not always have translated into effective practices for securing accountability, but it has imbued them with a political weight far greater than the consultative "invited spaces" that have proliferated in Brazil and elsewhere in recent decades (Cornwall 2007).

The multi-layered nature of the SUS's participation mechanisms has also provided opportunities for engagement to a huge variety of different actors at different levels, from grassroots Catholic Church health workers in rural municipalities to regional feminist health networks to national health policy specialists. The *controle social* spaces of the SUS are linked in turn with the institutions of representative democracy through the *bancada da saúde*, a Congressional caucus whose cross-party composition has helped to ensure that

the "SUS project" does not fall victim to changes in the political fortunes of particular parties, and which remains one of the most significant forces to be reckoned with in the national legislature (Duncan Semple, pers. comm. 2005).

These participatory institutions have also provided a focus for successive waves of emerging social movements to engage with the SUS. The influence of the Popular Health Movement may have waned, but others have taken its place. The feminist health movement has secured a significant voice in the shaping of the SUS at the regional and national levels. Catalysed by debates over the national HIV/AIDS policy, sexuality rights groups have increasingly moved centre-stage. Growing recognition of the need to address the health issues of Afro-Brazilians (Oliveira 2002; Maio and Monteiro 2005) has accompanied an increased presence of the *Movimento Negro* in SUS participation fora in recent years. And, as I discuss in detail in this thesis, since the transfer of responsibility for indigenous health care to the Ministry of Health in the late 1990s, indigenous peoples' organisations have become increasingly visible in health policymaking, a process that has included the reorganisation of the National Health Council to include indigenous representatives. Each of these movements has come in turn to identify the SUS as a key site of struggle for its rights claims.

The cumulative effect of these multiple inclusionary processes – bringing previously excluded citizens into local-level spaces and new waves of social movements into higher-level engagement – has been a continual deepening and broadening of the range of actors committed to the "SUS Project". Unlike the *Movimento Sanitarista*, this is not a recognisable "movement" with a single platform and identifiable leadership group. Though it includes some formal networks, and a classic semi-formal political coalition in the shape of the *bancada da saúde*, it is bound together by shared visions, values and discourses rather than by a coherently-articulated set of strategic goals. This diverse collection of actors in fact forms a potent "epistemic community" (Haas 1992), whose power operates at the discursive and ideological level to sustain the political momentum for rights-based health reform in Brazil.

In Chapter 4 I examine in depth the representations of health, democracy and citizenship that are espoused by this epistemic community, and explore how

they serve to frame indigenous people and their health rights claims. Here, I will focus on the insistence of the SUS epistemic community on *universality*, *decentralisation* and *participation* as core principles of the rights-based health reform model. As I noted above, these principles (along with "comprehensive care") are proclaimed in the Constitutional text that established the legal and political basis for the SUS, in the section of the Constitution which begins by declaring that "health is the right of all and its provision is the duty of the state, guaranteed through social and economic policies to reduce the risk of disease and other harmful conditions and to ensure universal and equal access to services" (Brazil 1988: 120).

The struggle for universality that the *Movimento pela Reforma Sanitária* took into the Constituent Assembly was focused on inclusion, as its central demand was for the extension of a uniform set of health rights to all Brazilians. This was (and continues to be) described as the "democratisation" of a public health system that had hitherto largely excluded the vast majority of poor Brazilians (Costa 2007: 134). The SUS has since its inception pursued this agenda of "democratisation" by seeking to expand the coverage of a universalising health system model – generally conflated with provision of an identical package of services throughout Brazil. This expansion has brought the SUS into parts of Brazil that are both geographically and socially far removed from the heavily-urbanised coastal regions for which its service package had originally been conceived, such as the remote Amazonian municipalities were I did my local-level fieldwork. This has now begun to lead some commentators and policymakers to reflect on the inability of its "one size fits all" approach to deal with the specific challenges of remoter settings and minority populations (Conselho Nacional de Saúde 2008a: 4), though – as my analysis in Chapters 4 and 5 demonstrates – such questioning has yet to be reflected in the mainstream of *sanitarista* thinking.

Of all Brazil's minority populations, it is indigenous peoples who have posed the greatest challenge for the SUS. As I explore in this thesis, this challenge relates to all the key SUS principles. The principle of decentralisation has been understood since the 9th National Health Conference of 1992 to refer to the imperative to transfer service delivery responsibilities to the municipalities (Costa

2007: 146) – but Brazil's indigenous territories do not fit within municipal boundaries, and political tensions between local elites and indigenous communities make the latter extremely reluctant to accept the transfer of control over their health services to municipal mayors who may be implicated in attempts to dispossess them of their land or plunder their natural resources.

The SUS principle of participation is associated in the Constitutional text on health care with "community participation" (Brazil 1988: 121), but as I discussed in Section 2.2.2 in Brazil this is generally conflated with the participation of "organised civil society". In the health sector, SUS ideologist Gilson Garvalho points out that it has long been interpreted to mean participation by "representative bodies of social segments" (Carvalho 2007: 64). This raises issues around adapting indigenous understandings of representation to fit the standard SUS model that I explore in depth in Chapter 7.

The challenge for the SUS principle of universality is even more fundamental: it relates to the tension between the universalising notions of inclusion, citizenship and democracy that animated the struggle of the *Movimento Sanitarista* to create the SUS, and the claims for recognition of radical difference that have been a central feature of indigenous movement organising. In the next section, I examine how this tension has played out in the engagements of the indigenous peoples' movement, the *Movimento Indígena*, both with the state and with non-indigenous civil society.

2.3 Democracy as transformation: the *Movimento Indígena*

Rainforest Action Network Headquarters, San Francisco, California, 25 April 1991. *The press conference is over, and I am chatting to Antônio Batista de Macedo, leader of the Juruá Valley branch of the National Council of Rubbertappers, about where he and the other Forest Peoples' Alliance representatives will be going next. They are travelling with Brazilian singer Milton Nascimento, who has invited them to join him on his US tour in a combined effort to promote the Alliance's message of community-based rainforest conservation and Milton's new album,* Txai. *The album (named after a Kaxinawá kinship term that has become the favoured greeting among Alliance activists) was inspired by a trip to the Juruá Valley which Milton made last year. I missed that trip, but I am not surprised that Milton found it inspiring: I have already fallen in love with the Juruá myself, having been there a few times in my dual role as a freelance journalist and a part-time propagandist for the Forest Peoples' Alliance (Macedo jokingly told me "Now you're my Press Officer", after a profile of him that I wrote for The Guardian helped to bring in a rush of donations through the Gaia Foundation, the Alliance's London-based supporters). In fact I've turned into a bit of a groupie; I'm supposed to be on holiday, visiting friends here in California, but when Macedo told me he was coming to San Francisco with Milton I rearranged my schedule just so I could hang out with the rainforest leaders whose courage, vision and eloquence I have come to admire so much.*

The Forest Peoples' Alliance delegation is led by Aílton Krenak, the Coordinator of the União das Nações Indígenas *(UNI) who co-founded the Alliance with National Council of Rubbertappers leader Chico Mendes, a few months before Chico was murdered by ranchers in Acre. Underneath his ready wit and willingness to prick the racist pomposity of Brazilian officialdom, I have always felt that Aílton radiated great serenity – a rare thing in the febrile world of indigenous-environmentalist politics. Now, however, he is looking uncharacteristically tense: someone has just handed him a fax, and its contents are obviously troubling him.*

Macedo goes over to Aílton, and he and the other leaders form a worried huddle as the sheet of fax paper is passed from hand to hand. It is an open letter issued in the name of UNI – not the national organisation headed by Aílton, but its former regional branch office for Acre and Southern Amazonas, which is now an independent organisation although it has retained the same brand name. The letter is a repudiation of the Forest Peoples' Alliance, of which the Acre UNI was a founder member but which it now denounces as a fraudulent plot by environmentalist NGOs seeking to undermine indigenous peoples' struggle for autonomy. It is also a vitriolic denunciation of Aílton, accused of arrogating to himself the right to speak for all indigenous peoples without having any mandate to do so, of living the big-city life in São Paulo while failing to communicate with the grassroots, and of profiting financially from his role as false representative and intermediary for money raised in the name of the indigenous peoples' movement. The Acre UNI coordinators have sent the fax to every international NGO whose contact details they have – including those, like the Rainforest Action Network, who have been working hard to make a success of this US tour.

I ask Macedo what it all means, as I try to make sense of the bombshell – I know that the Acre UNI leadership has become increasingly critical of the Alliance, but surely they must have realised how much damage this would do internationally to the movement as a whole, including them? "It was CIMI who put them up to this" he replies, referring to the Catholic Church's Indigenous Missionary Council. But why would CIMI do this, I ask – surely they are dedicated defenders of indigenous rights? "The padres *can't stand seeing indian leaders growing outside their control," Macedo replies, "and they know Aílton doesn't want to take orders from the Church – so if they can't control UNI, they would rather destroy it".*

The episode narrated above was the first time that I can remember becoming aware of the faultlines over which a group of indigenous leaders first built the precarious edifice of the *Movimento Indígena* in the 1980s. When I started my PhD fieldwork some 14 years after I witnessed the moment when Aílton Krenak's crisis of representation exploded into the public sphere, the same faultlines were still there, and subsequent tremors had brought down the Acre leaders who had denounced Aílton in 1991. At the time of writing, 18 years after the collapse of Aílton Krenak's UNI, the Acre UNI has followed it into oblivion and Brazil still does not have a single recognised organisation representing the *Movimento Indígena* at the national level. As I will show in later chapters, however, this does not mean that the *Movimento Indígena* has ceased to exist, nor does it mean that indigenous political representation has waned. In fact, indigenous representatives are a more active and influential presence in Brazil's hybrid democracy than ever before, thanks to their skill in combining institutionalised participation in new democratic spaces with unruly direct action outside them.

In this section I explore the meteoric trajectory of the national *Movimento Indígena* from its origins to its triumphant intervention in the 1987-88 Constituent Assembly. I then examine the representation crisis described above and its aftermath, analysing the roots of this crisis in the questions of representation that I will explore in depth in later chapters. I conclude by examining the challenges that the movement has posed for state *Indigenismo*, for the universal notions of citizenship that underpinned the SUS and for Brazil's hybrid democracy as a whole – challenges that the movement's institutional instability has made more significant rather than less.

2.3.1   UNI, the Movimento Indígena and the "Citizen Constitution"

As I have noted above, the reconfiguration of civil society-state relations that began during Brazil's democratic "opening" and extended into the period of the Constituent Assembly and beyond privileged the representation of different groups of citizens via the formally-structured associations of "organised civil society". For Brazil's indigenous citizens, this represented a greater problem than it did for many other historically marginalised groups, from peasants to *favela*-dwellers, whose *movimentos* had a longstanding tradition of establishing formal organisations as a channel for collective action at different levels. Although there are now literally hundreds of indigenous organisations at the village, territory, sub-region and regional levels across Brazil (Ricardo and Ricardo 2006), when the *União das Nações Indígenas* was established in 1980, Brazil had virtually no formally-constituted indigenous organisations at any level.

The country's indigenous peoples – originally some two thousand culturally and linguistically distinct ethnic groups, linked by complex webs of enmity and alliance – had struggled for centuries to find an effective set of strategies for engaging with a state whose attitude to them veered from the paternalistic to the genocidal. Whether caught between the slavers and Jesuits of the colonial period or between the settlers and "indian protection agencies" of the Republic, "indians" were repeatedly forced to choose between armed resistance, which generally led to systematic punitive massacres, and pragmatic engagement, which generally led to outright imposition of control by missionaries or landowners (Hemming 1978; 1987; 2003). The survivors of this process, perhaps half a million people belonging to around 200 different ethnic groups, were scattered across Brazil's vast interior, cut off from one another in the islands of territory that remained to them, while many of their leaders joined the drift to the cities.

It was only in the 1970s that the first of a series of "indigenous peoples' assemblies" sponsored by the Catholic Church began the slow process of construction of what was to become the *Movimento Indígena*, initially a loose network of community associations, traditional chiefs and urban-based activists who had started to reclaim their own indigenous origins (Athias 2007: 121).

Aílton Krenak and his fellow future UNI leaders Álvaro Tukano and Marcos Terena were all university students when they became involved in the succession of meetings that ultimately led to the creation of Brazil's first national indigenous organisation. UNI's most successful early initiative was a slot on the University of São Paulo's radio station, called *Programa de Índio*, which ran political debates and discussion of indigenous rights throughout the 1980s (Pappiani 2009a).

The university connection was not accidental. Just as the *Movimento Sanitarista* had enabled middle-class intellectuals to engage with popular movements under the noses of the secret police because health was considered a "politically safe" area, so a large number of leftist intellectuals came to support the *Movimento Indígena* because the Left saw them as a proxy for the suffering Brazilian masses with whose organisations they were banned from engaging – a phenomenon that led to students and the urban Left in Rio electing the Xavante chief Mário Juruna to the National Congress in 1982, as Brazil's first and thus far only indigenous representative in the federal legislature (Ramos 1998: 115).

From the outset, there were clear tensions between indigenous representatives aligned with the Catholic *padres* of the Liberation Theology-inspired Indigenous Missionary Council (CIMI)[18], leaders belonging to groups like the Xavante who had reached an accommodation with the federal indigenous affairs agency FUNAI (*Fundação Nacional do Índio* or National Indian Foundation) and the UNI group with their links to NGOs, anthropologists and other university-based intellectuals. Alcida Ramos notes that "there was a moment, for instance, when 'CIMI Indians' did not mix with other Indians associated with NGOs and the Union of Indian Nations" (Ramos 1998: 103).

Despite its many internal divisions, the *Movimento Indígena* was galvanised by the opportunity of engagement with the Constituent Assembly in 1987-8. The national UNI spearheaded a brilliant campaign to enshrine indigenous rights in the new Constitution; when the Assembly initially rejected the *Movimento*

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[18] Though basically correct, "Liberation Theology-inspired" is a simplification: CIMI's engagement with indigenous movement organising did owe its impulse to the same wave of Liberation Theology inspiration that led its sister organisation CPT (the Pastoral Land Commission) to support the creation or the Landless Rural Workers' Movement (MST), but CIMI activists working in indigenous communities in fact follow an approach to socially engaged missionary work known as "Inculturation Theology". I am indebted to Cristina Pompa for pointing out this distinction (pers. comm. 2009).

Indígena's proposals, Aílton Krenak electrified the nation's media by standing on the podium in Congress dressed in a white suit and dramatically painting his face with black genipap juice as a sign of mourning. UNI's formal engagement with the Constitution-making process was backed by a rare display of unity both among the *Movimento Indígena's* own disparate membership and among the ideologically diverse Brazilian and international civil society groups that supported different parts of it. Aílton Krenak's skilful advocacy – complemented by the dramatic displays of paint-and-feathers authenticity mounted by a large delegation of Kayapó warriors – was triumphantly successful. By the end of the Assembly the campaign had both ensured that indigenous land and cultural rights were enshrined in Article 231 of the Constitution and secured the abolition of the legal basis of the *tutela* ("guardianship") system. This system had for centuries defined indigenous Brazilians as "wards of the state" on the grounds that they were "relatively incapable" (the same classification that was applied to "children and lunatics"), but Article 232 stated that "indians, their communities and their organisations may legitimately be parties to legal action that seeks to defend their rights and interests" (Brazil 1988: 136). These changes were so significant that Alcida Ramos has suggested that "we might well consider the order of things Indian as divided into B.C. (before the Constitution) and A.C. (after the Constitution)" (2002: 265).

This stunningly successful intervention in the Constitution-making process suggested a promising future for the *Movimento Indígena* in national politics. It coincided with another trend that seemed to promise even greater success: growing international concern over the threat to the world's natural resource base in general and to the Amazon rainforest in particular, which brought a new willingness both to recognise indigenous peoples as symbols of a less destructive relationship with "nature" and to shower them with money in order to reward this eco-stewardship. Despite the loss of Chico Mendes as a figurehead for the Forest Peoples' Alliance, his eco-martyrdom at the hands of ranchers in Acre had made the Alliance's brand stronger than ever and stimulated the flow of money into UNI's projects. The 1990s seemed set to be the decade when *Movimento Indígena* organising took off, both nationally and internationally.

In the event, little more than two years elapsed between the promulgation of the new Constitution and the implosion of UNI after the crisis triggered by the Acre leaders' letter. The Forest Peoples' Alliance, which I discuss in more detail in Chapters 3 and 8, had its legitimacy shot away by the same salvos that exploded Aílton Krenak's claim to represent Brazil's indigenous peoples. When the world's politicians, NGOs and media converged on Rio de Janeiro for the June 1992 "Earth Summit", avid for dialogue with the organisation that represented all native Brazilians (now internationally recognised as "guardians of the rainforest"), there was no such organisation to be found.

By 1992, Aílton Krenak had abandoned organised *Movimento Indígena* politics and was concentrating on communicating indigenous spiritual and ecological values through his NGO, the Nucleus for Indigenous Culture (NCI). The national *União das Nações Indígenas* had effectively ceased to exist. Álvaro Tukano, who had been one of the original co-founders of UNI in 1980, was being shunned by his former comrades and by the environmental NGOs for doing a deal with the notorious mining company Paranapanema in his home territory of the Rio Negro in Amazonas. Another co-founder of UNI, Marcos Terena, had formed something called the "inter-tribal council"; it managed to bring a number of international indigenous leaders together to ponder the fate of the planet in a specially-built "traditional" meeting-house at the Rio summit, but it was notably short on support from the domestic *Movimento Indígena*. It was a bad time for leaders who represented paint-and-feathers authenticity, too: in June 1992 I was in Rio working as a volunteer on another parallel event, the "Earth Parliament", organised by ethnobotanist Darrell Posey with the renowned Kayapó leader Payakan, but on the day Payakan was due to open the event the news broke that he had been accused of raping a young white woman, and the national news magazine *Veja* ran a picture of him on its front cover with the headline "The Savage". In the next section, I trace the sources of this collapse of representation at both the organisational and symbolic level to the faultlines I observed in the opening story, before going on to outline the post-UNI shape of the *Movimento Indígena* in Brazil.

2.3.2   Reconfiguring Movimento Indígena representation

In the immediate aftermath of UNI's implosion, many *Movimento Indígena* representatives and their non-indigenous allies assumed that it would soon be replaced, attributing its failings to Aílton Krenak and his fellow leaders (accused of being too centralising, too urbanised, too easily seduced by environmentalists bearing gifts) rather than any more existential difficulty in establishing national-level indigenous representation. CIMI, the Catholic Church agency accused by my friend Macedo of fomenting UNI's collapse, was soon sponsoring the first of its many attempts to establish such an organisation – all of which proved to be doomed. The longest-lasting of these, CAPOIB, the "Coordinating Body for Indigenous Peoples and Organisations of Brazil", was created in the mid-1990s and limped from crisis to crisis until it finally shut up shop in 2000. The current tentative attempt to replace it is the *Articulação dos Povos Indígenas do Brasil* (APIB), created in 2005 with an explicit self-identification as more of a network than an organisation; although APIB claims to represent a broad range of regional organisations through a 40-person Secretariat, it only attempts to promote concerted action once a year, with the ritual "Indigenous April" protests in Brasília around the official national "Day of the Indian" (Montejo 2005).

It is not as if there is any shortage of local and regional indigenous organisations to "coordinate" or "articulate" at the national level; in fact, such organisations have gone from being virtually nonexistent at the time UNI was created to proliferating at a dizzying rate (Ricardo 1996a; Ricardo and Ricardo 2006). Alcida Ramos (1998) describes this phenomenon as a result of the changes introduced by the Constitution, which as I noted above for the first time attributed legal personhood to indigenous people. Bruce Albert (2000), on the other hand, associates the proliferation of indigenous organisations with the emergence of a "Projects Market" during the 1990s, as funding became increasingly available from international NGOs and from the community development and service outsourcing programmes of the "neoliberal" state. In Chapter 8 I examine this process in some detail in two Amazonian regions, and look at how the *Movimento Indígena* has dealt with it at the regional level. Here, the key point to

note is that my findings suggest that the multiplication of indigenous organisations was associated not only with the economic opportunities provided by the "Projects Market" but also with the effort to give organisational form to indigenous representation in the face of the contradictory demands of the proliferating new democratic spaces of Brazil's hybrid democracy. These demands are contradictory because they require both the dispersed representation of specific ethnic, gendered, local and sub-regional indigenous identities and the centralised representation of what Beto Ricardo has called "the generic indian" (1996b).

The collapse of the national UNI has been attributed by many observers to the logistical and political difficulties of maintaining communication and constructing mandates across hundreds of linguistically and culturally distinct groups scattered over a continent-sized country (Ramos 1998; Maybury-Lewis 2002b; Hemming 2003). I would argue, however, that while these difficulties are very real, they only became insurmountable when there was a radical shift in the nature of the representational role played by the national *Movimento Indígena* organisation.

The "legitimation crisis" that destroyed the national UNI arose from a collision between two of the forms of representation that I discussed in Chapter 1: that is, between representation as *signification* and representation as *acting substantively for others*. Aílton Krenak and his Kayapó allies had achieved their brilliant success in the Constituent Assembly by deploying "signifying practices" (Hall 1997) to represent an essentialised indigenousness in support of their rights claims. This representation could count on broad support across the disparate *Movimento Indígena* because it was confined to the abstract terrain of arguments over the nature of Brazilian citizenship, and on that terrain its symbolic "representativeness" was enough to sustain its legitimacy.

When the money began to flow and the opportunities for concrete engagement with government policy implementation and with international civil society projects began to multiply in the post-Constitution, pre-Earth Summit period, UNI was required to "act substantively" (Pitkin 1967) on behalf of Brazil's indigenous peoples. However, since it lacked any internal mechanism through which its actions could be validated, it was left with the option of continuing to

practice representation-as-signification as a source of legitimacy: justifying political positions in terms of "authentically indigenous" philosophical understandings rather than demonstrable grassroots support. Despite Aílton Krenak's brilliance as a communicator, this proved inadequate for legitimating UNI's actions in the messy terrain of day-to-day political engagement.

The failure of subsequent attempts to create a national replacement for UNI show that this remains a significant challenge, and the collapse in 2005 of the Acre UNI led by Aílton Krenak's critics, following its own shift to "representation-as acting substantively for others", shows that this challenge can also lead to devastating consequences at the regional level – a process analysed in detail in Chapter 8. But this does not mean that the challenge is insurmountable. In Chapter 8 I also analyse the case of FOIRN, a regional *Movimento Indígena* organisation that has successfully managed the transition to "representation-as acting substantively for others", albeit within an approach that is much less rich in symbolic representation strategies than that of the movement in Acre and correspondingly less capable of disrupting the dominant norms of majority Brazilian political culture. In my encounters with indigenous representatives such as those profiled in Chapter 7, I also believe that I have identified some of the ingredients of a much stronger national *Movimento Indígena*, whatever (single or plural) organisational form it eventually takes.

Throughout this thesis I give examples of how indigenous representatives are developing and reproducing the concepts and practices that a national *Movimento Indígena* organisation would need to sustain a balance between giving expression to plural indigenous identities and representing "the generic indian". These range from the near-universal adoption of the term *parentes* ("relatives"), used to designate people who share a representative's indigenous identity without belonging to her or his ethnic group, to representatives' recognition of the importance of frequent contact with the *base* (grassroots constituency). The latter is increasingly facilitated both by innovative institutional arrangements (such as FOIRN's federal structure) and by improvements in transport infrastructure and the revolution in education and communications that has exponentially increased the level of indigenous Brazilians' use of the internet.

Beyond symbolic language, organisational strategies, transport or communications, however, I believe that the most significant change is in the form of representation that is being practiced. This form, representation as *mediation*, is explored in more depth in Chapter 7. The key point to note here is that it depends on skills and behaviours that are learned through sustained engagement with the Brazilian state. The ways in which the terms of this engagement have shifted since the 1988 Constitution is the focus of the final section of this chapter.

2.3.3 Indigenismo and citizenship

The fact that the skills and behaviours associated with "representation as mediation" are spreading so rapidly among *Movimento Indígena* representatives is down to one factor above all others: the proliferation of new democratic spaces in which increasing numbers of people representing an increasing diversity of facets of indigenousness and scales of indigenous organisation are engaging with an increasing number of faces and arms of the Brazilian state.

The sector in which this is furthest advanced is health, as a result of the creation of an "Indigenous Health Subsystem" of the SUS in an attempt to respond to the challenges outlined at the end of Section 2.2. The new democratic spaces of the Subsystem are examined in detail in this thesis, particularly in Chapter 9. As I explain in the discussion of the Subsystem's origins in Chapter 5, they are the result of a curious fusion between the aspirations of the SUS and those of *Indigenismo*, the ideology that has traditionally guided the Brazilian state's engagements with indigenous peoples.

Alcida Ramos, author of the most influential study of *Indigenismo*, quotes Edward Said in support of her argument that "Indigenism is to Brazil what Orientalism is to the West", describing it as a field of state-society relations mediated by "an elaborate ideological construct about otherness and sameness in the context of ethnicity and nationality" (1998: 7). In the legal and policy arena, one of its pillars has been the notion of *tutela*, or state guardianship, that is discussed above. Another pillar has historically been the notion that "indians are

a federal problem", which supports the central government's practice of reserving to itself the right to mediate relations with indigenous peoples. While the pillar of *tutela* has been seriously eroded since the changes brought by the Constitution – leaving FUNAI casting around anxiously for a basis for its mandate to intervene in indigenous affairs now that it no longer legally "represents" indigenous people – the pillar of federal responsibility has remained largely intact. Successive administrative reforms have left FUNAI weaker while simultaneously creating new federally-managed institutional mechanisms for engaging with indigenous affairs, of which the prime example is the Indigenous Health Subsystem. This has extended to the creation of new democratic spaces at the national level, including the National Commission on Indigenous Policy (CNPI), which grew out of a FUNAI-sponsored *Conferência* in 2006 and is now the official institutional arena for discussions between indigenous representatives and the federal government on the Statute of Indigenous Peoples, an attempt to flesh out the Constitutional principles on indigenous rights that has long been stalled in Congress.

That the federal government has been maintained as the branch of the state with which indigenous people should engage, even as decentralisation is encouraging other Brazilians to look more to the states and municipalities, is due at least in part to the active collusion of indigenous representatives themselves. This has reflected their lack of trust in the local oligarchs who tend to control the remoter, poorer states and municipalities where most indigenous territories are located, and who are all too often implicated in attempts to plunder those territories and trample on the rights of their inhabitants. It has also been a reflection of the general preference among indigenous representatives for "going straight to the top", demonstrating their status as leaders of polities in their own right by demanding direct dialogue with the chief of the "white"[19] polity – a

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[19] In this thesis, I use the adjective "white" as a transliteration of its usage by indigenous representatives, rendering *branco* as "white person" and *governo do branco* as "white state". Alcida Ramos (1998) points out that anthropologists writing about indigenous perceptions of non-indigenous people in North America have made similar use of the term "whiteman". In both North and South America, the generic use of equivalent terms among indigenous people dates back to the groups who first made contact with Europeans, even though in the period since then non-white non-indigenous people have become a familiar presence to their contemporary descendants. In Brazil, where most non-indigenous inhabitants of the rural interior are not "white" by their own definition as recorded by IBGE (the national census bureau), *Movimento Indígena* representatives and ordinary indigenous citizens alike continue to use *branco* as the generic term for non-

mirroring of the colonial "take me to your leader" approach to which indigenous peoples themselves have all too often been subjected. Although this preference remains strong (hence the frequency with which indigenous delegations are seen storming Congress, demanding an audience with the President or barging in on a Minister), as their familiarity with the workings of the "white state" grows indigenous representatives are increasingly perceiving the extreme decentralisation of many aspects of governance in Brazil (Melo and Rezende 2004) and engaging more systematically with municipal and state governments (a process that is discussed in detail in Chapter 8).

While the special status that came with being a "federal problem" aligned the interests of indigenous representatives with some groups of national-level bureaucrats, it generated resistance among other groups of bureaucrats who wished both to promote decentralisation and to standardise the state's dealings with citizens. As I show in Chapter 5, the latter groups were able to seek ideological support from the very movements who had helped to place *cidadania* and *democracia* at the centre of the rights-based social policy agenda, including the *Movimento Sanitarista*, since they associated assertion of difference with tolerance of inequality or "neoliberal" social policy targeting. This is an uncomfortable reminder that these movements' struggle for "democracy as inclusion" will remain deeply problematic in the context of Brazil's highly unequal pluriethnic polity as long as it fails to ask what transformations may be necessary to ensure that inclusion is not reduced to homogenisation.

What makes the question even more problematic is that the right to difference is embedded in the 1988 "Citizen Constitution" just as strongly as are the social rights – such as health – whose realisation has been held by those in charge of implementing the Constitution's principles to require an equalising, "one size fits all" version of citizenship. Although the Constituent Assembly refused to endorse a draft clause formally declaring Brazil to be a multi-ethnic society (Maybury-Lewis 2002a: 338), by making it clear that the "rights and interests" of indigenous peoples covered by Article 232 included "their social

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indigenous people. For a particularly rich collection of writings on indigenous peoples' perceptions of "whites", see *Pacificando o Branco* (2002) eds. Bruce Albert and Alcida Ramos (São Paulo: Unesp).

organisation, customs, languages, beliefs and traditions" the Constitution effectively established the right to difference as a guiding principle for the terms of engagement between indigenous peoples and the state in democratic Brazil. This in turn evoked a transformative notion of democratisation – one whose underlying logic implied a transformation in the identity of Brazil itself, from a unitary society where homogeneity was to be pursued by state policies of forced "acculturation" and absorption of ethnic minorities, to a pluriethnic polity where the state's task was to mediate between the claims of multiple Brazilian cultures (Duprat 2002). The successful struggle of the *Movimento Indígena* to enshrine this principle in the Constitution echoed a broader trend in Latin America during the 1980s and 1990s, where as Deborah Yashar has pointed out, "the newly formed indigenous movements mobilized to redefine the *content* of citizenship"[20] (Yashar 2005: 34, emphasis in the original).

That this struggle during the Constituent Assembly was successful is all the more significant given that the state's initial reaction to *Movimento Indígena* organising had been to classify the indians as separatists and traitors, as a result of their self-identification as "indigenous nations". As I pointed out in Chapter 1, indigenous peoples do not aspire to "nationhood" in the sense of flags and armies, but they do see themselves as polities in their own right, "sovereign" in their choice of leaders and forms of social and political organisation. Nationalists – as well as some apparently progressive thinkers, including Jürgen Habermas (1998) – apparently have a hard time understanding the difference. Alcida Ramos claims that the leaders involved in the creation in 1980 of the national-level *União das Nações Indígenas* (Union of Indigenous Nations) "chose the term *nations* to call the country's attention to the existence within the Brazilian polity of fully constituted societies with specific problems that required specific solutions"; she goes on to remark somewhat disingenuously that "although the name of the organization is seemingly innocuous, it provoked the wrath of many

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[20] Yashar contrasts this mobilisation with the often violently exclusionary focus of ethnic mobilisation on "redefining the *boundaries* of citizenship" in "the new democracies in Africa, Asia and Eastern Europe" during the same period (*ibid.*).

an official of both the military regime (1964-1985) and the civilian governments that followed" (Ramos 1998: 168, emphasis in the original).

As Ângela Pappiani (Aílton Krenak's co-producer on the *Programa de Índio* radio programme) recalls, opposition from the military-dominated National Security Council meant that although the *União das Nações Indígenas* campaigned under that name, the organisation was never granted official permission to register itself formally as UNI, leading to the creation of the *Núcleo de Cultura Indígena* (NCI) as a channel for the donations that were beginning to come in from domestic and international supporters (Pappiani 2009b). The strength of right-wing nationalist reaction was also evident in the fact that UNI's advocacy efforts during the Constituent Assembly were almost derailed by a vicious smear campaign in the influential conservative newspaper *O Estado de São Paulo*, which accused indigenous representatives of being stooges for sinister foreign interests who were seeking to take over the mineral reserves that lay under indigenous territories.

Similar scare stories have recurred with every effort to guarantee indigenous land rights since then, from the successful campaign to secure recognition of the Yanomami territory in 1991 to the struggle over the demarcation of the Raposa-Serra do Sol indigenous reserve in the border state of Roraima, which was finally guaranteed by the Supreme Court in March 2009. In every case, the allegation has been that by demanding specific rights by virtue of their distinctive identity, indigenous Brazilians were demonstrating that they did not, in fact, see themselves as Brazilians at all – that the country's original inhabitants were in fact some kind of separatist movement or of fifth column for foreign powers.

While the economic interests behind the smear campaigns are obvious enough, the fact that they continue to resonate with significant segments of public opinion suggests that even two decades after the Constitution's recognition of the pluriethnic character of Brazilian citizenship, the legacy of the assimilationist "one nation" state policies of the past remains deeply entrenched. This legacy is not confined to the Right: one of the prime movers in the campaign to review indigenous land demarcations that was launched during the controversy over the Raposa-Serra do Sol indigenous reserve was Aldo Rebelo, leader of the

Communist Party of Brazil (PCdoB) in the Federal Chamber of Deputies and a former minister in Lula's government[21]. The fact that versions of *cidadania* claimed by the Left can combine with versions of nationalism claimed by the Right in resisting indigenous peoples' assertion of the right to difference demonstrates that the issue of indigenous rights touches on tensions and assumptions that run across the traditional faultlines of Brazilian politics. This, in turn, reflects a deeper paradox which Alcida Ramos attributes to "the cracks in the very constitution of modern Western ideology" between universalism and relativism, which mean that "if, on the one hand, the humanist quest for universalism has come to be the hegemonic idiom in which human rights are expressed everywhere regardless of cultural differences, on the other hand, universalism coexists with an equally humanist quest for relativism, according to which values are not universal but culture-bound and as such should not be submitted to universal principles" (Ramos 2002: 256).

Nowhere is this tension more in evidence than in the health sector, where the tendency of the *Movimento Sanitarista* to equate democracy with inclusion, and inclusion with the extension of a one-size-fits-all service package to every population group, has come up against the *Movimento Indígena*'s pursuit of a more transformative vision of democracy, where recognition of the right to difference means making space for different representations of health. The differences and similarities between indigenous and *sanitarista* representations of health are explored in detail in Part II of this thesis, in the context of struggles over the Indigenous Health Subsystem of the SUS. First, however, I will situate these struggles in the geographical, historical and political context of my case study sites, and locate those sites within the region that has witnessed the sharpest struggles of Brazilian nation-building against difference and otherness: Amazonia.

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[21] While Rebelo justified his attitude with nationalist arguments, other politicians of the Left have appealed to Brazil's supposed identity as a state founded on "Christian values" in attacking indigenous rights to cultural self-determination. The *Deputado* (Federal Congressman) who has spearheaded calls for government intervention in indigenous communities after claims by a fundamentalist US-based missionary group that infanticide of children with birth defects is widespread among Brazil's indigenous peoples is Henrique Afonso of the Acre PT. Both politicians' interventions are particularly ironic given the intimate relationships that both the PCdoB and the PT have established with the *Movimento Indígena* in many parts of Brazil, including Henrique Afonso's home state of Acre, which I discuss in Chapter 8.

Chapter 3. Where Brazil Begins

3.1   Locating Brazilian Amazonia

TV Aldeia offices, Rio Branco, Acre, 22 September 1990. I am finding this interview with Toinho Alves a bit perplexing. I was introduced to him as one of Acre's best-known journalists, and since I am supposed to be writing a news story about the upcoming state elections and he makes news programmes and documentaries for the local public TV channel, I was hopeful that he might be able to give me some useful insights into politics in Acre. Instead, he seems to be more interested in talking about philosophy, ecological values and the distinctive identity of this small and remote state, a strip of rubber-rich jungle which lies along the southwestern edge of Brazilian Amazonia, so far from the rest of the country that it is even in a different time zone.

It turns out that he is advising one of the candidates in the state elections, a young hopeful from the Workers' Party (PT) called Jorge Viana, who is taking on a right-winger backed by the ranching lobby that was responsible for the murder of rubbertappers' union leader Chico Mendes less than two years ago. However, Toinho Alves doesn't present this election as a class confrontation or a fight for justice; he seems to see it as some kind of struggle for Acre's soul, an existential choice between accepting the state's Amazonian identity or continuing to slash and burn a path through the forest to a sterile and denuded modernity.

These philosophical reflections are all very interesting, but I still need my quotes about politics in Acre – so I decide to take a different tack, seeking to establish a journalist-to-journalist rapport by asking him how it feels to work as a news reporter in such a peripheral place, out here where Brazil ends. He frowns, then smiles. "Acre is where Brazil ends? No, Acre is where Brazil begins".

This chapter attempts to locate my research in the Brazilian Amazon. As I stated in Chapter 1, the process of "multi-sited ethnography" took me to sites across Brazil – Brasília, Recife, Goiás, São Paulo – and beyond its borders (including the encounter in the House of Commons which I describe in Chapter 7). Nevertheless, this is not just a Brazilian but a fundamentally Amazonian story, and my most in-depth fieldwork was carried out in two indigenous health subsystem DSEIs – *Distritos Sanitários Especiais Indígenas* or Special Indigenous Health Districts – which are located in the Amazonian states of Acre and Amazonas. In both, I had prior entanglements with NGO health projects and with the *Movimento Indígena*, and these entanglements developed further over the course of my fieldwork until I was enmeshed in the complex positionality issues that I examined in Chapter 1.

My Amazonian entanglements go back furthest in Acre, where between 1989 and 1996 I was involved first as a journalist, then as a journalist-activist, then as an NGO project manager. The encounter with Toinho Alves described above took place during my third trip to Acre (my first having been in June 1989), and by then I had visited other Amazonian states and was beginning to get some sense of the many distinct ecological, geographical, social, economic and political realities which make up the complex mosaic of Brazilian Amazonia. Nevertheless, for me the story was still "The Amazon" rather than any particular region or aspect of it, and for most people outside Brazil – and indeed for most people in Brazil – that is still the case. I will start, then, by locating Brazilian Amazonia.

3.1.1 Amazonias

A recent map produced by a consortium of NGOs and research institutes shows the areas corresponding to three possible "Amazonias", which its authors describe as "basin", "biogeographical" and "political"; depending on which definition is chosen, the total area of the Amazon comes to 5.9 million, 6.9 million or 7.8 million square kilometres (RAISG 2009).[22] The first point to stress is that the Brazilian Amazon does not represent the totality of Amazonia; the Amazon river itself and some of its major tributaries (including the Rio Negro and the Juruá) rise outside Brazil's borders, and perhaps a third of Amazonia's estimated 33 million people live not in Brazil but in neighbouring regions of Bolivia, Peru, Ecuador, Colombia, Venezuela, Guyana, Surinam and Guiane Française. Cross-border interactions have been important in shaping social and political life in many regions of the Amazon, including those where I carried out my case studies. Within Brazil, the Amazon's boundaries also vary with different definitions. For the purposes of government policy, the key definition is the "Legal Amazon" which includes 760 municipalities across the seven states of the Northern Region (Acre, Amapá, Amazonas, Pará, Rondônia, Roraima and

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[22] By way of comparison, according to the respective Wikipedia pages the combined area of the member states of the European Union is 4.4 million square kilometers, and that of the "contiguous United States" (i.e. excluding Alaska and Hawaii) is 8.1 million square kilometers.

Tocantins), the whole of one state in the Centre-West (Mato Grosso) and part of one state in the Northeast (Maranhão). This covers some 5.2 million square kilometres, or 61% of the surface area of Brazil, and a total population of 22.3 million people – more than 70% of whom live in towns and cities (IBGE 2007).

The policy framework of the "Legal Amazon", much of it put in place during the military regime, defines the region as distinct from the rest of Brazil – and for many years served to frame it as a kind of internal colony, an "uncivilised" frontier zone to be tamed and occupied. Steve Nugent has argued that "to speak of Brazil and Amazonia as nested within one another is to promote a conceit which disguises official Brazil's relations with its margins, a conceit which has made possible the maintenance of a high level of popular ignorance about Amazonian affairs and a justification for the region's political subordination to central government... the Brazilian-ness of Amazonia may be a geopolitical fact, but in practice Amazonia is another country" (Nugent 1994: 11-12).

In the decade and a half since Nugent wrote his caustic account of the "othering" of the Amazon, however, the situation has shifted somewhat. "Popular ignorance about Amazonian affairs" remains considerable – as evidenced by the hysteria over supposed indigenous complicity with efforts to "internationalise" Amazonia which I described in Chapter 2 – but has diminished somewhat with the expansion of communications in the region, and the growing visibility of both elite and marginalised Amazonians in the media. Amazonia's "political subordination to central government" has also begun to shift. I have argued elsewhere that the remarkable upsurge in the creation of new Amazonian municipalities during the 1990s combined with a simultaneous growth in the number of partially self-governing territories – in the shape of indigenous and "extractivist" reserves – to shift the focus of political struggle away from the Brasília-centred federal policy process and towards new regional and local governance spaces (Shankland 1998). The neocolonial policy apparatus of the military regime – centred on the Amazon Development Superintendency, SUDAM, which handed out soft loans to Brazilian and multinational companies who "improved" the region through deforestation – has been largely dismantled. The former Federal Territories have become consolidated as states with their own

elected governments, both polities in their own right and full members of the federal polity. A growing number of Amazonian political leaders – especially a remarkable group of Workers' Party (PT) politicians from Acre – have appeared as figures on the national stage, encouraging public perceptions of the region as an integral and normally-functioning part of Brazil's body politic.

However, this "normalising" of perceptions of the region coexists with a continued "othering" that is evident both in the persistence of exoticised images of the region in mainstream Brazilian culture and also in some fields of policy, including land tenure, environmental legislation and intergovernmental relations. The federal government still occasionally lurches back into internal-colonialist mode, as in the comments on the need for the federal government to "unlock the development of Amazonia" – a disturbing echo of the military's *Brasil Grande* rhetoric – which marked the start of Lula's second term in office (Lima and Ramos 2006). As a result, Amazonia today has a curious dual image within Brazil – just another part of the country, with shared institutions and problems, but at the same time still as much "another country" as it has ever been.

3.1.2 Amazonian identities

As my interview with Toinho Alves showed, the "normalising/othering" of the Amazon is operated by its inhabitants as well as by other Brazilians and the global media. Just as many Amazonians (such as those whose voices Steve Nugent sought to capture in his 1994 book *Big Mouth: The Amazon Speaks*) are puzzled or frustrated to find themselves represented as exotic or un-Brazilian, outside observers who try to look at the region through a mainstream lens (as I did when I was trying to write that article on politics in Acre in 1990) can find themselves dealing with local self-representations that play up the distinctiveness of Amazonian identity, whether in terms of geographical remoteness or of a particular relationship with "nature".

The distinctiveness of this "other country" jolts into focus whenever the region's indigenous peoples move centre-stage – which they do with a frequency that belies their relatively small share (around 2%) of the region's population.

Amazonia not only has over half of Brazil's indigenous population and some 98% of the country's officially-recognised indigenous land, but also its most exotically "unacculturated" ethnic groups and its most broadly-based and politically effective *Movimento Indígena* organisations. These organisations seek simultaneously to construct a discourse based on radical difference and to reject the forms of "othering" which classify their constituencies as pre-modern, whether "children of nature" or "ignorant primitives". This has required them to frame accounts of their own identity formation which historicise the Amazonian indigenous experience, refusing to be classified as "people without history" (Wolf 1982). In engaging with mainstream Brazilian media and policymakers, they have found themselves facing a situation similar to that described by Anna Tsing in her account of the "marginality in an out-of-the-way place" experienced by the Meratus Dayaks of Indonesian Kalimantan:

> As powerful demands for resources, land and military control have guided state expansion to the most remote corners of the earth, the autonomy and mobility of the marginal cultural groups of once inaccessible places – rainforests, rugged mountains, deserts, tundra – have increasingly been threatened. The dominant frameworks for understanding recent encroachments, however, ignore long histories of marginality to posit conditions of "before" versus "after" – of pristine isolation, on the one hand, and rapid cultural destruction or modernization, on the other. In such frameworks, marginal people become archaic survivors who, for better or worse, are forced to "catch up" with the twentieth century. (Tsing 1993: 7)

The indigenous people of the Amazon certainly have one of Tsing's "long histories of marginality" – several centuries' worth of it. Far from being the pristine wilderness of popular imagination, Amazonia was densely populated before the arrival of Europeans. According to Nugent, "at the time of conquest Amazonia had 5 million plus Amerindians; currently it has, generously, 200,000... the apparent 'naturalness' of Amazonia is a comparatively recent development, a side effect of European decimation of indigenous societies" (Nugent 1994: 21-22). That decimation has gone hand in hand with the fact that the region has been linked to global commodity markets since the 16th century, when the Portuguese first came looking for the high-value plant-based products known as *drogas do sertão*, or "drugs of the backlands" (Hemming 1987).

The most globally important of Amazonia's plant-derived riches turned out to be rubber, the "black gold" which, as *The Economist* put it in a recent article, "drew the Amazon into the list of hinterlands that could be tapped if supplies were tight elsewhere, allowing growth to accelerate in much of the world from the 19th century onwards" (The Economist 2009: 25). The "rubber boom" of the 19th and early 20th centuries drove non-indigenous settlement into some of the remotest parts of Amazonia. Since the indigenous societies of the region – already shattered and scattered by centuries of epidemics, slaving raids and massacres – were unable to provide a large enough labour force to meet international demand for the commodity, the government and "rubber barons" worked together to facilitate a mass migration of the rural poor from Northeastern Brazil. The demographic change brought about by the influx of *nordestino* ("Northeasterner") migrants to the Amazon during the rubber boom was extremely significant, particularly in western regions such as Acre and Rondônia where the indigenous population had hitherto been little affected by non-indigenous settlement. By contrast, the environmental impact of the boom was limited, since commercial rubber production in the Amazon needed the rainforest to be left standing: efficient exploitation of latex from *hevea brasiliensis* (the Pará rubber tree) requires careful stewardship of trees that are widely scattered throughout the forest as a defence mechanism against parasites.

This kind of extensive, low-impact forest use was the opposite of what was to follow in the second half of the 20th century. New roads and fiscal incentives facilitated a scorched-earth advance of speculators who claimed land by clearing the forest and putting it under cattle. These cattle barons often used violence to take over land that had been cleared by another wave of *nordestino* migrants, joined this time by peasants who had been pushed off the land by agricultural modernisation in Southern Brazil. Ranchers and peasant migrants found themselves fighting not only each other but also the surviving indigenous groups and the *seringueiros* (rubbertappers) who had been brought to the region by the previous wave of migration. The latter had adapted to life in the forest since the end of the rubber boom and regarded it as their home as well as their source of livelihood; they were unimpressed by the military regime's description of the

Amazon as "a land without men for men without land". Steve Nugent argues that it is this dynamic which gives the Amazon its "frontier" identity, since the region is "a frontier in the sense that it's an experimental arena in which highly unregulated social forces encounter a number of, for want of a better term, traditional societies, themselves the products of highly unregulated social forces" (Nugent 1994: 13).

3.1.3 Normalising Amazonia

One key factor in the partial "normalisation" of the Amazon in the period since Nugent wrote his account has been the increasing regularisation of engagements between social movements claiming to represent these "traditional societies" and the state. Former periods of conflict in the Amazon were marked by armed indigenous resistance, slave revolts and messianic uprisings (Hemming 1987; Wright 2005). By contrast, as I indicated in Chapter 2, the period since the mid-1980s has been characterised by the emergence of some of Brazil's most important rural social movements, mobilising around both indigenous and "traditional" Amazonian identities.[23] Many of these movements achieved national and even international prominence in the decade after the murder of *seringueiro* leader Chico Mendes brought global media attention to the struggle of Acre's rubbertappers in 1988; some then disintegrated through internal divisions or loss of external support, while others consolidated their position by developing movement organisations which went on to capture state, donor and NGO resources and engage with formal policy and political institutions.

Since Lula's election in 2002 the social movement organisations claiming to represent these groups and a range of other "traditional communities" from outside Amazonia have become increasingly visible in mainstream government policymaking, culminating in a Presidential Decree in February 2007 that established a "National Policy for the Sustainable Development of Traditional Peoples and Communities" (Presidência da República 2007). This process was

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[23] These "traditional" identities are generally linked to particular livelihood strategies: they include *seringueiros* (rubbertappers), *castanheiros* (Brazil nut gatherers), *ribeirinhos* (riverine smallholders and artisanal fishers) and *quebradeiras de coco babaçu* (women *babaçu* nut extractors).

driven by movement allies within the Environment and Social Development ministries (particularly the then Environment Minister Marina Silva, herself the daughter of Acre *seringueiros*), but its influence has now extended into other sectors – including health, where policymakers have begun to debate a possible "National Policy on the Health of Rural and Forest Populations" (Conselho Nacional de Saúde 2008a). The debate on this issue has raised questions of universality and difference that have been prominent in the troubled history of health policy for a particular subset of "rural and forest populations": indigenous peoples. This history has centred on efforts to establish an "Indigenous Health Subsystem" of the SUS, which I discuss in detail in Chapter 5. The "Subsystem" is organised according to a very different governance structure from the mainstream SUS, and centres on "Special Indigenous Health Districts" (DSEIs) which cut across municipal and even state boundaries. My fieldwork included case studies of two DSEIs, one (the DSEI Alto Juruá) in Acre and the other (the DSEI Alto Rio Negro) in Amazonas, which are described in detail in Appendix A.

Just as the heterodox "Indigenous Health Subsystem" has provoked disquiet among mainstream SUS policymakers, the inclusion of indigenous peoples in the broad category of "traditional populations" has provoked unease among some *Movimento Indígena* organisations in the Amazon. This, in turn, has led to a revisiting of the tensions over the "Forest Peoples' Alliance" whose consequences for the national *Movimento Indígena* I described in Chapter 2. These tensions first emerged, along with the Alliance itself, in Acre; and it was also in Acre that the process of social movement-state engagement has been most intense and far-reaching. In the next section, I examine this process and its implications for the *Movimento Indígena*, after first locating Acre within the Amazon, and the part of the state where I carried out my most in-depth fieldwork – the Juruá Valley – within Acre.

3.2 Acre and the Juruá

3.2.1 Regional history and emergence of the Movimento Indígena

Acre lies on the southwestern edge of Brazilian Amazonia, bordering Bolivia and Peru. As Figure 2 shows, it consists of a number of parallel river valleys which feed into two of the Amazon's major Southern tributaries, the Juruá and Purus. The state has been marked from the time of its initial non-indigenous occupation in the 19th century by a distinct East-West split. The Juruá Valley, which covers the Western half of Acre and is remoter and more rural than the Eastern Acre-Purus Valley, has developed a strong regional identity. The Juruá, whose largest town of Cruzeiro do Sul has a population of around 74,000, has long felt overshadowed in the state's politics by the Acre-Purus Valley, which has two-thirds of Acre's 650,000 people and is dominated by the state capital Rio Branco, with a population is almost four times larger than that of Cruzeiro do Sul (IBGE 2007).

As well as being one of Brazil's remotest states (most of its settlements are only accessible by air or river, and even the state capital has only been linked to the rest of the country by paved road since the early 1990s), Acre is also among the poorest and smallest, in population if not in geographical area.[24] Nevertheless, it has historically enjoyed a level of visibility out of all proportion to its apparent lack of significance in the wider political economy of Brazil – a visibility that is associated with its history of political ferment and innovation. This dates back to the state's origins during the "rubber boom" of the late 19th and early 20th centuries. Having been formally recognised as Bolivian territory since the colonial period, Acre became part of Brazil only in 1903, after the Brazilian "rubber barons" and *seringueiros* who had occupied the region evicted the Bolivian administration in an uprising known as the "Acrean Revolution". The revolutionaries briefly set up an independent state, before a reluctant Brazilian political establishment agreed to annex the territory and pay compensation to Bolivia (Tocantins 1979; Pimenta 2003).

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[24] In 2005 Acre ranked 18th in per capita income and 24th in population size out of Brazil's 27 states (data from www.ibge.gov.br, accessed 02.05.09). Acre covers some 160,000 square kilometers, two-thirds the size of the UK, though this makes it only Brazil's 15th largest state.

Figure 2   **Acre**
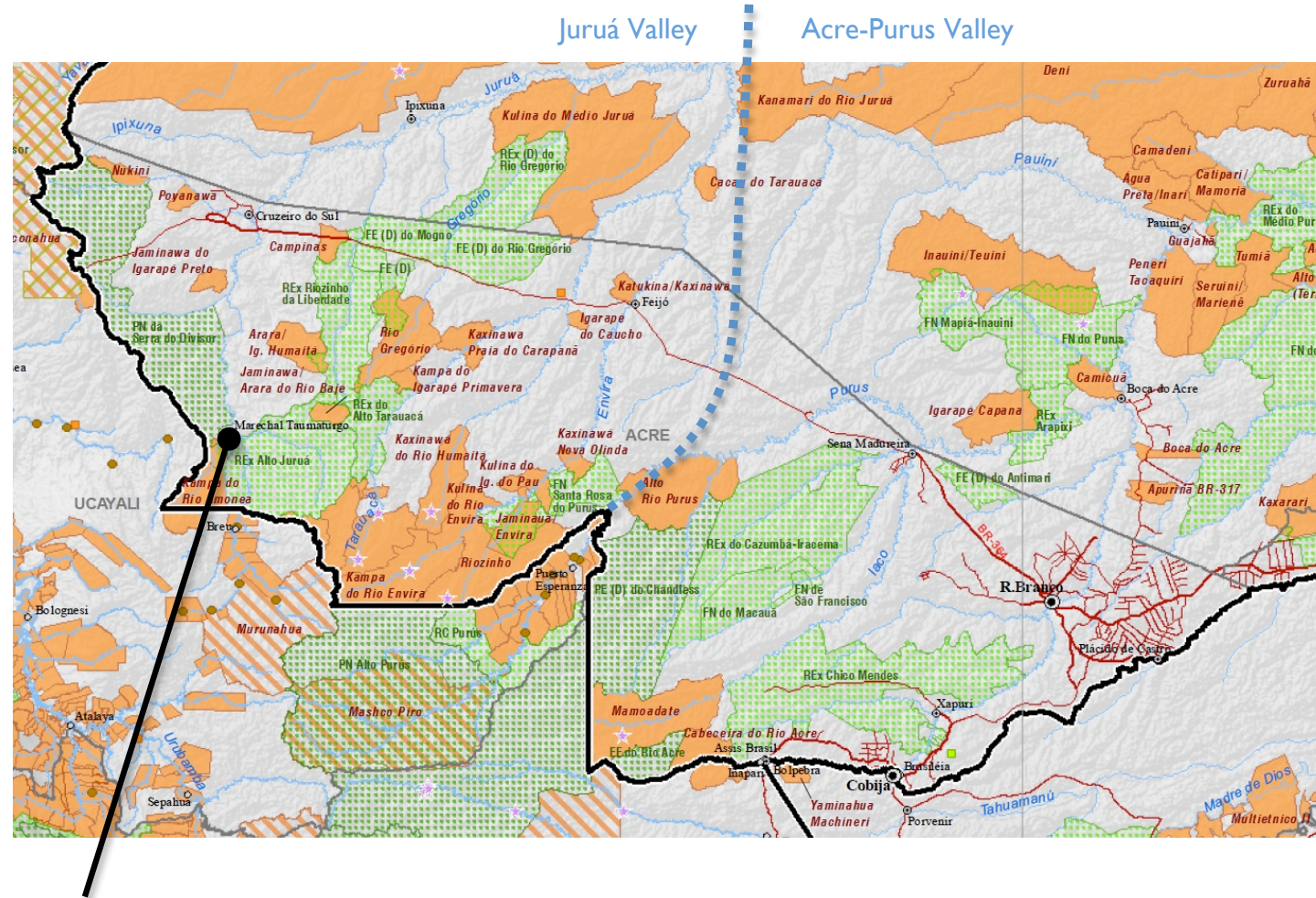
Source: RAISG 2009

As I noted above, Acre gained international visibility in the late 1980s and early 1990s as a result of the struggle of the local *seringueiro* movement for self-determination – after a century of virtual enslavement by the "rubber barons" – and for the preservation of the rubber-rich rainforest in the face of the aggressive expansion of cattle-ranching that had followed the construction of the first roads into the region. *Seringueiro* leaders like Chico Mendes, who became an internationally revered "green martyr" when he was murdered by ranchers in December 1988, built strategic alliances with Brazilian and global environmentalist networks to promote proposals for the creation of *Reservas Extrativistas* ("extractive reserves"). Chico Mendes was also a prime mover – along with Aílton Krenak and his NGO supporters – in the creation of the "Forest Peoples' Alliance". The impulse which led the *Movimento Seringueiro* to seek this alliance came not only from a perceived need for unity in the face of the common threat posed by the ranchers, but also from the recognition that it was the success of Acre's indigenous peoples in securing demarcation of some of their traditional territories as indigenous reserves that had first inspired the idea of *Reservas Extrativistas* (Antônio Batista de Macedo, pers. comm. 1991).

After three decades of land rights struggle, Acre's 14 different indigenous groups now inhabit 33 officially-recognised territories. As the map shows, these are widely scattered across the state, with some close to urban centres and roads while most are located in remote headwaters, often several days' journey by boat from the nearest town. The indigenous population of Acre currently numbers approximately 12,000, accounting for fewer than 3% of the state's inhabitants (Ricardo and Ricardo 2006: 570).[25] While Acre's ethnic groups have different levels of contact and familiarity with non-indigenous society (reflected in wide variations in the proportion who speak Portuguese and have access to formal education), all were directly (and often violently) affected by the occupation of the region during the rubber boom. This was marked by intense conflicts between the *nordestino* migrants brought in by the rubber baron *patrões* ("patrons" or "bosses")

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[25] These figures refer only to the population of officially recognised indigenous territories; they exclude the estimated 3,700 indigenous people living in Acre's urban areas (Virtanen 2007: 48), and the unknown number of *isolados* (members of groups that have succeeded in avoiding regular contact with non-indigenous society) living in the headwaters of the Acre-Peru border zone (Ricardo and Ricardo 2006: 594).

and the existing Pano-, Arawá- and Arawak-speaking indigenous population. Massacres and epidemics are estimated to have reduced the indigenous population of Acre and its neighbouring territories in the southern part of the State of Amazonas by around 80% between the mid-19th and mid-20th centuries, and several ethnic groups disappeared altogether during this period (Melatti 2004; Pantoja 2004). To this day interethnic relations in Acre are marked (usually latently but occasionally explicitly) by the legacy of the rubber boom, as some groups allied themselves to the *patrões* (working in rubber production alongside the migrant *seringueiros* or hunting down other indigenous groups to clear territory for new rubber estates), while others fled or resisted violently and suffered extensive processes of massacre, displacement and enslavement (Hemming 1987).

In the Juruá Valley, the indigenous groups developed a history of joint grassroots mobilisation with non-indigenous *seringueiros* against a common oppressor: the semi-feudal *patrões*, whose power survived in this isolated region long after it had been eroded elsewhere in the Amazon. Groups such as the River Jordão Kaxinawá prided themselves on an "indigenous *seringueiro*" identity, and others, such as the Arara Shawãdawa, were prepared to take direct action to protect non-indigenous *seringueiro* neighbours from eviction by the rubber barons (Antônio Batista de Macedo, pers. comm. 1991). When they began to mobilise for land rights in the late 1970s and early 1980s, the indigenous groups of the Juruá were supported by allies who were used to working with both indigenous and non-indigenous forest-dwellers, such as the formidable activist Antônio Batista de Macedo, who was himself of migrant *seringueiro* descent but spent a number of years working for FUNAI and supporting indigenous land claims before being invited by Chico Mendes to take on the role of regional representative of the National Council of Rubbertappers in the Juruá (Pantoja 2004: 332). These local allies were in turn supported by Brazilian NGOs linked to academia (including a group of researchers led by influential anthropologists Mauro Almeida and Manuela Carneiro da Cunha, who studied both the indigenous and non-indigenous forest societies of the region) and by international groups whose "Green" agenda was particularly receptive to the framing of a "forest peoples" identity (such as the London-based Gaia Foundation).

In Eastern Acre, by contrast, the indigenous groups had become disengaged from their non-indigenous *seringueiro* neighbours as the rubber estates declined. This decline was accelerated by the arrival of a new elite of ranchers and land speculators who had followed the first roads into the Acre-Purus Valley in the 1970s and bought out or displaced the traditional *patrões*. Because the indigenous groups of this part of the state had been pushed into the remoter headwaters during the rubber boom, it was the non-indigenous *seringueiros* now occupying their former territories who bore the brunt of the deforestation and violent evictions which the ranchers brought to the region.

The indigenous groups of Eastern Acre also came into regular contact with urban Brazilian society earlier than those of the Juruá; their greater proximity to Rio Branco meant that it was Eastern groups like the Manchineri (as well as Apurinã communities from the contiguous region of Southern Amazonas) who first began to send significant numbers of young people (generally male members of chiefly lineages) to the capital to study in "white people's schools". This produced a generation of young, educated leaders who were able to establish links with pro-indigenous NGOs and the national *Movimento Indígena*, culminating in the creation of the Union of Indigenous Nations of Acre and Southern Amazonas (UNI), established in 1986 as the first regional branch of Brazil's national indigenous movement organisation (Iglesias and Valle de Aquino 2005a: 152).

Although UNI was initially supported by the same activists who had been helping the indigenous communities of the Juruá to link up with the *seringueiro* movement, including Antônio Batista de Macedo and his ally Terri Valle de Aquino, a crusading anthropologist and founder of the Pro-Indian Commission of Acre (CPI-AC), its Rio Branco-based leadership swiftly moved into the orbit of the Catholic Church's Indigenous Missionary Council (CIMI). CIMI was ideologically opposed to alliances that diluted the distinctiveness of rights claims based on an exclusive indigenous identity, and under its influence and that of the ideologically (if not religiously) aligned COMIN, the Lutheran Church equivalent of CIMI, UNI moved away both from the Acre-based Forest Peoples' Alliance and from the national *Movimento Indígena* leadership, which it accused of lacking legitimacy and leading the indigenous cause astray through ill-chosen alliances – with the

consequences that I described in Chapter 2. Eschewing the "global green" networks of the pro-Forest Peoples' Alliance groups in the Juruá Valley, UNI instead developed links with international NGOs espousing rights/poverty agendas, such as Oxfam and Brot für die Weld. UNI's leaders also used their strategic base in the state capital to position the organisation to capture significant amounts of Brazilian government and multilateral funding, through the compensation and mitigation programmes that had been set up in response to protests at the environmental and social impacts of road-building in the region – thereby initiating a period of more systematic engagement with the state (Iglesias and Valle de Aquino 2005:153-4).

3.2.2 Movimento Indígena-*state engagement*

For a decade after the promulgation of the 1988 Constitution, Acre was ruled by a succession of state governments whose attitudes to indigenous peoples ranged from indifference to outright hostility. In this context, both the *seringueiros* and the *Movimento Indígena* gave priority to engaging with the federal government (where allies had taken up senior positions within the indigenous affairs agency FUNAI and the environmental protection agency IBAMA), as well as with the NGO networks and global development actors who had become increasingly interested in Acre in the wake of the international outcry at Chico Mendes' murder.

Then, after the 1998 state elections, the government of Orleir Cameli (a conservative oligarch whose family firm had a history of illegal logging in the indigenous territories of the Juruá Valley) was replaced by an "Acre Popular Front" coalition led by Jorge Viana of the Workers' Party (PT). Though he was himself a scion of one of Acre's most traditional political clans, at the start of his career as a government forester in the early 1980s Viana had worked with Chico Mendes, and he had subsequently helped Mendes and other *seringueiro* union leaders to found the PT in Acre. Having lost the 1990 state government election, Viana secured election as mayor of Rio Branco in 1992 and used a flurry of public works during his stewardship of the capital to cultivate the image of a politician who could get things done, rather than relying solely on his green credentials. Those

green credentials remained a fundamental part of Viana's electoral strategy, however; in 1998 as in 1990, one of his key advisors was the writer and journalist Antônio "Toinho" Alves – my interviewee in the encounter described at the start of this chapter – who devised a campaign platform based on reaffirming Acre's identity as a "forest society". Toinho Alves went on to develop a concept which was to become the rallying-cry for a decade of PT-led administrations in the state: *Florestania*.

The notion of *Florestania* (a coinage derived from combining the Portuguese words for forest, *floresta*, and citizenship, *cidadania*) was conceived as an explicit challenge to the universalising version of citizenship that had come to dominate social policy debate and progressive political discourse in Brazil since the 1988 Constitution. As Toinho Alves himself has pointed out, the undeniably urban origins of *cidadania* are evidenced by the fact that is cognate with *cidade*, meaning town or city (Alves 2007). In other words, *Florestania* was intended to represent citizenship as imagined by the peoples of the forest, rather than by the peoples of the city.

The term was enthusiastically adopted by Jorge Viana's two administrations, to the point that when carrying out my initial research during his second period in office (2003-2006), I was given state government documents emblazoned with the strapline "*Acre: O Estado da Florestania*". By this time it had become the key signifier of claims that Viana was implementing a radical new policy agenda centred on the rights and interests of the "forest peoples" – despite increasing concern that his re-elected government was in fact giving greater priority to road-building than to forest preservation[26]. It was maintained by Viana's successor Binho Marques, who took office in 2007 at the head of Acre's third successive PT-led administration.

The claim to be promoting *Florestania* was aimed not only at the "forest peoples" themselves (a relatively small part of the Acre electorate, given that by the time Jorge Viana took office almost half the state's population was living in Rio

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[26] Although indigenous territories and conservation units have been more effectively protected since the PT came to power, incursions by illegal loggers remain a constant threat and the "arc of deforestation" (Becker 2005) continues to expand in Acre, where according to the state government's own figures the rate of forest loss has actually accelerated over the last decade (Governo do Estado do Acre 2006: 86).

Branco and another quarter in the urban centres of the interior); it was important both for the external funders that the state government was wooing and for the sizeable number of urban voters who sympathised politically with the forest-dwellers' cause and with the distinctive Acrean identity which it evoked. This was the insight that lay behind Toinho Alves' forest-identity philosophising at our meeting in 1990, when I so signally failed to grasp the political relevance of what he was saying.

For the claim to remain convincing, however, the ideas that had inspired the creation of the Forest Peoples' Alliance needed to be kept alive, and Acre's indigenous groups (as the original and most high-profile "forest people") needed to be seen to be on board. This imperative gave the Acre *Movimento Indígena* a strategic political importance for the state government that was out of all proportion to the small number of voters that its leaders could claim to represent. This importance was reflected in several government initiatives, including a series of state-sponsored festivals of indigenous culture held in Rio Branco, which according to Marcelo Iglesias and Terri Valle de Aquino (Iglesias and Valle de Aquino 2005b: 126) not only opened up a potential market for crafts produced by indigenous artisans but also provided a valuable opportunity for the citizens of the capital to meet indigenous people in a setting unmediated by the deep-rooted racism of the local media. Funding from the loans which the Inter-American Development Bank and Brazilian National Development Bank had made to the Acre state government for a development programme centred on road-building were channelled into micro-projects proposed by indigenous and *seringueiro* community associations, under schemes labelled "support for traditional peoples" and "promotion of *Florestania*" (*ibid.*). Following criticism that dialogue with the *Movimento Indígena* had been too sporadic during Jorge Viana's first term in office, at the start of his second term in 2003 he established SEPI, the Special Secretariat for Indigenous Peoples, which was subsequently transformed into a special advisory department of the Governor's Office by his successor Binho Marques. This combination of initiatives represented a more sustained and extensive effort to demonstrate the inclusion – both material and symbolic – of indigenous peoples than any previous state government had mustered, and for

external and internal audiences alike it seemed to give substance to the claims of the PT administrations in Acre that theirs were truly *Governos da Floresta*, or "Governments of the Forest".

The creation of posts for indigenous leaders inside the state government and the growing availability of state funding both for "community projects" and for larger-scale initiatives (including subsidies for the running costs of regional indigenous organisations) led the Acre *Movimento Indígena* to become increasingly enmeshed with the Viana and Marques administrations – and thereby with the internal party politics of the Acre Popular Front. The two largest parties in the Front were the Workers' Party (PT) and the Communist Party of Brazil (PCdoB), whose cooperation on the government benches of the Acre State Legislative Assembly and (after 2002) the National Congress belied an intense rivalry that was played out at the local level and within the state and federal government apparatus. Both parties had been recruiting indigenous leaders since before Jorge Viana's election, as had the smaller Green Party (PV), which was also part of the Acre Popular Front. As a result, the existing ethnic, historical, regional and ideological cleavages within the *Movimento Indígena* were overlaid by a further layer of inter-party tension.

Broadly speaking, leaders from the Juruá Valley with a history of backing the Forest Peoples' Alliance tended to support the PT (or occasionally the PV), while leaders from the Acre-Purus region with a history of supporting the UNI leadership's go-it-alone strategy for indigenous organising were more likely to belong to the PCdoB.[27] The former, as members of the Governor's party and more willing spokespeople for the *Florestania* agenda, tended to occupy the more senior posts made available to indigenous leaders within the state government apparatus. The latter compensated for this by consolidating their hold on the key positions within UNI – leading the state-level *Movimento Indígena* organisation to develop what Iglesias and Valle de Aquino describe as a "symbiotic relationship" with the PCdoB (Iglesias and Valle de Aquino 2005: 164) – and strengthening their links

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[27] In fact the East-West / PT-PCdoB split was not quite so neat, as there were some pockets of PT support among indigenous leaders from Eastern Acre, and in the Tarauacá and Feijó regions of the Juruá Valley a number of important indigenous leaders (particularly belonging to the Kaxinawá and Shanenawa ethnic groups) were PCdoB members.

with the Acre offices of federal government agencies over which the national-level PCdoB had some influence, such as the indigenous affairs agency FUNAI and the Ministry of Health agency responsible for the "Indigenous Health Subsystem", FUNASA. This configuration of party interests turned out to be critically important in the health sector, which was to become a key political battleground and ultimately the site of the disintegration of the regional-level *Movimento Indígena*. In Chapter 8, I analyse in detail UNI's involvement in health service outsourcing and its consequences for indigenous movement organising in the region. Here, I will focus on the crisis which resulted from that engagement, and its impact on relations between the Acre *Movimento Indígena* and the "Governments of the Forest".

This crisis emerged in 2004, after four years of increasingly troubled UNI stewardship of services outsourced by FUNASA in the two Acre-based Special Indigenous Health Districts (DSEIs), the DSEI Alto Rio Juruá and the DSEI Alto Rio Purus. A trickle of critical media reports in Acre gave way to a flood of corruption allegations, which were seized on by the new FUNASA administration in Brasília (dominated by politicians hostile to the PCdoB), which declared a series of recentralisation measures and the suspension of UNI's contracts while a series of audits were carried out.

UNI's leaders protested that they were the victims of politically-motivated persecution by FUNASA managers who were desperate to distract attention from their own involvement in "irregularities", and released a public statement insisting that "the indigenous communities see UNI as their legitimate representative, which has unceasingly spoken out against the acts of violence and abuses of their rights to which indigenous peoples have been subjected, while at the same time struggling to transform these communities' demands into public policy" (UNI 2004). Despite these protestations, the DSEI management disaster had clearly led to a crisis of legitimacy capable of breaking the UNI leadership's hegemony in the representation of the Acre *Movimento Indígena*. In July 2004, the UNI *Conselho Fiscal* (Scrutiny Committee), which was dominated by leaders from the Juruá Valley, convened a Special Assembly of indigenous leaders to discuss responses to the crisis. This Assembly approved the suspension of the UNI coordinators and

the appointment of a Provisional Coordinating Body (also dominated by Juruá Valley leaders). In early 2005, the Provisional Coordinating Body carried out a series of community visits, meetings and seminars to discuss a radical reshaping of the structure of indigenous representation in Acre, aiming to promote greater decentralisation of power and increase the accountability of the Rio Branco-based indigenous leadership.

These events were funded by the state's PT Governor, Jorge Viana, who had become alarmed that the meltdown in UNI and the subsequent acrimonious dispute between the PT-aligned provisional leadership of the organisation and their PCdoB-affiliated predecessors was drawing in non-indigenous politicians from both sides, threatening to fracture the governing coalition's unity at a time when important municipal elections were under way (Iglesias and Valle de Aquino 2005: 167). The collapse of UNI also threatened to leave a vacuum that could disrupt Viana's strategy of establishing a range of reliable indigenous movement interlocutors, at a time when he was gradually extending state government influence into indigenous territories through SEPI, the recently-created Special Secretariat for Indigenous Peoples. As Francisco Pianko Ashaninka, the Juruá Valley leader appointed by Viana to head the Secretariat, stated in a newspaper interview, SEPI had been created because "the Governor himself felt that there was a need for an instrument within his government that could deal with indigenous issues [and] prepare the State and the indigenous communities to develop a different relationship" (Weber 2006).

As damning auditors' reports were followed by the threat of criminal prosecutions, and a series of unfavourable civil and labour court judgements made it clear that UNI was facing a bill that could potentially run to several hundred thousand dollars, the organisation was formally declared bankrupt and wound up. In May 2005, the Provisional Coordinating Body organised a general assembly of indigenous leaders to create a successor organisation, OPIN, and elect new coordinators. The assembly was paid for by the state government, and the Provisional Coordinators campaigned for Juruá Valley candidates linked to the PT and PV – but in the event the OPIN elections were won by candidates belonging to the former UNI leadership group, linked to the PCdoB, who called in

all the favours they could to secure election in the hope that this would restore their monopoly on state-level representation. However, with the growing access to the state government of their Juruá Valley rivals (thanks to their PT links and the creation of SEPI) this monopoly had been decisively broken.

The flight of the international donors who had supported UNI left OPIN dependent on handouts from SEPI, which tried to continue the state government's policy of consolidating on its own terms a regular dialogue with the state-level *Movimento Indígena*. However, the OPIN leadership reacted by systematically biting the hand that fed them: since 2005, most of their campaigning energy has gone into a series of increasingly strident attacks on the state government in general and its favoured indigenous leaders in particular (Machado 2007). In Chapter 8 I explore the origins and political logic of this "unruly" representation strategy, and contrast it with the approach taken by the Rio Negro *Movimento Indígena* in its engagements with the state in that region. In the next section I outline the context for those engagements, situating the Rio Negro within the State of Amazonas.

3.3 Amazonas and the Rio Negro

3.3.1 Regional history and emergence of the Movimento Indígena

For many outsiders, Amazonas State is synonymous with Brazilian Amazonia. In fact this is deeply misleading, since although Amazonas does cover a larger area of the Amazon than any other state (1.6 million square kilometres against the 1.2 million square kilometres of its nearest rival, Pará), it is by no means "typical" – it is significantly less deforested, more sparsely populated, less agricultural and more metropolitan than any other state in Brazilian Amazonia. This paradoxical combination of "nature" and "modernity" reflects the fact that over half the state's 3.2 million inhabitants – including perhaps a tenth of its 120,000 indigenous people – are concentrated in a single highly industrialised metropolis: the state capital, Manaus (IBGE 2007). Contemporary visitors seeking to "experience the Amazon" tend to head straight for Manaus, which is located on the banks of the Rio Negro near the "meeting of the waters" where it joins the Solimões to form the Rio Amazonas. There, before heading off to one of the "jungle lodges" that have proliferated around Manaus in recent years, those visitors may pay a brief visit to the Opera House that was inaugurated in 1896 by the rubber barons who made the city their headquarters. If they give it any thought at all, they may wonder how the *Belle Époque* Manaus of the rubber boom came to be superseded by the modern city whose shopping centres, apartment blocks, *favelas* and flyovers make it look like a bizarre attempt to build São Paulo in the jungle.

The lack of all-weather roads linking Amazonas to Southern Brazil has meant that unlike the states along the Amazonian "Arc of Deforestation" (Pará, Maranhão, Tocantins, Mato Grosso, Rondônia and Acre) it has not suffered significant penetration either by large-scale ranching and soya-growing operations or by migrant smallholders (Becker 2005 – though this is likely to change with the proposed paving of the BR-319 Manaus-Porto Velho highway (Fearnside and de Alencastro Graça 2006). The political economy of Amazonas has thus been shaped by forces that are very different to those which produced the movement-state interactions in Acre that I outlined in the previous section.

Figure 3   **Amazonas and the Rio Negro**

Médio Tiquié   São Gabriel da Cachoeira   Manaus

DSEI Alto Rio Negro
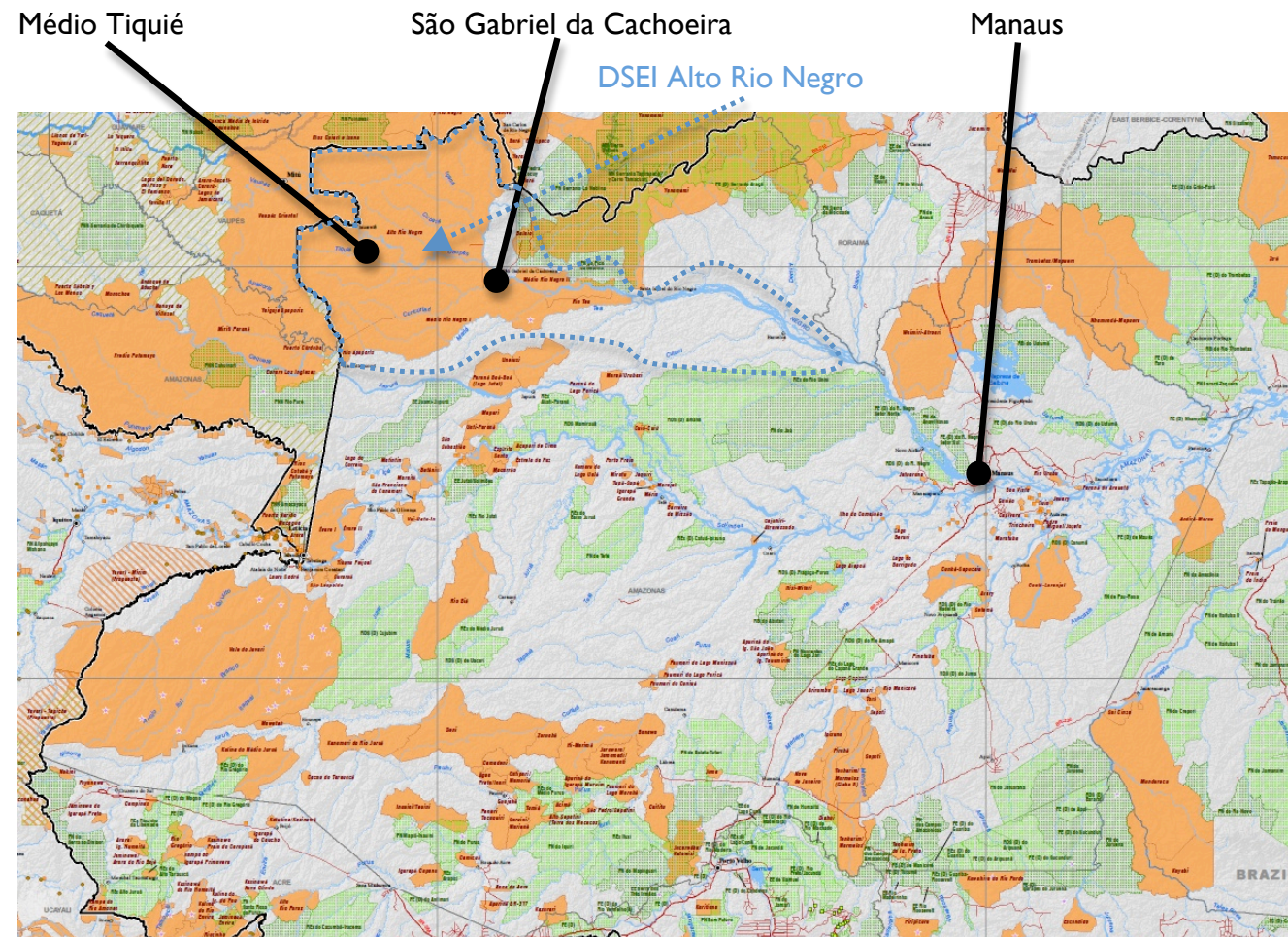
Source: RAISG 2009

Amazonas was first constituted as a single political territory under the Portuguese Captaincy (*Capitania*) of the Rio Negro. As the territory's administrative centre, Manaus (then known as Barra) served as a base first for trading with and then for fighting and enslaving the Manao people who had originally dominated the lower and middle reaches of the great Rio Negro, the Amazon's largest tributary. For the best part of three centuries (barring a brief period as an insurgent stronghold during the *Cabanagem* revolt in 1836) it remained a colonial outpost, serving as a base for sporadic military and scientific expeditions intended to consolidate control of the vast Amazonian borderlands where Portuguese Brazil came up against Spanish America, and for systematic slaving raids up the Rio Negro and Solimões and along their tributaries. Then, as the rubber boom took hold in the late 19th century, Manaus experienced an extraordinary surge of wealth, which gave rise to the enduring legends of *patrões* who lit their cigars with banknotes and ladies who sent their linen to Europe for laundering to avoid staining it in the tannin-laden waters of the Rio Negro. The rubber boom intensified the pressure on the indigenous peoples of Amazonas, who were forcibly recruited into bonded labour on the great rubber estates, but because the density of *hevea brasiliensis* trees was so much lower in the Rio Negro basin than in the Juruá and Acre-Purus basins of Southwestern Amazonia, the axis of migration was directed towards Acre, with Amazonas in general and the Rio Negro in particular receiving comparatively fewer *nordestino* migrants (Hemming 1987).

The end of the rubber boom in 1912 bankrupted many of the great trading houses of Manaus, and apart from the brief resuscitation of the rubber economy during the Second World War Amazonas seemed destined for irreversible economic decline. Then the military dictatorship took a hand, with a seemingly bizarre piece of economic central planning that used fiscal incentives administered by SUDAM to direct into the *Zona Franca de Manaus*, or Manaus Free Trade Zone, the bulk of Brazil's assembly plants for white and electronic goods. As John Hemming notes, "[the military's] curious solution proved surprisingly effective", thanks largely to the high tariff barriers which the regime maintained against imports that could have competed with the output from

Manaus's assembly plants (Hemming 2003: 460). When those tariff barriers started to come down during the "neoliberal shock" of the Collor government in the early 1990s the Zona Franca shrank dramatically, but it was saved by a mix of restructuring and state subsidies and over the last decade it has once again grown strongly, this time on the back of booming domestic demand for electronic goods.

Government subsidies apart, the profitability of the Zona Franca's assembly plants is ensured by an abundance of cheap but manually-skilled labour which in turn is guaranteed by the steady flow of rural migrants into the city. Most of these migrants are of indigenous descent, and they are following a path worn over the centuries by indigenous people from all over Amazonas who moved to Manaus either involuntarily, as enslaved or indentured labourers or domestic workers, or voluntarily, as mission-educated "civilised indians" in search of social mobility. The biggest contingent of migrants in Manaus is from the Upper Rio Negro, which is home to the largest surviving concentration of indigenous peoples in the state of Amazonas. In the 1980s migrants from the Upper Rio Negro living in Manaus took the lead in establishing Brazil's first urban indigenous movement, which included the first formally-registered regional indigenous women's organisation, AMARN (the *Associação das Mulheres Indígenas do Alto Rio Negro* or Upper Rio Negro Indigenous Women's Association). It is significant that AMARN took its name from its members' region of ethnic origin, despite being based in Manaus and representing many women whose families had moved downriver from the Upper Rio Negro region decades before. In fact, despite the great distance – over a thousand kilometres – which separates Manaus from the indigenous heartlands of the Upper Rio Negro, the capital is an established point of reference for the ethnic groups of the region, who are accustomed to following what Geraldo Andrello (2006) has described as "an intense practice of multilocality".

Within this broader framework of "multilocality" – which includes frequent circular movement by households between their "home village" and urban or peri-urban bases in Manaus or the smaller municipalities of the region – the Upper Rio Negro contains one of the very few concentrations in Brazil of indigenous groups still inhabiting the same territory occupied for millennia by

their direct ancestors (Wright 2005: 13).[28] This has enabled the 22 different peoples of the region, who belong to the Tukano, Arawak and Maku linguistic groups,[29] not only to retain a rich array of ancestor-myths and other lore relating directly to specific geographical features in the region but also to preserve a complex set of institutions for interethnic exchange. This process of exchange, which centres on the festival-institution of *dabucuri*, has ritual, social, political and commercial dimensions: from the retelling of mythological narratives within which groups locate one another's origins, to the exchange of marriage partners under the Tukano principle of "linguistic exogamy", to the establishment of military alliances, to the trading of the different goods in which each group's artisans specialise – such as the dugout canoes of the Tukano-speaking Tuyuka, the manioc graters of the Arawak-speaking Baniwa, or the carrying-baskets of the Maku-speaking Hup'däh (Cabalzar and Ricardo 2006).

Dabucuri and its related practices have given the diverse groups of the Rio Negro a framework within which to deploy a complex and politically sophisticated set of representations of hierarchy, alterity, affinity and reciprocity – with ritual hierarchy (among different ethnic groups and among different clans and sibs within those groups) being identified by many observers as one of the key characteristics of rionegrine political thought and practice (Athias 2003; Garnelo 2003; Cabalzar and Ricardo 2006). These representations and practices have profoundly influenced the ability of the Rio Negro *Movimento Indígena* to organise political action across interethnic boundaries – an aspect which I examine in detail in Chapter 8 – though that is not to say that *dabucuri* and the other rionegrine cultural-political institutions have remained unaffected by

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[28] When the Portuguese arrived in 1500, coastal and central Brazil were already in demographic flux as a result of the rapid territorial expansion of warlike Tupi-speaking groups (Hemming 1978). This was amplified by the massive disruption resulting from the epidemics, warfare and slave-raids of the colonial period, the mass *nordestino* migration of the rubber boom and the inexorable "March to the West" of the agricultural frontier over the last century – with the result that most "traditional territories" now inhabited by Brazilian indigenous groups have in fact been their home for only a few generations, having usually been occupied as a refuge after violent contact with non-indigenous society displaced them from former homelands.

[29] The regional convention is to include a fourth "language group", Nheengatú, which derives from the simplified Tupi which was introduced by the Jesuits in an attempt to establish it as a lingua franca for all indigenous groups. However, the groups who speak Nheengatú in the Rio Negro (of whom the most numerous are the Baré) were all originally Arawak-speakers.

contact with non-indigenous society. In fact, they have been profoundly affected by a contact process as sustained and brutal as any in Brazil, which included two centuries of slave-raids and epidemics and then several decades of subordination to viciously exploitative non-indigenous *patrões*, who operated with the connivance of the government Indian Protection Service (SPI), the predecessor of FUNAI. However, despite this battering the indigenous groups of the Rio Negro have been able to avoid wholesale decimation or displacement, and this has allowed them to maintain a vital if constantly-threatened sense of territorial, cultural and political continuity.

The grip of the Rio Negro's *patrões* was broken in 1914 by the arrival in the region of the Catholic Church's powerful Salesian Mission. The Salesians established a base in the town of São Gabriel da Cachoeira ("St. Gabriel of the Rapids"), which is the strategic centre of the Upper Rio Negro, located on high ground overlooking the massive set of rapids which marks the furthest navigable point for large boats coming upstream from Manaus. Because the missionaries put an end to the abuses of the *patrões* they were widely welcomed by the indigenous peoples of the Upper Rio Negro – but the welcome soon gave way to dismay as the missionaries revealed what John Hemming describes as their "conservative and authoritarian" side (Hemming 2003: 244). Destroying communal houses (*malocas*), banning *dabucuri* and seeking to stamp out shamanic healing practices, the Salesians initiated a period of "culture wars" whose consequences I examine in detail in Chapter 6.

One of the most deeply-resented of the Salesians' impositions was the requirement for indigenous children as young as six to be taken away from their home villages and placed in multi-ethnic boarding schools in São Gabriel or the upriver mission stations, where they were sex-segregated, subjected to rigid discipline and forbidden to speak any language other than Portuguese. Paradoxically, however, these schools provided a generation of Rio Negro indigenous leaders with weapons – language skills, literacy and familiarity with Western discourses – that they could use to fight back against the missionaries. This was famously demonstrated in 1980 when the mission-educated Álvaro Tukano (one of the founders of the national UNI) obtained the Brazilian passport

to which he was entitled as an "acculturated indian" and used it to travel to Rotterdam and denounce the Salesian Order in front of the Russell Tribunal on Genocide and Ethnocide (Ramos 1998: 111).

Álvaro Tukano and other young leaders who had left the Rio Negro to study in Manaus, Brasília or São Paulo brought the rionegrine practice of "multilocality" into the *Movimento Indígena* during the 1980s, working simultaneously to establish the national UNI, a number of indigenous organisations based in Manaus and a range of community associations in their ethnic home territories in the Upper Rio Negro. The latter dimension was becoming particularly important because after a long period of neglect they now found themselves confronting a resurgent interest in their region on the part of the state – and in particular the Brazilian military. This meant that in addition to dealing with the missionaries, the "founding generation" of Rio Negro *Movimento Indígena* leaders had to learn to engage with the state in their home villages as well as on the national and international stage.

3.3.2 Movimento Indígena-state engagement

In the early 1980s, having largely ignored the Upper Rio Negro for most of the two centuries since a series of military expeditions finished demarcating Brazil's borders with the Spanish colonies occupying what is now Colombia and Venezuela, the Brazilian national security establishment decided that the country's geostrategic interests required a heavily militarised state presence along the northern frontiers of the Brazilian Amazon. In 1985 the military-backed civilian President José Sarney authorised a massive programme called *Calha Norte* ("Northern Watershed"), which included road-building and the construction of "frontier platoon" army bases along Brazil's borders with Venezuela and Colombia – thereby militarising a borderland that was occupied almost exclusively by indigenous groups.

When *Calha Norte*'s military planners arrived in São Gabriel, they found that the emerging *Movimento Indígena* had already begun to discuss the issue of land rights. This had come to the fore not because of migratory pressures – the Rio

Negro's lack of rubber trees had kept out the *seringueiros* and its lack of roads still protected it from the ranchers – but because mining companies were showing an increasing interest in prospecting for gold and other minerals in the headwaters (a factor not entirely unconnected with the military's own interest in the region). Both the military (with the aid of FUNAI) and the mining companies began an intensive hearts and minds effort to convince the *Movimento Indígena* to scale down its land rights claims, promising to build hospitals and other infrastructure and making cash payments to leaders and community associations.

This effort succeeded in dividing the nascent *Movimento Indígena* between leaders who insisted on full cultural self-determination within a single continuous multiethnic territory and others who were willing to consider the military's "modernising" alternative, which involved smaller areas being demarcated as "indigenous colonies" with the surrounding land designated for commercial exploitation. The latter group accused the former of trying to consign the region's indigenous inhabitants to the backwardness of the "time of the *malocas*", depriving them of the benefits of civilisation – and in turn received counter-accusations of selling out the patrimony of their ancestors. As Geraldo Andrello (2006) brilliantly shows in his study of the micropolitics of the "indian town" of Iauaretê in the Uaupés region of the Upper Rio Negro, these ideological and political divisions persist to this day. However, the Rio Negro *Movimento Indígena* has been extraordinary successful in managing them, largely through the innovative institutional arrangements developed by its regional organisation FOIRN, the *Federação das Organizações Indígenas do Rio Negro*, or Federation of Indigenous Organisations of the Rio Negro.

FOIRN was established at a grand *assembléia* of indigenous leaders from across the Rio Negro region in 1987, at the height of the tensions over *Calha Norte*. In a process which I examine in detail in Chapter 8, it established a broadly successful compromise between local autonomy and regional-level collective action. After an initial period of instability, this enabled FOIRN to consolidate its legitimacy and settle the argument over the form of land demarcation for which the *Movimento Indígena* would campaign in favour of the "single continuous territory" model – helped by a growing perception among

local leaders that the military and the mining companies were breaking their promises, as the economic situation deteriorated and budgets were cut. FOIRN's land rights campaign was hard-fought but ultimately achieved triumphant success, culminating in 1998 with the physical demarcation of no less than 109,185 square kilometres as the Upper Rio Negro Indigenous Territory. Together with the subsequently-recognised territories in the neighbouring Japurá, Apaporis and Middle Rio Negro regions, this represents the largest continuous area of officially-recognised indigenous territory in Brazil.

With over 90% of its territory lying within the demarcated area and with almost 90% of its population self-identifying as indigenous – a situation that is almost unique in Brazil – the municipality of São Gabriel da Cachoeira might have seemed a certain candidate for an indigenous takeover once democratisation took hold in Brazil. In fact, successive municipal elections were won by white candidates, representatives of the powerful non-indigenous minority who controlled commercial life in the region through the wholesale operations in São Gabriel that supplied the Rio Negro's network of river traders. This commercial power allowed them to establish conventional patron-client relations with rural communities which reliably delivered indigenous votes for the traditional clientelist parties at election time – until the growing political strength of FOIRN and the establishment of municipal branches of anti-clientelist parties like the PCdoB, PT and PV presented them with the real prospect of defeat by an indigenous candidate for mayor in the 2004 municipal elections. This prospect attracted the attention of Eduardo Braga, the Governor of Amazonas – a self-declared moderniser and born-again environmentalist whose political support base was nevertheless firmly rooted in the centrist-clientelist PMDB. Braga did not relish the prospect of an independent-minded indigenous-led administration in the strategic municipality of São Gabriel, especially as the FOIRN-backed candidate Pedro Garcia Tariano was affiliated to the PT, whose Amazonas branch opposed his government (despite the formal PT-PMDB alliance which was in force at the national level). According to my interviewees in São Gabriel, it was inducements offered by Braga to particular groups (in particular the Baniwa of the

Içana region) that split the indigenous vote at the last minute and cost Pedro Garcia victory by less than 300 votes.

This political strategy may or may not have been connected with Braga's subsequent appointment of Baniwa leader and former FOIRN director Bonifácio José to head the state government's indigenous affairs agency, FEPI. Established by Braga's predecessor, FEPI had long been seen as a tokenistic and ineffectual agency, but it gradually assumed more strategic importance as Braga polished his green credentials. Although he never came up with a discourse as striking and coherent as the Acre PT's *Florestania*, after his reelection in 2006 Braga began to attract international plaudits for his government's green policies, including an innovative programme of payment for environmental services pioneered by Virgílio Viana, his well-respected Secretary for the Environment and Sustainable Development. With a quarter of the state's forested area gazetted as indigenous territory, Braga needed the *Movimento Indígena* on side as he tried to position Amazonas as a prime recipient of rainforest-preservation funding. At the time of writing this strategy has just reached a new symbolic high point with the creation of a Secretariat for Indigenous Peoples to replace FEPI (inverting the sequence followed by the Acre state government, which downgraded indigenous affairs from full secretariat to advisory department status in 2007), in a decision that has been loudly praised by the Manaus-based regional *Movimento Indígena* organisation COIAB (Mota 2009).

As Governor Eduardo Braga manoeuvred to extend his influence over the state-level *Movimento Indígena*, FOIRN was finally breaking through in São Gabriel da Cachoeira. In the municipal elections of October 2008, Braga's old adversary Pedro Garcia Tariano was duly elected as the first indigenous mayor of São Gabriel, with 51% of the votes cast. This time he left no room for a repeat of the 2004 split, choosing as his running mate a leader from the Içana: the FOIRN director (and brother of Bonifácio) André Baniwa. André had acquired considerable management experience as one of the FOIRN directors involved in running the Alto Rio Negro Special Indigenous Health District (DSEI) under contract to FUNASA in 2002-2006. In Chapter 8, I discuss in detail how FOIRN dealt with the challenges of involvement in health service outsourcing – and in

particular how it avoided the disastrous consequences which this involvement brought for UNI. In this discussion, I argue that FOIRN's handling of the DSEI can be seen as part of a broader strategy of occupying the institutions and spaces of power of the "white state" and challenging prevailing stereotypes of indigenous incapacity and pre-modernity. The election victory of October 2008 was part of the same strategy, and has brought the *Movimento Indígena* into power in a sizeable Brazilian municipality for the first time – extending its engagement with the state into new terrain.

Part I of the thesis has sought to locate representation conceptually, and to and situate my research on it in Brazil and the Amazon methodologically, historically and geographically. Part II focuses the analysis on the first element of my conceptual framework, *representing health*.

PART II

REPRESENTING HEALTH

Chapter 4 *Sanitarismo*

4.1   The SUS Tribe

***Lecture Theatre of the FAAO university campus, Rio Branco, Acre, 6 September
2007***. *As the delegates to the 5th Acre State Health Conference disappear into the
classrooms where they will spend the next three hours deliberating in small
working groups, Conference organiser Zilmar Cândido da Silva sits down next to
me with a sigh of relief. She asks me how the indigenous delegates are getting on.
I comment that they seem to have difficulty understanding the terms used in the
debates and expressing their own proposals in those terms. "Yes", she says with a
wry smile, "o povo da saúde does have its own culture and language".*

The first section of this chapter explores *sanitarista* identification within the "SUS
tribe" as a subject position that brings a particular representation of personal
identity together with a particular representation of health around the notion of
the SUS as a driver of "democracy as inclusion". The next section examines an
alternative strand within the *sanitarista* tradition that emphasises inclusion without
(and sometimes in opposition to) democracy, going back to the origins of
sanitarismo and tracing the development of the service delivery organisations that
have evolved out of the encounter between *sanitaristas* and the state, with
particular reference to FUNASA. Chapter 5 will examine the origins,
development, institutions and discourse of the Indigenous Health Subsystem,
understood as the product of the encounter between *sanitarismo*, *indigenismo* and
the *realpolitik* in which FUNASA became embedded. The ways in which health is
represented in *sanitarismo* and in the Subsystem under FUNASA's management
are then compared, in the Chapter 6, with the representations of health that are
deployed by indigenous medical specialists as they compete with exponents of
both the SUS and FUNASA versions of *sanitarismo* for hegemony among the
indigenous communities of the Rio Negro.

4.1.1   Sanitarista *as subject position and movement identity*

While *o povo da saúde*, the phrase used by my interlocutor Zilmar in the scene
described above, could be translated literally as "health people" and taken simply
to refer to anyone involved with health care, in the context of contemporary

Brazil it is both a more specific description and a marker of political identity. In this usage, *povo* means "people" not as persons in the plural, but as a distinct community, polity or tribe – the sense in which it is used by indigenous representatives referring to their ethnic group ("*o povo Ashaninka*"). *Saúde* means not health as a concept or condition, but the institutions which make up the official public health system, the *Sistema Único de Saúde* (SUS). And the preposition *da* – "of the" – conveys not a simple link but rather a sense of identification, membership and commitment. *O povo da saúde* is "the SUS tribe".

As I indicated in Chapter 2, the key ideological marker of membership of the "SUS tribe" is identification with a *sanitarista* position. This position carries with it a particular set of representations of health, and I argue that it is only by understanding both these representations and their institutional expressions that we can begin to interpret the interactions which take place at the interface where the SUS meets the *Movimento Indígena*.

Zilmar is an energetic, capable health service manager with a nursing background. For the last few years she has served as Executive Secretary to the Acre State Health Council, in which capacity she has helped to organise the last two State Health Conferences. She is often chosen by the State Secretary for Health to represent him at events where the theme is *controle social* in the health sector (such as the SSL workshop where I met her for the first time). She describes herself as "passionate about *controle social*", and tirelessly uses her position and know-how to open up opportunities for marginalised groups – including Acre's indigenous peoples – to enter the official SUS participation spaces so that they can have a say in the running of the services that affect them.

Zilmar was born on a rubber estate in the Juruá Valley, which has a strong regional identity and is a major centre of the *seringueiro* movement. She trained as a nurse, and has worked in the State Health Secretariat for a number of years, coming to occupy a series of relatively senior positions with the three successive victories of the Acre PT, of which she is an active member. She is black, and described to me how she went to look for her ancestors' place of origin in Mozambique when she found herself in Maputo for a conference. But when I asked her about her life history, when I watched her introduce herself to different

groups of people in formal and informal settings, and even when I joined her in debating issues of identity, policy and politics, she did not choose to speak in terms of any of these potential subject positions – except once, when one of the doctors to whom we were chatting during a lunch break at the Conference mentioned his descent from German immigrants in Southern Brazil and she responded "well, my ancestors came over in the belly of a [slave] ship". This comment positioned her as literally *afrodescendente* (of African descent), a framing of black Brazilian identity which has gained increasing currency among race-equality movements in recent years. However, it was made in an informal, "quasi-private" setting. In "public" settings where others present were asserting race, gender, regional, professional and political-party identities, Zilmar consistently chose instead to emphasise her membership of *o povo da saúde*. At the State Health Conference, this identity also apparently trumped her status as a nurse and a health system manager: on first taking the microphone at the Conference, she stated that she was participating "not as a health professional, not as a government employee, but as a SUS activist".

While it is predictable for a government official at a health conference to attempt to neutralise potentially hostile reactions by stressing her ideological commitment to the public health service and claiming to be a longstanding activist on its behalf, Zilmar's assumption of this subject position did not sound false and was not questioned by anyone present – despite the obvious counter-argument that she was in fact there precisely because she was a government employee, occupying a post which she owed to her training as a health professional (and, it could be suggested, to her links with the party which controlled the state government). In the world of Brazilian health policy, it is perfectly legitimate for a government official to assume the subject position of "SUS activist". Membership of *o povo da saúde* not only cuts across the conventional state-civil society divide, it connects service user representatives, professionals and managers across the internal hierarchies of each segment, linking neighbourhood mothers' club organisers and national union bosses, community health workers and eminent epidemiologists, street-level bureaucrats (Lipsky 1983) in rural municipalities and high-ranking officials in the Ministry of

Health. It gives hundreds of thousands of Brazilians – women and men, black and white, poor and privileged – an identity based on membership of what Andrea Cornwall and I have described (following Haas 1992) as the "SUS epistemic community" (Shankland and Cornwall 2007: 175).

The SUS epistemic community apparently subsumes inequalities of class, race, ethnicity, gender, geographical origin and professional status, in pursuit of a visionary political project whose declared aim is the elimination of these inequalities as they affect access to health care. Difference matters in SUS ideology, but only because it is correlated with inequalities in access to services – emphatically not because it is also associated with different perspectives on the nature of health and disease, on the types of activity which contribute to wellbeing and illbeing and on the issues with which the health system should concern itself. The fact that Zilmar chose to highlight her position as *afrodescendente* in a "private" conversation but in all her public discourse had no hesitation in foregrounding her membership of *o povo da saúde* while remaining silent on this race identity (and any gender, regional, professional or party-political identifications she may have felt) hints at a key aspect of SUS ideology: it is both radically inclusionary and either blind to or actually intolerant of difference. It is this paradox which makes the SUS both extremely attractive and extremely frustrating for those who try to engage with it as representatives of minorities whose claims are based on assertions of difference.

The significance of this phenomenon also extends far beyond the health sector, thanks to the importance of this sector as a trailblazer and bellwether for other areas of Brazilian social policy. That rights-based reform in the health sector has achieved this "paradigmatic" status for social policy in the country (Melo and Rezende 2004: 44) and even been recognised as a driver of democratisation rather than merely a side-effect of it (Labra and St. Aubyn de Figueiredo 2002) is both consequence and cause of the role of the SUS epistemic community as one of the most durable and influential elements of the evolution of Brazil's post-dictatorship polity. As I argue in Chapter 2, the SUS epistemic community has energetically promoted the notion of democratisation as inclusion, and both helped to broaden political inclusion and successfully ensured its own

reproduction through the institutions of *controle social* which are hard-wired into the structure of the health system.

As I noted in Chapter 1, specific health issues can stir political passions that lead to engagement with broader questions of citizenship and democracy – but it is rare to find a setting in which health policy as a whole is so thoroughly and explicitly politicised, to the point where the health system itself is treated as a microcosm of the polity and a laboratory for democratic experimentation. Gill Walt opens her influential study of health policy (subtitled "An Introduction to Process and Power") by recalling a conversation in which a Brazilian colleague tells her that "In Portuguese the word 'politica' means both policy and politics" (Walt 1994: 1). This insight is relevant to understanding policy processes in all sectors in Brazil – but it does not explain why this explicit politicisation of the policy process should have begun earlier and advanced further in health than in any other sector. In Chapter 2 I gave an overview of the factors that drove the creation of the SUS and ensured its survival and growth in an often hostile macro-political context – and argued that a key element was the ability of the SUS epistemic community to reproduce itself in the participation spaces of the health system while continually recruiting new actors.

4.1.2 The Acre State Health Conference

This was vividly in evidence at the 5th Acre State Health Conference, where state government representatives, led by Zilmar and the young, energetic *sanitarista* State Secretary for Health, Oswaldo Leal, went to considerable lengths to guarantee and support the participation of indigenous delegates – which included inviting me to come as a "supporter" to help ensure that the indigenous participants were able to get their concerns onto the Conference agenda (raising the positionality issues which I explore in Chapter 1 and Appendix A). The broader political context of the engagement between the Acre *Movimento Indígena* and the state government within which this participation was situated is analysed in detail in Chapter 8. Here, I will concentrate on the general ways in which the inclusionary spirit of the SUS was represented at the Conference, and

the specific ways in which this representation was signalled to the indigenous representatives.

Everyone arriving in the main hall was greeted by an enormous banner where the Conference's name ("5th State Health Conference") and its nationally-determined official theme ("Health and Quality of Life") were underpinned by the strapline "*A Política da Saúde Pública no Estado da Florestania*". As discussed in Chapter 3, "*Florestania*" (or "Forest Citizenship") is the label adopted by the PT-led administrations in Acre for their claim to be promoting policies of social and political inclusion for the state's forest-dwelling populations. Because "*política*" can mean either "policy" or "politics" (as noted above) and "*estado*" can mean "state" either as a political-territorial entity ("the State of Acre") or as a condition ("a state of happiness"), the Conference's strapline could be read either as "public health policy in the state which promotes *florestania*" or "the politics of public health when people attain a state of *florestania*". Having analysed the discursive strategies of the Acre "Governments of the Forest" and interviewed some of their architects, I am in no doubt that the ambiguity was deliberate; the Conference strapline was intended to communicate the event's political (as well as policy) importance, and the link between participation in health policy *fora* and the attainment of a state of active (forest) citizenship.

This notion of institutionalised inclusion as something born out of people's active citizen engagement rather than simply extended by a benevolent state is a recurrent trope among the activists of the "SUS tribe". It helps to preserve the idea of SUS *controle social* institutions as "conquered" spaces, enabling them to retain the quasi-social movement character whose role in energising and articulating the "SUS epistemic community" I examined in Chapter 2. At the Acre State Health Conference, the idea of the SUS as something incomplete that had to be continually constructed through mobilisation and struggle – rather than as an established system requiring policy adjustments – was reiterated by speaker after speaker.

The star turn was given by Gilson Carvalho, a renowned *sanitarista* who had risen to head the powerful Health Care Secretariat of the Ministry of Health, and after losing this post had returned to the Ministry through the revolving door of

consultancy to advise on the National Policy for the Humanisation of Health Care. Invited by the Conference organisers to give the keynote speech on the opening day, Carvalho – an imposing figure with the abundance of grey beard that seems to go with the status of hero of the *Movimento pela Reforma Sanitária* – trod the boards of the auditorium stage with great energy, exhorting participants to join the fight to preserve the SUS, "the world's greatest health service... which doesn't belong to the manager, to the governor, to the mayor, but to the citizen". Insisting that "health is more than a human right, it is a positive Constitutional right", Carvalho stated that "the Constitution is my Bible". This religious language is a recurrent element in Carvalho's rhetoric and in that of other *sanitaristas* who – like him – became involved with health rights struggles through the Catholic *Comunidades Eclesiais de Base*, or Grassroots Church Communities. In his latest book (which was on sale at the Conference along with many other *sanitarista* devotional texts), Carvalho opens his analysis of the health system with a section headed "A Statement of Faith". In this section, he writes "I would like to see the essence of the SUS carried forward by every male and female citizen as if it were a statement of faith, rooted in hearts and minds like a religion" (Carvalho 2007: 27). Carvalho's speech at the Acre State Health Conference left no doubt as to what was required of those in whom the *sanitarista* faith had been kindled: they must join in the ongoing struggle to build the SUS, as a demonstration that they were indeed true citizens – defined, in a quote from legendary Brazilian sociologist Herbert "Betinho" de Souza, as "people who are conscious of both their rights and their responsibilities, and participate actively".

The idea of inclusion as something sought and achieved by active citizens was also represented by the way both organisers and delegates treated the indigenous participants at the Conference. The indigenous delegates qualified for inclusion according to this criterion because the Acre *Movimento Indígena* had mobilised politically (with SSL's assistance) to demand the right to participate – the Secretariat's undertaking to guarantee indigenous participation came after a workshop which my SSL colleagues and I had facilitated in Rio Branco a couple of months before the Conference, at which a group of over 50 indigenous leaders presented Zilmar (who had been delegated to represent Oswaldo) with demands

for the Secretariat to engage directly with the *Movimento Indígena* in seeking to improve accountability and service quality in indigenous health care provision. During the Conference, Zilmar and Oswaldo made conspicuous efforts to signal their appreciation for the presence of the indigenous delegates, stopping whenever they crossed paths with them to ask how they were doing – signalling that they wished to be reassured that the indigenous representatives felt fully included in this very important event, and that they recognised the effort that had been made to guarantee their participation.

This effort did not extend to the nature of the deliberative process, however: welcoming as they were, the organisers and facilitators made no concession to the need for discourse or practices to be adapted to facilitate the indigenous delegates' understanding or take account of their perspectives. Following a broader pattern which I analyse in Chapter 9, no one tried to simplify the dense Latinate legal terminology which is such a marked feature of Brazilian Health Conferences, or to explain the profusion of arcane terms and acronyms that dominated the plenary debates[30]. The indigenous delegates were expected to compete for the microphone and make their points as best they could, and when their (infrequent) speeches during the plenary failed to fit the appropriate SUS discursive register they were either ignored or "reinterpreted" (sympathetically but patronisingly and often incorrectly) by the facilitators for the benefit of the other delegates.

However, at no point did Zilmar and Oswaldo, or any of the other organisers, seek to influence the proposals the indigenous representatives aimed to place on the Conference agenda. On one level, they had no need to micro-manage indigenous participation because the overarching political bargain (analysed in Chapter 8) had already been struck, and because there were allies on hand (including me) who could help ensure that it was followed through. Nevertheless, by their behaviour they were also signalling that the task of true

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[30] The latter included ato médico, vigilância epidemiológica, intersetorialidade, hierarquização, pactuação bipartite, repasse fundo-a-fundo, CRM, COREN, SAS, PSF, MAC, IAPI, TFD – to cite only those which I noted down.

leaders of *o povo da saúde* is to bring active citizens into the fold, not to manipulate or control their democratic self-expression once they are inside.

In this respect, the contrast with FUNASA's attempts to represent the inclusion of indigenous peoples at the 4th National Indigenous Health Conference (analysed in detail in Chapter 9) could hardly have been greater. Clearly, the *sanitarista* spirit which represents health as the outcome of a process of democratic inclusion of active citizens was not the one guiding the apparatchiks who operated FUNASA's manipulation of that Conference. That is not to say, however, that those FUNASA apparatchiks' claim to be heirs to the same *sanitarista* tradition as the *povo da saúde* is necessarily wholly false. In the next section, I examine why.

4.2   *Sanitarismo* and its discontents: from the "Vaccine Revolt" to FUNASA

Edifício FUNASA, Brasília, 17 April 2008. *I am standing in the lobby of FUNASA's large but somewhat run-down national headquarters building with my colleagues from IDS, SSL and Cebrap, waiting for the summons to our meeting with Dr. Pimentel. Our three institutions – a UK-based development studies institute, a Brazilian health rights NGO and a Brazilian social policy think-tank – have come together to undertake a large piece of consultancy work whose stated objective is to support a thorough overhaul of the Indigenous Health Subsystem. I am the IDS project manager, FUNASA are the clients, and Dr. Pimentel is the FUNASA Director in charge of the World Bank-funded "VIGISUS II" programme through which they are commissioning the work.*

The lobby is dominated by a large panel which lists the key events in FUNASA's history, like battle honours on a regimental war memorial. Although FUNASA was only created in 1991, the panel traces its descent directly from the institutions established by Oswaldo Cruz, the founding father of Brazilian public health: its timeline starts in 1904, with his appointment to the Directorate of Public Health and the launch of his campaign against yellow fever in Rio de Janeiro. The panel's sepia-tinted background with its images of rugged-looking men in battered tropical battledress setting off to eradicate mosquitoes in some jungle backwater gives a clear message: this is a venerable and heroic institution, which has made many sacrifices in the struggle to free Brazil from the scourge of disease.

I don't have time to read through all the public health triumphs listed in the timeline, because the summons arrives for us to go up to Dr. Pimentel's office. We are ushered through the antechamber – where ranks of secretaries are typing and less fortunate supplicants than us sit or stand while they await their chance of an appointment – and into the presence of the Director. He is talking animatedly on the phone, but concludes the conversation with a series of brusque orders and rises to greet us.

Dr. Williames Pimentel (it turns out that the honorific "Doutor" is not because he is a medic, but because he has a law degree; very few senior FUNASA managers today actually have any public health training) is a large man, bulging out of his dark suit, with a fleshy face and quick eyes. He greets us warmly enough, but it is soon clear that he is unhappy about something. He raises no objection to our technical proposal – in fact, he makes no comment at all on either the issues we are proposing to address or the methodology we are proposing to use, and I get the distinct impression that he hasn't actually read our proposal document. It turns out that the problem is not technical but political: the head of FUNASA's Indigenous Health Department (DESAI) has complained to him that the IDS-SSL-Cebrap team includes several people who in the past have been outspokenly critical of FUNASA's alleged corruption and poor management of the Indigenous Health Subsystem. I can guess who the head of DESAI is talking about.

My guess is confirmed when the names are listed: the team members concerned are all SSL consultants or staff, and happen to be among Brazil's most respected indigenous health practitioners, having accumulated years of

experience working under very difficult conditions in some of Brazil's remotest regions – very much in the sanitarista *spirit celebrated by the panel downstairs in the lobby. They are passionate about the cause of indigenous health, and not the kind of people to remain silent when they perceive that the health rights of indigenous peoples are being abused.*

Dr. Pimentel and I spar for a while: he wants me to replace the team members who have criticised FUNASA in the past, and I am not willing to do any such thing. He eventually backs down when I point out that since FUNASA has already sent the World Bank its official "no objection" statement for our technical proposal – which included a full list of team members' names and all their CVs – he will need to send a correction to Washington, which will obviously cause embarrassment and delays. Dr. Pimentel is not interested in anything that might hold up the flow of World Bank disbursements on the VIGISUS II project, which according to the gossip we are hearing has already supported some very generous contracts to build indigenous health posts in his home state of Rondônia in the Western Amazon. So we agree that the consultancy work should go ahead, though of course our team will undertake at all times to show the proper respect for the venerable institution that has contracted their services.

This encounter with FUNASA came after the official end of my fieldwork, when I had already begun my writing-up, but it threw into sharp relief a sense that had formed during my research of the troubling contrast between the radical aspirations and noble achievements of *sanitarismo* and the crude *realpolitik* and authoritarian, dissent-repressing attitudes of the institution which claimed to represent the embodiment of its traditions in contemporary Brazilian health policy. As I went back over the literature on the history of public health in Brazil, however, it became clear that the disjuncture was not as clear-cut as I had supposed. If the radical-democratic spirit of Zilmar and the "SUS tribe" is one facet of *sanitarismo*, the institutional history of Brazil's public-health apparatus reveals that this has long coexisted with another facet – one that emphasises coercion and control rather than participation and rights.

4.2.1 *Oswaldo Cruz and the* Revolta da Vacina

This can be perceived in the most emblematic incident in the early history of *sanitarismo* in Brazil: the 1904 *Revolta da Vacina*, or Vaccine Revolt. Pioneering public health champion Oswaldo Cruz had been placed in charge of the effort to sanitise Brazil's then notoriously unhealthy capital city, Rio de Janeiro, where high death rates from Tropical diseases were blamed for deterring European

immigration and foreign investment. Cruz obtained government approval for a policy of compulsory smallpox vaccination backed by paramilitary force. Popular opposition to this provoked riots, which in turn ignited a general uprising in some of the poorest urban neighbourhoods, where Afro-Brazilian former slaves competed with destitute Portuguese immigrants for the work sporadically available in Rio's docks or in the glittering homes of the capital's élite – an uprising which in turn was used as cover for a coup attempt by a reformist élite faction. Jeffrey D. Needell has argued that the coup plotters were seeking "to erect an authoritarian, inclusionary, paternalist order dedicated to 'modernity' without marginalization or the continued hegemony of the agroexport elites" (Needell 1987: 268) – one version of a vision which has had plenty of adherents among *sanitaristas* and other activists of the Left in more recent periods of Brazilian history. In Needell's view, mass participation in the *Revolta da Vacina* in Rio reflected a "revolt against 'modernization'" to which the widespread destruction of working-class housing to make way for "modern" boulevards contributed significantly – but he notes that the tactics used by Oswaldo Cruz were both a symbol and an essential ingredient of this urban-cleansing "modernization" agenda:

> The two phases (yellow fever and plague eradication) completed before obligatory vaccination goaded the population mercilessly. For example, Oswaldo Cruz's plans for yellow fever (derived from the model of U. S. success in Cuba) turned on a strategy of dramatic and authoritarian tactics, carried out with precise military-style organization and in conjunction with the housing destruction. Despite the obvious benefit to the population, the doctor's prescription doubtless fostered bitterness and suspicion. Cruz divided the city into sections and then, armed with the appropriate legal dispensations, sent in teams of officials and sanitary police to inspect every building, force the cleanup of mosquito breeding grounds, and designate which buildings were too amenable for such breeding to be allowed to stand. These were promptly torn down. The procedure for plague eradication was similar: it involved rat killing and unannounced visits to buildings to ensure that the residents maintained the required conditions and, as with yellow fever, registered the diseased. In both cases, then, the poor were physically forced to stand aside while the public physicians, sanitary police, and public health officials entered and ransacked their homes, designating some for destruction and reserving the rest for periodic invasions, threats, and meddling. (1987: 257)

Although the coup attempt was frustrated and the popular *Revolta da Vacina* was brutally put down, compulsory smallpox vaccination was put on hold by the government. Oswaldo Cruz turned back to the fight against yellow fever, leaving the Directorate of Public Health and establishing a new base of operations in the Rio suburb of Manguinhos. There, he created the Experimental Pathology Institute which was later to become the Fundação Instituto Oswaldo Cruz, or FIOCRUZ – home of the National School of Public Health and training-ground for the most renowned leaders of the *Movimento Sanitarista*. After yellow fever was formally declared to have been eradicated in Rio in 1907, Oswaldo Cruz turned his attention to the Brazilian interior, setting up a yellow fever control programme that represented the first serious incursion of *sanitarismo* into Brazil's paradigmatic "disease frontier": the Amazon.[31]

4.2.2 Sanitarismo *in Amazonia*

At the time, there was a clear economic logic driving *sanitarista* interventions in the Amazon: the "rubber boom" was at its height and the massive number of deaths from malaria and yellow fever among migrant *seringueiros* was compromising the economic viability of the great rubber estates. The rigid disease prevention programme which Cruz prescribed for the workers building the notorious Madeira-Mamoré rubber transportation railway in the Western Amazon is credited by FUNASA's official history with having made the railway's completion possible (FUNASA 2004: 20). However, with the collapse in rubber prices after 1912, the Brazilian government quickly lost interest in attempts to "sanitise" the Amazon.

This changed again in the 1940s, when the Japanese captured Malaya, where the British had used smuggled Amazonian rubber seeds to establish the plantations that broke Brazil's dominance of the world rubber supply. The Allies' desperation for a reliable source of rubber drove up prices in the Amazon once

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[31] According to Needell's account of the aftermath of the *Revolta da Vacina*, in travelling to Amazonia Cruz was following in the footsteps of some of the people who had resisted his authoritarian imposition of public health measures: "The streetfighters, beggars, unemployed, and prostitutes were sent to a kind of Brazilian Devil's Island – the recently acquired Territory of Acre, in the steaming tropical rain forests drained by tributaries of the Amazon" (1987: 267).

more, and the Americans persuaded Brazilian dictator Getúlio Vargas to institute the "Battle for Rubber" (Hemming 2003: 297). This was a campaign of mass recruitment among the landless and marginal smallholders of the drought-prone Northeast, to rebuild the depleted Amazonian *seringueiro* labour force. Soon, migrant *seringueiros* were once again dying in vast numbers in the rubber estates of the Amazon, threatening their ability to meet American demand. In 1942, an agreement signed between the Brazilian Ministry of Health and Education and the US Department of Interamerican Affairs led to the establishment of the Special Public Health Service (SESP), which was to become one of the most renowned *sanitarista* institutions and FUNASA's direct ancestor of (FUNASA 2004: 24).

SESP remained in operation after the end of the war, despite the diminished strategic importance of Amazonian rubber. In 1960 it was reorganised as FSESP, a government foundation subordinated to the Ministry of Health, and continued to run small field hospitals, install sanitation infrastructure and operate preventive health outreach programmes in many parts of the Amazon and Northeast (FUNASA 2004: 26). FSESP doctors, known as "*sespianos*", were immensely respected in the small towns of the interior for their professionalism and their commitment to treating all patients irrespective of their ability to pay – generating a popularity which led many to launch political careers (Renato Athias, pers. comm. 2008).

At the other end of the class spectrum, the status of *sespiano* doctors was paralleled by that of the foot-soldiers of the battle to eradicate malaria in the Amazon: the *mata-mosquitos*, or "mosquito-killers" of SUCAM, the Public Health Campaigns Superintendency (FUNASA 2004: 28). Established in 1970, at the height of the military régime, SUCAM was organised along paramilitary "brigade" lines with a rigid hierarchy whose base was formed by detachments of uniformed "Endemic Disease Guards" – the *mata-mosquitos*. Despite its militaristic organisation, in the Amazon SUCAM did not trigger the popular resistance that the "Sanitary Guards" deployed by Oswaldo Cruz had provoked in Rio six decades earlier. Its interventions targeted not poor people themselves but an enemy who was feared deeply by poor and rich alike: the malaria-carrying *anopheles* mosquito, combated not by tearing people's houses down but by

spraying their thatched roofs with insecticide. The *mata-mosquitos* were respected for their willingness to travel to the remotest communities, lugging the heavy equipment which they used to spray mosquito breeding-sites with DDT – exposure to which was to leave many of them with terrible long-term health problems (Ferreira 2009). When I first visited the rubber estates of the Juruá Valley in 1989, I found *seringueiro* huts deep in the forest, more than a week's boat journey from the nearest town, with the word "SUCAM" and a reference number painted neatly above the door, as a record of the last visit by the *mata-mosquitos*. Local people told me that SUCAM was the only public institution with which they came into regular contact – and the only outside source of health services beyond the medicine-selling river traders and the politicians who appeared at election-time, distributing antibiotics in exchange for votes.

The origins of SUCAM lay in a precursor institution, the National Department for Rural Endemic Diseases (DENERu), whose ancestry can be traced back to an earlier wave of *sanitarista* mobilisation: the "Campaign to Sanitise Brazil", which persuaded the government to set up the National Department of Public Health (DNSP) in the period between the first and second world wars (Lima and Hochman 2000: 321). This campaign was spearheaded by a group known as the "hygienists", whose thinking, Lima and Hochman have argued, "played a central and long-lasting role in the reconstruction of national identity from the starting-point of identifying disease as a distinguishing element for the condition of being Brazilian" (2000: 314). This "reconstruction of national identity" was especially significant in that it rejected previously-dominant racially-based explanations for Brazilian "backwardness", arguing instead that poor health was the principal factor behind the failure of rural Brazilians to embrace modernity and raise their productivity to European levels. The campaign appealed to a rising tide of nationalist sentiment, arguing for health services to be extended to the interior in order to ensure the social inclusion of Brazilians who, in their malnourished and malaria-wracked listlessness, were not even aware which country they belonged to, let alone ready to spring to arms in its defence (*ibid*.). These arguments were revived by the military governments and harnessed to their slogan "*integrar para não entregar*" ("integrate it in order not to lose it") during the

renewed push to "occupy" the Amazon in the 1970s – the period which saw the creation of SUCAM and the appearance of the *mata-mosquitos* in their paramilitary uniforms in remote settlements in the frontier states of Acre and Amazonas.

FSESP and SUCAM survived throughout the "lost decade" of the 1980s, but their model of "*sanitarismo campanhista*" ("campaigns-based public health promotion"), with its focus on the remote interior, no longer represented the cutting edge of *sanitarismo*. Instead, a new generation of health reformers were turning their attention back to the excluded masses of Brazil's cities, where rapid urbanisation followed by economic crisis and mass unemployment had left millions without the right of access to the government health services that were on their doorstep but served only the minority who were in formal-sector employment (Costa 2007). As I have argued in Chapter 2, the *Movimento pela Reforma Sanitária* drew its strength from urban Popular Health Movements, and its *sanitarista* ideologues developed radical inclusionary models for bringing health to a Brazilian population that was imagined as essentially urban. The key issue was defined as universalisation of the right of access to existing health services, not the geographical expansion of those services.

In fact, some expansion had already taken place as a result of the successive efforts to "take health into the interior" launched under the military governments (Dowbor 2008). As these efforts led to the appearance of more regular public health service provision, the relative importance of FSESP and SUCAM began to decline in all but the remoter parts of the Northeast and the Amazon – though they retained an immense amount of public credibility.

4.2.3 Enter FUNASA

This was the situation when FSESP and SUCAM were suddenly merged in 1990-91 to create FUNASA, during the chaotic neoliberal "reform of the state" instituted by the government of Fernando Collor de Mello. Carla Costa Teixeira has pointed out that the merger was also driven by the creation of the SUS, with its radically new division of labour between the different levels of Brazilian

federalism: "If the reform of the state involved actions which sought to shrink the federal administrative machinery, the implementation of the SUS removed from the federal government the responsibility for the direct delivery of health care activities, transferring this responsibility to the states and municipalities" (Teixeira 2007: 7). FUNASA was, in effect, created as a sort of amorphous holding company for the federal health institutions and programmes declared obsolete by the new dispensation of the SUS.

The merger was deeply traumatic for staff of both FSESP and SUCAM. The attrition of responsibilities and personnel to which FUNASA was subjected over the next decade, and continuing efforts by pro-municipalisation *sanitaristas* to close FUNASA down altogether, created the impression of an institution living on borrowed time. The uncertainty over its future contributed to a failure to create a meaningful "brand" for the merged organisation with which the remaining staff could identify. As a result, long-serving FUNASA personnel to whom I spoke during the research still seemed – almost two decades after FUNASA's creation – to be in mourning for the lost greatness of either FSESP or SUCAM, depending on which of the two institutions had been their original home. This sense of primordial allegiance was reflected in in-fighting between factions tracing their origins either to FSESP or SUCAM, aggravated by regional rivalries and differences in their institutional cultures and professional hierarchies (Rômulo Paes de Sousa, pers. comm. 2009).

This combination of institutional directionlessness and divided loyalties eroded the common *sanitarista* identity which many FUNASA staff might otherwise have espoused, which in turn made FUNASA more vulnerable to a creeping takeover by political appointees who were driven by rent-seeking opportunism rather than *sanitarista* idealism. This takeover has been gradually consolidated over the last decade within FUNASA – in contrast to the Ministry of Health itself, which though rocked by sporadic corruption scandals and plagued by high Ministerial turnover has retained a pervasive *sanitarista* culture identified with the Ministry's self-proclaimed role as guardian and driver of the "SUS project". As a result, by the time I began my fieldwork FUNASA was becoming better-known in Brazil for its notoriously corrupt procurement practices than for

its commitment to public health. The scandals continued to intensify during my time in Brazil, to the point where in November 2008 the agency that could lay more claim than any other to being the institutional home of the *sanitarista* tradition that had Oswaldo Cruz as its patron saint was publicly accused by Health Minister José Gomes Temporão, a renowned *sanitarista* and former director of FIOCRUZ, of being a "den of corruption" (Ceolin 2008).

On the day when the story of the Minister's outburst broke, I was in Manaus with my colleagues from the IDS-SSL-Cebrap team. We were to be reunited with Dr. Pimentel for a major regional workshop with indigenous peoples' representatives, DSEI field staff and FUNASA regional managers to discuss the initial conclusions and proposals of the VIGISUS II project consultancy. Here was a chance for FUNASA to celebrate the *sanitarista* spirit and draw on its legacy to imbue with a new urgency the effort to strengthen the Indigenous Health Subsystem – and a chance to draw all stakeholders together around a common vision forged through free and open debate.

However, it didn't seem as if FUNASA saw it that way. On the opening day of the workshop, in the breakfast room of the hotel where we had gathered to await the arrival of the most important guest – not an indigenous leader or field medic, of course, but the representative of the World Bank – one of my teammates overheard Dr. Pimentel giving orders to a group of lackeys. The orders were to keep a close eye on our presentations, and immediately cut off the microphone if any of the IDS-SSL-Cebrap team – eloquently described by Dr. Pimentel as "*estes comunistas filhos da puta*" ("these commie bastards") – showed any sign of using the workshop as a sounding-board for criticism of FUNASA.

In the event, we didn't need to make any public criticisms: we simply presented our technical analyses and facilitated an open discussion, in which a large number of participating indigenous representatives subjected FUNASA to a barrage of criticism far harsher than anything we could come up with. The nature of those criticisms and the conflicts which underpinned them can only be understood in the light of the development of the Indigenous Health Subsystem and FUNASA's role within it. This is the subject of the next chapter.

Chapter 5   The Indigenous Health Subsystem

5.1   *Sanitarismo* meets *Indigenismo*

***Department of Preventive Medicine, São Paulo Medical School, 23 February 2006**. Sitting with a laptop, an ashtray and a flask of sweet black coffee at a table in the small office he uses as a base when he is in São Paulo, Douglas Rodrigues is telling me the story of how the Indigenous Health Subsystem came into being. He describes the effort of mobilisation that went into organising the 1993 National Indigenous Health Conference, which agreed the detailed proposals for a specific indigenous health service – the satisfaction when SUS founding father and* sanitarista *icon Sérgio Arouca (then a recently-elected* Deputado *for the post-communist* Partido Popular Socialista*) agreed to put the proposals into a bill and steer it through Congress, and the frustration when the bill ground to a halt in the Congressional bureaucracy for which indians always seemed to be the lowest priority. Then Douglas breaks into a broad smile as he describes how the bill finally became law:*

> *Around this same time… the São Paulo Medical School had hired a lobbying firm, a big powerful lobbyist called Michelle... a very interesting blonde woman who really knew her way around, she used two mobile phones at a time when mobiles were something new in Brazil, she knew everyone... She had been hired to turn the School into UNIFESP[32], on a fixed-term contract, one or two years. This woman had been really efficient, and the law transforming the School into a University had gone through in a matter of months, but as she had the contract she was still being paid. I had gone to see the* Reitor *[equivalent of a British University Vice-Chancellor] to ask for help, to ask if he knew any* Deputados*, as we had this law we wanted to get through, and he said 'here's what I'm going to do for you... there's this lobbyist to whom we're paying a fortune, she finished getting our law through six months ago but because she has this contract we need to keep paying her, so let's get her to help you out'. So I said 'great' and off I went to Brasília, where this woman... took me from* Deputado *to* Deputado*, the really key guys, the Committee Chairs for the Justice Committee, the Health Committee... she managed to convince everybody with this discourse of 'come on* Deputado*, let's pass this bill, it's for the poor little indians'... there's a way to pass a bill, called* tramitação terminativa *[literally "terminatory scrutiny"], which is to get it approved by all the Committees; if it is OKed by all of the Committees in the Chamber of Deputies it doesn't need to be voted on by a Plenary session, it goes straight to the Senate and there it can also be approved via the Committees. So the indigenous health bill didn't go to the Plenary, it was approved by the Committees, it wasn't even discussed in the Plenary... after Michelle got involved, it went through all the Committees of the Chamber of Deputies in three months, then it went to the Senate where [PT Senator Eduardo] Suplicy helped out, and so on, and in 1999 it was passed into law.*

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[32] This refers to the creation of the Federal University of São Paulo – i.e. the lobbying was for Congressional approval to enable the School to secure full university status and allow it to expand.

5.1.1   Indigenismo sanitarista

Douglas, a handsome and charismatic doctor in his fifties, is a leading figure in Brazilian indigenous health circles. He is considered one of Brazil's foremost university-based experts on the subject, though his CV shows relatively meagre academic credentials (an incomplete PhD and a couple of co-authored articles). He is one of the most influential actors in indigenous health policy, though he has held no high-ranking government jobs – this despite his longstanding membership of the Communist Party of Brazil (PCdoB), which has controlled many of the key posts in the Ministry of Health and FUNASA (he turned down the post of FUNASA's Director of Indigenous Health when senior PCdoB leaders lobbied for it to be offered to him in 2007). Instead, he owes his status to his role as Coordinator of the São Paulo Medical School's programme in the Xingu Indigenous Territory and as protégé of the man who established the programme over forty years ago, Professor Roberto Baruzzi.

The Xingu, which covers 26,000 square kilometres of Central Brazil and is home to 15 different ethnic groups, is the best-known, most frequently filmed and most extensively-researched of Brazilian indigenous territories. It was created by the legendary Villas Bôas brothers, scions of a São Paulo ranching family who established the first permanent contact with its tribes (who had been protected from the full impact of the Rubber Boom by the formidable rapids of the lower Xingu River) after exploring the region during a series of government-sponsored expeditions in the 1940s and 50s (Hemming 2003: 133-174). The Villas Bôas brothers fell in love with the ideas of social and ecological balance that they perceived in indigenous culture – writing that "the Indian is not only at one with his natural environment but perfectly integrated into his society" (Orlando and Cláudio Villas Boas, cit. in Bisilliat 1995: 19) – and successfully fought to have much of the Xingu valley gazetted as a Park in which this culture could be preserved in its natural habitat. In 1965 they invited the young Dr. Roberto Baruzzi to help them deal with a malaria epidemic in the recently-created Park (Baruzzi 2007). He brought in a team of colleagues from the School, and soon transformed this short-term intervention into a permanent programme which

served as a training-ground for generations of young, idealistic health professionals. Many of these professionals, "*indigenistas sanitaristas*" steeped in both the *indigenista* tradition of the Xingu and the new wave of *sanitarista* idealism that was sweeping Brazil's medical schools, subsequently became standard-bearers for the struggle to transform the grossly inadequate health services covering Brazil's less fortunate indigenous territories into something approximating the Xingu model.

It was a group of Xingu veterans – including Douglas himself, his wife and fellow São Paulo Medical School lecturer Sofia Mendonça, and some of the professionals who were later to work with UNI (and me) in Acre and go on to set up SSL – who took the lead in trying to get indigenous health onto the agenda of the *Movimento pela Reforma Sanitária*, in which they were active participants. In 1986 these *indigenistas sanitaristas* linked up with Aílton Krenak's national *União das Nações Indígenas* and its anthropologist allies, and helped to persuade Sérgio Arouca to open a space for them in the 8th National Health Conference (VIII CNS). This led to a small parallel meeting of the VIII CNS which was given the grand title of "1st National Conference on the Protection of the Health of Indians", or I CNSPI (Van Deursen Varga 2007). Though it is widely cited as the foundational moment for the process which was to culminate in the creation of a specific health service for indigenous peoples, the I CNSPI was more important for bringing the issue of indigenous peoples' health to the attention of the *Movimento Sanitarista* than for placing any concrete policy proposals on the health reform agenda. It was the successor Conference held in 1993 – the II CNSPI – that formalised the outline of the proposed Indigenous Health Subsystem of the SUS, subsequently incorporated into the Arouca Law which would finally be pushed through Congress by Douglas's lobbyist friend in 1999 (Athias and Machado 2001; Langdon 2007). The Arouca Law was sold to its sponsor, who knew Douglas to be a fellow Communist and *sanitarista*, as a minor adjustment of the SUS's structure to further the principles of universality and inclusion on which it had been founded – when in fact its underlying logic lay awkwardly across the grain of the mainstream SUS, as I discuss below.

The story of the creation of the Subsystem, as told by Douglas, demonstrates the power of well-placed allies and well-deployed symbolic representations to bring about policy change despite indigenous peoples' small numbers and the range of economic interests arrayed against them. The implications of this in terms of the broader questions of indigenous representations are discussed in Chapter 7. Here, I will focus on exploring what the story tells us about the curiously anomalous place occupied by indigenous health in relation to the logic of conventional politics in Brazil.

According to Douglas's narration, the Arouca Law was whisked through Congress on the say-so of a few key politicians who owed favours to a lobbyist who had been employed by an élite institution for completely different ends. The speed with which this happened and the fact that no plenary debate took place contrast strongly with the epic struggle to push the creation of the SUS through the Constituent Assembly, and the fact that the Statute of Indigenous Peoples is still mired in Congress almost two decades after the Constitution was promulgated. The effort to pass the Arouca Law had no mass social-movement mobilisations, no popular petitions, no eye-catching demonstrations by indigenous leaders addressing Congress – but it did not need them, because in practice promoting the cause of indigenous health triggered little resistance. To the people who mattered for its chances of getting through, it seemed less subversive than a rights-based national health system, less threatening to economic interests than indigenous claims over land and natural resources and less abhorrent to nationalist ideology than talk of "indigenous nations" and self-representation. It could also be represented as a low-cost way to demonstrate the generosity and selflessness of the Brazilian élite, their willingness to save the lives of the benighted peoples whose lands and cultures they had trampled in the rush to build *Brasil Grande*.

The visibility of the Xingu's "shop window indians" and of recently-contacted groups like the Yanomami – in the news at the time, as they had been hit by yet another devastating malaria outbreak – reinforced an image of indigenous people as exotic and vulnerable, the "poor little indians" which Douglas's lobbyist described to the *Deputados*. The participation of one of

Brazil's most prestigious medical schools (itself invited in to the Xingu by the impeccably white and well-born Villas Bôas brothers) identified indigenous health as a glamorous field in which the involvement of élite São Paulo-based institutions and their alumni was understandable – perhaps quixotic (after all, trainee doctors or dentists choosing to go down this route were unlikely to end up owning their own hospitals or whitening the teeth of leading industrialists), but at least not subversive. Of course, both these representations depended on indigenous people themselves remaining largely passive, "preserving their culture" for the TV cameras and gratefully accepting the care which élite health professionals had condescended – out of idealism and at no little cost to their career prospects – to provide. The problem would come when the indians made it clear that they had recognised health policy for the field of power that it is and that they intended to fight for territory – both ideological and material – within it. However, this possibility was far from the minds of the *Deputados*, and even had it occurred to them it would hardly have been a source of concern: the kinds of micropolitical contestations which I explore in the next section of this chapter have little apparent bearing on the distribution of budgets and patronage opportunities which drive party-political calculation in Brazil. It would take FUNASA to establish a connection between indigenous health and the world of high clientelistic politics.

The possibility of such a connection must have seemed remote indeed to the *indigenistas sanitaristas* in 1993, as they pushed the II CNSPI to approve the proposals that would lead six years later to the creation of the Subsystem. By then, Brazil already had more than half a century of experience with government health service provision for indigenous peoples – but always outside the mainstream public health services, in the political "world apart" that was official *indigenismo*. First the SPI and then FUNAI had taken on the responsibility of trying to ameliorate the catastrophic impact of exposure to introduced diseases among the peoples whose lands were being "opened up" in the South and Centre-West. In addition to the "flying health teams" who sought to respond when epidemics were reported, the official indigenous affairs organisations also gave basic training and medical supplies to the agents who took up permanent residence in the

"settled" indigenous villages, following in a tradition established by missionaries in Brazil since the time of the Jesuits. These services achieved some successes and threw up their own heroes, including Noel Nutels, leader of the "flying health teams" at the time the Villas Bôas brothers were establishing permanent contact with the indigenous peoples of the Xingu (Bisilliat 1995: 95-6). But they were too amateurish and unsystematic, too lacking in rational modernity, to impress the *sanitaristas* – and by the late 1980s the combination of under-funding and haphazard management which characterised the FUNAI services was leading to some widely-publicised health disasters.

The most notorious of these was the devastating malaria epidemic which took hold among the Yanomami of the Brazil-Venezuela border region in the Northern Amazon after their lands were invaded by wildcat gold-miners (*garimpeiros*), killing an estimated 1,500 of the 10,000 Brazilian Yanomami in the five years between 1986 and 1991 (Hemming 2003: 524). The global outcry at the impact of the *garimpeiro* invasion galvanised President Collor, who decided to use the Yanomami issue to demonstrate his credentials as a worthy steward of Amazonia ahead of the UN Conference on Environment and Development that was due to be held in Rio in June 1992. This led to the first erosion of FUNAI's exclusive responsibility for indigenous health, as in 1991 Collor ordered the creation of a Yanomami Health District (DSY) that would be co-managed by FUNAI and a newly-created executive agency of the Ministry of Health: the *Fundação Nacional de Saúde* or FNS, later rebranded as FUNASA.

5.1.2 *FUNASA discovers indigenous health*

FUNASA in 1991 was struggling to affirm its new identity in the wake of the establishment of the SUS and the forced FSESP-SUCAM merger, and was badly in need of a raison d'être. Indigenous health seemed to fit the bill, because it required a capacity to operate in the remote backwaters where FSESP and SUCAM had built their reputations, and because indians were a "federal problem" – which meant that FUNASA could set up health services for them without provoking the ire of the municipalist tendency in the *Movimento Sanitarista*. The

only problem was that indigenous health was completely unknown territory for FUNASA, and indeed for the *sanitarista* mainstream as a whole: as Teixeira puts it, "it is as if indigenous health care, because it had been located outside the institutional history which over the centuries has been repeated through a succession of departments, superintendencies, foundations and ministries... had simply not existed as far as the prevailing notion of public health was concerned" (Teixeira 2007: 23).

Initially, FUNASA was able to make progress by recruiting a number of passionate and dedicated *indigenista sanitarista* professionals, many of them trained in the Xingu, who had been working for NGOs such as the Commission for the Creation of the Yanomami Park (CCPY). This gave it the confidence to establish a Coordinating Department for Indigenous Health (COSAI) and begin to lobby for a wider role. Before long, however, FUNASA's foray into indigenous health had provoked a furious backlash from FUNAI, and for most of the next decade responsibilities were transferred back and forth between the two organisations as their respective fortunes ebbed and flowed in a bitter ongoing bureaucratic turf war. By the late 1990s this had settled into a dysfunctional stalemate, based on an awkward division between preventative services to be delivered by FUNASA and curative services that remained under the authority of FUNAI (Athias and Machado 2001: 428). This is the stalemate that was broken in 1999, when Douglas's lobbyist pushed the Arouca Law through Congress and the government of Fernando Henrique Cardoso abruptly issued a flurry of decrees transferring personnel and budget allocations from FUNAI to FUNASA, definitively reframing indigenous health as a question to be addressed by *sanitarismo* rather than *indigenismo* – or perhaps by that curious hybrid, *indigenismo sanitarista*.

5.2   FUNASA and the Subsystem

FUNASA was ill-prepared for this sudden victory. By 1999 several of the idealistic *indigenistas sanitaristas* had left, disillusioned by the institution's bureaucratic culture and lack of direction. Senior management had paid little attention to the indigenous health issue; they had been preoccupied with fighting a rearguard action against the Ministry of Health, to which FUNASA was nominally subordinated but whose decentralisation-promoting edicts it stubbornly resisted. Ambitious *sanitarista* bureaucrats and policymakers left FUNASA in droves, as more and more strategic functions, including the national health information service and the national TB control programme, were shifted into the Ministry itself (FUNASA 2004: 43). Less than a year before FUNASA took over full responsibility for indigenous health, it was forced by the Ministry to transfer some 25,000 staff to the State and Municipal Health Secretariats, reducing its total personnel by around 85% (Teixeira 2007: 7). To make matters worse, an IMF-inspired hiring freeze had been imposed as the Cardoso government struggled to balance the budget after the shock of the 1998 Asian crisis. FUNASA was thus taking on a new and complex set of responsibilities with no clear plan, a haemorrhaging base of competent public health managers, a severely depleted field operational capacity and no scope for building up a significant specialised workforce for its new indigenous health service.

5.2.1   Distritos Sanitários

As envisaged in the Arouca Law, this service required a radical restructuring of FUNASA's field operations around a completely new set of territories: the Special Indigenous Health Districts, or *Distritos Sanitários Especiais Indígenas* (DSEIs). The idea of "Health Districts" has an extensive genealogy within Brazilian *sanitarismo*: Oswaldo Cruz had split Rio's slum neighbourhoods into *Distritos Sanitários* in order to organise his assault on yellow fever, plague and smallpox. As the *Movimento Sanitarista* developed, however, it drew on the ideas of Italian health reformers to reframe Health Districts as sites of popular empowerment rather than

paramilitary coercion (Athias and Machado 2001: 427). The most high-profile exponent of this approach, Eugênio Vilaça Mendes, declared that the creation of *Distritos Sanitários* in the SUS should be seen not as the establishment of new bureaucratic territories but as "the social process of changing health practices" (Mendes 1995). The DSEIs were imagined by the *indigenista sanitarista* reformers who proposed their creation at the II CNSPI within this logic: not as an organisational structure for imposing one-size-fits-all public health measures, but as a way of "organising the provision of services that are relevant to the reality of each ethnic group, in order to ensure that the resulting interventions are effective for a given population, while giving fundamental importance to the participation of the different forms of indigenous organisation in the shaping of policy in the sector" (Athias and Machado 2001: 427).

Unlike the *Distritos Sanitários* of the SUS, however, which were mostly designed around a group of contiguous urban neighbourhoods within a single municipality, the 34 DSEIs created by FUNASA between 1999 and 2000 covered large geographical areas which often cut across municipal and even state boundaries, as can be seen from the FUNASA map on which I marked my research sites in Chapter 1 (Figure 1).

According to the national indigenous health policy document first adopted at this time, the official logic behind the choice of this format for the DSEIs was that they needed to reflect the distribution of the indigenous population (given that the non-indigenous occupation of the interior had often left a single ethnic group widely dispersed across a series of different micro-territories) and the "social relations between the different indigenous peoples of the territory and with national society", as well as standard health system organisation criteria such as the location of existing health services and the availability of different transport options (FUNASA 2002: 14). In other words, it was a compromise between sociocultural and management logics – between the contrasting *sanitarista* visions of the Health District as a "social process" and as a zone of organisation and control.

The creation of DSEIs which cut across municipal boundaries not only reflected the social reality of many ethnic groups, but also suited FUNASA's

strategic purposes – since it institutionalised a territorial distribution of services which could not easily be devolved to municipal control. In avoiding the "municipalisation" which had become the defining characteristic of the SUS, the DSEIs thus represented a convergence of the interests of FUNASA and the *indigenistas sanitaristas* who had pushed for the Arouca Law. It also attracted support from the *Movimento Indígena* itself, as many indigenous leaders were very hostile to the idea of a "municipalisation" process that would place power over their communities' health services in the hands of local élites who were deeply implicated in efforts to steal their lands and loot their natural resources (Shankland and Athias 2007). This created the basis for an uneasy alliance of convenience between sectors of the *Movimento Indígena* and FUNASA – an alliance which was to acquire an additional and deeply problematic layer of complexity when FUNASA started to sign outsourcing contracts that transferred funds for health services to be run by *Movimento Indígena* organisations themselves.

5.2.2   The Great Outsourcing Disaster

This radical shift in policy away from vertically-organised state-delivered services to health provision co-managed with indigenous organisations was not the result of any Damascene conversion. FUNASA had not been convinced by the *indigenistas sanitaristas* that its outmoded top-down approach needed to be replaced by something more participatory, nor had it been won over by the international literature demonstrating the greater effectiveness of community-managed indigenous health services (Stephens, Porter, Nettleton et al. 2006: 2025). It was simply trying to solve the problem of setting up a broad range of services in the new DSEIs when it had a critical shortage of staff who could be deployed to run them.

For the Cardoso government, ideologically predisposed towards public-private partnerships and working with the so-called "Third Sector" (Melo and Rezende 2004), the obvious answer was to outsource the services to NGOs. The problem was that most *indigenista* NGOs were geared towards advocacy rather

than service delivery, and those who combined the two (such as SSL) had nowhere near enough capacity to cover the full extent of the DSEIs. FUNASA tried to plug the gaps by recruiting the missionaries (Catholic and Protestant) and university departments (including the São Paulo Medical School) who worked in some indigenous territories, but this still left large areas without service coverage. Finally, FUNASA turned to the two sets of actors that did exist across the country's diverse indigenous territories: municipal health secretariats and *Movimento Indígena* organisations. As a result, in some areas a *de facto* municipalisation began to take shape, while in others indigenous movement organisations found themselves involved simultaneously on both the demand side and the supply side of service delivery – with implications that are examined in detail in Chapter 8. As a rule, the involvement of municipalities in service outsourcing was greater in the South, Centre-West and Northeast, where *Movimento Indígena* organisations were relatively new and weak, while outsourcing arrangements between FUNASA and regional indigenous organisations became the dominant model in large areas of the Amazon, where the *Movimento Indígena* had developed more robust formal representative structures (Athias and Machado 2001: 426).

With these outsourcing arrangements in place in the DSEIs, the federal government was able to channel significantly increased resources into meeting the health needs of indigenous peoples. In 2002 the budget for indigenous health services reached R$124 million (over US$ 40 million at current prices), almost a fourfold increase in dollar terms on its 1995 level (Barroso-Hoffmann, Iglesias, Garnelo et al. 2004). However, although some indicators (including immunisation coverage) improved significantly, death rates from preventable diseases remained extremely high, and there was soon a widespread perception that this massively increased investment was not being reflected in the system's performance (Coimbra Jr., Garnelo, Basta et al. 2006).

When the system's credibility began to collapse in the face of mounting criticism from indigenous representatives, NGOs and academic observers alike, amid repeated breakdowns in service coverage and insistent rumours of corruption, the outsourcing arrangements proved to have disastrous consequences for many of the indigenous organisations involved. Although DSEI performance

was poor across the Indigenous Health Subsystem, as a wave of corruption scandals began to attract the interest of the media FUNASA systematically set about scapegoating the *Movimento Indígena* organisations with which it had contracted. Barroso-Hoffmann *et al.* argue that this was a clear case of blaming the victim, as FUNASA had consistently failed to provide the promised technical and operational support to what were often administratively weak organisations, and sought to impose standardised health planning and administrative norms on indigenous territories which existed within "a reality with which the *sanitaristas* had little familiarity" (Barroso-Hoffmann, Iglesias, Garnelo et al. 2004: 311). Be that as it may (and the complexities of two cases are examined in detail in Chapter 8), scapegoating the *Movimento Indígena* organisations gave FUNASA the excuse it needed to tighten the centralised control mechanisms which many observers had blamed for the Subsystem's bureaucratic failings in the first place (Athias and Machado 2001: 426). In 2004, FUNASA abruptly pulled back from the co-management arrangements, ending contracts outright or forcing contract-holders to become little more than payroll management agencies, as planning and procurement were re-centralised (Shankland and Athias 2007: 81).

The consequences of this turbulent period for the trajectory of indigenous organisations in the Amazon, and the shifting practices of representation associated with the struggles over health services that were triggered by the FUNASA outsourcing programme, are examined in detail in Chapter 8. Here, the key point to note is that by the end of this first phase in the development of the Indigenous Health Subsystem a deep division had emerged between *Movimento Indígena* leaders who had established a close alliance – either strategic or self-interested – with FUNASA, and others who felt that it had betrayed and manipulated them. The sense of betrayal was strongest in the Amazon, where several indigenous organisations had been politically damaged or had even collapsed outright as a consequence of their involvement in FUNASA's outsourcing programme. These were the feelings that were clearly on display when indigenous representatives from DSEIs in Amazonas and Acre took up the microphone at our workshop with Dr. Pimentel in Manaus in November 2008. In the South and Centre-West the picture was more mixed, reflecting the generally

lower level of *Movimento Indígena* involvement in outsourcing, and in the Northeast a strongly pro-FUNASA faction began to emerge among leaders who felt that since the organisation's arrival on the indigenous health scene they had been able to bargain successfully for personal and collective benefits. These divisions were to become a recurrent theme of *Movimento Indígena* politics over the next half-decade, leading to the explicit polarisation which dominated the 2006 National Conference on Indigenous Health, discussed in Chapter 9, and the subsequent period of policy paralysis.

FUNASA's recentralisation measures also led to splits among the NGOs and *indigenista sanitarista* university teams working in the Subsystem. Some, including SSL (which had initially taken on a management contract for the Rio Negro DSEI in 1999-2000) and URIHI (the NGO set up by former CCPY medics to work with the Yanomami), had already pulled out in protest at what they perceived as creeping bureaucratisation and corruption, and sought to return to a more advocacy-based approach. Others adapted to their new status as FUNASA clients and abandoned advocacy work altogether, with some (including the prestigious University of Brasília) subsequently becoming mired in corruption scandals of their own. A few, protected by their media profile or highly-placed political supporters, sought to combine the two: the São Paulo Medical School hung onto its management contract for the Xingu DSEI until early 2009, despite FUNASA's systematic undermining of its role and Douglas's increasingly acerbic public criticisms of the direction of indigenous health policy.

5.2.3 *The politicians move in*

The period since 2004 has seen a significant shift in both FUNASA's management strategy and its political strategy. The former has included an attempt to restore the centralised, hierarchical and extremely bureaucratic management practices which characterised FSESP and SUCAM, combined with a clear shift towards using municipalities rather than NGOs to supply the primary care services that FUNASA still lacks the personnel to deliver directly. This is mirrored in FUNASA's political strategy, which is increasingly characterised by party-political bargaining

over jobs and contracts through the local and regional client networks that sustain the national political patrons to whom FUNASA managers are beholden. Clientelistic calculation was a feature of FUNASA's management practices before 2004, but it has intensified since then as the organisation has come more firmly under the control of the Brazilian Democratic Movement Party (PMDB), the centrist-clientelist party which has become the most important coalition partner of President Lula's PT and the effective centre of gravity of Brazilian politics (Paulo Maurício Teixeira da Costa, pers. comm. 2008).

Since the PMDB's takeover, FUNASA has followed a paradoxical trajectory of ever-growing political power and budgetary resources and ever-shrinking policy and technical credibility. The organisation's budget has increased year on year, despite a series of increasingly grotesque corruption scandals – including one in 2007 in which the President of FUNASA was forced to resign after the media exposed a plan to divert millions of dollars through a fraudulent contract to develop an institutional TV station, at the same time as death rates from malaria among the Yanomami were climbing back towards the levels last seen at the height of the *garimpeiro* invasion (Teixeira 2007: 15). After his re-election in 2006, President Lula announced that FUNASA was to receive R$4 billion (some US$1.9 billion at current exchange rates) to invest in "social inclusion through sanitation infrastructure" as part of the federal Growth Acceleration Programme (*Programa de Aceleração do Crescimento*, or PAC). Lula could have chosen to allocate this money to the Cities Ministry, which also has a large sanitation programme; experienced observers of the Brazilian political scene to whom I spoke during the research were in no doubt that the option for FUNASA was part of a grand bargain with the PMDB, one that centred on the party's awareness that FUNASA's capillary reach – almost unique among federal agencies in the wake of the wholesale decentralisation of social policy in Brazil – made it an invaluable tool of clientelistic politics.

5.2.4 Sanitarismo *à la FUNASA*

By this point it was already clear that FUNASA had identified sanitation as its core "mission", supplanting indigenous health. Sanitation was a link with the heroic past: FSESP had implemented many well-regarded sewerage and water supply programmes in the small towns of the interior. It relied on the "hard skills" of engineering, rather than the "soft skills" of intercultural negotiation which FUNASA had so signally failed to master in the DSEIs. Most importantly, it generated a huge number of opportunities to sign padded contracts with small municipalities, energising the far-flung client networks which were the source of the PMDB's strength. Even before the PAC money flooded in, the budget, prestige and visibility of FUNASA's Public Health Engineering Department (DENSP) already dwarfed that of the Indigenous Health Department (DESAI). Although DESAI still had plenty of money to spend, it had lost any capacity that it had once possessed to articulate a clear indigenous health strategy, as the growing ascendancy of rent-seeking political appointees drove its best indigenous health specialists to leave in despair. By the time I came to work on the VIGISUS II consultancy in 2008, barring a few increasingly marginalised individuals, the *indigenistas sanitaristas* had all abandoned DESAI, moving to the Ministry or returning to the NGOs or university departments from which FUNASA had recruited them at the start of its involvement in indigenous health.

In fact, the *indigenistas sanitaristas* had never really managed to shift FUNASA's institutional culture to the point where it could fully comprehend, let alone implement, the vision of the Arouca Law – as Carla Costa Teixeira makes clear in a brilliant essay entitled "*O Museu da FUNASA e a Saúde Indígena*" ("The FUNASA Museum and Indigenous Health"), in which she draws a parallel between the representation of indigenous health in the museum displays in which FUNASA presents its own history and identity, and the status of DESAI within the institution (Teixeira 2007). She notes that the FUNASA museum display cabinet on "Indigenous Health" contains a sad miscellany of mostly unlabelled or mis-labelled objects: a feather headdress whose cultural origin is unrecorded; a manual for carrying out health status surveys of indigenous villages which is

labelled "National Indigenous Health Policy"; a set of crude wooden dolls which is labelled "Indigenous Family" and described as "instructional aids used by the Health Team to foster sex education in the indigenous villages". By contrast, the neighbouring cabinet containing various (pickled and stuffed) poisonous and disease-transmitting animals is meticulously organised and exhaustively labelled, as are the ranks of other display cabinets containing the many and varied tools of vector eradication and a series of dummies dressed in the paramilitary uniforms of SUCAM *mata-mosquitos* and other warriors against endemic disease.

Teixeira analyses the mismatch between the official identification of indigenous health as the primary element of FUNASA's Mission (as proclaimed on its website) and its appearance as an awkward side-show or subsidiary function in the institution's other self-representations and day-to-day discourse. She notes that at the time she carried out her study the post of DESAI director was vacant, rendering the department invisible at senior management level. Although when I came to work closely with FUNASA a few months later this post had been filled, I witnessed a series of meetings in which the alternate exclusion and ritual humiliation of the DESAI Director by Dr. Pimentel (who in formal terms was his equal in the FUNASA hierarchy, not a superior) offered a very public reiteration of this marginal or subordinate position.

This relegation of indigenous health to virtual insignificance would suggest that FUNASA gave little importance to retaining control of the Subsystem – and the increasing anger of indigenous communities and organisations, who had launched a series of highly visible direct action protests across the country (discussed in Chapter 8), was certainly damaging what little credibility it had retained in this field. And yet, when Lula finally lost patience after a particularly high-profile round of indigenous protests in September 2008 and ordered Health Minister Temporão to take responsibility for indigenous health care away from FUNASA, the organisation initiated a fierce counterattack. This resistance escalated to the point where it even seemed to threaten the stability of the government, as the PMDB publicly withdrew its support in Congress after the Minister's "den of corruption" remark – forcing him to back down and Lula to leave the issue in the political long grass of an interinstitutional working party.

Why, then, did FUNASA fight so hard to retain control of a Subsystem in which it apparently had so little interest? Rent-seeking may be part of the answer, in view of the scandals over DESAI drugs procurement and transport contracts in 2007 and 2008, and the gossip about the construction contracts that Dr. Pimentel had overseen as part of the World Bank-funded VIGISUS II programme. However, by the standards of FUNASA corruption scandals the sums of money involved were small; the opportunities for rent-seeking in the Subsystem were limited compared to those in DENSP's sanitation programme, and (as Chapters 8 and 9 discuss) they required an investment in complex negotiations with unruly indigenous leaders that was far more demanding than the straightforward clientelist bargaining that characterised FUNASA's relations with the municipal mayors.

My contention is that the motivation was in fact strategic, and even existential: FUNASA had identified indigenous health – awkward, low-status and ill-understood as it was – as the one "mission" that could not easily be taken away from it, and therefore as the ultimate justification for its continued existence. The sanitation programme was determined by short-term political calculations, and could be switched to the Cities Ministry at any time, should the balance of those calculations change. Indigenous health, by contrast, was a "federal issue" and would remain defined as such until the Arouca Law was repealed – which in turn was unlikely to come about until Brazil's indigenous peoples reached an accommodation with their enemies in the municipalities. It was the one legally-recognised exception to the iron law of municipalisation that had driven the consolidation of the SUS, and therefore the one justification for refusing to allow FUNASA's remaining rump to follow the bulk of its once-proud labour force into low-status oblivion in the state and municipal health secretariats. In the struggle to retain control of the Indigenous Health Subsystem, the strategic interests of the PMDB opportunists who had hijacked FUNASA and those of the ex-FSESP and ex-SUCAM professionals who staffed it were perfectly aligned – despite the latter's hankering after former days of *sanitarista* glory and often bitter criticism of their new masters.

Dr. Pimentel may be the *reductio ad absurdum*, but FUNASA is indeed following in a tradition of a kind – he is heir to one kind of *sanitarista* tradition, just as Zilmar is heir to another. While *sanitarista* ideology inspired the rights-based health reform that reflected and fostered Brazil's democratisation, the institutions of public health whose creation was originally driven by that same ideology were built around the use of coercive power, to enforce their "sanitising" interventions and suppress the dissent these provoked. In the process they accumulated other forms of power, political and material. Today's FUNASA is the bureaucratic apparatus of *sanitarista* power, shorn of the purpose for which it was originally assembled – leaving the struggle to control that power (and its associated funding streams and patronage opportunities) as an end in itself.

The fact that many of those ex-FSESP and ex-SUCAM *sanitaristas* who are deeply critical of the practices that managers of Dr. Pimentel's ilk have brought to the institution also vociferously support those same managers' struggle for bureaucratic turf – including their efforts to retain control of the Indigenous Health Subsystem – indicates that FUNASA's *sanitaristas* and patronage politicians may have more in common than the former would like to admit. Revealingly, the two groups not only share an inability to engage reflectively with the Subsystem's present problems and set out strategies capable of fostering its future development, but also end up arguing for flawed solutions which share a similar logic. During the VIGISUS II consultancy, my IDS-Cebrap-SSL team colleagues and I were bombarded with assertions from the political appointees that the answer was to step up centralised spending (despite the fact that FUNASA's total annual indigenous health spend had already reached R$328 million, or US$170 million at current prices), and from the *sanitaristas* that the answer was to recruit thousands of new federal civil servants to allow them to organise direct service provision without having to rely on either NGOs or municipalities (despite the fact that this was not only anathema to the Ministry of Health but vigorously opposed by the Planning Ministry, which had to authorise any new hiring by federal agencies). Neither group managed to engage seriously with the questions and proposals that were raised in regional workshops like the one attended by Dr. Pimentel in Manaus.

The themes emerging from those workshops had in common the fact that they emphasised the need for different ways of working – replacing investment in things with investment in people, top-down planning with decentralised decision-making, stand-alone services with partnerships and traditional *sanitarista* practices with the kind of "intercultural" approaches that FUNASA's own National Indigenous Health Policy proclaimed as one of its essential ingredients (FUNASA 2002: 15). Only by adopting such approaches could FUNASA have begun to engage with the indigenous representations of health that I explore in the next chapter. However, as I argue in relation to the experience of the Rio Negro DSEI, this engagement would be doomed to failure unless it started from a recognition that indigenous specialists represented health first and foremost as a field of power – and that (all other differences notwithstanding) this was something that they shared with FUNASA.

Chapter 6   Health as a Field of Power

6.1   Indigenous medicine and health policy in the Rio Negro

Municipal Assembly Debating Chamber, São Gabriel da Cachoeira, Amazonas, 7 April 2004*. The smart red chairs occupied by the* vereadores *on the days when the Chamber is in session have been pushed back against the walls, and a mixed group of some two dozen DSEI health professionals, FUNASA managers, FOIRN leaders and* pajés *(indigenous medical practitioners) is clustered round the flipcharts on which the different participants' recommendations have been scribbled. The workshop has been organised by FOIRN and SSL and funded by a research programme in which Renato Athias and I are participating along with Raimundo Nonato, a University of Amazonas anthropologist who is himself of indigenous descent. Its theme is "Traditional Medicine and Health Policy", and everyone seems to be agreed on the desirability of bringing the former into the latter. There are some differences of emphasis as to where the problem lies, with managers talking about the practical difficulty of training professionals to engage with indigenous culture when staff turnover is so high and FOIRN leaders identifying more institutional and political barriers, but the prevailing spirit is one of cooperation and goodwill.*

Then one of the health professionals, commenting on a flipcharted point which refers to the pajés' knowledge of medicinal plants, suggests that they should train the Agentes Indígenas de Saúde *(AIS), the indigenous village health workers who sit at the lowest level of the DSEI hierarchy, in the use of these plants. "That's no good," responds* Seu *Guilherme Maia, leader of the pajés' organisation CERCI (the Iauaretê-based Centre for the Revitalisation of Indigenous Culture), "because the plants only work if they are administered by someone who knows the right* benzimentos *[incantations – literally, 'blessings']". Undaunted, the medic comes back with the riposte that the pajés should simply teach the AIS the right benzimentos to use with each plant. "That's no good either," Seu Guilherme responds, "because the benzimentos only work if the person using them knows all the right myths".*

This chapter analyses representations of health in the discourses of different indigenous actors, particularly those associated with the practice of indigenous medicine in one of my case study regions, the Upper Rio Negro. It argues that these indigenous representations locate health within multiple fields of power, at the nexus of struggles both between human and non-human forces and among different human political interests – above all, those of the actors who claim expert authority when it comes to controlling the behaviour of others in the name of disease prevention and cure.

6.1.1 Pajés *and* padres

The encounter described above took place at a time when the tension between authority claims based on different systems of medical knowledge in the Rio Negro, present but largely hidden from outsiders within the social world of the region since the Salesian Mission first started providing basic biomedical care in its infirmaries and hospitals in the first half of the 20th Century, was beginning to emerge as a publicly-acknowledged political issue. The pajés of the region were starting to articulate a common discourse and agenda, having secured the outside support that they needed to gain a breathing-space in the face of the hitherto overwhelming pressure from the Mission, which had forced them and their rôle as specialists into invisibility. One of the chief sources of this support was Renato Athias, who in addition to his rôle as a university-based researcher is an active member of SSL, which has operated in the Rio Negro since 1996. Renato had led a two-year SSL project which worked with CERCI to provide resources for pajés from different clans and ethnic groups in the Uaupés region of the Rio Negro to come together and exchange mythological and curative knowledge, subsequently recording part of this knowledge (in the indigenous languages) in books and CDs for sharing with a new generation.

The project's discourse of "sharing knowledge" was problematic, not least because for the cultures of the region genuinely powerful knowledge is secret, and "owned" by a specific individual or at most a clan. The "pajés' meetings" promoted by the project therefore required careful negotiations around what could and could not be shared, and the exchanges were largely confined to the "public" field of mythology rather than the "secret" one of the specific *benzimentos* and shamanic practices underpinned by this mythology (Renato Athias, pers. comm.). However, this limited sharing was enough to generate significant political momentum. By creating a space for re-connecting the scattered fragments of knowledge held by different indigenous specialists, the SSL/CERCI project enabled the pajés to begin to articulate a collective challenge to the reproduction of the biomedical hegemony which had begun with the

Mission, been extended by the military and now threatened to become definitively entrenched through the DSEI.

Within the complex system of inter-clan and interethnic relations of the Uaupés, mythological knowledges and their associated curative practices are the property of specific groups (Athias 2003). These knowledges were traditionally reproduced within the clan space of the communal house (*Maloca*) and shared in the inter-clan / interethnic exchange festivals known as *Dabucuri*, as well as through the ritual institutions associated with the *Jurupari* meta-myth, common to all the groups of the Eastern Tukano cultural region (Reichel-Dolmatoff 1996).

As Chapter 3 has described, these pre-existing mechanisms of knowledge reproduction and exchange had been systematically targeted by the Salesian Mission, with the support of the civil and military authorities. *Malocas* were burned down and the clans forced or cajoled into establishing nuclear-family dwellings, which today are increasingly built from adobe (a technology imported by the missionaries from Northeastern Brazil) and occasionally – usually as a sign of status, in the more "urbanised" villages – roofed with corrugated iron rather than *caranã* palm thatch. Indigenous children were removed *en masse* to boarding schools often located several days' journey from their home communities, in which they were forbidden to speak their own languages. *Dabucuri* festivals – which served as the focus of exchange not only for knowledge but also for material goods (food and the different craft items in which each ethnic group specialised) and social relations (marriage contracts and military alliances) – were banned. The dancing, story-telling and music which characterised *Dabucuri* were lumped together as *coisas do diabo* ("things of the devil") along with the consumption of *caxiri* (manioc beer) and the use of coca and hallucinogens by shamanic practitioners. The sacred instrument boxes associated with *Jurupari* were destroyed, or removed to Salesian centres in Manaus and further afield. Shamanic practitioners were banned from conducting healing rituals, expelled from communities or in some cases hunted down and killed.

This sustained campaign of cultural violence, which lasted for several decades, showed that the missionaries had correctly understood the deeply

intertwined nature of religious, social-normative and curative practice within the indigenous cultures of the region. By targeting pajés, they were seeking to remove from the scene the specialists who not only diagnosed and treated health problems but also interpreted the world for their communities – situating physical health within a complex set of relationships with other beings (human, spirit-human, animal, animal-human and spirit-animal) and explaining disease in terms of mythological origins and current material, social and spiritual conditions. In other words, the pajés were not only rivals to the biomedical practitioners in terms of their authority in curative and preventive health care, but also rivals to the *padres* in terms of their authority in giving meaning to human existence and prescribing appropriate behaviour.

6.1.2 *Indigenous medicine and behaviour control in the Rio Negro*

The all-encompassing nature of indigenous medical practitioners' rôle in guiding behaviour is evidenced by Renato Athias' summary of the activities of the *kumu* class of specialist (plural: *kumua*, a group of practitioners specialising in *benzimentos*[33]):

> The existing medical systems, principally among the peoples of the Uaupés Basin, are based on preventive activities at both the personal and the collective level. In other words, all practices relate to the protection of individuals in the milieu within which they live. These preventive practices are effected in the preparation of the body to live well in this world. The *Kumua* are all unanimous in agreeing that those who follow the steps of the preventive practices carried out by *Kumua* and adhere to ritual and food-related practices will be less exposed to disease. This way, their bodies will be prepared and protected from the diseases of the world. Thus, there are specific "*benzimentos*" for every situation, before an individual is born, during birth, and post-partum for the child and its parents. According to some of the *Kumua*, it is the failure to perform these preventive activities which is responsible for the increase in disease among the communities. These are very wide-ranging preventive practices, and there are "*benzimentos*" for every specific situation.
> (Athias 2003: 5)

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[33] The analogous category among the Baniwa people of the Rio Negro (who are Arawak-speaking rather than Tukano-speaking) is *malikai iminali*, or "incantation owners" (Garnelo 2003: 20).

In their discussion of social representations of health and disease among the Baniwa, the major non-Tukano-speaking indigenous group in the Rio Negro region, Luiza Garnelo and Robin Wright describe a similar set of practices focused on protecting individuals and communities from the deleterious effects of social, spiritual and ecological imbalance. The authors clearly situate these practices in relation to a body of Baniwa mythology narrating the origins of humanity and of the spirit entities with which humans are in constant (generally hostile) contact:

> The ancestral world is a chaotic stage on which violent behaviours, which render human life impossible, are acted out. As in many other societies, the myths speak of incest, cannibalism, murder and other situations of extreme violence which must be overcome and superseded for the world we know today to come into being. The narration of these myths makes it possible to perceive not only the transitional moment of the establishment of human social order – overcoming the perpetual violence of the undifferentiated ancestral world – but also the conditions which generate disease, closely linked to chaos, anti-social behaviour, dirt, putrefaction and transgression of rules concerning diet, personal hygiene and the need to obey one's elders. (Garnelo and Wright 2001: 274)

For the pajés of the Rio Negro, such mythological narratives provide a powerful ideological underpinning for the work of disciplining the behaviour of their communities. In their diagnoses, episodes of illness are frequently attributed to lapses in observance of dietary, sexual, ritual, hygienic, ecological or social-hierarchical rules, either as a direct causal mechanism (as when a failure to prepare fish or game properly allows noxious substances associated with certain species to enter the bodies of those who consume them) or because such lapses render individuals more vulnerable to sorcery and other forms of spiritual aggression from human or non-human foes (as when a failure to seek out an elder to give the appropriate blessing before a journey leaves the traveller exposed to the invisible arrows of hostile forest-dwelling spirits, or unregulated contacts with the opposite sex encourage jealous rivals to use attack sorcery). The treatments prescribed tend to centre on the re-imposition of (self-)discipline, with regular ritual practice, strict diets and long periods of sexual abstinence (Garnelo 2003: 282).

The pajés' discourse thus associates challenges to existing roles and hierarchies – whether based on clan, gender or generation – with an increased risk of the social, spiritual and environmental chaos which in turn is intimately linked to disease and death. This discursive association acts as a vital legitimator of unequal power relations within the household and community – though of course such hierarchies and inequalities are never uncontested in any society. Indeed, the contestation often extends into the domain of myth itself: ethnographers have documented a multiplicity of "alternative versions" of inequality-legitimating myths among women, younger men and members of subordinated clans, with Cristiane Lasmar's discussion of indigenous women's narratives (Lasmar 2005) providing a fine recent example from the Rio Negro region. Arguably, however, the very vehemence of this discourse as currently articulated by pajés and other holders of "traditional power" (such as *capitães*, village chiefs whose role is discussed in Chapter 7) is an indicator of the extent to which these power relations are already shifting, or at least suffering more serious challenge, as a result of wider processes of social change.

As Garnelo and Wright (2001) point out, the Baniwa are embedded in a complex set of relations with other indigenous societies in the region, as well as with agents of the non-indigenous societies which surround them – which, as Chapter 3 has described, in the case of the Rio Negro includes not only the commercial, military, political, bureaucratic and health-technician representatives of "white Brazil" but also a diverse set of actors from neighbouring Colombia and Venezuela, ranging from doctors and traders to guerillas and drug-traffickers. The same is true for the other ethnic groups of the Rio Negro region, and to a greater or lesser extent for almost all indigenous societies in contemporary Amazonia. These relations provide a multitude of new opportunities for different actors located at different levels of the intra-group hierarchies, from community leaders establishing interethnic political alliances and extending their power bases, to women engaging in commercial handicraft trading and gaining an income that they themselves can control, to younger men training as health workers and acquiring biomedical knowledge which allows them to compete with the pajés.

This latter example serves (as does my earlier discussion of the Salesian Mission's efforts to break the power of the pajés at the same time as it introduced biomedical services) to highlight a broader point that is often neglected in the literature on traditional medicine and social change, which is that in addition to *struggles over practices* – that is, contested interpretations of disease and conflicting advice on the best strategies for prevention or cure – health as a field of intercultural encounter is marked above all by *struggles between practitioners*.

6.2   Health, expertise and power

6.2.1 Expertise and health-seeking

Medical anthropology has long explored curative and preventive practice as a field of power, and there is a rich literature on patients' and lay publics' resistance to the imposition of practices legitimated by expert knowledge (Leach and Scoones 2003). In Brazil, the account of the *Revolta da Vacina* in Chapter 4 shows how the foundational period of *sanitarismo* was marked by violent contestation of its attempts to discipline the population. However, as Byron Good points out, the flows of power in health encounters are more complex than a simple narrative of expert domination and patient resistance would suggest:

> What is perhaps surprising and worthy of research is not simply that the sick sometimes respond to physicians' power with individual or collective resistance, but that they respond in this fashion so seldom. Power differences among participants in medical or healing encounters are often enormous, certainly among the greatest that we routinely experience in contemporary American society. Yet these differences have seldom produced real resistance. Instead, access to power and the ability to employ it on behalf of the sufferer is universally required if one is to be considered a healer (Glick 1967)... Medicine is not all war or exploitation, strident claims notwithstanding. It is also a conversation, a dance, a search for significance, the application of simple techniques that save lives and alleviate pain, and a complex technological imagination of immortality. It is a commodity desperately desired and fought for, perhaps even a basic "human right", even as it is a fundamental form of human relating. (1994: 60)

As in the North American medical encounter imagined by Good in this passage, a Hup'däh, Tukano or Baniwa person in the Rio Negro who feels the onset of

serious illness will tend not to resist expert intervention but rather deliberately to seek out an expert whose power of intervention s/he perceives to be significantly greater than her or his own. The health-seeker's need for reassurance that the forces behind the disease – whether incoming spirit-arrows or multiplying cancer cells – are being counterattacked with every resource available is thus perfectly aligned with the health provider's need to have his/her power affirmed and legitimated.

The contestation is thus not with expertise *per se*, but rather with hegemonic expertise claims that devalue the patient's own knowledge and experience and/or that of other experts with whom s/he may be in sympathy, or which impose curative or preventive practices which conflict with deeply-held beliefs or basic notions of human dignity. Such contestations notwithstanding, health expertise – understood as specialist knowledge on how to deploy powerful resources (whether spiritual, ritual, technological or pharmaceutical) in response to health needs – remains very desirable to those who feel their health to be under threat (Bloom, Edström, Leach et al. 2007). It is this very desirability that creates the incentives for different experts to dispute the right to be called upon when the need arises, ensuring that the key power struggle is not that between experts and patients but rather that among different experts.

One strategy used when such struggles arise is simply to seek to annihilate the material, social, religious and epistemological basis of rival expertise claims. This is the strategy that was followed by the Salesian *padres* as they stole the sacred ornaments, burned down the *malocas*, abolished *dabucuri* and denigrated the shamanic diagnosis rituals as both diabolical and primitive-ignorant. An alternative strategy, followed by many "progressive" biomedical practitioners on the intercultural frontier in contemporary Brazil, is the demarcation of epidemiological territories within which different forms of expertise can be acknowledged as locally dominant without presenting an existential threat to other forms. In the Brazilian Amazon, this is apparently favoured by the use of the vernacular distinction between *doenças de branco* ("white people's diseases") and *doenças de índio* ("indians' diseases") or *doenças tradicionais* ("traditional diseases"). Such a distinction allows pajés to be called in to treat a problem which

biomedical diagnosis has identified as psychosomatic or simply unclassifiable but which the patient has identified with a "traditional" cause (such as attack sorcery/cursing), while reinforcing the expertise claims of biomedical practitioners in the case of clearly-identifiable "introduced" diseases such as malaria, TB or measles. This is the process described by Melvina Araújo in her analysis of the acceptance by biomedical practitioners working for the Consolata Catholic mission among the Macuxi of Roraima (whose territory lies to the northeast of the Rio Negro region) of the indigenous disease category of *kanaimé* (attributed to maligant spirits), and their encouragement of pajés' involvement in treating cases considered to fall into this category (Araújo 2006: 137-157).

However, in most intercultural settings this distinction is far from being as clear-cut as its proponents would wish. Renato Athias relates how the Hup'däh medical system, which he describes as "not autonomous but constantly negotiated and subject to transformation when significant changes occur in the political and social context" has developed mythological narratives to explain the origin of TB, an "introduced disease",[34] and incorporated diagnostic and treatment strategies for the disease into the repertoire of the pajés (Athias 2004: 13), while Dominique Buchillet describes a similar process occurring for malaria among the Desana of the Rio Negro (Buchillet 2002). At a health policy workshop which I facilitated with indigenous leaders in 2006, a Baniwa representative argued for official recognition of "traditional diseases" as a separate epidemiological category. However, Garnelo and Wright highlight the blurred nature of such distinctions when they point out that among the Baniwa, "the term 'traditional diseases' simultaneously covers the categories of indigenous diseases – recognised as such by our informants – and of native representations around the diseases introduced by contact, which do not necessarily match the diagnoses provided by biomedicine" (Garnelo and Wright 2001: 277).

The extensive literature on "therapeutic itineraries" documents the tendency of health-seekers in many cultural settings to transit between "formal" and

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[34] Though there is some controversy over whether tuberculosis is in fact a "disease of contact" since some archaeological evidence suggests that an infection with similar symptoms did exist among pre-Columbian Amerindian populations (Buchillet 2002: 113).

"informal", "modern" and "traditional" or "biomedical" and "complementary" sources of curative expertise.[35] These itineraries may be influenced by deep-seated beliefs or by more pragmatic concerns; for example, Garnelo and Wright record how many Baniwa who remain wedded to the "traditional" repertoire of explanations for health and disease may choose in practice not to follow the rigorous and restrictive "traditional" prescriptions of the pajés but instead to seek biomedical treatment simply because it is more compatible with the demands of their current mobile and semi-urbanised lifestyles, since "factors such as travel into town, the need to produce for the market and the requirements of school attendance make it hard to maintain adherence to traditional treatment régimes" (Garnelo and Wright 2001: 283). The editor of a recent study of the experience of the Alto Rio Negro DSEI, citing an argument originally put by Dominique Buchillet, claims that such pragmatic approaches are unproblematic for indigenous health-seekers because there is a fundamental difference in the signification of biomedical and "traditional" diagnoses:

> with their therapeutic itineraries, indigenous people show that they are very open to experience, using Western medicine as a complement to their own medical practices without this representing a conflict or confrontation for them [because] the two forms of medicine do not operate/act on the same level... for them, Western medicine operates at the level of the symptoms and not that of the causes of disease. (Soares 2007: 16)

These arguments suggest that the strategy of relying on a *doença de branco / doença de índio* distinction as a device for demarcating the territories of biomedical and "traditional" experts is doomed to failure. This is not only because the categories themselves are flawed but also because in practice indigenous health-seekers themselves ignore the implied boundaries of authority even when they recognise the classification of their problem: they may follow "traditional" explanations for cases of "introduced diseases" (for example, identifying TB with a particular mythological entity rather than with Koch's bacillus) while at the same time choosing biomedical treatment for a "traditional" health problem (for example, taking vitamin supplements and antibiotics to combat the weakness and lassitude that affect victims of ritual cursing).

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[35] For a recent example covering literature in Portuguese and English, see Nunes and Sena Esteves (2006).

6.2.2 Agentes Indígenas de Saúde

This context of "intermedicality" (Follér 2004) creates particular problems and opportunities for a category of specialist whose role is explicitly located in official policy discourse at the interface between the "traditional" world of the community and the "modern" world of the biomedical health system: the indigenous village health worker or *agente indígena de saúde* (AIS). Melvina Araújo argues that "the *agente indígena de saúde*, as someone who holds knowledge which belongs to both the indigenous and Western worlds, is responsible for communication between indians and medics, contributing to the creation of a space of intercultural mediation, that is, a space for the construction of shared communicative codes, within which these codes are operated and acquire meaning" (Araújo 2006: 210). However, this emphasis on their role as facilitators of communication between biomedical specialists and traditional knowledge-holders risks ignoring the agency of AIS as political actors in their own right, both within the community and in the wider world of the health system. The latter form of agency is discussed in Chapter 7; here, I will focus on the micropolitical role of the AIS and its relations with broader disputes over the control of curative resources.

The official Indigenous Health Subsystem training guidelines emphasise the role of the AIS in disciplining his or her community, combating the unhygienic practices which are assumed to proliferate among indigenous people (FUNASA 2005a: 10). This is a direct extension of the *sanitarista* legacy of Oswaldo Cruz – but as the above discussion has shown it is by no means incompatible with indigenous belief systems that associate disease prevention with obedience in relation to restrictive norms around hygiene, diet, sexuality and hierarchy. This apparent congruence can, nevertheless, disguise a complete resignification of the role of the AIS: for example, Garnelo and Wright note that among the Baniwa AIS are enthusiastically encouraged by their communities to monitor food hygiene – except that this is understood to mean checking the menstrual status of women involved in food preparation, rather than urging them to use (hard to obtain) soap to clean their hands before cooking (Garnelo & Wright 2001: 281].

Aside from serving as boat pilots, interpreters and general dogsbodies for visiting white health professionals, and dispensing advice on hand-washing, safe defecation and rubbish disposal to their communities, the AIS are officially allowed to administer oral rehydration therapy and occasionally nutritional supplements and other low-risk treatments which have been prescribed by the DSEI doctors or nurses. They are, however, rigorously forbidden under federal regulations (strenuously upheld by the nursing and medical lobbies) to provide any of the curative services which their communities expect from someone who has spent time being trained in the mysteries of the white health system – above all, they are banned from dispensing the drugs which are the central focus of indigenous interest in biomedical practice.

Among the AIS whom I interviewed in the Rio Negro, this was universally resented – especially among the older generation who had trained with NGOs like SSL or with the University of Amazonas RASI programme before the DSEI was formally established, and who had become expert in handling a range of basic medicines. These medicines were provided on an ad hoc basis by the NGOs or the municipal administration, or occasionally bought from river traders and provided to community members in exchange for food or other gifts; administering them was therefore a major source of both symbolic and material benefits. The advent of the DSEI had led to much greater formal control over AIS's access to medicines, and an explicit reiteration of the official line that they were supposed to restrict their activities to preventive work. In practice many AIS were able to obtain medicines from sympathetic white professionals or by "borrowing" them from the *pólo-base* pharmacies, while others used their DSEI salaries to buy private drug supplies in São Gabriel. Thus the practical means of maintaining their prestige could still be secured, but its all-important symbolic legitimation had been withdrawn by the DSEI; their resentment was focused on the fact that the biomedical system which they had undergone arduous training to join seemed to insist on de-legitimating the curative role which had motivated their joining in the first place.

Access to drugs is central to the micropolitical role of the AIS because drugs are the quintessential modern commodity, and community members who accept

roles which link them to what Araújo terms the "space of intercultural mediation" are required to demonstrate efficiency in obtaining modern commodities and generosity in distributing them. As Garnelo and Wright put it, "even if [an AIS] is able to administer oral rehydration therapy, organise health education meetings, assist with immunisation or with health council meetings, channel demands or take patients to hospital, none of these skills can offer greater prestige than that which derives from naming diseases and supplying drugs with which to treat them... [without which] the AIS declare themselves to be impotent and are seen as such by their communities" (Garnelo and Wright 2001: 282). AIS who are successful in obtaining drugs strengthen the political position of their kin group, whom they are expected to privilege in sharing out these powerful resources (irrespective of clinical need), and with whom they are also expected to display generosity in distributing the other modern commodities which their DSEI salary enables them to buy. This explains the intensity of the political disputes between kin groups over who has the right to nominate a candidate for training as an AIS to cover a particular area.

Aside from their potential role in influencing the patterns of access to valued commodities among different kin groups, the micropolitical importance of the AIS extends to their potential to act as the focal point for the formation of alternative power centres in the community. As I discuss in Chapter 7, a significant number of indigenous political representatives both within and outside the health system began their careers as "intercultural mediators" by training as AIS. Within this role, young, ambitious indigenous men and women can attract the support of others of their generation who have more formal education than their elders but who feel themselves to be held back by "traditional" hierarchies of age, gender or clan, above all by establishing themselves as potential rivals to the arch-arbiters of those "traditional" hierarchies – the pajés.

6.2.3 Articulating knowledges

Despite the political opportunities afforded by their role and the tensions with the pajés that accompany any growth in their power, however, the AIS are by no means simply "modernisation agents" spearheading a unidirectional process of biomedicalisation. In fact, by delegitimating their curative role and informalising their access to drugs, the "white" health system has actually weakened their ability to compete with the pajés. In some cases, AIS have actively begun to seek out pajés and apprentice themselves to them, with the aim of acquiring prestige through traditional medical knowledge that allows them to counterbalance the limitations on what they can obtain through biomedical practice. This has had the effect of reaffirming indigenous medical knowledge by demonstrating its ability to absorb people trained in biomedicine. In the Rio Negro it has been supported by the growing political visibility of the pajés, and has been lent additional legitimacy by another group of "intercultural mediators" – the indigenous movement leaders associated with FOIRN. These leaders have begun to speak out in favour of traditional knowledge, both in order to rebuild their own legitimacy with the older leaders in the villages who control their support bases (see Chapter 7) and to strengthen the claims to difference which are the political basis of their engagement with the white state.

During my period of fieldwork in the Rio Negro, I came across several narratives which seemed to be rapidly gaining currency among movement leaders, AIS and community members alike, whose central theme was the effectiveness of indigenous medicine in dealing with health problems that the white health system had sought to claim as its own. The most commonly-repeated such narrative concerned Rosa, a Hup'däh woman from the Uaupés region, who had been taken to the *pólo-base* by her local (indigenous but non-Hup'däh) AIS after being bitten on the leg by a venomous snake (according to most accounts a fer-de-lance, *bothrops atrox*). Because they had no antivenom available, the *pólo-base* health team arranged for her to be transported to the military hospital in São Gabriel da Cachoeira (two days' journey away by speedboat). By the time she

arrived in São Gabriel, necrosis had set in and the army doctors recommended that she be referred to Manaus (over 1,000 kilometres away, a two-hour journey in the small turboprop planes which ply the route). On arrival in Manaus, Rosa was installed in the *Casa do Índio*, a notoriously problematic mix of referral clinic and hostel for indigenous patients awaiting treatment in Manaus's hospitals. There, she endured strange food and the fear of sexual violence, poisoning and sorcery associated with lying helpless among a large number of non-Hup'däh men – along with the agonising pain from her injury – for several days while a hospital appointment was sought for her. When the doctors eventually saw her, they declared that the advanced state of the necrosis meant that they would have no alternative but to amputate her leg. Her husband, who had been permitted to accompany her but who (like Rosa herself) had never been outside the Uaupés and spoke virtually no Portuguese, "went mad" and simply disappeared in Manaus, leaving her alone (he was to reappear literally months later, having found or stolen a canoe and paddled himself almost 1,500 kilometres back to the Uaupés). Rosa refused to consider undergoing amputation, and insisted that since the operation would kill her she would prefer to return to the Uaupés to die among her people. With great courage and firmness of purpose, she succeeded in forcing the local FUNASA staff to accept her wishes and arrange for her to be transported back to the DSEI-Rio Negro headquarters in São Gabriel and from there to the Uaupés. As soon as she was back in her village, she sought out a renowned pajé and began the traditional treatment for her injury. Within a matter of weeks the necrosis had been reversed and her leg was sound enough to allow her to resume her functions in the household and community.

Whatever their basis in reality (and I was never able to locate Rosa to ask her to tell me her own version of the story), such narratives provide a potent source of support for claims that the biomedical system entrenched by the DSEI is not as all-powerful as its white experts and their indigenous allies (whether AIS in the villages or FOIRN leaders involved in health system management) may have tried to suggest. These claims serve, of course, to bolster the resurgent authority of the pajés, legitimating their attempts to move out of the residual territory of the *doenças de índio* and onto biomedicine's own patch, diagnosing and treating

problems for which the white health system has a name and a prescribed treatment. They also legitimate AIS and FOIRN leaders who are interested in repositioning themselves politically, backing away from their former rôles as technical and bureaucratic spearheads of modernisation into a more nuanced position, where they can continue to enjoy the power and prestige associated with biomedicine while reducing their risk of suffering the accusations, poisoning and sorcery which await those deemed to have "gone over" to white society and abandoned traditional values and hierarchies.

The pajés counter-offensive is, however, more ambitious than a simple redrawing of the boundaries between their areas of competence and those of the DSEI in treating people in the villages. As the incident described at the start of this section made clear, the pajés vigorously resist efforts by the DSEI to appropriate areas of their expertise in the shape of "packages" (plant-based treatment recipes, or combinations of plants and benzimentos) akin to those of biomedicine, divorced from the mythological narratives which give meaning to indigenous treatments and guarantee their effectiveness, and leaving no clear role for the indigenous specialists themselves. This does not, however, mean that they reject association with the DSEI. Quite the contrary, in fact: analysis of the records of pajés' meetings and of Health Council sessions where "traditional medicine" was on the agenda demonstrates that a number of proposals are recurrently articulated which clearly aim to associate the pajés with the prestige of the white health system. One category of demand is for "projects" which could provide pajés with money and/or highly-valued goods like outboard motors in exchange for delivering activities such as cultivating medicinal plants or training AIS in traditional medicine. Another category centres on involving pajés in preparing white professionals to work in the villages, including demands for reactivation of the cultural sensitisation training for new (non-indigenous) staff which was introduced by SSL during its period of involvement in DSEI management (using pajés as paid trainers) but subsequently discontinued. A third category of demands seeks to place pajés within the power centres of the DSEI itself and guarantee their access to the same flow of money and goods enjoyed by the AIS, via proposals for

them to be put on the DSEI payroll and provided with consulting rooms within the *pólos-base* and the military hospital itself.

The National Indigenous Health Policy states that "articulation with these [traditional] knowledges and practices should be encouraged in order to secure improvements in the health status of indigenous peoples" (FUNASA 2002: 18). "Articulation" between indigenous medical knowledge and biomedicine has been practised by indigenous health-seekers since the latter first appeared in their world, in the company of devastating epidemics of new diseases and sustained cultural violence aimed at eradicating the influence of traditional specialists. At the level of the health system, however, "articulation" has barely begun to take place. What the pajés of the Rio Negro are demonstrating is that indigenous specialists are actively seeking to redefine the terms on which it will occur. Their proposed terms make it clear that there can be no articulation of knowledges without articulation of knowledge-holders – and that for them this implies placing the material and symbolic resources of the "white health system" at the service of their efforts to re-establish their power base. Both this proposal and the "white" system's clumsy attempt to extend its hold over indigenous hearts and minds by the selective adoption of "traditional" treatment packages make it clear that different experts' strategies are guided by more or less explicit representations of health as a field of power, where what is at stake is the authority to explain illness and discipline the behaviour of non-specialists – and to enjoy the symbolic and material dividends which flow from this authority.

This part of the thesis has shown how the representations of health that come into play in interactions between the *Movimento Indígena* and the state are both startlingly diverse and strongly linked by common themes. The diversity exists not only *between* the fields of indigenous and "white technical" knowledge, but also *within* each field – whether among actors (pajés and AIS, doctors and managers) or among ideological positions (Hup'däh and Baniwa shamanism, or FUNASA and "SUS tribe" *sanitarismo*). The commonalities can be perceived when we focus on the themes of inclusion and power.

The inclusionary impulse can be driven by progressive ideology and human generosity, as is generally the case among the "SUS tribe" – but even here the task of inclusion is to mould the included into something else: conscious, active citizens enjoying "health" that is represented a standard package of health services, to which they can claim the right of access as a correlate of their duty to participate. In the FUNASA version of *sanitarismo* and its antecedents from Oswaldo Cruz to SUCAM, inclusion is openly identified with disciplining and coercion, in the cause of a less disease-ridden, more modern and more (militarily) secure Brazil. The pajés of the Rio Negro are developing strategies to "re-include" those segments of indigenous society that have begun to escape their control, as new agents of modernisation (including the DSEI) disrupt social norms which had already been battered by the *padres*. The pajés are also seeking, on the symbolic level, to resist "inclusion" of their specialist knowledge by the biomedical practitioners of the DSEI, and to counterattack by asserting the relevance of their curative power in diagnostic fields where biomedicine had seemed to have achieved a hegemonic position.

The subtext of power running through the examples discussed in the three chapters that make up this part of the thesis is of course linked to notions of power as control – specifically, the power to discipline the unruly/unhealthy. Both for the followers of Oswaldo Cruz and for the pajés of the Rio Negro, the exercise of this power is legitimated by specific representations of health: representations that portray it as something constantly under threat, that must be secured by coercive action and the imposition of discipline. However, this notion is never fully separated from a cruder, more materialistic notion of power as the ability to command money and things as well as people. In this thesis, I argue that this notion has itself become a representation of health: in the same way that for *o povo da saúde* "health" has come to mean the SUS, for both FUNASA and its interlocutors, "indigenous health" has come to represent not the "intercultural" pursuit of greater wellbeing for indigenous people, but an ensemble of money and things to be struggled over in a series of zero-sum confrontations. Understanding these struggles, however, requires us to shift the focus of our analysis of representation: from representing health to representing people.

PART III

REPRESENTING PEOPLE

Chapter 7   Speaking for the People

7.1   Representing indigenousness

Strangers' Dining Room, House of Commons, London, 16 October 2007. *Davi Kopenawa Yanomami looks round the heavily-panelled room where a mix of British politicians, NGO activists, academics and media types have gathered for the launch of a report by Survival International on the health of the world's indigenous peoples. He turns to the Liberal Democrat MP (and former Oxfam fundraiser) Martin Horwood, who has welcomed him there on behalf of the All-Party Parliamentary Group on Tribal Peoples, and says "I have no role, I don't have guards or armies; I am here to speak for my people because I speak truth". A respectful hush falls over the room as Davi begins to speak, in Portuguese interspersed with words in Yanomami, his speech skilfully divided into short blocks to make it easier for Fiona Watson from Survival to translate into English. I am moved and stirred by Davi's speech, even though I have heard versions of it many times before – in Brazil in the early 1990s I worked as a part-time press officer for the Brazilian NGO Commission for the Creation of the Yanomami Park (CCPY), which was where I first met Fiona and established the intermittent connection with Survival which led to my being invited to the House of Commons event. I'm not sure how much most of those present really understand of what Davi is saying, though, despite Fiona's excellent translation: his references to the misdeeds of FUNASA – hardly a household name in the UK – are probably as mysterious to most people as his explanation for the successive epidemics that have struck the Yanomami, which is that the gold-miners' environmentally destructive activities have released the harmful* xawara *spirit-essence from its hiding-place under the ground.*

This chapter examines the representation of indigenous people by indigenous people, from the global to the local level, with a particular focus on health policy debates and new democratic spaces associated with the Indigenous Health Subsystem. In line with the conceptual framework set out in Chapter 1, it distinguishes between representation as *signification* and representation as *mediation*. My third category, representation as *acting substantively for others*, is applied to the more in-depth look at the involvement in health service provision of regional *Movimento Indígena* organisations in my case study sites of Acre and the Rio Negro which is the focus of Chapter 8.

7.1.1 Speaking as an indigenous person, speaking like an indigenous person

Davi is experienced in handling different cultural representations of health. As an active participant in health programmes instituted first by CCPY and subsequently by FUNASA, he has helped to supervise malaria control activities which have included mass screenings for *Plasmodium Falciparum* and *Plasmodium Vivax* infection and even the training of some Yanomami in microscopy. As a respected shaman, he has also participated in spiritual battles to tame *xawara* and heal *urihi*, the Yanomami land and ecosystem. Despite this experience, however, in his speech at the House of Commons meeting he was not able to set these references in a context that his British audience could easily grasp, and as a result both his policy point about the need to reform FUNASA and his spiritual point about the need for a different relationship with the environment will have been largely missed by most of those present. Nevertheless, their respectful silence while he spoke and their warm applause at the end of his speech signalled that this short, burly, middle-aged man wearing blue jeans and a straw circlet woven with toucan feathers had successfully represented *something*.

As far as most of the people in his audience in the House of Commons that evening were concerned, what Davi was practising was neither representation as action nor representation as mediation. He himself signalled that the legitimacy of his claim to speak for his people rested on his identity as one of them and on the truthfulness of his speech, not on the backing of organised structures (the "guards and armies" which he indicated that British MPs could command). Despite his eloquence, both the policy and spiritual points which he sought to make went unremarked in most of the responses that he elicited from other speakers. These responses emphasised instead the *authenticity* of his presence: for these speakers, what Davi was representing was indigenousness itself.[36]

Although Davi does actually lead a formally-structured Yanomami organisation (*Hutukara Associação Yanomami*, or HAY), he does not base his representation claims on this – understandably, since HAY has little formal support beyond Davi's home community of Demini and the Yanomami have no

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[36] For a recent example of how the UK media represent Davi's authenticity, see Vidal (2009b).

central authority structure, divided as they are into four linguistically distinct subgroups and over 300 autonomous and often mutually hostile communities (Hemming 2003: 483). Davi has long been active in trying to bring the different Yanomami groups together for concerted political action – especially against the successive *garimpeiro* invasions – but he has never claimed to be any kind of "paramount chief". When I worked with CCPY we were always careful to describe him as a "Yanomami spokesperson" and not as a "Yanomami leader".

This careful positioning has not prevented Davi's claim that he speaks for his people because he can "speak truth" from being vigorously contested at different times. The contestation has come from a variety of people who found themselves opposed to Davi in struggles over both material and symbolic territory, from the invading *garimpeiros* to the controversial anthropologist Napoleon Chagnon. The attacks on Davi's legitimacy increased in direct proportion to his growing success in this "spokesperson" role, because the global reach of this success gave significant political advantage to whichever side was able to claim Davi's support – which mostly meant whichever side CCPY was on, since the organisation was run by Davi's closest non-indigenous allies. As Laura Graham has pointed out, after he won the UN "Global 500" environment award in 1988, "Davi Yanomami came to be sought after as a representative not only of the Yanomami but of all native Amazonian peoples" (2002: 181).

Graham relates how Napoleon Chagnon launched a highly-publicised challenge to Davi's legitimacy as part of an ongoing dispute with CCPY and its anthropologist supporters (especially Bruce Albert and Alcida Ramos), who had challenged Chagnon's own representation of the Yanomami as a "fierce people" permanently divided by endemic warfare (*ibid.*). As John Hemming has pointed out, this representation was extremely useful to the Brazilian military's campaign to prevent the Yanomami's territory from being demarcated as a single continuous area rather than an "archipelago" of small and scattered reserves amid a "sea" of government land that could be opened up to mining and colonisation (Hemming 2003: 499). Chagnon argued that since the Yanomami had no unified political structure Davi could not claim to speak for them all, and was therefore no more legitimate a spokesperson that any other Yanomami. The same argument was

used by the mining interests promoting the *garimpeiro* invasion, who while I was working with CCPY in 1990 recruited a rival "Yanomami spokesman" called Marcelo and persuaded him to put his name to an article in Brazil's leading news magazine *Veja* that began "I am Yanomami and I argue for the *garimpeiros* to be allowed to stay in the indigenous lands" (Yanomami 1990: 95). Graham argues, however, that the central part of Chagnon's attack on Davi's legitimacy referred not to his supposed claim to be able to act substantively for others but to his self-representation as a "speaker of truth" whose perspective was authentically Yanomami: according to her account, Chagnon stated that the fact that Davi used speech patterns that were not "traditionally Yanomami" indicated that he was actually parroting words put into his mouth by his "First World activist mentors", and that he could not claim that he "represents anything other than himself or what his NGO creators tell him to say" (Graham 2002: 184).

This episode illustrates how issues of legitimacy and authenticity of representation are deeply bound up with the performance of indigenousness, in words as well as visual imagery. In her essay (entitled "How Should an Indian Speak?"), Laura Graham points out that indigenous representatives constantly have to walk a tightrope between the poles of an "authentic" indigenous rhetoric whose references will be largely lost on a non-indigenous audience and a more easily-understood "white" political discourse which risks being disqualified as inauthentic. The role of such representatives as mediators and translators is discussed in the next section; here, my concern is to show that representation as signification – representing indigenousness itself, rather than a particular indigenous agenda or group – is fraught with complexity and needs to be carefully and strategically calibrated by its practitioners.

Similar tensions apply to the dress codes of indigenous political mobilisation. A group of indigenous representatives who turned up to lobby Congress wearing "authentic" pre-contact dress (which for some groups would consist only of penis sheaths for men and tiny *uluru* vagina-coverings for women, and for others would consist of nothing at all) would have difficulty making themselves heard over the hubbub of shocked-prurient responses. Conversely, a leader who does not at least put on a feather *cocar* headdress (whether or not

such headgear actually features in the traditional material culture of his or her ethnic group) before addressing white people at a formal political event is likely to be considered insufficiently representative of authentic indigenousness.

Indigenous women face particular challenges in this respect, as a result of both the eroticisation of the "naked (female) savage" in the (male) Western imagination and the particular pervasiveness of sex-object representations of women in Brazilian media culture. The latter is disrupted not by the general idea of nudity but by the particular shock of everyday bare-breastedness, which is not tolerated even among the miniscule bikinis of Ipanema beach. These tensions have elicited some very creative responses, from the (prodigious) cleavage to which Carmem Pankararu, Coordinator of the National Forum of Indigenous Health Council Presidents, proudly draws attention (referring to it with the samba school term *comissão de frente*, or "parade-opener", when she describes its impact on male politicians and bureaucrats with whom she has to negotiate), to the (stylish but completely non-traditional) Gaultier-style conical woven breast-covers worn by the group of young Shanenawa women who performed a "traditional" welcome dance for me and a group of other (male and female, white and indigenous) outsiders when we arrived for a workshop in their village.

During my fieldwork, I observed many cases where the exuberance of a representative's visual display of indigenousness – the use of face-painting, the wearing of ornaments such as feather headdresses and seed necklaces and the carrying of weapons such as the bow or *borduna* war-club – was inversely correlated with the extent of their group's permanent immersion in urban non-indigenous culture. At the 2006 National Indigenous Health Conference (discussed in Chapter 9), none of the Mentuktire Kayapó delegates from Mato Grosso even wore a headdress, whereas the Tupinambá delegates from Olivença in Bahia were festooned in feathers.[37] At the 2007 Acre State Health Conference

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[37] The Mentuktire Kayapó (also known as Txukarramãe) are a fiercely traditional group who only came into permanent contact with non-indigenous society in the late 1950s and still regularly take up *bordunas* to defend their lands against non-indigenous incursions (Hemming 2003:150). The Olivença Tupinambá emerged as a distinct group just a few years before the Conference in a classic process of "ethnogenesis"; they no longer speak any indigenous language but claim descent from one of the largest of the Tupi-speaking peoples who dominated the Atlantic coast when the Portuguese arrived in 1500, and the authenticity of their indigenous identity has been systematically questioned since they began a land claim in a region of Bahia popular with foreign and Southern Brazilian tourists.

the only indigenous delegate who consistently wore a headdress and face-paint was a young, highly educated representative from a village close to an urban area; older delegates from more isolated territories, where non-visual markers of indigenous identity (such as everyday use of an indigenous language and the ongoing oral transmission of mythology) have been facing fewer challenges from urban society, did not paint their faces, and wore "smart-casual" non-indigenous clothing throughout the Conference.[38]

7.1.2   Authenticity and its discontents

The legitimation of authenticity claims through visual signifiers such as face-painting and headdress-wearing fits squarely within a framing of indigenousness that is *ethnic* and not *racial* – a distinction that has long been central both to official *Indigenismo* and to *Movimento Indígena* politics (Ramos 1998; Varga 2007). However, during my fieldwork I encountered several examples of claims based on indigenous identity being contested on the grounds that the person representing them did not "look like a real indian". "Looking like a real indian" can be associated with dress, adornment and posture – just as "sounding like a real indian" can be associated with certain discursive tropes or the deployment of indigenous-language words within a speech in Portuguese, as in the examples analysed by Laura Graham (2002). It can also, however, be associated with "racial" features such as hair texture and skin colour – which means that "not looking like a real indian" can quickly elide into "not being of pure indian blood". Here, the contestation enters the slippery terrain between "results-based ethnicity" (Albert 2000) and the racial politics of a country where race-equality movements are struggling to challenge a long-entrenched representation of Brazil as a "racial democracy" defined by its history as "the crucible of *métissage*, the result of the encounter of white, black and Indian" (Ramos 1998: 286).[39]

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[38] For a visual record of the performance of indigenousness by this young delegate, Elisomar Kaxinawá – and of the Shanenawa welcome dance described above – see the SSL video *Fala Txai* (Damasceno 2008), which can be viewed online at http://www.youtube.com/watch?v=zt_xl-XeDjw.

[39] For a ground-breaking analysis of the penetration of Brazilian race politics by the logic of ethnicity in the case of the *quilombolas* (Afro-Brazilians claiming descent from escaped slaves), see Arruti (1997); for a

What makes this racialised form of contestation particularly problematic is the frequency with which it tends to be deployed not only against the *Movimento Indígena* but also within it – above all in factional struggles where disputing rivals' claims to authenticity is a way to discredit their political strategies or supplant them in the representation channels that give access to resource flows from non-indigenous society. This came into play in two of the conflicts within the *Movimento Indígena* which I studied: that over engagement with FUNASA through the National Forum of Indigenous Health Council Presidents and the National Indigenous Health Conference (discussed in detail in Chapter 9) and that over engagement with the state government in Acre.

In the former, the accusation of "not being a real indian" was levelled by Amazonian representatives at Carmem Pankaruru, the Coordinator of the Forum, whose Afro-Brazilian heritage – she is from a people in the Northeast which has had centuries of intermarriage with *quilombolas* (escaped slaves) and other Brazilians of African descent (Arruti 2002) – is evident from her "un-indigenous" curly hair. Aside from sexism (Amazonian indigenous leaders, unlike those from the Northeast, are not used to seeing women in positions of authority in the *Movimento Indígena*) and racism (some indigenous groups are inclined to treat people of African descent as dangerously "other"), the political logic of this attack on Carmem's legitimacy was to imply that she was more inclined to side with FUNASA, a non-indigenous institution, because in an "us and them" situation she was not really indigenous enough to identify herself with "us".

In the Acre case, the target was the State Secretary for Indigenous Peoples, Francisco Pianko Ashaninka – whose father is Ashaninka and whose mother is from a migrant *seringueiro* family – and the use of racial mixing as ammunition in an attack on a representative's authentic indigenousness was rendered particularly ironic by the fact that the person doing the accusing was himself *mestiço*. This accuser was Sabá Manchineri, a member of the UNI leadership group who had gone from the Acre *Movimento Indígena* to head the pan-Amazonian indigenous organisation COICA (*Confederación de las Organizaciones Indígenas de la*

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thorough and insightful overview of the emergence of *quilombola* identity and its deployment in engagements with the state, see (Menino 2009).

Cuenca Amazónica, or Confederation of the Indigenous Organisations of the Amazon Basin). After a split within COICA, Sabá returned to Acre in 2005 and mounted a challenge to Francisco with the declared aim of replacing him as the state government's designated interlocutor with the *Movimento Indígena*, using as part of his campaign the accusation that Francisco was "not a real indian" because his mother was "white". Sabá was counter-challenged on his own mixed descent, but argued that "according to Manchineri tradition" he was indigenous despite the fact that his father had *seringueiro* origins, because his mother was Manchineri.[40] The confrontation degenerated into a farcical series of exchanges in Rio Branco newspaper columns and blog postings, which further damaged the political credibility of a regional *Movimento Indígena* still struggling (as discussed in Chapter 3) with the aftermath of the UNI health service outsourcing disaster (Machado 2005).

In Acre the long history of (forced and voluntary) intermarriage between indigenous people and migrant *seringueiros* has left a confusing landscape for racists and practitioners of "strategic essentialism" alike. In the heart of the Upper Juruá Extractive Reserve, which was the first *seringueiro* territory to secure federal recognition in 1990, the extended family of local patriarch and former *seringueiro* movement leader *Seu* Milton Gomes da Conceição has embarked on a process of "ethnogenesis" that culminated during my fieldwork period in the formal registration of a claim for land rights based on an identity as "Kuntanawa" – a Pano-speaking people of whom Seu Milton's father (captured as a child in a *seringueiro* raid that destroyed his village) seems to have been one of the few survivors (Pantoja 2008). As Mariana Pantoja shows in her beautifully-reconstructed history of the family, *Os Milton* (2004), this self-identification is the latest phase in an extraordinarily dynamic process of movement back and forth across the interethnic frontier. This movement is apparent in the life histories of many Acre *Movimento Indígena* representatives: for example Anchieta Arara, who was a member of the UNI "Provisional Coordinating Body" and subsequently

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[40] Sabá also ran into problems with his use of dress to signal authenticity; after returning from Peru he took to performing his indigenousness by wearing "traditional" dress, but it emerged that he was actually wearing the traditional robes of the Pano-speaking Shipibo people and not those of his own relatives across the border in Peru, who belong to the Arawak-speaking Piro people.

became "indigenous advisor" to the DSEI Alto Juruá, is the son of an Arara Shawãdawa mother and a *seringueiro* father, and had a successful career as a rural workers' union leader before becoming involved in *Movimento Indígena* politics. Although the prevalence of *métissage* during and after the *seringueiro* occupation of Acre means that the fluidity of self-identifications in the state is often associated with leaders who have mixed ancestry, it is also reflected in the life histories of those who are of "pure" indigenous descent. For example, Davi Waine Ashaninka, whose trajectory as a representative I discuss below, is of "pure" Ashaninka descent but was brought up by a *seringueiro* family and speaks Portuguese as his first language – whereas Francisco Pianko Ashaninka, one of the most important leaders to emerge from Davi's "home" territory of the River Amônia, is *mestiço* but grew up in the village and speaks Ashaninka as his first language. Just as in the case of the Andean "indigenous" teacher-activists in Peru whose shifting identities are analysed by Fiona Wilson (2007), the ethnic and racial identities of *Movimento* representatives in Acre are both the product of and a dynamic response to deeper social processes and wider political struggles.

Although "strategic essentialism" is a familiar approach for many marginalised groups, the importance of accurately calibrating and effectively deploying their representation of an essentialised identity is greater for indigenous peoples than for most others. This is because they are so often a very small minority of the total population; as Alcida Ramos has pointed out, this increases the importance of political representation strategies which privilege "image politics". She argues that unlike countries such as Ecuador, Peru, Bolivia, Mexico and Guatemala, where the indigenous population is large enough for mass mobilisation to shift the balance of power in more conventional ways,

> "...in countries such as Brazil and Colombia, with Indians representing less than 2 per cent of the population, the impact of indigenous political pressures necessarily has a different character and raises a different set of analytical issues. In these contexts one is faced with a distinct kind of indigenous power. It is a power that affects those countries' image rather than their *Realpolitik*." (2002: 261)

The enemies of indigenous peoples are well aware that this is the source of their power, and are therefore constantly seeking to question the political legitimacy of

those who represent indigenousness or to challenge the authenticity of their claim to this essentialised identity, on either "racial" or "cultural" grounds. The "cultural" challenge has long been a favourite of the national security establishment in Brazil, with its statements about the need for "acculturated indians" to give up their land claims because they are no longer authentically part of a *silvícola* ("forest-dweller") culture[41]. Warren and Jackson point out that "critics of indigenous movements who question their legitimacy by pointing to signs of cultural hybridity often miss the point, because groups inevitably mix strategic essentialism with other lines of argument to legitimize their existence" (Warren and Jackson 2002: 8). When the critics are pro-indigenous but misguided "culturalist" sympathisers, this may be the case; however, when they are enemies of the indigenous groups who are actively seeking to delegitimise their representatives and movement organisations, the critics are not missing the point – they are demonstrating an awareness that strategic essentialism is both the strongest weapon and the Achilles heel of indigenous political action.

Dealing with such enemies while at the same time managing to "mix strategic essentialism with other lines of argument to legitimize their existence" requires representatives to display a great deal of presentational skill. Successfully combining this discursive "mixing" for the benefit of outsiders with the work of interpreting those outsiders' political universe for the benefit of representatives' own communities requires a great deal of communicative skill. Bringing signification and interpretation together to influence policy processes requires representatives to be consummate political operators. This is the terrain of *representation as mediation*, which is explored in the next section.

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[41] The extent to which this discourse associating legitimate claims to indigenousness and its associated rights with pre-modernity has penetrated everyday perceptions of indigenous people in Brazil is exemplified by a recent discussion on a popular blog site run by a journalist who is based in the region of Bahia where the Tupinambá have staked their land claim. When someone self-identifying as Tupinambá posted in defence of the claim, the response of another site visitor was "hey indian, you're accessing the internet now are you? In that case why do you need so much land? Go take over an internet café and that should be enough for you" (Mendonça 2009).

7.2   Choosing representatives

7.2.1 Process

Cafeteria of the FAAO university campus, Rio Branco, Acre, 7 September 2007. *There are twelve of us sitting around the plastic tables in the corner of the cafeteria where we have improvised our meeting-space: six of the eight indigenous delegates to the Acre State Health Conference (two of whom are women), Francisco Pianko Ashaninka (the former Juruá Valley indigenous organisation leader who is now Special Advisor on Indigenous Affairs to the State Governor) and his Yawanawá wife Eliane (who works for the Education Secretariat), myself and my colleagues Andrea and Silvana from the SSL action research project team (we have been asked by Francisco to take notes and advise on official health service participation procedure), as well as Andrea's baby, Tamani. While we wait for the last two delegates to join us, the women fuss over Tamani (whose father is a prominent Kaxinawá leader) and occasionally interject comments into the discussion the men are having about the Conference. All the indigenous delegates are clearly taking their participation seriously – though one of the women attracts censorious male glances when she complains that she can't think straight because she is too hung over after last night's post-plenary party – but they are finding some of the debates hard to follow. Many of the issues under discussion seem remote: there are plenty of references to* Florestania *in the official speeches, but the young and articulate delegate Elisomar Kaxinawá tells me in a wry aside that "all they are talking about in the debates is health care in the urban areas".*

As the last two delegates arrive, Francisco calls the meeting to order. He begins by positioning himself: "Here and now, I am Estado *and not* Movimento*". He then sets out the task at hand: to decide who should represent the indigenous* usuários *(health service users) of Acre at the National Health Conference in Brasília. He concludes by saying that "as everyone knows what is required from delegates, I am sure there won't be many doubts or much dispute over our choice".*

There is evident discomfort at having to choose a single representative, and the initial discussion focuses on why it isn't possible for all the indigenous delegates or even most of them to travel to Brasília. In fact, the nationally-determined ceiling on delegates per state has turned a place in the Acre delegation into a scarce and sought-after commodity, and even the State Health Secretariat's promise to reserve a single place for an indigenous delegate is a major concession, which may not go through at all without the Secretariat investing political capital in negotiations with other groups of usuários. *Edna Shanenawa, a delegate who is also Coordinator of the regional women's organisation SITOAKORE, explains that "we indigenous people alone just don't have the votes, we would have to join up with other groups". Dr. Oswaldo, the State Secretary for Health, stops by during a break in the plenary discussions to see how the indigenous delegates are getting on, and reinforces the message that the choice is between identifying a single representative and submitting to a logic of numbers that is heavily weighted against any indigenous representation at all: "if we fix the representation of* usuários *according to regional quotas by population you won't get anyone into*

the delegation, so that's why we've been negotiating an agreement to guarantee a single indigenous delegate".

The justification for this improvised quota clearly depends on delegates self-identifying as indigenous rather than emphasising any other subject position, but some of them don't seem to see it that way. Rosildo Jaminawa-Arara states that "whoever goes to Brasília as an indigenous delegate will have to fight not only for his people but for the whole population of Acre", and Gilberto Kaxinawá points out that he was chosen as a delegate "not just by my community, but by the population of the municipality". He adds that the most important thing in selecting a representative is "to choose people we trust", and looks pointedly towards Elisomar, who is also Kaxinawá and from the same municipality, Feijó – and, I later discover, a fellow member of the Communist Party of Brazil (PCdoB), which has been supporting a faction hostile to Francisco in recent internecine struggles in the Acre Movimento Indígena.

Suddenly, without any explicit closure on the issue of the size of the quota and its justification, the discussion has shifted to focus on who will be chosen as the single indigenous delegate. Elisomar is soon being explicitly nominated; the first to recommend him is the older, quietly authoritative Adalto, who is also Kaxinawá but from a different municipality, Jordão, where the indigenous leaders have tended to support the Green Party (PV) or Workers' Party (PT) – the parties that are more closely identified with Francisco's own faction. There are other murmurs of support for Elisomar, noting that he is one of only two indigenous delegates to have made a speech during the plenary debates so far – the "courage" to address white people directly in a public political space is a highly-valued attribute in a representative.

*Francisco, in response, emphasises the need for the person selected to have "a good understanding of the health [policy] process" – and he follows this up with a challenge: "I don't know Elisomar well, so I'm not sure what his knowledge is in this area". Rosildo, who is an AIS (*Agente Indígena de Saúde, *or indigenous village health worker) from an indigenous territory in Marechal Thaumaturgo, the municipality where Francisco's own home community is located, seizes on this and directly asks Elisomar what "function" he has in the health field. Rosildo is the other indigenous delegate who has made a speech during the plenary debates, and he clearly believes that his own combination of "expertise" (as a longstanding and well-respected AIS) and "courage" in public speaking makes him a better candidate – though he is a much less confident and fluent speaker than the younger and more "urbanised" Elisomar. As he perceives the challenge, Elisomar's body language shifts from confident relaxation to sudden tension. His voice begins to rise in pitch as he argues that his relative lack of sector-specific expertise (he is not an AIS but a trainee teacher) should not be the defining criterion: "My experience is in education, but we should be bringing things together, not dividing them... I happen to be a member of the Local Health Council, I know what the reality is down at the* base *(grassroots) and what matters most is whether someone is following the issues and participating". This appeal to the importance of attitude over expertise appears not to have convinced people, and no one else speaks up in support of Elisomar – but neither are there any voices raised to nominate Rosildo in his place.*

Then, at the other end of the table, Orlando Katukina clears his throat to speak. There is a moment of evident tension. Orlando is the chair of the Indigenous Health District Council (CONDISI) for the DSEI Alto Juruá and was a delegate at the previous year's National Indigenous Health Conference – and can thus lay a better claim than anyone else to the status of expert on health policy processes. The problem is that he is widely regarded as an ineffectual chair of the Conselho, *far too beholden to the FUNASA manager of the DSEI, who like him is a PCdoB member. A group of other indigenous leaders in the Juruá has been trying to oust him, with scarcely-veiled support from Francisco. Everyone is expecting Orlando to make his own pitch – but instead he simply says "We should respect the decision of the majority".*

Rosildo, upset at the lack of support for his own bid, is becoming visibly impatient. "We're spending too much time on this – if seven or eight of us are having such a hard time deciding, imagine what it would be like if there were more of us". He concludes abruptly: "My candidate is Adalto". Orlando responds by saying "We shouldn't rule anybody out", and then appears to be making a belated bid of his own, with a rambling speech about how "health is our biggest problem" which ends "some progress has been made, but we need to get it up to 100%". Elisomar responds by nominating Orlando, but his former ally Gilberto has switched tack, and casts his vote for Adalto, on the grounds that he has proven knowledge of the health system. Gilberto (who is himself an AIS) points out that Adalto is the manager of the indigenous health service pólo-base *(nursing station) in his municipality, having been installed in place of a non-indigenous manager after the Kaxinawá stormed the* pólo-base *to protest about the poor quality of its services. According to Gilberto, this means that Adalto "has the inside knowledge of these things that we need... the* nawá *(white people) always stand up for their rights, but it is hard to defend the rights of the indigenous peoples".*[42]

As others mutter their assent, Francisco turns to the one delegate who has remained silent throughout: the Madihá (Kulina) representative from Santa Rosa, a tiny and remote municipality with a largely indigenous population. "What about you, txai*?" he asks, using the Kaxinawá kinship term that has become the* Movimento Indígena*'s equivalent of "comrade". "I don't know anything" comes the startled response, in the Madihá delegate's clearly very limited Portuguese. Francisco presses him to opt for one of the candidates, and he responds by asking where they are from – he evidently doesn't know any of them, and hasn't been part of the group's previous discussions because he has spent the whole Conference sitting unnoticed with the "white" delegates from Santa Rosa until just now, when Edna spotted him and brought him along to this meeting. He is told*

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[42] *Nawá* is a common term in the Panoan languages for members of other ethnic groups, but Gilberto was using it specifically to mean non-indigenous Brazilians. The suffix *nawa* or *nawá* added to tribal labels indicates that contact with these groups was made via other groups who had their own names for them – hence *kaxi-nawá*, ("the people of the bat", whose name for themselves is *huni kuin*, or "true people"). In the Acre *Movimento Indígena*, however, *nawá* is generally used in to refer to white people, more or less interchangeably with the regional term *cariú* (see Pantoja 2004, Chapter 3). It is used to transmit a generic sense of otherness, just as *txai*, the Kaxinawá word for "brother-in-law", is used to indicate a a generic sense of political closeness among non-kin, becoming the equivalent of "comrade" among Acre *Movimento Indígena* leaders and their allies.

which municipality Elisomar, Rosildo, Orlando and Adalto are from and which ethnic groups they belong to; none of the names seems to elicit much response, but then he timidly gestures towards Adalto, and the nomination is formally clinched.

The delegates have chosen their representative, but the dispute has left tension in the air. Francisco turns to me and asks for clarification about other possible avenues for the inclusion of indigenous delegates in the National Health Conference. I point out that in addition to a titular delegate they are entitled to choose a suplente *(substitute delegate), in case Adalto is unable to go when the National Conference invitation arrives. I also mention that as the chair of a CONDISI, Orlando will automatically be invited if the National Forum of CONDISI Chairs is successful in its bid to guarantee places for its members at the National Conference, and that I have heard that the* Movimento Indígena *organisation COIAB (Coordinating Body for the Indigenous Organisations of the Brazilian Amazon) is lobbying for the right to nominate delegates from each of the Amazonian regions, including the Acre and Southern Amazonas region formerly represented by UNI. The tension suddenly eases, and in a flurry of democratic deliberation that is expertly steered by Francisco, Rosildo is chosen as* suplente *for Adalto, Elisomar is unanimously selected for the Acre and Southern Amazonas place in the (hypothetical) COIAB quota and Orlando's place in the (similarly hypothetical) Forum quota is ringingly endorsed by all present.*

The meeting breaks up and we head back to the auditorium where the final plenary is under way. The non-indigenous usuário *delegates are frantically caucusing and jostling for places in the group that will go to the National Conference. There are a few discontented mutterings when the organisers announce that an agreement has been reached to reserve one place for an indigenous representative in both the titular and substitute delegate groups, but other participants seem to be supportive, and no one takes the microphone to protest. The indigenous delegates move in a unified block to the front of the hall, with Adalto and Rosildo at their head. As their names are read out and they mount the stage, a ripple of applause begins, and then breaks into cheering. Adalto and Rosildo look around the auditorium with fiercely proud but slightly bemused expressions, taking in the sight of the hundreds of white delegates whose cheers are welcoming them to* o povo da saúde.

This part of the chapter is about the representation of representation: it seeks to analyse how those indigenous people who represent others in the new democratic spaces of the Indigenous Health Subsystem talk about what they do, and how those who choose them as their representatives talk about the criteria for that choice. In this section and the next I present the discourses of both representatives and represented, and go on to argue that these discourses privilege the practice of *representation as mediation*, and that this is associated specifically with the characteristics that indigenous people attribute to Brazilian new democratic spaces. In these spaces, the practice of *representation as signification* – the "image

politics" of performing and contesting authenticity – tends to appear only infrequently (though it can be used to great effect, as in one of the cases which I discuss in Chapter 9). This is because "image politics" depends on the representation of indigenous peoples' own difference, and therefore privileges sites that function as mirrors or amplifiers for the performance of authenticity. By contrast, indigenous representatives see new democratic spaces above all as sites for learning about, interpreting and engaging with the difference of others – in particular, that of the "white state". The chapter then concludes by discussing what my findings and the literature on indigenous political systems can together tell us about the differences between the practice of *representation as mediation* and the practice of *governance*, which depends on forms of *representation as acting substantively for others* such as those analysed in the next chapter.

7.2.1 Criteria

The scene described at the start of this section involves a form of "meta-representation": a group of representatives (elected delegates at a State Health Conference) trying to choose the person who could in turn represent them at a subsequent national event. This is a challenge that participants in Brazilian new democratic spaces often find themselves confronting, whether they are Local Indigenous Health Councillors choosing who should represent their sub-region on the District *Conselho*, or neighbourhood-level Participatory Budgeting delegates deciding who should take their proposals to a "Regional Plenary". In fact, this kind of "meta-representation" is inherent in the pyramid logic of "participatory sphere" institutions (Cornwall and Coelho 2006) that are arranged to mirror the governance levels of a federal polity.

In theory, it should be particularly useful to examine the selection criteria that are cited in such "meta-representation" episodes, since they are at one remove from the particularistic issues of faction and kin that permeate community-level micropolitics, and this relative abstraction means that they should be more revealing of the ideal types imagined by those who are choosing the representatives. As the episode narrated above shows, this isn't necessarily

how it works in practice: sub-regional, ethnic group and political party solidarities and rivalries provided a swirling undercurrent to the discussion, and may have contributed as much to its eventual outcome as the actual representation criteria that were mooted. Nevertheless, several key criteria for choosing a representative were clearly signalled during the discussion, and their relevance is evident from the fact that throughout my fieldwork these criteria were among the most frequently-mentioned in interviews and workshop discussions in both Acre and Amazonas, though with varying emphasis.

The first of these criteria was whether a potential representative had the "courage" to speak out in front of white people, as both Elisomar and Rosildo had done in the plenary debates of the State Health Conference. In Acre, with its more combative style of *Movimento Indígena* politics, the interviews and workshop discussions indicated that "courage" (*coragem*) and cognate virtues like "firmness" (*firmeza*) and "strength in the struggle" (*força na luta*) were regarded as essential. The same emphasis was evident among the Hup'däh in the Rio Negro, who demonstrate *coragem* by speaking out not only in front of white people but also in front of members of Tukano-speaking groups who regard them as hierarchically inferior (as discussed in detail in Chapter 8). Among the Tukano-speakers themselves, there was also an insistence that representatives should have enough "courage" to speak out, but the quality of their speech was considered equally important. This emphasis on "speaking well" (*falar bem*) or "speaking beautifully" (*falar bonito*) – in Portuguese, of course, as new democratic spaces in Brazil are hosted by the "white state" and must use its official language – may have been reflecting the Tukanoan preference for elaborate oratory in political discourse (Renato Athias, pers. comm. 2006). It may also have been reflecting the rionegrine political practice (which I discuss in the next section) of learning through imitation – in this case, imitation of the "white" politicians of the Brazilian interior, who are notoriously fond of rhetorical flourishes. When Renato Athias and I facilitated a discussion on meanings of representation with a mixed group of Hup'däh and Tukano-speaking (Desana and Tukano) trainee AIS in the Middle Tiquié, the Hup'däh-language phrase describing a representative was translated as "person

chosen to go outside the community", while the Tukano-language phrase was translated as "person chosen to speak to others".

The second criterion cited by participants in the discussion related above was whether potential representatives had the sector-specific expertise and experience that would allow them to engage in technical discussions, which was seen as a strong point for both Rosildo (the AIS) and Adalto (the *pólo-base* manager). The issue of technical knowledge was considered a key criterion in both case study regions, but the technical knowledge that mattered was less that relating to heath care itself (for example, the ability to interpret clinical or epidemiological data) and more that relating to the governance of the health system. Again, there was a difference in emphasis between the two regions: interviewees in the Rio Negro placed a much greater stress on familiarity with the formal rules and roles of the institutions of the Indigenous Health Subsystem, from the *burocracia* ("bureaucracy", or administrative procedures) of FUNASA management practices to the *leis* ("laws", or rules and norms) of institutionalised participation in the *Conselhos*; in Acre, by contrast, interviewees emphasised the importance of understanding the *política* – the political and policy dynamics – of those institutions.

The value placed on technical expertise for ensuring effective representation helps to explain the apparently contradictory practice of choosing people with service provision experience (AIS, nursing technicians, *pólo-base* administrators) as "service user" representatives. This practice was widespread in both regions – and indeed throughout the Subsystem, as was evident from the survey that I carried out with SSL colleagues at the 2006 National Indigenous Health Conference (discussed in Chapter 9), which found that among a random sample of 38 *usuário* delegates no fewer than 22 (58%) were working or had worked as AIS. The fact that even regions with a high level of knowledge of the formal rules of *controle social* (such as the Rio Negro) went ahead and chose a large number of AIS (that is, village health workers who are trained, supervised and usually paid by the DSEI) as "service user" representatives demonstrates that the SUS principle of keeping representation of users and providers separate in new democratic spaces does not seem to fit within indigenous representation logics. This is a striking

contrast with mainstream SUS *controle social* spaces, where the need for separation and numerical parity between service users and service providers is a central feature of representation debates (Cornwall 2007). Clearly, an indigenous representative is assumed *a priori* by his or her *base* (grassroots constituency) to be more likely to identify with ethnic interests than with class interests – in other words, AIS and other health workers chosen as *usuário* representatives are assumed to be indigenous first and health professionals second.

The third criterion that emerged from the discussion related above was whether potential representatives had demonstrated a proactive attitude – as Elisomar put it, whether they were "following the issues and participating". During the discussion, the emphasis was on proactiveness in following (*acompanhando*) what was going on in the health system via participation in the *Conselhos*. This was identified in both Acre and Amazonas as an essential characteristic of good representatives; those who missed *Conselho* meetings or otherwise seemed to give their role a low level of priority quickly lost legitimacy. The desirable characteristics listed at a brainstorming session on representation at a workshop which my SSL colleagues and I facilitated with *Movimento Indígena* representatives from the Alto Juruá and Alto Purus DSEIs in Acre included being "participative" (*participativo*) and generally "well-informed" (*informado*), as well specifically "well-informed about politics/policy" (*informado da política*).

Being good at monitoring (*acompanhando*) interactions around health services means more than just assiduous participation in the new democratic spaces of the Indigenous Health Subsystem, however. In the discussion related at the start of this section, Elisomar also emphasised his familiarity with the *base*, as someone who is a permanently resident and politically active member of his village community – perhaps in implied contrast with leaders like Adalto (or Francisco himself) whose political work has involved taking up posts that require them to move to town. In the Acre workshop discussion as in many others, the importance of being steeped in the "reality" (*realidade*) of the *base* was repeatedly stressed, within the broad argument that an essential part of the representative's job was to be proactive in relaying this local knowledge (*conhecimento da realidade*) to a "white state" seen as profoundly ignorant of the cultural, material,

geographical and epidemiological realities of the indigenous communities whose health it claimed to be protecting and promoting.

In interviews and workshop discussions in both case study sites, an even greater weight was attributed to another dimension of the proactiveness demanded of a representative: dedication and creativity in finding ways to take information from the new democratic spaces to the *base* (as well as vice-versa). In-depth discussions with successful representatives (such as the three whose experience is discussed below) demonstrated that they themselves attributed their success to their dedication and skill in relaying to the *base* the technical and political information acquired during their interactions with the "white state". Failure to provide feedback to the *base* is often given as grounds for revoking the mandate of a representative, and participants in the Acre workshop discussion insisted that a good representative should be *multiplicador*, a "multiplier", who showed a commitment to *repassar* ("pass on") the knowledge acquired during his or her work.

Among the *conselheiros* whom I interviewed in both Acre and Amazonas, the most commonly-cited single cause of difficulties in fulfilling their role was lack of resources for visiting or otherwise communicating with the *base*. In Amazonian DSEIs this is not a trivial issue; with mobile phone coverage almost nonexistent, communication relies on two-way radio networks to which by no means every village has access, and lack of roads and low population densities make travel from village to village expensive and time-consuming. A mapping exercise carried out during my fieldwork in the Rio Negro demonstrated that even in the densely-populated Middle Tiquié a local *conselheiro* who represented four or five small villages (usually with a combined population of fewer than a thousand people) would have to row a dugout canoe for a total of more than a day to cover all of his or her *base* – which given the need to stop in each village (with the associated hospitality rituals and the summoning of a formal village meeting to hear his or her account) would in practice meant spending at least three days providing feedback after each *Conselho* meeting. Since *conselheiros* are unpaid and spending time travelling around the *base* has not only an opportunity cost but also

a material one (for example in expensive fuel, if an outboard motor is used), this is a significant constraint[43].

7.3   Three representatives

Providing adequate feedback to the *base* requires more than material resources, however; it also takes a high degree of political and communicative skill. As Paula Montero, José Maurício Arruti and Cristina Pompa write in their manifesto calling for "an anthropology of the political", this is the terrain of *mediation*, the set of practices and discourses which emerge from the fact that "every interconnection of diversities requires an effort of signification that is undertaken by agents through their relationships" (Montero, Arruti and Pompa 2009: 29). These "agents", or mediators, are the key players in the two-way process by which marginalised groups are made "legible" to the state (Scott 1998) at the same time as they map out its contours for use in their own strategies of political action. In order to explore further how this two-way process operates, I will briefly outline the trajectories, practices and narratives of three indigenous mediators, one from each of the different levels of *controle social* in the Indigenous Health Subsystem, before reflecting on their similarities and differences.

7.3.1   National level: Carmem

Carmem Pankaruru is Coordinator of the National Forum of Indigenous District Health Council (CONDISI) Chairs, which has functioned informally since 2003 and was officially recognised by FUNASA on the eve of the 2006 National Indigenous Health Conference (described in Chapter 9), for which Carmem was one of the key organisers. She is one of very few women to have risen to prominence in the *Movimento Indígena* at the national level, or indeed at any level; the survey which my SSL colleagues and I carried out at the National

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[43] My interviews with women representatives indicated that this constraint is even greater for them, as their gender roles make it harder for them to spend time away from the household (particularly when they have young children); they also often have to persuade a male "protector" to accompany them (due both to the physical risks of travel and to norms that oppose women travelling alone), and if they want to use an outboard motor rather than rowing they will have to negotiate with the male family heads or community leaders who usually control such high-value items.

Conference indicated that only 16% of the *usuário* delegates elected by local and District pre-Conference meetings were women. In the discussion related at the start of this section, neither of the two indigenous women delegates seems even to have been considered for nomination, despite the fact that both had previously demonstrated the "courage" to speak out in other spaces and Edna could also claim to fulfil the "expertise" criterion, since she manages a women's health project for her organisation. In Acre at least, it seems that indigenous women can represent indigenous women, but not "indigenous health service users" as a whole.

Carmem's home community is in the semi-arid backlands of the São Francisco Valley in the Northeastern state of Pernambuco; she points out that women leaders are more common among the indigenous peoples of the Northeast than among those of the Centre-West or the Amazon, claiming that she herself was inspired to become politically active by the fact that some of the most important champions of the indigenous land struggles of the 1970s and 1980s in the Northeast were women. Despite their affirmation of "traditional" forms of social organisation and ritual practices such as the *toré* ceremony, the Pankaruru no longer use their indigenous language in day-to-day life and have a long history of intermarriage with Afro-Brazilians (Arruti 2002); as I noted in Section 7.1, Carmem's own mixed ancestry and her familiarity with the world of the "white state" has led to the authenticity of her indigenousness being challenged by opponents both inside and outside the *Movimento Indígena*. However, she shrugs off these challenges as a consequence of those opponents' limited understanding of the diversity of indigenous realities in Brazil.

Carmem attributes her own grasp of the minutiae of the legislation, policy and politics of the health system to a personal commitment to hunting down and digesting information to ensure that she is as well-informed as possible. She says that this began as simple curiosity, after she happened to be invited to a meeting in 1999 at which the creation of the Indigenous Health Subsystem was being discussed. Unlike many of the indigenous "service user" representatives who are active in the *Conselhos* of the Subsystem, she did not work as an AIS before becoming involved in *controle social*; in fact, it was after she had already

achieved recognition as a *controle social* organiser that she was offered her current job, as manager of the *pólo-base* covering her home community. At the time of that formative first meeting she had recently returned to Pernambuco after spending several years travelling around Brazil and making a living as best she could, including a period selling handicrafts on the beach in the Southern resort city of Florianópolis[44].

Encouraged initially by a friend who worked for FUNAI, and subsequently by a group of Pankaruru *Movimento Indígena* activists who realised that health was becoming a strategic field for engagement with the state, Carmem became involved in the mobilisation effort around the creation of the first Local Health Councils in her home indigenous territory. She was subsequently invited to work as a community organiser supporting the establishment of *Conselhos* across Pernambuco, and when she was chosen to represent the District *Conselho* (CONDISI) for her region at the first meeting of the National Forum of CONDISI Chairs in 2003, she emerged from that meeting as the Forum's elected Coordinator. When I asked her (in an interview in November 2006) why she thought she had been chosen, she replied

> Perhaps it was the way I behaved; as well as the fact that I talk too much [*laughs*], I had a bit of an understanding of the [indigenous health] policy, I was participating a lot in the conversations, the debates, and there was the aspect of me encouraging the group too, I started to encourage them to start making demands, so this helped the group to choose me as coordinator.

During my fieldwork period Carmem was recognised as a dynamic and proactive coordinator of the Forum, but her style of engaging with FUNASA was the focus of diametrically opposed criticisms from other (mostly male) *Movimento Indígena* leaders: some described her as too combative and aggressive, while others claimed that she wasn't critical enough and had been "bought" by FUNASA. This illustrates the difficult balancing act between confrontation and collaboration that mediators like her must perform, one which is especially difficult for a female

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[44] Carmem's spatial mobility is not at all uncommon for a member of her home community; the Pankaruru have migrated all over Brazil, and one section of the Real Parque *favela* in the São Paulo neighbourhood of Morumbi is inhabited almost entirely by Pankaruru migrants who originally travelled to São Paulo to work in the construction industry.

representative who must also deal with gendered stereotypes about what is or is not "appropriate" behaviour for indigenous women in public/political spaces. In the interview, Carmem claimed that although she was "direct and truthful" in what she said, she did also sometimes hold back from criticising health service managers, and had forced herself to learn to be *política* (someone who thinks and acts according to political calculation) even though this was contrary to the values and practices of her community: "there's pure wickedness in the intention of [non-indigenous politicians] to lead us in one direction or another, they're like snakes drawing you in with their gaze, but in an indigenous community people aren't like that, they're more truthful". The Pankaruru have a reputation for vicious and sometimes bloody intra-community disputes, but according to Carmem they deal with conflicts in a more open way than non-indigenous people, "hitting out at you when they have to hit out at you, but welcoming you when they have to welcome you".

In the interview, Carmem recognised that her rapid rise to prominence had generated resentment among "traditional" *lideranças* (leaders), almost all of whom are older men, and whose position she claims has been entrenched over decades by their links with FUNAI. However, she insisted that she had been able to overcome this after a "campaign" of grassroots meetings where she sought to make it clear that her aim was "not to replace the *lideranças* but to contribute to their work". She consistently attributes her political legitimacy to the strength of her links with the *base* (even though she no longer lives permanently in the Pankaruru territory), and she makes a point of regularly seeking out the local *conselheiros* and other *lideranças* to relay news of the decisions and processes in which she has been involved in Brasília and beyond.

It is undoubtedly easier for Carmem than for some other CONDISI Chairs to adhere to this ideal of the representative who is accountable to her *base* and a good "multiplier" of information acquired at higher levels, given the relative accessibility of the Pankaruru territory (which is located a few hours by car from the state capital), her paid role (which includes supervising health team activities in the villages) and her access to FUNASA travel funds through the Forum. Nevertheless, she insists that maintaining good communication with her grassroots

constituency and frequent contact with the *realidade* of her home territory is central to her political practice, and the key to demonstrating the *seriedade* ("seriousness" or "commitment") which is "what keeps a person in a leadership position... and [ensures that] she doesn't let herself get coopted".

7.3.2 District level: André

Maintaining legitimacy with the *base* is also a key concern for André Fernando Baniwa, Chair of the Rio Negro CONDISI, member of the FOIRN *Diretoria*, President of OIBI (the FOIRN-affiliated community association for his home region of the River Içana) and, since January 2009, Deputy Mayor of the Municipality of São Gabriel da Cachoeira. In André's case, however, this legitimacy is actually facilitated by "traditional" norms, since he is a member of a Baniwa (*Waliperi Dakenai*) clan that is categorised within the hierarchical system that characterises rionegrine political thought as one that produces leaders, and he can therefore claim to be acting as the direct heir of a line of ancestral *lideranças*.

In addition to this ascriptive basis, André credits his legitimacy as a representative to a history of involvement with "projects that worked", including a "traditional medicine" (i.e. medicinal plant cultivation) initiative supported by high-profile University of Amazonas / FIOCRUZ researcher Luiza Garnelo (one of André's most important political allies), and an innovative venture into handicrafts trading which has involved supplying Baniwa basketwork directly to a high-end household furnishings chain based in São Paulo. He also did basic training as an AIS, and although he soon moved on to other activities he explains that he retained an abiding interest in health work, which later led him to serve for a period as lead FOIRN director on the FUNASA outsourcing contract for the Rio Negro DSEI (discussed in Chapter 8).

Despite being able to combine legitimacy claims based on three key factors – lineage, proven success as a bringer of resources and technical expertise – André says that he has faced challenges in explaining and justifying his role to his *base*. These challenges may well relate to the tendency among the Baniwa (and other Amazonian groups) to seek to counteract potentially dangerous

accumulations of power by undermining over-successful representatives. As Luiza Garnelo explains in her brilliant study of "Power, Hierarchy and Reciprocity" among the Baniwa, representatives who use their strategic position as mediators of interethnic relations to acquire a level of social prestige or material wealth that sets them apart from the community as a whole quickly become the targets of social sanctions intended to "bring them back down to earth". These range from malicious gossip to a form of poisoning-based sorcery known as *Manhene*, which has "the important task of inhibiting social differentiation, even where it is well-intentioned and backed by strong moral purposes and the common interest... [since] the changes deriving from ethno-political action, however sought after and successful they may be, in and of themselves contain a subversion of the established order which the social body seeks to enclose and recapture by attributing meaning to the symptoms of poisoning" (2003: 101).

André's response to this tense and potentially dangerous situation has been to frame his work as a representative in "traditional" terms that associate it with the transmission of information and not with the accumulation of power. In an interview in February 2007, André explained that

> the Baniwa are like this: they have the traditional [chiefly] lineage, but this person has never been alone, he has other groups around him that help with the intelligence he needs to command the village, so he issues commands, receives information and issues commands, but there is another layer in the organisation of indigenous society which in Baniwa we call *rimacuni*, a kind of soldier who is out there on the front line. He is the first to see things, he brings them to the chief, the chief thinks about it and has time to act against whatever it is. So, even if you are a traditional leader within the *Movimento Indígena* you end up being *rimacuni* for your peoples, because you go out, search for information, come back, discuss it, make proposals and you create an idea of how you can protect yourself inside your territory so you can avoid a lot of bad things happening.

By positioning himself as *rimacuni*, André explained his forays into the "enemy territory" of the "white state" as the work of a warrior-scout seeking out potential sources of threat in order to relay information back to the "real" decision-makers in the village. In other words, he denied his own role in decision-making in order to downplay the accumulation of power which could potentially accompany his control of the flow of information. This explanation of his work is clearly a partial

one: André's own account contains references to his role in activities such as "making proposals" and "creating ideas" that clearly belong to what he has described as the domain of the chief rather than that of the *rimacuni*. Nevertheless, André's skill as a mediator is evident from his creative use of the "native category" (Goldman 2006) of *rimacuni* to translate his work as a representative, with its novelty and potential for destabilising intra-group power relations, into a strategic but non-threatening political activity that is both itself "traditional" and distinct from the exercise of chiefly power as traditionally understood.

The same skill as a mediator is evident in André's work as a facilitator of what he calls "didactic meetings", where the accountability function of a representative's feedback to the *base* is complemented by an effort to educate people at the grassroots in the intricacies of health system management. One of the techniques he has developed for such meetings is the use of a set of winnowing-baskets and some manioc flour to demonstrate how federal transfers leak from or are absorbed by the bureaucracy: by the time the money represented by the flour reaches its destination basket, much of it has been left behind in the other baskets that represent the multiple levels of FUNASA management between Brasília and the DSEI[45].

André's mediation practices also involve literal as well as symbolic translation: despite his detailed grasp of policy detail and excellent command of Portuguese, André will frequently ask health professionals or managers using too much jargon to "say that again for me in Baniwa" when he is in his role as CONDISI Chair. In the interview, he explained that this is not only to rein in "experts" who try to fast-talk their way past him but also to stop them from excluding other indigenous participants, forcing the "white" specialists to translate their arguments into simpler Portuguese phrases that everyone can follow. The tendency of "white" participants to use excessively "technical" language in *Conselho* meetings was one of the key recurring complaints among the

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[45] André has obviously scored a long-running hit with this creative piece of didactic practice, since at least two other researchers recorded him using it several years before my fieldwork (Garnelo 2003; de Souza 2000).

conselheiros I interviewed, and the production of simplified materials explaining key legal and management concepts and making budgets and accounts more easily-understood was a frequently-expressed demand in both Acre and the Rio Negro. Since the use of medical and managerial jargon has also been identified as a constraint on the participation of lay "service user representatives" in the *controle social* institutions of the SUS as a whole (Coelho, Andrade and Montoya 2002), by playing up his own indigenousness (calling attention to the fact that he has Baniwa rather than Portuguese as his first language) André is actually highlighting an issue that affects the efforts of indigenous and non-indigenous representatives alike to ensure accountability in the health system.

7.3.3   Local level: Davi

Access to information for accountability is a key theme of the mediation practices of the third representative, Davi Waine Ashaninka, Chair of the Local Indigenous Health Council for the Municipality of Marechal Thaumaturgo in the Juruá Valley of Western Acre. Davi has made the struggle for "accounts and accountability" (Jenkins and Goetz 1999) the principal focus of his work with the *Conselho*, which is analysed in detail in Chapter 9.

Davi was born in the Ashaninka community of the River Amônia and began his career as a mediator while working as a kind of junior diplomat on behalf of the Piankos, the community's formidable "royal family", in Vila Thaumaturgo, the small town that serves as the municipality's administrative centre. He was especially suited for the role because unlike the vast majority of Ashaninka (a people who are famously proud of their difference and who tend to keep contact with non-indigenous society to a minimum), as I mentioned in the first section of this chapter, Davi speaks fluent Portuguese and is very much at home in "white" society. Davi himself told me when I interviewed him in August 2006 that he was chosen for his role as a mediator because he "knew how to deal with the outside world". I discovered the reason for this when I visited Marechal Thaumaturgo in July 2007: I was walking around the town with Davi when he suddenly invited me to come into a house that we were passing and meet his adoptive family. It turned

out that he was born a twin, and in Ashaninka communities (and many other Amazonian societies) twins are considered cursed and almost invariably rejected by their parents – but fortunately for him, a *seringueiro* couple who lived near his Ashaninka parents agreed to raise him. He therefore grew up with Portuguese as his first language and non-indigenous culture as his principal reference-point, until in late adolescence he returned to the River Amônia (now demarcated as an indigenous territory) to re-establish his social, cultural and political connections with the Ashaninka community where he was born.

Once he had re-established his Ashaninka identity, Davi was sent back into the town where his adoptive family now lived to help look after the interests of APIWTXA, the River Amônia community association, by the Pianko family members who run the association[46]. The Pianko "royal family" of the River Amônia Ashaninka has produced several important indigenous leaders in addition to Francisco (the Governor's Indigenous Affairs Advisor and the chair of the meeting that I described at the start of this section). Francisco's charismatic younger brother Benki, whose training in shamanism has made him a popular speaker in New Age/Green circles in Brazil and Europe, recently raised funds for a "centre for forest knowledges" to teach Ashaninka ecosystem management skills to non-indigenous people, attracting luminaries such as French Presidential widow Danielle Mitterand. Another brother, Isaac, is a film-maker and teacher, and has served as President of the trade union for indigenous teachers in Acre, a respected part of the state-level *Movimento Indígena*. Isaac stopped by to visit while I was staying with Davi's family in Marechal Thaumaturgo; he talked lucidly about the Ashaninka political strategy of "reaching out to the surrounding communities" (a strategy in which Benki's "centre for forest knowledges" is a key ingredient), before giving Davi a series of orders that left little doubt as to who was really in charge.

Despite the obvious hold over him that the powerful Pianko clan can claim, Davi has worked hard to establish his own legitimacy as a representative since he

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[46] These interests are quite extensive, and have both a political and a commercial dimension, as can be seen from the APIWTXA website, http://apiwtxa.blogspot.com/, which combines blog entries on indigenous culture and politics with electronic advertising for the traditional handicrafts marketed by the association's cooperative, AYONPARE.

was elected to the Local Indigenous Health Council. A key factor in this has been his emphasis on treating all the indigenous communities of the municipality as his *base*, rather than only the River Amônia Ashaninka. In a conversation in September 2008, Davi criticised the decision of one of his political rivals on the *Conselho*, a Kaxinawá AIS, to stand for election as a *vereador* (municipal councillor) on the grounds that his support base was too narrow: "he might be a leader in his own community but he needs to become a leader beyond his own community, building alliances in the space of the municipality".

Like Carmem, Davi is employed as a *pólo-base* manager, which means that he can legitimately access DSEI resources to allow him to travel around the local health team's coverage area. As I describe in Appendix A1, this area includes four formally-recognised indigenous territories and two recently-claimed areas, with a population of something over a thousand indigenous people belonging to six different ethnic groups (some of them traditionally hostile to the Ashaninka). During these field trips, Davi combines acting as an ombudsman (investigating any complaints about the performance of the non-indigenous professionals who make up the health team) with passing on the latest news of his struggle for accountability with the mayor, whom he has accused of misusing indigenous health care resources transferred to the municipality by the federal government (a struggle that I discuss in detail in Chapter 9).

Davi's original political platform was based on taking an energetically combative stance, and he still talks about the new democratic spaces of *controle social* as sites of conflict, using a terminology associated with warfare (such as *batalha*, "battle", and *luta*, "struggle") to describe the confrontations that are needed to ensure accountability and "respect" (*respeito*) for indigenous rights and indigenous representation. As well as respect, the struggle has been over resources, and Davi (like several other indigenous representatives whom I interviewed) also uses a terminology associated with "hunting" (*caçar*) to describe the work of securing the material resources that are hidden in the forest of bureaucracy and bad faith that is the natural habitat of non-indigenous managers and politicians.

Now that this period of "warfare" and "hunting" has achieved results, with the mayor starting to treat the *Conselho* with more respect and release some funds for priority investments identified by Davi and his fellow *conselheiros*, the emphasis of Davi's mediating practice has shifted. As I discuss in Chapter 9, he increasingly talks of the need to educate his *base* into more "civilised" and less "unruly" forms of political interaction, and his community visits have also taken on more of the "didactic" quality emphasised by André.

7.3.4 Carmem, André and Davi: commonalities of discourse and practice

Each of these three mediators has found her or his own way of dealing with the core challenges of the role, which centre on issues of *legitimacy* and *translation*. Carmem has constructed her legitimacy by making proactive use of her own charisma and intelligence, despite being structurally disadvantaged (not a man, not a traditional leader, not of authentically "pure" indigenous origins). André has had to demonstrate creativity and skill in handling negative reactions to his representative role that have their origins in the traditional value system that legitimated him for the role in the first place. Davi has had to carve out his own constituency by reaching beyond the small group (powerful mediators themselves) to whom he owed his own initial selection for his representative role, simultaneously reclaiming the Ashaninka identity that he lost when he was "given away" at birth and identifying himself as a "pan-indigenous" mediator for the diverse ethnic groups of the municipality. In all three cases, frequent contact with their grassroots constituency – their *base* – was emphasised as a key element of their legitimacy. Interestingly, though, the higher-level representatives Carmem and André emphasised the local (village or micro-territory) level as their *base*, while the local representative Davi emphasised that his *base* was broader than his home village alone.

Although they claimed that this frequent contact with the *base* meant that they were able to represent its *realidade* to policymakers, none of the three emphasised any specifically "indigenous" agendas that they had sought to translate into health policy and practice. The struggles that they have championed

most actively – for national-level recognition of *controle social* in Carmem's case, for DSEI management autonomy in André's and for local transparency and accountability in Davi's – could all equally well have been proposed by non-indigenous "service user representatives". More than translators of an essentialised "indigenous perspective" for the "white state", they have found themselves acting as translators of the "white state" for their indigenous *base*. A significant part of their role seems to involve explaining the novel institutions (such as *Conselhos*), practices (such as health system management), concepts (such as epidemiological surveillance or results-based management) and relations (such as accountability of municipal power-holders to indigenous communities) with which they have engaged through their work as representatives. This has required them to develop "didactic" strategies that simultaneously seek to broaden their constituents' understanding of the health system and to redefine the criteria by which their own legitimacy and effectiveness as representatives will be judged – and which (most explicitly in Davi's case) include a clear trend towards using newly-acquired knowledge to argue for the need to "discipline" excessively unruly tendencies among the *base* and promote more rule-bound forms of indigenous participation. The idea of focusing on "rule-bound" political action is a novelty – and a contested one – in many settings for *Movimento Indígena*-state interaction, as I discuss in Chapter 8. It also has broader theoretical and political implications for relations between marginalised groups and democratic states and the competing claims of inclusion and transformation, which I examine in the final chapters of this thesis.

7.4   Representation and governance in indigenous societies

7.4.1 Pacifying the Whiteman

The tendency of mediators such as Carmem, André and Davi to emphasise "rule-bound" engagement with the "white state" is particularly striking because it implies that indigenous and non-indigenous collectivities can actually adhere to the same set of rules. This is surprising, given that these mediators are engaging with the "white state" on behalf of an indigenous *base* whose representations of the "white" world characterise it as turbulent, deceptive and fraught with dangers – in other words, *unruly*. This sense of the "white" world as profoundly "other", well documented in the growing literature on indigenous "cosmologies of contact", hardly suggests that indigenous people see Brazilian new democratic spaces as sites in which they or their representatives can engage with non-indigenous people as co-equals and fellow-citizens through some kind of rule-bound Habermasian deliberative process. In a collection of essays revealingly entitled *Pacificando o Branco*, or "Pacifying the Whiteman" (2002), Bruce Albert, Alcida Ramos and their co-authors record indigenous mythological and political narratives that depict "whites" as fascinating, technologically prodigious but also treacherous, disease-bringing and extraordinarily violent.

This characterisation is also present in the ways in which the mediators themselves represent the "white" world with which they have to engage. Carmem emphasises her aversion to the treacherous, snake-like white politicians with whom she has to deal; André describes himself as an *rimacuni* warrior-scout seeking advance warning of threats that the "white state" may pose to his community; Davi talks of his engagements with the municipal administration in terms of warfare and hunting. As Luiza Garnelo notes, the default strategy for dealing with such beings is not participation but war: "in the space of interethnic relations the role of *lideranças* can be considered to be an updated version of warrior engagements with a dangerous and potentially destructive otherness" (2003: 121).

Long before I came to work on this thesis, I was given a sense of this by Francisco Pianko Ashaninka, in an encounter that took place in 1991. I was visiting the River Amônia community to research an article (Shankland 1991), and Francisco was my host at a celebration that included a dance accompanied by a rather beautiful song. I asked Francisco, who was then manager of the community's cooperative and already an accomplished intercultural mediator, what the words meant. I was a guest at the *festa* along with some other Forest Peoples' Alliance supporters who had been helping to raise money for the Ashaninka, and was half-expecting to hear that it was some kind of celebration of friendships and alliances. Instead, he told me that it was a retelling of an Ashaninka myth about loss and revenge in their dealings with the "white" world, which he then narrated for me:

> Before, the Ashaninka lived in peace and happiness. They served the *Inka*, who made many valuable tools and artifacts for them[47]. Then the *viracocha*[48] came, and they captured the *Inka*. They imprisoned him in the mountains, and forced him to make tools and weapons for them. That is why they now have helicopters, rifles and machineguns while the Ashaninka only have bows and arrows. But one day there will be a great flood in the mountains, which will wash the *Inka* out of his prison and down into the lands of the Ashaninka. Then he will make helicopters, rifles and machineguns for the Ashaninka, and we will rise up and drive the *viracocha* from our lands.

The Ashaninka have long memories, and an impressive track record in warfare against "whites", including the messianic uprising led by Juan Santos Atahualpa in the 1740s that closed the Peruvian Amazon to non-indigenous incursions for a generation, and a more recent bloody struggle against the Maoist *Sendero Luminoso* guerrilla movement that was responsible for driving many refugees across the border from Peru into the Ashaninka territories of Acre. Significantly, war is the only situation in which large numbers of the fiercely independent Ashaninka communities have come together for an extended period under a single leader. According to José Pimenta (2006) of the University of Brasília, who

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[47] Probably a reference to the Ashaninkas' well-documented pre-Conquest trading and military alliances with the Inca Empire (Pimenta 2006).

[48] Ashaninka term for white people, which echoes the deity of the same name who was a creator and the founder of civilisation in the Inca pantheon, but with more of the sense of a demonic demiurge.

studied the River Amônia community, Ashaninka chiefdom – an approximate translation for the term *pinkatsari* – is fluid and contingent, with autonomous nuclear or extended family groups freely deciding to adhere to the *nampitsi* (political territory) of a given leader, but quickly abandoning it if the leader fails to guarantee the promised stream of trade goods obtained in interethnic contact. This suggests a pattern of indigenous political organisation whose guiding logic is engagement with "whites", either through fighting against them or through trading with them.

7.4.2 Stateless governance

When they are not organising themselves to deal with the "white" world, the indigenous societies of lowland South America seem positively averse to establishing durable vertically-structured forms of political organisation. Ever since European travellers first started to spend time among Brazilian "indians", those reading their accounts have been fascinated by the apparent pervasiveness of egalitarian social structures and non-coercive decision-making among these peoples. As Eric Wolf puts it in *Europe and the People Without History*, Europeans arriving in the New World encountered societies where leaders might "organize warfare, redistribute food and other goods, and aid in the resolution of conflicts through the management of consensus", but lacked "any institutionalized apparatus for applying sanctions" (1982: 65). This has led many outsiders to use Brazilian indigenous societies as symbols of the "good life" sought by their own "Western" political projects, from the utopianism of Montaigne and Thomas More to the "primitive communism" of Marx and Engels – and to today's "green utopianism" with its eulogies of ecologically-harmonious indigenous community management of land and natural resources. These attitudes are echoed by the more romantic strands of Brazilian *Indigenismo*, exemplified by the Villas Bôas brothers, who argued that

> the indian is not only at one with his natural environment but perfectly integrated into his society. His behaviour is that of an essentially balanced person, free to dwell in a community where people can afford to live under no form of physical authority; where no one has the right to command. Power as we understand it does not exist in an indian tribal community; it

is diluted for the community's benefit." (Orlando and Claudio Villas Bôas, cit. in Bisilliat 1995: 19)

Evidently, there are indigenous Amazonian societies that are ordered according to very different political logics from this happy egalitarianism, with the elaborately-structured hierarchies of the Rio Negro being a case in point. Even here, however, strong social pressures work against the establishment of permanent power concentrations, as with the threat of *Manhene* sorcery-poisoning that Baniwa leaders like André face if they become too socially-differentiated and fail to share out any "white" commodities acquired during their political activities (Garnelo 2003). Mechanisms like *Manhene* serve to ensure that ritual hierarchies such as those associated with belonging to a chiefly lineage do not become permanently associated with structural inequalities.

In one of the key texts of political anthropology, Pierre Clastres argues that for the indigenous "societies against the state" of lowland South America, the most important practices of political leadership are those associated with managing the tensions between centralising/hierarchising and centrifugal/egalitarian social forces. Clastres explains that even when it appears to be "permanently settled" by the institution of heredity through chiefly lineages, overall leadership must coexist with autonomous clan or family "mini-chiefdoms", which means that

> far from being indivisible, as it were, authority does divide and become multiple; that by retaining its own leader each extended family thereby expresses its "will" to maintain – in a way that may or may not be emphatic – its identity. This releases forces within the group that may be divergent. Of course, this trend does not go so far as to threaten to disintegrate the group, and it is precisely at this juncture that the chief's major function intervenes: his job as a peacemaker, as an "integrator" of differences. Thus the social structure of the group and the structure of its power are seen to ratify, attract and complete one another, each finding in the other the meaning of its own necessity and its own justification: it is because there is a central institution, a principal leader expressing the real existence of the community – and this existence is experienced as a unification – that the community can permit itself, as it were, a certain quantum of centrifugal force that is actualized in each group's tendency to preserve its individuality. (1989: 59-60)

Many observers have argued that the delicate balance between central authority and centrifugal political impulses in indigenous societies inevitably suffers

permanent disruption from the demands of interethnic contact – which by extension would include the construction of indigenous representation in new democratic spaces. They can point to the gross distortions introduced by colonial indirect rule and post-colonial *Indigenismo*, including the entrenching of often arbitrarily-chosen chiefs by FUNAI that Carmem described in her interview with me. As John Hemming has shown in his exhaustive history of five centuries of contact between Brazil's indigenous peoples and their European conquerors, a recurrent practice of *Indigenismo* and its precursors has been the replacement of multiple or temporary leadership arrangements with permanent individual chiefs who are then privileged as interlocutors by the "white state" (Hemming 1978; 1987; 2003). As Anna Tsing puts it in her account of engagements between indigenous Meratus Dayak peoples and the Indonesian state in Kalimantan, in such cases "local leaders constructed their authority not by reiterating community hierarchy but by emphasizing their ties to state rule" (1993: 8).

This has led the more pessimistic observers to conclude that durably legitimate indigenous representation is either a trap or an impossibility. A trap, because the intention to coopt representatives into becoming instruments of their peoples' subordination has been present ever since the first colonialist greeted an indigenous person with the phrase "take me to your leader". An impossibility, because the egalitarianism and centrifugality of indigenous societies serve to create defence mechanisms – like *Manhene* among the Baniwa – that undermine and ultimately reject those representatives who do begin to consolidate their position. This affects even the most successful representatives: José Pimenta (2006) notes that even though the Pianko clan of the River Amônia Ashaninka have successfully developed novel political strategies allowing them to maintain an unprecedentedly large number of people within their *nampitsi* (of which Francisco's father Antônio Pianko is the titular head), they have failed to extend their authority into other Ashaninka territories in Acre, and face constant centrifugal pressures even within their own *nampitsi*.

Another reason for pessimism is the supposed incompatibility of indigenous social structures based on kinship and ritual hierarchy with a "Western" logic of democratic representation that is both ritually egalitarian and atomised, based on

individual citizens participating as bearers of equal rights, rather than socially-situated persons participating as bearers of complex and differentiated obligations. Luiza Garnelo argues that the fact that the threat of *Manhene* hangs over Baniwa representatives who fail to pay due attention to the specific claims of their kin group means they are unable to adhere to a logic of democratic representation based on equity across groups. She insists that this results in an "instability in the delegation of the power to exercise the interethnic mediation which is an intrinsic part of the modes of operation of the *Movimento Indígena*", and that this instability in turn "demonstrates the vitality of the influence of kin relations" (2003: 229).

Another seasoned observer of the Rio Negro (and of the wider *Movimento Indígena*), the anthropologist and NGO director Beto Ricardo, has pointed out in an influential series of articles entitled *Quem Fala em Nome dos Índios?* ("Who Speaks in the Indians' Name?") that this instability and the difficulty in establishing durable representation at the supralocal level can be attributed to the fact that genuinely "indigenous" politics occurs within "a reality that is fundamentally local (for each village, community or family), factional (for example, in villages where social organisation is based on ritual moieties, each of which has its own chief) and decentralised (with no recognition of a centre of power)" (1996b: 91). When I interviewed Beto Ricardo in São Gabriel da Cachoeira in February 2006, he elaborated on this further, pointing out that

> horizontal societies, averse to vertical representation mechanisms that are permanent in nature, functioning via a system of *ad hoc* delegation that is highly specific, that lasts for a short time, and that is very tightly focused, are all of a sudden required in the face of the so-called agencies of national society – above all in the face of these policy spaces – to produce new forms of representation that are in fact the antithesis of the very social organisation of these groups, which is a horizontal form of organisation, based on small groups, managed in a way that is very different from these verticalised mechanisms based on representation by delegation, with a mandate that lasts for a particular predefined time, and so on. So what happens is that only very rarely do you get stability of the representatives in these fora, because they escape from *controle social**, even when they don't intend to, they end up sociologically speaking in a vacuum, so it's very difficult to keep relations going.

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* In this case, referring to control of representatives by their communities rather than to the SUS sense of control of the state by civil society.

These insights have undoubted relevance for understanding the failure of the *Movimento Indígena* to maintain an effective nationally-representative structure since the collapse of Aílton Krenak's *União das Nações Indígenas* (discussed in Chapter 2), as well as for the challenges faced by the Acre and Rio Negro *Movimento Indígena* organisations whose trajectories I examine in Chapter 8. I would argue, however, that these pessimistic assessments of the possibility of constructing durably legitimate indigenous representation may need to be revisited. Firstly, because they do not allow for indigenous agency: even in the face of the undoubted challenges posed by clashing political logics, the dynamism and creativity of the *Movimento Indígena* is constantly throwing up new responses to these challenges, from the sophisticated federative arrangements (discussed in Chapter 8) that allow FOIRN's *Diretoria* to stabilise their representation for long enough to serve out "a mandate that lasts for a particular predefined time", to the energetic efforts of Carmem, André and Davi to "keep relations going" and thereby avoid being left "sociologically speaking in a vacuum". Secondly, because Beto Ricardo, Luiza Garnelo and other observers may be confusing two political processes which overlap but are not identical: *representation* and *governance*.

7.4.3 Representation and non-bindingness

For Brazilian indigenous societies, the key loci of *governance* are communities, whereas the key loci of *representation* are spaces of interethnic contact. That is not to say that governance does not exist beyond the community level, in either traditional forms (such as Ashaninka war leadership) or novel ones (such as *Movimento Indígena* project management). Nor is it to claim that representation only occurs in interethnic relations, since there are traditional intraethnic institutions in which it plays a key role (such as the ritual representation of clans and sibs in ceremonies such as *dabucuri*). It is simply to draw attention to the fact that it is both theoretically and practically possible to separate the role of extra-community *representation as mediation* from the institutions of intra-community authority.

This separation is not simple, and it is not only "white" observers who confuse the two, as is evidenced by the fact that many *Movimento Indígena* interviewees used the term *liderança* ("leader") to refer both to traditional holders of authority at the community level and to emerging representatives who are active in the spaces of interethnic contact. This confusion derives both from the potential for representatives to use their position as interethnic mediators to accumulate power at the community level and from the frequent appearance of "traditional leadership" criteria (such as gender and lineage) in the reasons given for selecting representatives.

Some representatives – like André – are indeed *lideranças* in both the traditional (ascriptively-derived) sense and in the emerging sense of "mediators". However, other representatives – like Carmem and Davi – are not "traditional" leaders even though they are referred to as *lideranças*, and they construct their legitimacy by appealing to different criteria. As I have tried to show in this section, in the construction and legitimation of representation for the new democratic spaces of the Indigenous Health Subsystem these criteria are quite clearly defined – and they are not the same as those used to legitimate a chief. The role of the chief (variously identified in my case study sites as *cacique*, *pinkatsari*, *kuraka*, *capitão* or *tuxaua*) requires some attributes (such as generosity) that are also required of *lideranças* who acquire status and material benefits through the practice of representation as mediation. However, legitimacy as a chief depends above all on the ability to manage intra-community tensions – in Clastres' terminology, to act as a good "integrator" – whereas legitimacy as an indigenous representative engaging with new democratic spaces depends above all on the ability to demonstrate skill and dedication in acquiring strategic information and relaying it to the *base* – in André's terminology, to act as a good *rimacuni*.

In her discussion of Baniwa political practice, Luiza Garnelo argues that indigenous representation can only ever be partial and provisional, because in indigenous societies

> the notion of representativeness is radically different from the way in which the term is understood in the Western world; the idea of delegation of authority and the power to decide on behalf of those who are represented is foreign to their internal logic. The indigenous political chief does not

usually receive delegated authority that is far-reaching enough to support decisions that attribute to him the power to intervene in and change the social reality of those whom he leads, or to guarantee that his decisions and agreements will be upheld by those who are supposedly represented in them. (2003: 157)

Brilliant as their accounts are, both Luiza Garnelo and Beto Ricardo are missing the point when they argue that durably legitimate indigenous representation is an impossibility because it is fundamentally incompatible with the political logic of indigenous authority structures. As I have shown, being an indigenous practitioner of *representation as mediation* is not the same thing as being an "indigenous political chief". To assume that the indigenous representative in a given space of interethnic encounter must necessarily be the chief is to fall into the same classic ethnocentricity that underpins the colonialist "take me to your leader" approach.

In "Western" societies, representatives are chosen to form part of the collective institutions of government, and they are seen as part of the "governing class" even if they are in political opposition to the group that controls the Executive. This is what Hanna Pitkin (1967) means when she says that representation should be understood as "acting substantively for others". "Western" (and indeed "Eastern") societies have long adhered to the practice of sending out representatives who are not senior power-holders within those societies to make and maintain contacts with other societies – but the crucial point is that these representatives are not empowered to make binding decisions. In this sense, the British diplomat who is "sent abroad to lie for his country" (or, for that matter, to spy for his or her country) is playing much the same role as the Baniwa *rimacuni*. However, when it is time to do some serious negotiating (or at least to signal binding agreement with the results of some serious negotiations), the representative who goes is not the *rimacuni* but the *cacique* – not the Ambassador but the President. This applies to democracies and undemocratic states alike; think of Roosevelt and Churchill meeting Stalin at Yalta, or Obama and Lula meeting Hu Jintao at the London G20 summit.

In most indigenous societies, by contrast, the *kuraka*, *pinkatsari*, *cacique*, *capitão* or *tuxaua* does not generally leave the community to engage in binding negotiations with the "white state". This would be an aberrant departure from

indigenous political logic, which insists that the only truly binding negotiations are those that take place *within* the community. The job of the leader is to coordinate, facilitate and interpret those decisions, not to pre-empt them by binding the *base* to the outcome of negotiations in which its members have not taken part. Thus, the representatives who engage with the "white state" outside the community either are not themselves chiefs, or are chiefs but are not occupying the representative role *as* chiefs – like André, they may have chiefly status in the village but act as *rimacuni* when they are outside the village. In "Western" terms, they are Ambassadors and not Presidents.

If we accept that the indigenous representatives who appear in sites of interethnic encounter such as the new democratic spaces of the Indigenous Health Subsystem are there as scouts (or diplomats) and not as chiefs (or presidents), then several things follow. Firstly, we must accept that the issues of enforced egalitarianism and political centrifugality identified by the writers I have cited are only problematic for the work of *representation as mediation* when this work has consequences for the distribution of power and resources inside the community – in other words, when it spills over from extra-community representation into intra-community governance. The sanctions which representatives may suffer (such as *Manhene* poisoning-sorcery) are not applied to them because they are representatives, but because they may be able to use their role as mediators to accumulate symbolic and material resources that are perceived as threatening the egalitarian principles of the community. These are mechanisms for ensuring that representatives remain accountable and don't become socially distanced from the *base*, not for invalidating the work of representation.

Similarly, the negative reactions of "traditional" chiefs to the emergence of new (possibly younger, possibly female, possibly hierarchically-inferior) practitioners of *representation as mediation* are motivated not by a rejection of representation *per se* but by a fear that these new *lideranças* may stray onto their own patch of intra-community governance. They can be managed through strategies such as Carmem's "campaign" of assurances that she intended her work to help village-based *lideranças* and not to supplant them. Where these village-

level *lideranças* have themselves accumulated power and material resources by acting as mediators with the "white state", conflicts will of course continue to occur – but they will occur because old and new *lideranças* are competing for control of extra-community representation, not because they are both operating on the terrain of intra-community governance.

Secondly, it follows that we should not be surprised if indigenous communities treat the results of deliberative processes in which their representatives have been engaged as non-binding – or at best as only provisionally binding, pending intra-community ratification. In "Western" societies, we do not regard international treaties as binding when they are agreed by Ambassadors, but when they are signed by Presidents. We do in theory regard the results of national deliberations by duly mandated (elected) representatives as binding – though as I discussed in Chapter 1, this theory is having a harder and harder time keeping up with the practice of "Western" polities where constituents are starting to subject the legitimacy of their political representatives to same kind of fierce interrogation that a Baniwa *conselheiro* can expect from his or her *base*. But this applies, crucially, to the deliberations of representatives who all belong to the same polity – which is not how indigenous people perceive their encounters with the "white state" in Brazilian new democratic spaces. More than encounters of Brazilian citizens differentiated only by their roles as "users" or "providers" of health services, as I discuss in Chapter 9 the *Conselhos* and *Conferências* of the Indigenous Health Subsystem are encounters between representatives of different polities. They are sites where people representing different indigenous societies encounter others representing the different "tribes" of the Brazilian health system described in Part II, whether they are the SUS faithful of the *povo da saúde* or the clientelistic-authoritarian apparatchiks of the FUNASA brand of *sanitarismo*. In this sense, they are more like European Union treaty negotiations that must be ratified by individual member states than like parliamentary debates whose outcomes require only *pro forma* royal assent to become binding on all citizens.

As I noted in Chapter 2, the new democratic spaces of the Brazilian health system often fail to perform what are ostensibly their governance functions, and as I discuss in Chapter 9, their failure to operate as properly *deliberativos* – in the

sense of producing binding decisions – has been held up by both indigenous *usuários* and health system managers as evidence for the lack of legitimacy of *Conselhos* and *Conferências* in the Indigenous Health Subsystem. However, although many of the indigenous representatives I interviewed complained about the non-bindingness of these spaces' deliberations on the "white" managers and medics, within indigenous political logic the fact that they are also seen as non-binding on the indigenous representatives is not something that invalidates them but rather part of their attraction. When they are reframed as sites into which indigenous representatives venture not as equal members of a collective decision-making body but as scouts, spies, hunters or warriors in search of strategic information and material resources that can be channelled to the "real" decision-makers in the *base*, it becomes evident that these new democratic spaces may in fact be sites of representation without necessarily being sites of governance.

In this chapter I have sought to show how the roles of indigenous representatives in the new democratic spaces of the Indigenous Health Subsystem are framed and how their legitimacy is constructed. I have argued that both the roles and the legitimation strategies of the *lideranças* who practice *representation as mediation* are fundamentally different from those of the *lideranças* who are responsible for village-level governance, though there may be overlaps (they may be the same people fulfilling two different roles, or successful representation may have material and political consequences that lead to conflicts because of their impacts on community governance). Finally, I have concluded that the non-bindingness of indigenous representation in the new democratic spaces of the Indigenous Health Subsystem is not an accident but a necessary function of the way this representation is conceived by representatives themselves and by their *base*.

In conclusion, I want to reiterate that this analysis applies to a specific form of representation: *representation as mediation*. The "image politics" of *representation as signification*, discussed in the first part of this chapter, follows a different logic and operates at a different level – though it may occasionally be deployed by representatives in new democratic spaces, as when André demands

that technical jargon be translated into Baniwa, or even more dramatically in the kind of scene that I analyse in Chapter 9. This leaves the third form identified in my framework, *representation as acting substantively for others* – which, as I have suggested above, is where representation really does collide with governance. This is the focus of my analysis in the next chapter, which deals with the contrasting experiences of two *Movimento Indígena* organisations who moved beyond their "representative" function in the Indigenous Health Subsystem to take on management contracts for specific health services.

Chapter 8   Acting for the People

8.1   UNI and the path of the "revolutionary con-artist"[49]

In August 2006 I organised a reflection workshop with a group of SSL colleagues
in the Shanenawa village of Morada Nova on the River Envira in central Acre for
indigenous representatives who had been involved in the *Movimento Indígena*'s
engagement with the state over health services in Acre in the period since SSL's
last project with UNI ended in 1997. During this period UNI had undergone the
spectacular and acrimonious collapse described in Chapter 3, and levels of ill-
feeling among those involved on both sides of the divisions that came to a head
during this collapse were still running high. However, we traded on our credibility
as outsiders who in the past had been valued allies of both sides to ensure that
those invited to the workshop included members of the former UNI leadership
group (some of whom were now at the helm of its successor organisation OPIN),
as well as some of their critics who were now politically aligned with the state
government. Among those who spoke during the open discussion session on the
first day was Manuel Gomes Kaxinawá, an OPIN leader who had been a member
of UNI's coordinating group during the disastrous foray into health service
outsourcing. In his speech, Manuel emphasised that under his leadership OPIN
had abandoned its predecessor organisation's discredited agenda of becoming
directly involved in service provision. Instead, he called for a strategy based on
demands for respect, on the training of indigenous people to replace "white"
professionals and on strengthening *controle social*, whose purpose he described
as "monitoring the work of the municipality, of the Ministry of Health itself, and
telling them to get rid of all this bureaucracy and start doing a more complete job,
one that has its feet planted on the ground". When he addressed the project's
concluding workshop in Rio Branco a year later, Manuel Gomes was even more
explicit about the need to move away from direct involvement in service

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[49] I am indebted to Bettina von Lieres for her comments on the version of this section which I wrote as a
contribution to the book on *Mobilising for Democracy* that she is editing with Vera Schattan Coelho (Zed
Books, forthcoming), and to Citizenship DRC and Cebrap colleagues who gave me valuable feedback on
earlier drafts when I presented these at workshops and seminars in São Paulo, Sussex and Cape Town in
2007 and 2008.

provision, stating that UNI's mistakes had arisen because "we got it into our heads that we should do the job of the state".[50]

This chapter explores what happened when two regional *Movimento Indígena* organisations in two different states in the Brazilian Amazon decided to "do the job of the state". This phrase of Manuel's contains an idea of *government* that is critical if we are to understand the tensions within the form of representation analysed in this chapter: representation as "acting substantively for others" (Pitkin 1967).

In Chapter 7 I argued for the need to differentiate between *representation* and *governance* in analysing the political strategies of indigenous societies who situate the former in the terrain of interethnic relations and the latter in that of intracommunity relations. *Representation as mediation* comes into its own when interethnic contacts have implications for intra-community governance – and when indigenous understandings of governance begin to incorporate the idea of "the community" as part of a wider polity, composed either of a collectivity of indigenous groups or of the different ethnicities, identities and institutions of contemporary multicultural democracies such as Brazil. In this chapter I combine this argument with the differentiation between *governance* and *government* that I introduced in Chapter 1, to argue that the *governance* component of representative activity has two subcomponents: representation *to* government and representation *as* government.

"Doing the job of the state" falls into the latter category. It is clearly perceived as a dimension of representation not only by European absolutists (*L'État, C'est Moi*) but also by some indigenous movement leaders. In both Acre and the Rio Negro, the discourses of the leaders whose trajectories are analysed in this chapter are shot through with the assumption that "acting substantively for others" in the specific form of *governing* extra-community resources (such as a DSEI) on behalf of the community is a *representative* activity. However, while this is a common factor in the cases of UNI and FOIRN, the two organisations' representatives differed radically in their approaches to this activity of

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[50] For a video recording of part of Manuel's speech to the Morada Nova workshop, see the SSL film "*Fala Txai: Os Índios e a Saúde no Acre*" (Damasceno 2008).

"representation as government". The differences were both tactical and strategic, and I argue that they amount to two different pathways of representation that minority groups can choose as they engage with the tensions between "democracy as inclusion" and "democracy as transformation" that I explore throughout this thesis. In naming these pathways, I have been inspired by a conversation with my SSL colleague Maria Elvira Toledo during the research which we carried out together in Acre. I remarked that on the fact that UNI in Acre had fallen apart spectacularly after taking on outsourced health service management responsibilities while FOIRN in the Rio Negro had remained intact in the same circumstances – but at the same time the Rio Negro *Movimento Indígena* had proved much less innovative in its engagements with health policy than the Acre *Movimento Indígena*. "Well," Elvira replied, "the Rio Negro indians are strategic, but they are bureaucrats; the Acre indians are revolutionaries, but they are con-artists[51]".

In analysing what I have called "the path of the revolutionary con-artist" and "the path of the strategic bureaucrat", I have concentrated on three dimensions that are fundamental to the analysis of any process of social movements engaged in "representation as government": the structural conditions of the movement's social and political *base* and the context within which it operates; the institutional arrangements which it creates to deal with those conditions, including internal accountability mechanisms and patterns of inclusion, subordination or exclusion of sub-groups within the base; and the practices it deploys to maintain its legitimacy and pursue its tactical and strategic ends. I examine each of these dimensions for both the UNI and FOIRN case, beginning with the Acre *Movimento Indígena* and moving on to the Rio Negro in the second half of the chapter. In each case I include an analysis of the trajectories of representation of one especially marginalised sub-group within the *base* of the regional organisation: indigenous women in the case of UNI and the Hup'däh minority-within-a-minority in the case of FOIRN.

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[51] The word Elvira used was *golpistas*, which actually has the double meaning of a confidence trickster and someone who favours coups in the political sense (as in *golpe militar*, military coup). The second meaning is also apposite in the case of the UNI leadership.

8.1.1 Movimento Indígena structure and patterns of representation

As I noted in Chapter 3, Acre's 12,000 or so indigenous inhabitants belong to 14 different ethnic groups. The Western part of the state (the Juruá Valley) has a much larger indigenous population than the East (the Acre-Purus Valley). However, for the purposes of *Movimento Indígena* organising Eastern Acre has long been linked to Southern Amazonas and Western Rondônia, for whose indigenous communities Rio Branco is a much more accessible reference-point than their respective state capitals of Manaus and Porto Velho. When the two latter regions are included, the demographic balance between East and West is more even.

This East/West split has a broad ethnic dimension, since the West has a greater predominance of Pano-speaking groups and in the East the largest groups are Arawak-speaking – though this is by no means clear-cut, as there is a significant presence of Pano-speaking Jaminawa, Kaxinawá and Kaxarari in the East, and of Arawak-speaking Ashaninka in the West. Within each sub-region interethnic relations are also marked by the often bitter legacy of the rubber boom, which saw some groups allying with the invading *brancos* to track down or attack others who were regarded as hostile; this legacy is overlaid on that of the wars, alliances and trading links of the pre-contact period, which have left traces in the roles which the different peoples attribute to one another in their mythological narratives. These regional, ethnic and historical differences provide the politics of the Acre *Movimento Indígena* with an undercurrent of enmities, affinities and hierarchies that constantly interacts with its other internal divisions.

As I discussed in Chapter 3, these other divisions are associated with differences in choice of NGO allies, political party allegiances and attitudes towards cooperating with non-indigenous forest-dweller groups under the aegis of the Forest Peoples' Alliance and its successor ideology of *Florestania*. They both influence and are influenced by the relationships established by different factions with the PT-led "Governments of the Forest" that have been in power in the state since 1999. Links with different global, national or regional civil society groups (Oxfam, Gaia Foundation, Health Unlimited, CIMI, IECLB, SSL, CPI-AC...) and with parts of the state at federal, regional or municipal levels (FUNASA, FUNAI,

the Governor's Office, SEPI, mayors' offices, municipal health secretariats...) have a material as well as an ideological dimension, since they provide the resource flows which make control of the regional *Movimento Indígena* a prize worth fighting for.

Such divisions are by no means unusual in *Movimento Indígena* organisations in Brazil – or indeed elsewhere, as is clear from the cases brought together in recent collections of writing on the "indigenous resurgence" and movement-state engagements in the Americas (Maybury-Lewis 2002b; Warren and Jackson 2002; Postero and Zamosc 2004). What sets the experience of different regional *Movimento Indígena* organisations apart is the way they deal with these divisions – and this, I argue, can be a key factor in the political trajectories that they follow.

In Acre, UNI's trajectory was not determined by a single charismatic leader like those who came to prominence elsewhere in the heyday of the *Movimento Indígena*, promoted by the media's demand for high-visibility figureheads and encouraged by state *Indigenismo*. It was, however, shaped by a representation structure which combined an extremely high level of centralisation with internal democracy and accountability mechanisms that were biased towards perpetuating the control of one faction, thereby creating a more or less permanent polarisation between a "governing group" and an "opposition party". This gave its internal politics a winner-takes-all dimension which served as an amplifier for inter-group and intra-group conflicts, to the point where they spilled beyond the *Movimento Indígena* and became inextricably mixed with the broader political currents of the state.

The faction that came to dominate UNI was initially composed of young leaders who were mainly from Eastern groups (Apurinã, Manchineri, Jaminawa and Kaxarari). These groups have historically had much easier access to Rio Branco, which meant (as I noted in Chapter 3) that they were the first to send large numbers of young people to study in the capital, where these students were able to make contact with pro-indigenous activists and the national *Movimento Indígena*. It also meant that these groups were more easily able to pack the periodic *Assembléias* at which UNI's four-person *Coordenação* was elected, since

they were faced with much lower transport costs in mobilising a large delegation to travel to the state capital than the remoter Western groups. Since the election process was based on slates which competed for a simple majority, this ensured that leaders from Eastern ethnic groups held most of the key positions in UNI's coordinating body throughout the organisation's two decades of existence (Iglesias and Valle de Aquino 2005b: 185).

Officially, the right to participate in UNI's electoral *Assembléias* derived from a person's status as a community *liderança* – and the overwhelming majority of participants were therefore older men. This did, however, shift somewhat over time as younger leaders emerged along the paths of social mobility that had been opened up by new careers appearing in the villages: teachers, agroforestry extension workers and community health workers (*Agentes Indígenas de Saúde*, or AIS). The *Agentes Indígenas de Saúde* were particularly important, not only because of the particular mediation skills and forms of power associated with the role (discussed in Chapter 6) but because they began to emerge earlier (the first AIS began their training with CPI-AC and with the UNI-SSL project team in the late 1980s) and thus individual AIS had more time to accumulate experience as *lideranças* – and also because this category included some women, who were almost entirely absent from the other professional groups and from the traditional set of *lideranças*[52].

In Section 8.1.2 below I examine how the collapse of UNI described in Chapter 3 created opportunities for indigenous women representatives to occupy political spaces formerly dominated by the male UNI coordinators, through the creation of the women's organisation SITOAKORE. The story of SITOAKORE's rise to prominence after UNI's collapse is just one example of a wider trend. During the research, I encountered a paradoxical sense that the demise of UNI had been both a shocking blow and a valuable stimulus for indigenous mobilisation in Acre – as groups that had long been overshadowed by UNI or found that it was unable or unwilling to act as a channel for their rights claims began to emerge as social movement actors in their own right. The result was a shift away from regional-

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[52] The Apurinã of Southern Amazonas have produced some women *caciques*, but this is very much the exception in the region.

level representation of a generic indigenous identity towards mobilisation around a wide variety of often overlapping local, sub-regional, ethnic, professional, age-related and gendered identities. Some organisations structured around these identities had existed since UNI's heyday, but because their relationship to the regional *Movimento Indígena* organisation was not formalised (unlike the federative arrangement adopted in the Rio Negro, discussed below), a zero-sum pattern often emerged whereby in seeking support for their own initiatives they ended up competing with UNI in the "Projects Market", and were in turn treated by the UNI leadership as traitors or dissidents who needed to be forced or bribed back into line.

In one of the discussions with a group of local indigenous organisation leaders during the research, I came up with the image of UNI as a great tree that had grown to dominate the rainforest canopy before crashing down – its fall was traumatic and destructive, but my interlocutors agreed that many smaller plants had suddenly been able to start growing vigorously in the light that was flooding in through the hole in the canopy. This sense of renewed energy was summed up by the many workshop participants who echoed the rallying-cry that emerged from the Provisional Coordinating Body's response to the UNI débâcle: "the *Movimento Indígena* is not dead" (Iglesias and Valle de Aquino 2005b: 166), often followed by the statement "we are the *Movimento Indígena*".

It is clear from the data collected by Iglesias and Valle de Aquino (2005b) that although there has been a significant acceleration in the emergence of new formally-constituted *Movimento Indígena* actors since UNI began to lose legitimacy in 2002, the trend began earlier, following the election of the first PT-led government in 1998. As discussed in Chapter 3, the *Florestania*-promoting rhetoric and political-party configuration of the "Governments of the Forest" created both new channels of *Movimento Indígena* engagement with the state and new opportunities for groups sidelined by the hegemonic UNI faction to seek to occupy these channels.

Overall, their data shows that local and sub-regional indigenous organisations make up the category which has grown most since 1998; this growth was clearly encouraged by the availability of state government funding for

projects that required an officially-registered association as a vehicle. This immersion in the "Projects Market" (Albert 2000) initially followed the traditional pattern of focusing on small-scale "community development" initiatives. However, since UNI's collapse many local and sub-regional indigenous organisations have begun to take on a more explicitly political role (Iglesias and Valle de Aquino 2005b: 171) – a trend which contradicts the pessimistic predictions of creeping depoliticisation made by Bruce Albert and Alcida Ramos, among many others (Albert 2000; Ramos 2002). This is also reflected in SITOAKORE's attempt to combine political mobilisation with project management, an experience that is analysed in the next section.

8.1.2 From invisibility to representation: indigenous women leaders

Although UNI managed to elect just one woman (Ivanilde, a Shanenawa AIS who had trained with the UNI-SSL project team) to its *Coordenação* during its eighteen-year history, the growing presence of women in the *Assembléias* did combine with pressure from the gender-aware Northern NGO donors who paid UNI's bills to ensure that in 1998 the organisation officially established a women's department, the *Grupo de Mulheres Indígenas da UNI* (GMI/UNI), or UNI Indigenous Women's Group. Most of the leading members of GMI/UNI were the wives of *Movimento Indígena* activists who had moved permanently to Rio Branco to occupy senior positions in UNI or jobs in FUNAI or the state government machinery. These leaders initially focused on marketing the handicrafts produced by other women in the villages – a traditional "politically safe" field for women to occupy within *Movimento Indígena* organisations, which apparently challenges neither gender roles nor movement hierarchies[53]. However, they soon established links with MAMA, a Rio Branco-based ecofeminist NGO, and with its support began to branch out into more overtly politicised areas of activity, using funds obtained for "women's health education" to organise village

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[53] Though it has been used by some indigenous women activists in the Amazon to raise issues around male control of both intrahousehold resource allocations and movement organisation budgets.

visits in which they discussed sexuality, gender and rights with groups of indigenous women.

The most charismatic of this emerging group of women leaders was Letícia, the Yawanawá wife of Antônio Apurinã, the long-serving UNI Coordinator who subsequently became the PCdoB-nominated Regional Administrator of FUNAI in Rio Branco. With MAMA's support, Letícia began to build connections both with other indigenous women activists in the Amazon and with broader feminist networks in Brazil. However, she and her GMI/UNI colleagues remained marginal players in the "high politics" of the Acre *Movimento Indígena*, occupying a corner of the UNI office very much on sufferance – until UNI's implosion gave them the chance to strike out on their own. In 2005, the Assembléia which created OPIN as a replacement organisation for UNI did not determine that OPIN should have a women's department but instead approved the creation of a separate regional women's organisation, SITOAKORE[54].

SITOAKORE was so successful in raising funds for new women's health, craft marketing and grassroots organisation projects that it soon outstripped OPIN itself, which was mired in the problems outlined in Chapter 3. When I first met Letícia in August 2006, she and half a dozen other SITOAKORE activists were working in a cramped two-room office in a shabby office block in downtown Rio Branco. A few months later, I heard that SITOAKORE had a fine new headquarters, and when I was in Rio Branco for the State Health Conference in September 2007 I was invited to pay a visit to what turned out to be a large house in a leafy residential neighbourhood. On being given a guided tour of the house, I found a couple of OPIN's male leaders occupying one of the offices on sufferance; they had been evicted from their own headquarters, and begged the use of a room from the women who a few years before had been barely tolerated guests in an office dominated by men.

Unfortunately, by the time of this visit Letícia was no longer occupying her office in the grand new headquarters: she had been forced to resign after a scandal over the disappearance of funds that had been raised for a series of

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[54] According to a group of SITOAKORE members interviewed during my fieldwork, the name is not an acronym, but a term derived from the Apurinã for "women working together".

handicraft programmes and a new grassroots women's organisation project. I wasn't able to locate Letícia for an interview to hear her side of the story, but the most common theme of the gossip doing the rounds of the *Movimento Indígena* was "old habits die hard": Letícia was considered guilty by virtue of her association with the disgraced former UNI coordinators (since she was the wife of one and a friend and party colleague of the others) of sharing their predilection for helping themselves to funds that were supposed to be benefiting the indigenous communities whom they claimed to represent.

There may well have been a factional aspect to the story, however, as after Letícia's departure SITOAKORE seemed to be moving more firmly into the orbit of the state government (which, it turns out, was now paying part of the running costs of the new office). Although her successor Edna Shanenawa was also a PCdoB member, she seemed to have developed a much better working relationship with Francisco Pianko Ashaninka than Letícia had ever enjoyed. This might explain the vehemence with which Letícia attacked Francisco when she suddenly re-emerged onto the political stage in March 2009, as the accuser who led him to face a police investigation over alleged sexual abuse of two Yawanawá girls – and may also explain the vehemence with which Edna joined in the counter-attack by Francisco's allies, questioning Letícia's legitimacy as a defender of women's rights with the words "if someone was to go to any indigenous community and ask if this lady represents our movement, I can guarantee that the answer would be negative" (Pullig 2009).

The scandal which triggered Letícia's departure was undoubtedly a setback for SITOAKORE, but under Edna's leadership and with the support of the state government the organisation was able to weather the storm and continue to reach out into the villages through visits and workshops, working to develop the kind of broad-based grassroots support among indigenous women across Acre that UNI had never managed to secure among the groups that made up its *base*. Reflections emerging from indigenous women's group discussion sessions held during my research with SSL colleagues in Acre suggested that at the local level too they were speaking out – and being heard – much more than before in internal movement spaces. Although broader trends (including social mobility through

education and rising incomes from the burgeoning women's handicrafts market) undoubtedly contributed to this, the importance of SITOAKORE as a catalyst for strengthening indigenous women's political position in Acre should not be underestimated.

Talking to people in Acre and reading through the blog posts and news stories through which the war of words triggered by Letícia's accusations against Francisco is being fought at the time of writing, it is easy to perceive an undercurrent of increasingly nasty race, sexuality and gender politics – from the "drunken indian rapist" stereotypes deployed by anti-government commentators and the speed with which they played the "paedophile" card in calling for Francisco to be sacked without having had a chance to defend himself, to the patriarchal overtones in the angry counter-accusations made against Letícia by male pro-Francisco *Movimento Indígena* leaders (Costa 2009; Organização dos Povos Indígenas do Rio Juruá 2009). Depressing as this episode is and obvious as its factional and party-political drivers seem to be, however, I can't help feeling that its very intensity reflects a sea-change in the internal politics of the Acre *Movimento Indígena*. Before the collapse of UNI it would have been unthinkable for an indigenous woman to challenge a politically powerful indigenous man so directly – let alone for the *Movimento*'s internal political agenda to include debates over whether it was time to de-normalise the practice of senior *lideranças* being offered sex with fourteen-year-olds as part of the diplomatic courtesies of a visit to a friendly village. If those fourteen-year-olds have been through puberty and initiation, under indigenous cultural norms they are socially and sexually mature, making them "women" and not "children", so this can be read as a struggle not over child abuse but over women's rights to choose their sexual partners – precisely the kind of issue that SITOAKORE has sought to raise.

One of the key sectors in which SITOAKORE sought to combine project management with political action was health; although its work in this field had a gender-specific focus, it reflected a wider trend among Acre *Movimento Indígena* organisations towards political engagement both in health policy and in health service provision. In the next section, this is placed in its context within the long

series of *Movimento Indígena*-state engagements that included UNI's ultimately disastrous foray into health service outsourcing.

8.1.3 *Movimento Indígena engagements with health policy and service provision*

During the 1990s, UNI acquired a reputation as a pioneer among regional indigenous organisations in Brazil for its engagement in health policy, both through institutionalised participation (it was the first *Movimento Indígena* organisation to secure a seat on the National Health Council) and through direct service provision (funded by international NGOs like Health Unlimited, and delivered by village health workers who were trained by the group of non-indigenous health professionals who would later set up SSL). This experience of state-substituting service provision was not unproblematic[55], but it was broadly successful and bolstered UNI's legitimacy with grassroots constituencies in regions – such as the Juruá Valley – where its Rio Branco-based and PCdoB-affiliated leadership had limited support. It also gave UNI the credentials to be included by FUNASA in the list of possible partners for the federal indigenous health service outsourcing programme.

In October 1999, UNI signed management contracts with FUNASA for the two Districts covering Acre and its neighbouring region of Southern Amazonas (the Alto Juruá and Alto Purus DSEIs). Over the following four years, FUNASA transferred a total of almost 12 million *reais* (equivalent to some US$5 million at current prices) to UNI for the provision of primary care services to the indigenous communities living in the two DSEIs (a total of some 15,000 people, three-quarters of them in Acre)[56]. Although this annual spend of some US$80 per capita was arguably a relatively modest budget for providing a broad range of services to highly vulnerable populations living in extremely remote areas where there was no existing government health service infrastructure, it was still five times more than

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[55] Iglesias and Valle de Aquino argue that the turbulent relationship between the UNI leadership and the non-indigenous professionals recruited by Health Unlimited (HU) to work with UNI on the village health worker training programme in the mid-1990s, which I personally witnessed when working for HU, established a pattern which was to repeat itself a few years later when UNI took over management responsibility for the two DSEIs (Iglesias and Valle de Aquino 2005b: 158).

[56] Data from FUNASA accounts analysed by Iglesias and Valle de Aquino (2005b: 158).

UNI had previously received from its international NGO partners for its health initiatives, and managing the DSEIs required working with a much larger team of non-indigenous professionals than these precursor projects.

Under UNI management the Alto Juruá and Alto Purus DSEIs performed poorly, with widespread staff retention problems and difficulty in maintaining immunisation schedules and health worker training programmes – though it should be noted that amid the general chaos of FUNASA's outsourcing programme (discussed in Chapter 5) this performance was not much worse than that of other Districts managed by NGOs, Church groups or municipal health secretariats, where similar problems were reported (Coimbra Jr., Garnelo, Basta et al. 2006: 143).

Significantly, in Acre there were widespread indigenous complaints of insensitive and even racist behaviour among health staff hired by the DSEIs (Iglesias and Valle de Aquino 2005b: 161), despite the fact that their services were under the nominal responsibility of a *Movimento Indígena* organisation and guided by a national policy which emphasised the importance of differentiated care, indigenous participation and "intercultural" working practices (FUNASA 2002). This undermined the validity of claims by the UNI leadership that their assertive approach to management of the DSEIs – which frequently included overruling the non-indigenous health staff and reallocating funds according to "political" rather than "technical" criteria – was necessary to safeguard the health and cultural rights of their indigenous constituents and prevent the service being run along lines arbitrarily established by "white" experts.

UNI also failed to invest in strengthening the *controle social* system – which in Acre included two District *Conselhos* and ten local ones – that was supposed to ensure accountability and facilitate indigenous participation in shaping the priorities and practices of the DSEIs. In this UNI's approach diverged significantly from that of other *Movimento Indígena* organisations with DSEI management contracts, such as FOIRN in the neighbouring state of Amazonas (Shankland and Athias 2007). In contrast to the FOIRN strategy (discussed in detail below), UNI provided neither regular training nor transport and communication support to indigenous members of the *Conselhos* (Iglesias and Valle de Aquino 2005b: 160).

Despite increasingly insistent rumours that the DSEIs' management problems were being exacerbated by corrupt practices, FUNASA was initially complacent – or perhaps complicit, as subsequent media reports accused FUNASA staff of facilitating and participating in corruption, including the diversion of large amounts of DSEI funding to pay for election campaigns run by the PCdoB, of which both the senior FUNASA managers in Acre and most of the UNI leadership were card-carrying members (Machado 2005). Although serious problems had been apparent as early as 2001 (when there was a mass walkout of non-indigenous professionals hired by UNI, which led to most hiring responsibilities being transferred to the municipal health secretariats), FUNASA transfers to UNI continued until the last quarter of 2003.

As I have described in Chapter 5, changes in the political control of FUNASA and a rising chorus of protests at the poor performance of the Indigenous Health Subsystem as a whole led in January 2004 to a series of recentralisation measures. The "indigenous NGOs" (*Movimento Indígena* organisations) were identified as the prime targets of a scapegoating process, and a wave of audits and interventions in outsourced providers led to most services either being reassumed by FUNASA (in the case of procurement) or transferred to NGOs regarded as "safe" – that is, non-political and/or linked to FUNASA/PMDB client networks – or to municipalities (in the case of field staff hiring and primary care provision). During this process UNI's DSEI management contracts were suspended, pending audit reports which subsequently confirmed widespread "irregularities" (Iglesias and Valle de Aquino 2005b: 165), leading to their revocation and the start of legal proceedings which triggered the consequences – including the collapse of UNI and its replacement by OPIN – that I described in Chapter 3.

Following FUNASA's decision to rescind its contracts with UNI, more and more responsibility for local-level indigenous health system management in Acre was passed to the municipalities. This ran counter to the stated principles of the Indigenous Health Subsystem, and raised serious accountability issues: indigenous participants in the reflection workshops which my SSL colleagues and I organised in 2006 and 2007 complained that municipal mayors were diverting funds to other uses and allocating jobs for indigenous leaders and non-indigenous professionals

alike according to clientelistic calculations, while FUNASA was unable or unwilling to control these practices. The DSEI *controle social* structures, first neglected by UNI and now hamstrung by a lack of resources for training and meetings, a widely seen as compromised by the fact that so many indigenous "service user representatives" had by now been put on FUNASA's or the municipalities' payrolls, initially proved incapable of holding to account either FUNASA or the municipal power-brokers.

Insensitive behaviour and outright racism among non-indigenous health staff, already a problem when UNI was running the DSEIs (as noted above), were described as endemic; when we asked workshop participants to make drawings that expressed how they felt about the health service, the most common themes were humiliation by "white" professionals (particularly among indigenous women) and disrespect for traditional medical knowledge. In his speech to the Morada Nova workshop described above, Manuel Gomes Kaxinawá referred to a recent incident where Ivanilde had been on the receiving end of racist abuse, to argue that "for a doctor to care for our people he must respect them, if he calls an indigenous woman a 'greasy indian', [that] is where poor health starts... if we are to have good quality health care then at the very least we must be treated with respect by the technical staff".

As I discussed above, Manuel Gomes consistently advocated a strategy for the *Movimento Indígena* that focused on *Controle Social*, arguing that the UNI's leadership's mistakes stemmed from the fact that "we got it into our heads to do the job of the state". This strategy was in fact already being pursued by many of the local and sub-regional organisations which had been growing in importance since UNI's collapse, in a trend led by the River Jordão Kaxinawá association ASKARJ and the sub-regional organisation for the River Juruá, OPIRJ. The need to strengthen *Controle Social* was a recurrent theme of the workshops and interviews in Acre; though the *Conselhos* were widely described as ineffective, they were also valued as potential spaces for securing recognition and engaging the state, and there were signs that attempts were already being made to revitalise them. Workshop participants described some Local Indigenous Health Councils as starting to take a more combative approach, as they were "reclaimed" by discontented communities seeking a channel to make themselves heard. This trend seemed to be largely

spontaneous, as despite Manuel's rhetoric OPIN had taken no concrete steps to support mobilisations by local indigenous health *conselheiros*, and until SSL became involved through the project in which I took part no NGOs were working to strengthen accountability in the Acre indigenous health sector.

In the absence of central *Movimento Indígena* or NGO support, local leaders seeking to strengthen *controle social* shared news of their mobilisations by word of mouth during inter-community visits or over the network of two-way radios that linked Acre's remote indigenous territories, and it was this growing flow of horizontal exchange that encouraged the sub-regional indigenous organisations to become more involved. The SSL project itself became a catalyst for this, as our workshops were used by *Conselheiros* from different municipalities to compare notes. This was the case in the Juruá Valley, where Davi Waine Ashaninka's performance at the Morada Nova workshop helped to launch him as a rising star of the sub-regional *Movimento Indígena*, and OPIRJ then used the example of Davi and the Marechal Thaumaturgo Local Indigenous Health Council to engage at the DSEI level and mobilise local leaders for a revitalisation of *controle social* in municipalities throughout the Juruá Valley.

Although in Marechal Thaumaturgo Davi dissuaded local leaders from launching an occupation of the municipal health secretariat in protest at the mayor's diversion of indigenous health funding to other uses (a process which I examine in detail in Chapter 9), in other parts of Acre indigenous groups demonstrated an increasing willingness to take direct action as discontent with the "municipalisation" of health services spread in the post-UNI period. In the first half of 2007, a DSEI health team were held hostage in a Yawanawá village, and a group of Kaxinawá leaders occupied the *pólo-base* in the municipality of Jordão – the action which led to Adalto's appointment as the *pólo-base* administrator (as discussed in Chapter 7).

Significantly, both these cases of direct action were accompanied by other political strategies: in the case of the Yawanawá, a demand for a meeting with senior state government and FUNASA representatives, and in the case of the Kaxinawá an online campaign (supported by NGO allies) to denounce municipal mismanagement and demand transfer of the *pólo-base* to indigenous control

(Machado 2007). The former UNI leadership themselves joined the trend towards direct action, staging a protracted but ultimately unsuccessful squat of their former headquarters (an imposing building that had been purchased with donations from European NGOs) when it was ordered to be put up for auction to pay court-imposed fines resulting from the DSEI management débâcle.

The River Jordão Kaxinawá's use of e.mail and blog postings followed a trend set by others, including the highest-profile of all Acre indigenous groups, the River Amônia Ashaninka and the River Gregório Yawanawá. As I noted above, the Pianko "royal family" of the River Amônia Ashaninka runs a much-visited website on behalf of the community association, APIWTXA, which combines blog entries on indigenous culture and politics with electronic advertising for the traditional handicrafts marketed by the association's trading cooperative arm. Yawanawá leader Joaquim Tashka is a regular blogger, who has used the command of English and "global green" discourse that he acquired during a spell living at a New Age centre in the US to attract foreign visitors – including Hollywood figures like Joaquin Phoenix – to the annual "Yawá" festival hosted by the River Gregório Yawanawá community, which is also assiduously attended by Acre politicians keen to burnish their credentials as supporters of *Florestania*. It was after attending the 2008 Yawá festival that Acre Senator Tião Viana (who trained as a doctor before going into politics) was persuaded to help mobilise the state government and FUNASA to implement an emergency health programme for the River Gregório Yawanawá, whose international celebrity sat uneasily with extremely high rates of morbidity and mortality from waterborne and sexually-transmitted diseases (Aquino 2009).

The fact that this programme was led by the state health secretariat (SESACRE), with FUNASA reduced to a supporting role, reflected a broader emerging trend in indigenous engagement with the state around access to health services in the post-UNI period. During the course of our project (and sometimes with direct support from the project team), indigenous leaders began to make increasingly active efforts to involve the state government in mediating relations with FUNASA and the municipalities. SESACRE had not hitherto played a significant part in the indigenous health system, since formal responsibility for regulating the system lies with the

federal government (and is vested in FUNASA) and those health units under direct state government management tend to be large hospitals located in urban areas rather than field posts close to indigenous territories. However, the arrival of Binho Marques as Governor with an agenda explicitly focused on improving municipal-level service delivery, his appointment of the young and energetic *sanitarista* Oswaldo Leal as head of SESACRE and continued lobbying by Francisco Pianko Ashaninka combined in 2007 to produce an apparent commitment to a new and more interventionist approach.

Sensing this opportunity, Anchieta Arara (a Juruá Valley indigenous leader who had previously worked as a DSEI "indigenous advisor" but left the job to run unsuccessfully as a PT candidate for election to the State Legislative Assembly) presented a package of proposals for restructuring and democratising the management of the system, for which he secured the support of a number of local indigenous associations. These proposals were presented at an SSL workshop with indigenous leaders and government representatives in July 2007, and at subsequent meetings SESACRE staff made it clear that they were interested in taking action – but they pointed out that if they were to take on FUNASA and the municipalities they needed to be legitimated by both the *Movimento Indígena* and the SUS *controle social* structure. This led to SESACRE inviting me (on behalf of the SSL project team) to support the participation of indigenous delegates in the September 2007 State Health Conference, which duly approved a resolution calling for State Government intervention in the indigenous health system.

Since then, SESACRE has moved forward cautiously and gradually strengthened its involvement; there are now clear signs that its intervention in the River Gregório Yawanawá community is a test run for a wider set of interventions underpinned by a triangular alliance between SESACRE, Senator Tião Viana and the Juruá Valley wing of the *Movimento Indígena*. This alliance has effectively excluded two actors who until recently would have assumed the leading role in any such set of interventions: FUNASA and the regional *Movimento Indígena*, which since UNI's demise has been represented by OPIN. The Acre branch of FUNASA seems willing to submit to this emerging dynamic – perhaps unsurprisingly, given the power of the PT Senator and Governor to influence the appointment of FUNASA staff in the state,

since their closeness to President Lula effectively neutralises any claim by the PMDB patrons of FUNASA's national bosses to determine who should represent the agency in Acre. OPIN is evidently less willing to play along, as it has made clear with a recent barrage of criticism, which has included not only Letícia's accusations against Francisco but also a series of "open letters" denouncing the state government as a whole. It remains to be seen whether this attempt to position OPIN as a last centre of resistance to the wholesale cooptation of the *Movimento Indígena* by the PT-led "Governments of the Forest" will attract the support of other indigenous representatives – or whether it will merely consolidate the final isolation of the group of leaders who pioneered the path of "institutionalised unruliness" when they took control of UNI's engagements with the state over health service provision.

8.1.4 Analysis: the path of the "revolutionary con-artist"

Any attempt to analyse the strategies pursued by the Acre *Movimento Indígena* in its engagements with the state over health services must start by recognising their sheer bewildering variety, the restless creativity with which indigenous organising seemed to shift between apparently contradictory modes of discourse and practice, and the energy with which it veered from triumph to disaster to resurgence.

The political and policy context certainly made a difference. FUNASA's need for organisations who were prepared to sign up for its outsourcing programme led to it channelling a flood of resources into UNI which affirmed the regional *Movimento Indígena*'s political importance even as it created the dynamic which ultimately led to the implosion of its representative organisation. Similarly, the presence of a series of avowedly pro-indigenous state governments who needed visible indigenous representation to legitimate their claims to be promoting *Florestania* provided opportunities for gaining access to recognition and to resource flows which might otherwise have been denied to minorities who accounted for only a very small percentage of Acre's electorate (a significant

contrast with the situation of the indigenous peoples of the Rio Negro, whose experience as a "local majority" is discussed below).

What is significant, however, is that the *Movimento Indígena* did not simply move *en bloc* into the orbit of the external agencies presenting these political and economic opportunities, whether FUNASA and the PCdoB or the State Government and the PT. Instead, it remained split into different factions who mined these external agencies for resources – and then used those resources to pursue their internal disputes, frustrating their interlocutors with displays of "unruliness" that seemed to intensify the closer any facet of the "white state" came to coopting the movement as a whole. When FUNASA and the PCdoB appeared to have brought the UNI leadership securely into their orbit, the "opposition party" within the regional *Movimento Indígena* responded by pursuing closer links with the State Government and the PT. When UNI's collapse left FUNASA and the municipal power-brokers free to carve up the health services of the DSEIs, local organisations, *lideranças* and *conselheiros* responded by launching a wave of "unruly" direct action – including health team kidnappings and armed occupations of DSEI buildings – which was paradoxically combined with sophisticated advocacy strategies (ranging from blog postings to legal petitioning of the Attorney-General's Office) and assiduous institutionalised participation in the formal *controle social* institutions. When the emergent *Movimento Indígena* leaders sought out SESACRE as an ally against FUNASA and the municipalities, OPIN's leaders deluged Acre's political blogs and newspapers with attacks on the State Government.

Of all this tangled mass of strategies, the hardest strand to analyse is the strategic thinking (if such it was) that guided the choices which led to the downfall of UNI, from the moment when – as Manuel Gomes put it – "we got it into our heads that we should do the job of the state". The roles of neoliberal state-shrinking dogma and incompetent or ill-intentioned FUNASA management – and the convenience for the "white state" of "entangling the Indians in bureaucratic labyrinths" (Ramos 2002: 262) – cannot, of course, be ignored, but the large-scale diversion of health service funds to other uses was, in the end, a political choice. Some sense of political purpose can be glimpsed amid the stories of petty

corruption and individual greed: for example, the diversion of funds to PCdoB election campaigns may have represented an attempt to buy the formal political representation denied to indigenous people by demography and the concentration of economic power in "white" hands. Nevertheless, this choice had powerfully negative consequences: it prolonged the suffering of indigenous communities who had long been denied access to decent health care, and while the fallout from it may in many ways have re-energised the *Movimento Indígena*, it also gave copious ammunition to the anti-indigenous propagandists who trade in racist representations of "lazy thieving indians".

In the end, I cannot find a better characterisation of the UNI leadership's behaviour than Elvira's description of them as "*revolucionários e golpistas*": they embarked on a "revolutionary" trajectory, but were brought down by their penchant for "coups and con-tricks" over the sort of patient long-term strategising that characterises the Rio Negro experience which I analyse in the next section. The "revolutionary" component of the UNI leadership's behaviour was reflected in their rhetoric of indigenous distinctiveness and the barrage of public denunciations of the state government which they kept up even when it was paying their bills. Although it was self-serving (in that the criticisms were used to undermine the legitimacy of other indigenous leaders who were their political rivals), this "oppositionist" stance can also be seen as an attempt to shift the terms of engagement with the "white state" by refusing to sign up for a bit-part in *Florestania*. Although other groups in Acre engaged with the state in very different ways, there were many signs of the same "revolutionary" spirit (from the discourses of shamanic practitioners questioning Western notions of health to the noisy occupation of FUNASA buildings by painted warriors wielding bows and arrows), even among those who had formally aligned themselves with *Florestania*.

I would argue that there was even a "revolutionary" component of the UNI leadership's mismanagement of the DSEIs. This lay in the fact that they regularly overruled the "technical" decisions made by non-indigenous professionals on "political" grounds – interpreting indigenous *controle social* not as the power to demand accountability but as the power to give direct orders. This was part of a pattern of constantly interrogating the legitimacy of *sanitarista* ideology and the

technical, political and bureaucratic apparatus that was trying to consolidate its hold over the indigenous territories of Acre via the provision of "Western" health services, even while UNI's leaders were benefiting politically and financially from it.

Ultimately, this approach failed to achieve its "revolutionary" potential for two reasons that are intimately bound up with the factors that had attracted the UNI leadership to "the path of the revolutionary con-artist" in the first place. Firstly, because deploying "institutionalised unruliness" had brought short-term recognition and success, the UNI leadership had no incentive to develop the patience and application which they needed to absorb the minutiae of "white" administrative practices. This meant that they not only presided over a poorly-performing health service that cost them both internal and external legitimacy, but also failed to acquire the subtle skills which allow non-indigenous politicians and bureaucrats to avoid getting caught when they indulge in much more systematic pilfering of the health system's resources. It is precisely this patience and application that the "strategic bureaucrats" of FOIRN have demonstrated in the Rio Negro – though there it has generally been applied to more useful tasks than diverting heath service funds for short-term personal and political gain.

Secondly, the UNI leadership failed to promote "revolutionary" change in the DSEIs they were managing because the "vanguardist" approach that had carried them to power and kept them there made no provision for maintaining open communication with their *base* or facilitating bottom-up discussion of complex challenges. Thanks to their centralising tendencies and "con-artist" preference for theatrical displays, bombastic rhetoric and sudden short-cuts, rather than the long slog of building a solid and inclusive movement base for democratic engagement, they proved incapable of fostering an inclusive process of critical reflection on what the indigenous peoples of Acre actually wanted from their health services and how this might best be delivered.

However, once such a process has taken place (and during my time working with the SSL team in Acre I noticed clear signs that it was beginning to get under way), the resulting articulation of currently excluded indigenous perspectives will still need the support of an effective set of political representation strategies if it is

to lead to any kind of transformation in health policy and practices. Here, as I suggested above, the "con-artist" aspect of UNI's behaviour may have rather more to offer in the way of useful lessons. While the self-serving elements of this behaviour are undeniable (most obviously when "con-artist" tactics are used to facilitate personal corruption), there may also have been a strategic value to actions that preserved an element of unpredictability and danger in the representation of the *Movimento Indígena*. If a group lacks the demographic and economic weight to pursue its interests under the normal rules of the democratic game, it may achieve more by pursuing a guerrilla politics of unruliness in the face of "neoliberal governmentality" (Ferguson and Gupta 2002). Arguably, by incorporating groups and factions who both supported and opposed *Florestania*, and by pursuing strategies of "unruly" direct action alongside "orderly" institutional participation, despite its shocks and setbacks the Acre *Movimento Indígena* as a whole has achieved more than it could have done by sticking to a single path. This reflects a strategic insight that is valid for other marginalised minorities in contemporary processes of democratisation: being invited to play on a field from which you were previously excluded is important, but it may not get you very far unless you are simultaneously challenging the rules of the game.

This willingness to harness "revolutionary" creativity and innovation to the task of transforming health services sits in marked contrast to the approach taken by the *Movimento Indígena* in the Rio Negro. As I suggest in my analysis in the next section, however, this is also a matter of strategic choice as well as tactical preference.

8.2   FOIRN and the path of the "strategic bureaucrat"

8.2.1 Movimento Indígena structure and patterns of representation

As I noted in Chapter 3, FOIRN was formally created at a regional *Assembléia* which took place in April 1987, a few months after the one which established UNI in Acre. Today FOIRN has a *base* of some 70 affiliated indigenous organisations which between them claim to represent a total of around 30,000 people belonging to 22 different ethnic groups and living in over 700 communities along an 800-kilometre stretch of the Rio Negro and across the basins of its major Western tributaries (the Içana and Uaupés). At the time it was established, there were only a handful of pre-existing local associations in the region (Cabalzar and Ricardo 2006: 101) – but despite this initially limited formal associative base, from the outset the Rio Negro regional *Movimento Indígena* organisation was conceived – or at least labelled – as a *federation of indigenous organisations*. UNI, founded at a time when Acre had a similarly small number of pre-existing community associations, chose to identify itself as a *union of indigenous peoples* (or "indigenous nations", to use the term that UNI itself adopted, which in turn was borrowed from the national *União das Nações Indígenas*). I would argue that FOIRN's organisation as a federation of formally-structured associations, which is reflected in the electoral system through which its powerful central *Diretoria* is chosen, provides a set of mechanisms for managing and channelling internal conflicts that has been a key factor in enabling it to avoid the kind of meltdown which destroyed UNI, despite FOIRN facing many of the same pressures.

The use of formal federative structures is rare among *Movimento Indígena* organisations in Brazil, though it is more common elsewhere in the Americas – and has native historical precedents both in Brazil, where the *Confederação dos Tamoios* was a sixteenth-century multi-ethnic military alliance against the Portuguese (Hemming 1978), and in North America, where the Iroquois Confederacy has been credited with inspiring the federal structure adopted by the US Constitution (Weatherford 1988). Despite its distinctiveness, the reasons for

adopting this format are not recorded in any of the multitude of documents on FOIRN's history produced by the organisation itself and its NGO allies. None of the leaders I interviewed during my research in the Rio Negro could remember who initially proposed the name or came up with the idea of forming a "federation", as opposed to following the example of the other newly-created regional *Movimento Indígena* structures emerging in Brazil at the time and establishing a "union" or "council". When I interviewed Carlos Alberto ('Beto') Ricardo, the anthropologist and NGO director who has been a highly influential political advisor to FOIRN since its establishment, he denied being the source of the idea, despite having helped to organise the founding *Assembléia* in 1987 and advised on the original and subsequent versions of FOIRN's statutes. Beto Ricardo described its emergence at the 1987 *Assembléia* as "curious... I was here [in São Gabriel da Cachoeira, where the *Assembléia* was held] but they didn't consult me, the name just appeared". The FOIRN video *Nós, Indígenas do Rio Negro* ("We, the Indigenous People of the Rio Negro"), which includes footage of the founding *Assembléia* and the election of the organisation's first *Diretoria*, has interviews with several members of that generation of *lideranças* in which one describes the creation of the federation as "a surprise", and another asserts that "we created the federation without preparing, defining beforehand the path it would follow from then on... what mattered was that we created it, because indigenous politics had to have a central representation" (Leonardo Sette 2004).

Though I was never really able to get to the bottom of the issue, my own hypothesis is that the idea of creating a "federation" may have been inspired by Rio Negro leaders' own efforts to understand the workings of the Brazilian state, which at the time was establishing a much more marked presence in the region after a long period in which (as I discussed in Chapter 3) control of the indigenous population had largely been delegated to the Salesian Mission. The leaders – some of whom had themselves started to travel to Manaus and Brasília as part of efforts to challenge government plans for the region – were mapping out the structures of a "white state" which self-identified as federal, with a semi-autonomous Amazonas State Government run by politicians who occasionally sought votes in the Rio Negro, and a Federal Government which controlled

FUNAI and the military, the institutions most directly concerned with the "indian question". Several observers to whom I spoke during the research noted that rionegrine political practice is strongly marked by institutional mimetism: scanning the design features of "white" organisations and then adapting them to create an indigenous-controlled equivalent. As Geraldo Andrello notes in his discussion of indigenous political practice in the emerging "indian town" of Iauaretê in the Rio Negro region, this has extended to the creation of indigenous organisations formally organised along "white" lines to manage the tensions between traditional systems of authority and resource allocation and the new governance demands of a "quasi-urban" pluriethnic settlement (2006: 42).

Establishing FOIRN as a federation of organisations rather than a unitary structure also provided a framework for negotiating a common front at a time when the indigenous groups of the region were deeply divided over which strategies to pursue in dealing with the military and mining interests that were energetically penetrating the Rio Negro (Hemming 2003: 623-625). The existing organisations were partly structures of political representation and partly "project vehicles" through which resources from the mining companies and the military's *Calha Norte* hearts and minds operation could be channelled. By establishing FOIRN as a federation, the new organisation's leaders reassured the local and sub-regional *lideranças* that they would be able to retain their control of these resource flows while at the same time allying with other groups in pursuit of the overarching strategic objective of securing demarcation of the entire region as a single continuous indigenous territory.

The indigenous organisations that make up FOIRN's *base* have largely retained this mixed character of political representation structures and project vehicles, though the traditional territorially-based associations have been joined over time by others claiming to represent specific groups and agendas, including women (largely focused on marketing their handicrafts, but also with some forays into debating issues of gender, health and sexual rights along the lines of the work carried out by SITOAKORE in Acre), professional categories (including *Agentes Indígenas de Saúde*, whose association AAISARN was created in 1996), "cultural" agendas (such as the pajés' organisation CERCI, discussed in Chapter 6) and new

hybrid structures (such as the "ethnic school associations" which serve as combined educational, community development and cultural reaffirmation projects for specific ethnic groups including the Tuyuka and Baniwa). The territorially-based associations themselves have also multiplied through a process of fission, as the claims to represent large areas initially made by the *lideranças* who sought to negotiate with FUNAI and the military in the 1980s gave way to efforts to organise at a more socially meaningful and logistically viable scale. When I interviewed him in São Gabriel da Cachoeira in February 2006, Beto Ricardo noted that

> In the early days I remember that we would travel around holding meetings and some associations would turn up and say 'we represent 90 communities'. That's how they talked at the start, but in practice it became clear that the only associations which actually functioned as units for management, etc., were those with five, six, eight, twelve communities occupying contiguous territories along the same river, since life here happens along the rivers.

Far from destabilising FOIRN, the proliferation of formally-registered associations has actually enabled the federation to accommodate emerging identities and interests which might otherwise challenge its overall legitimacy. By convention, all indigenous associations established within FOIRN's jurisdiction immediately seek to become affiliates of the federation, thereby gaining both the status of voting participants in its *Assembléias* and the possibility of using its technical and networking resources to support their own quests for project funding. This creates a centripetal dynamic which has actually expanded FOIRN's reach beyond its original jurisdiction, as groups outside its traditional borders establish associations to negotiate with the "white state" and then seek the added legitimacy which FOIRN affiliate status confers.

This is not to say that tensions do not exist between FOIRN and its local and regional affiliates – in fact, they are a major feature of the federation's life, and handling them requires a combination of tireless cultivation of the *base* by the members of the central *Diretoria* and constant institutional innovation. One example of this is the ongoing process of negotiation which was taking place during my fieldwork period between the *Diretoria* and the sub-regional structures, called *Coordenadorias*, which FOIRN had set up in an attempt to devolve some of

the micro-management of resource allocation and project support demands while at the same time responding to demands for greater autonomy (particularly from leaders based in Iauaretê, whose trajectory as a "potential municipality" in its own right is discussed in Chapter 3). At one point, while I was interviewing the leader of COITUA (the *Coordenadoria* for the Tiquié / Uaupés sub-region – an area with more than 80 communities scattered over some 20,000 square kilometres) in his home village of São Sebastião on the River Tiquié in February 2006, he began to talk enthusiastically about autonomy and the possibility of negotiating projects directly with donors. A FOIRN representative who was also there immediately challenged him, pointing out that since COITUA was officially an integral part of FOIRN these projects would have to be approved by the central *Diretoria*.

During my fieldwork period FOIRN ended up ceding power to the *Coordenadorias*, moving what had initially been conceived as deconcentration closer to real devolution. This included changing the rules for electing the *Diretoria* to give the *Coordenadorias* a bigger role. Initially, the five directors of FOIRN had been elected at a quadriennial *Assembléia* where each of the affiliated organisations voted for one of two or more competing slates – a process which encouraged would-be directors to seek out allies from across the five different sub-regions of FOIRN's jurisdiction. This promoted a more fluid politics of shifting interethnic alliances which in turn led to a relatively high turnover of *Diretoria* members – in marked contrast to the stranglehold which a narrowly-based leadership group held over UNI's *Coordenação* for the best part of two decades in Acre. From 2008, FOIRN moved to a system whereby each *Coordenadoria* elected a single director at a sub-regional assembly, leaving the general FOIRN *Assembléia* only with the task of choosing who among the five would take up the post of *Presidente*. The next few years will thus bring a new challenge: ensuring that small groups of *lideranças* do not become entrenched in hegemonic positions in the sub-regional *Coordenadorias*, carving FOIRN's jurisdiction up into a series of UNI-style fiefdoms.

Within each sub-region, the associations claiming to represent several communities (often belonging to different ethnic groups but usually distributed along a single river, as Beto Ricardo pointed out) display a complex mixture of

"new politics", where leadership can be carved out by political entrepreneurs who have demonstrated the ability to operate successfully as mediators with the "Projects Market" of the "white" world, and "old politics", where leadership is ascribed to members of a single clan or lineage and justified by successful mediation of internal tensions and skilled performance of ritual functions. Some of the implications of this for individual representatives have been discussed in Chapter 7; at the collective level, however, it should be noted that the long tradition of interdependence and intense (hierarchically-structured) exchange described in Chapter 3 provides a relatively strong foundation for efforts to organise across multiple communities. This contrasts with the situation in Acre, where sub-regional organisations also tend to bring together communities belonging to different ethnic groups living along a single river but where the absence of inter-community institutions such as *dabucuri* and the greater disruption and displacement suffered by ethnic groups during the rubber boom mean that these organisations' repertoires of strategies for ensuring political reciprocity and solidarity must be developed virtually from scratch.

The fact that traditions stretching back into the pre-contact period underpin the relatively greater intensity and resilience of inter-community social bonds that facilitate indigenous organising in the Rio Negro does, however, mean that FOIRN's affiliated organisations – and thus FOIRN itself – tend to be more conservative and less open to the emergence of new social actors than is the case in a more fluid setting such as Acre. Despite the emergence of new *lideranças* (including some women, though many fewer than in Acre outside the specific indigenous women's organisations), election to positions of authority in the territorial representative structures tends broadly to reflect the complex and entrenched pattern of gender, age, clan and interethnic hierarchies discussed in Chapter 3.

8.2.2 *From invisibility to representation: the Hup'däh*

This is particularly problematic for one set of ethnic groups in the Rio Negro: the Maku (Hup'däh, Yohup, Nadëb and Dâw) who are deeply embedded in patterns

of unequal relations with their Tukanoan neighbours that have been variously described by outside observers as "asymmetrical exchange" or "virtual slavery"(Hemming 2003: 251; Athias 2006: 3). As Renato Athias points out, the hierarchically inferior status of the Hup'däh (the largest of the Maku groups, with around 1500 people in 35 communities scattered over the Tiquié-Papuri watershed of the Uaupés basin) is so embedded in the discourse of their Tukanoan neighbours that it is justified by reference to creation myths which describe the Hup'däh as latecomers to the world, despite the archaeological evidence that they actually inhabited the Rio Negro region before either the Tukano-speaking or Arawak-speaking groups arrived (Athias 2006: 10). The tasks which Hup'däh undertake for the Tukanoan groups (particularly the hard labour of clearing and weeding manioc plots) and their particular expertise in hunting in the deep forest (far from the "civilised" river bank) are discursively associated with hierarchically inferior status, justifying the level of the payments offered by Tukano-speakers in agricultural produce or manufactured goods, which to outsiders' eyes is derisorily low. The relationship is a subtle and complex one, however, which includes Tukanoans regularly seeking out Hup'däh shamans for treatment and advice, and the highly-visible ritualised inclusion of the Hup'däh in the interethnic tradition of *dabucuri* exchanges, where their speciality products (light, tough and expertly-woven baskets for carrying manioc) are greatly valued (Hemming 2003: 251).

Despite its evident embeddedness in longstanding cultural discourses and practices in the Rio Negro, the asymmetrical relationship between the Hup'däh and their Tukanoan neighbours is subject to constant – and often highly conflictual – renegotiation of its boundaries. Agents and institutions of non-indigenous society have contributed to this process in both directions. Historically, the slavers and rubber barons who terrorised the riverine Tukano-speaking (and Arawak-speaking) communities left the highly mobile forest-dwelling Maku relatively unscathed, while their successors, the river traders, now reinforce the hegemony of the Tukanoans by using them as intermediaries to purchase Hup'däh baskets and forest produce. The Salesians used the Tukano-speaking groups as part of a classic colonial "indirect rule" strategy when they

turned their attention to "civilizing" the Maku in the 1960s and 1970s, using Tukanoan catechists as auxiliaries and establishing "model villages" to sedentarise the Maku in riverine zones which were traditionally Tukanoan territory. The Desana leader who guided me to the one of the largest missionary-established Hup'däh villages, Nova Fundação, in February 2006 proudly told me that it was his family that had ceded the land to the missionaries for their civilising task. At Nova Fundação, the resident nuns' whitewashed house and chapel looked out across a dusty parade ground at the huts housing the unhappy remnants of three mutually hostile Hup'däh clans who had been trapped there by their dependence on the missionaries' food handouts, since all the game in the surrounding forests had long since been hunted out. The Hup'däh of Nova Fundação provided a very handy labour pool for the local Desana, and also a source of high-status jobs, since there (as elsewhere) the teachers and AIS serving the Hup'däh community were recruited from among the Tukano-speakers rather than among the Hup'däh themselves, on the grounds that the latter lacked the necessary literacy skills and basic formal education to undertake training. By legitimating the role of these Tukanoan paraprofessionals and paying their salaries, the municipality (who hired the teachers) and the DSEI (who hired the AIS) were following in the missionaries' footsteps in reinforcing Tukano-speakers' hegemony over the Hup'däh.

During my fieldwork period, however, another group of outsiders were actively engaged in trying to change this situation: my friends and colleagues from SSL. In a project set up and guided by Renato Athias, the SSL team in the River Tiquié region were systematically working towards the goal of replacing all the Tukanoan teachers and AIS who were then covering Hup'däh communities with people from those communities, through an innovative strategy which combined basic anthropological and linguistic research, participatory curriculum development, formal education and training and political support. This strategy evidently generated considerable resistance among some of the local Tukanoan groups, as well as from the nuns of Nova Fundação and the fundamentalist Protestant missionaries who had begun infiltrating some Hup'däh communities. Both groups of missionaries feared (quite correctly) that SSL's ultimate aim was to provide the Hup'däh with support that would enable them to leave the mission

villages and return to the deep forest if and when they chose to do so. Despite this resistance, the project was able to go ahead and secure significant progress (training some two dozen teachers and a dozen AIS, and creating a rich array of Hup'däh-language learning materials to replace the Tukano ones that Hup'däh children had previously been obliged to use) – at least until its funding began to run out in 2008, leaving the Hup'däh once again in an uncertain political position.

The project's ability to overcome opposition and move ahead was largely thanks to Renato's and SSL's personal and political credibility in the region. Renato had been a friend and advisor to several Tukanoan leaders and organisations in the Uaupés over many years, and (as described in Appendix A2) SSL had had a long and successful period of working with Tukanoan (and Arawak-speaking) communities (initially with funding from Health Unlimited and subsequently through the DSEI) before it decided to focus exclusively on the Hup'däh. However, the project also benefited from the formal approval of FOIRN, despite the fact that several of the organisation's leaders were from Uaupés Tukanoan communities which might have been expected to resist disruption of their patron-client relationships with Maku groups. FOIRN's approval of efforts to help the Hup'däh was generally couched in paternalistic terms, as an expression of their responsibility as leaders to look after the wellbeing of hierarchical inferiors – reminiscent of the discourse I witnessed during my fieldwork on the River Tiquié, when a group of Tukanoan leaders asked the SSL team to "come and help our *Maku*" (referring to their Yohup clients whose communities were outside the SSL project's coverage area). However, it was also rendered less problematic for FOIRN by their symbolically transferring the "representative" functions that had formerly been exercised on the Hup'däh's behalf by their Tukanoan patrons not directly to the Hup'däh themselves, but to SSL.

As discussed above, FOIRN's formal structure is that of a federation of officially-registered indigenous organisations. The Hup'däh have never had an *associação* of their own; establishing one requires not only the acquisition of a high level of familiarity with the logic of "white" legal and organisational structures (which has only begun to be developed recently, through SSL's political

support work with Hup'däh leaders) but also a complex set of political negotiations between communities (which outside the missionaries' zone of control are fluid, as families come and go between them), clans (who are often mutually hostile) and leaders (whose authority is more contingent and provisional than among the more hierarchy-minded Tukano and Arawak-speakers). Although these negotiations had begun at the time of my fieldwork, they were still at a very early stage and there was therefore no immediate prospect of the Hup'däh establishing a representative *associação* that could claim any legitimacy beyond the immediate kin groups of one or two leaders.

FOIRN thus responded to the increasingly insistent demands for its political representation structures to demonstrate inclusion of the Hup'däh by associating the task of representing them with SSL – in effect making SSL an "honorary affiliate" of FOIRN and at the same time identifying the NGO as the new "patron" of the Hup'däh. This was reflected both in the FOIRN leaders' discourses which I witnessed at the 2006 *Assembléia* and in the organisational strategies of the *Controle Social* department (whose role is discussed in detail in the next section). The latter delivered the first institutionalised recognition of the Hup'däh in a formal representative space by making provision to include two Hup'däh representatives in the *Conselho Local* for the River Tiquié sub-region of the DSEI Alto Rio Negro. However, when I was given copies of the documents that recorded this, I noticed that while the constituencies of the Tukanoan *conselheiros* were identified with community and/or *associação* names, the two Hup'däh were identified as representing "*a área de atuação da SSL*" – "SSL's area of operation".

The inclusion of these two Hup'däh representatives came after a highly unusual mobilisation centring on the *Conselho* meeting where the new representatives were to be chosen. When I interviewed three Hup'däh participants in that meeting, they proudly described how a large number of people from their communities not only turned up at the meeting site without first asking the Tukano for permission (which in itself is almost unheard of) but also spoke out repeatedly in front of a large number of people from hierarchically superior Tukanoan clans to insist on their right to equal representation. While this mobilisation was probably only possible because of the political and logistical

support they received from SSL (whose team had briefed Hup'däh leaders about the meeting and provided transport for Hup'däh participants who would otherwise have had to row for more than a day to reach the village where it was being held), it did seem to fit with a broader trend towards greater assertiveness.

This assertiveness was expressed not only in the greater ease with which Hup'däh representatives were able to find the "courage" to speak out at interethnic political events, but also in more "unruly" ways. When I was staying in the village of Barreira in November 2006, a *caxiri* celebration ended in a fight in which a group of Hup'däh men beat up the local Tukano chief, who was regarded as arrogant and excessively exploitative in his dealings with the Hup'däh who worked for him. During my fieldwork period I heard of other fights taking place both in upriver villages and in São Gabriel, in the latter case involving Hup'däh AIS and teachers who had come to town to negotiate contracts with the municipality and DSEI and found themselves being victimised by urban-based Tukano and Baniwa. The other groups of the Rio Negro often describe the Hup'däh as pugnacious, but most fights take place between Hup'däh clans (including one in Nova Fundação some months after I was there, in which two people were killed and one of the three resident clans abandoned the village to return to its former deep-forest hunting-grounds). The trend towards more frequent violent expression of latent tensions between Hup'däh and members of "hierarchically superior" groups seems to be a relatively new one, and may well be related both to the growing assertiveness of the Hup'däh and to attempts by Tukano- and Arawak-speakers to "keep the Maku in their place".

By taking the first steps towards including the Hup'däh in its political representation structures, FOIRN has signalled that it is willing to recognise their demands to renegotiate their subaltern status. However, this has been made possible by the use of SSL as a "surrogate representative" structure and source of political backing for the Hup'däh. It is not clear whether this will be enough to avoid them suffering in a backlash if SSL is unable to secure funding for a continued presence among them – a continued presence which, unless it is accompanied by a clear exit strategy, would itself put SSL in the uncomfortable

position of mimicking the behaviour of the missionaries whose work with the Hup'däh it has criticised so strongly.

For the Hup'däh, the key to their gradual emergence into visibility within the formal representative structures of the regional *Movimento Indígena* was thus their insertion (via SSL) into the new social and political relations established around access to health services. That the link to FOIRN came about through the DSEI's *Controle Social* structure indicates the extent to which the regional *Movimento Indígena* saw its involvement in the oversight (as well as the management) of DSEI health services as an integral part of a wider set of political strategies – a marked contrast with the approach of UNI in Acre. FOIRN itself was well aware of this contrast: when Renato Athias and I interviewed former FOIRN director Bonifácio Baniwa (André's brother, who was then the head of FEPI, the Government of Amazonas agency that was the equivalent of SEPI in Acre) in April 2004, he emphasised that "in the Rio Negro the District has strengthened our movement... for the other movements, it seems like health work was a separate thing, which couldn't be combined with political work, but FOIRN has developed health work and political work together" (Shankland and Athias 2007: 84). In the next section, I examine exactly how FOIRN "developed health work and political work together" when it came to engage with health service provision.

8.2.3   *Movimento Indígena engagements with health policy and service provision*

As discussed in Chapter 6, control of health service provision has for many decades been an intensely politicised part of broader struggles for hegemony in the Rio Negro, starting with the initial conflict between missionaries and indigenous medical specialists. In a timeline exercise which I facilitated with SSL colleagues in the Tukano village of São José II in the Middle Tiquié in February 2006, a mixed group of Tukano, Desana and Hup'däh AIS and *lideranças* identified the Salesians' construction of their Mission Hospital in the settlement of Pari-Cachoeira on the Tiquié in the 1940s as the starting-point for these engagements. In addition to the missionaries, the group listed a very broad range of actors who had been involved in health service provision at different points

during the period since then, including SUCAM (the "mosquito-killers" whose role is discussed in Chapter 4) and FUNAI (with health team visits described as taking place "once a year") in the period up to 1986 and the military *Calha Norte* hearts and minds operation in 1986-88, as well as the SSL team in the period after 1996. The timeline also recorded the "creation of the AIS" in 1992 – a possible reference to the point when people from the Tiquié began to take part in a series of village health worker training courses run by Luiza Garnelo and colleagues from the University of Amazonas under an initiative called *Projeto RASI* (de Souza 2000).

SSL's own arrival in the region in 1996 was associated on the timeline with "basic health care throughout the Tiquié, Papuri and Ayari; AIS training, medicine supply". In the discussion, participating AIS highlighted the importance of this last element: SSL's willingness to entrust them with some basic medicines after they had completed training was contrasted with the reluctance of the current DSEI health teams to allow AIS to handle any drugs at all (discussed in Chapter 6). SSL's provision of "basic health care throughout the Tiquié, Papuri and Ayari" referred to the three sub-regions of the Rio Negro where the NGO's itinerant health teams delivered a limited curative service alongside the in-service AIS training programme which was the centrepiece of the initial SSL project.

As I discussed in Appendix A2, this first phase of SSL's engagement with the Rio Negro followed a feasibility study which Renato Athias, István van Deursen Varga and I carried out in 1994-5 for Health Unlimited (HU). On arriving in São Gabriel da Cachoeira and opening negotiations with FOIRN, we were immediately struck by how different their approach was from UNI's. Whereas the Acre *Movimento Indígena* leaders were obsessive about upholding what they claimed were their rights to exercise direct control over budgets and carry out line management of health professionals, FOIRN's directors made it very clear that they did not want to be saddled with managing opinionated "white" medics and dealing with the accounting requirements of a foreign NGO donor. What they were interested in was strategic political control: they wanted a say in where the project teams would work and how they would relate to local *Movimento Indígena* organisations. They also wanted health policy training and advisory

support that would enable them to engage with government in the ongoing debates about the future of health services for indigenous peoples. As a result, when Health Unlimited successfully secured British Government and European Union funding for a four-year primary health care project in the Rio Negro, this was delivered by teams who were under contract to SSL rather than to FOIRN – but the SSL office from which the project was managed was located inside FOIRN's headquarters in São Gabriel da Cachoeira, symbolically positioning it under the oversight of the organisation's *Diretoria*.

FOIRN followed the same political logic when, after the passing of the Arouca Law and the creation on paper of the DSEI Alto Rio Negro in 1999, FUNASA came looking for implementing agencies who could manage outsourced services in the new DSEI. Unlike UNI, FOIRN did not seek an outsourcing contract for direct service provision. Instead, they negotiated a specific role for themselves as facilitators of *controle social* across the DSEI, while service management was contracted out to three other providers: SSL; the São Gabriel da Cachoeira Municipal Health Secretariat; and the Diocese of the Upper Rio Negro (i.e. the Salesian Mission). This division of labour had already begun to be outlined in 1997, when a Municipal Health Conference brought together the different actors involved in health service provision in São Gabriel (including the military, who up to that point had been reluctant to engage with either the NGOs or the *Movimento Indígena*) to negotiate a plan which became the basis for the subsequent DSEI implementation strategy (Athias and Machado 2001: 428). It provided a solid foundation for the initial establishment of DSEI services, which at first proceeded speedily and secured broad-based indigenous support – reflected in the "trend lines" which we asked participants in the São José II timeline exercise to draw, which showed perceptions of both access to services and indigenous participation rising steeply after 1999 and arriving in 2001 at their highest level for the whole of the period between 1940 and 2006.

Unfortunately, this initial momentum could not be sustained. There were capacity constraints on the part of the service providers, who were having to scale up their operations to cover remote communities scattered over vast geographical areas where after years of neglect there was an immense amount of pent-up

demand. These formidable logistical and management challenges were aggravated by frequent delays in the transfer of funding for the contracted activities – a problem which had already been affecting FUNASA's own performance before the outsourcing contracts were signed but which was significantly worsened by the slow and extremely bureaucratic process of analysis and signoff which each provider's accounts from the previous period had to go through before the next tranche could be released (rendered even slower by FUNASA's penchant for manipulating the process in the interests of political bargaining and control). This made it all but impossible to maintain training and immunisation schedules, when a delay of a few weeks could mean that teams found some communities had become virtually inaccessible due to seasonal fluctuations in water levels (de Souza 2000: 8).

Unlike federal civil servants, who would receive their salaries whether or not the funds were there to allow them actually to do anything, professionals working for the outsourced providers went unpaid whenever FUNASA transfers were delayed. This damaged morale and increased staff turnover rates, which in turn undermined SSL's efforts to improve service quality through its "cultural sensitisation" training programme. This programme was intended to avoid the problems of racist attitudes and insensitive behaviour that poisoned relations between many DSEI teams and communities in Acre, by ensuring that all newly-arrived "white" DSEI Alto Rio Negro staff were given a minimum level of familiarisation training, which included bringing in FOIRN leaders and *pajés* as co-trainers (as discussed in Chapter 6). Although widely-praised, the training was expensive to run, and as the DSEI budget came under pressure and professionals left in increasing numbers, the raw recruits brought in to replace them (usually recently-qualified doctors, nurses and dentists from middle-class Southern Brazilian backgrounds) were increasingly expected to head upriver to their assigned *pólo-base* straight away, without waiting for the next familiarisation course.

The situation continued to deteriorate in 2001-2, with the poor performance of the Municipal Health Secretariat in particular generating a groundswell of protest from indigenous leaders in its coverage area, who called on FOIRN to take

action. When FUNASA failed to show any commitment to resolving the problem of transfer delays (which were exposing the outsourced providers to potentially ruinous legal action from staff whose wages they had been unable to pay), SSL refused to sign its contract renewal agreement. Having initially avoided becoming involved in direct service provision, FOIRN now found itself under pressure from the grassroots leaders of its *base* and from FUNASA to take over the management of services in both the Health Secretariat's and SSL's coverage areas. Then, in 2002, the Bishop ordered the Diocesan health service to end its contract with FUNASA. In response, FUNASA opened negotiations with the municipal administration, which was run by non-indigenous politicians perceived as hostile by the *Movimento Indígena* leaders. Finally, FOIRN agreed to step in and accept a management contract for the whole DSEI – a decision which a member of the *Diretoria* whom I interviewed with Renato Athias in 2004 attributed to a desire "to fulfil our commitment to represent the *base*, and to avoid the DSEI being handed over to the municipal administration" (Shankland and Athias 2007: 83). As the São José II timeline recorded, this left the *Movimento Indígena* organisation in a curious position: "2002-3 – FOIRN takes over the contract with FUNASA completely, continuing with *controle social*". From then on, FOIRN was faced with the task of "representing the *base*" both by managing service delivery and by organising user oversight of those same services.

By this time, FOIRN had established a *Departamento de Controle Social* which was embedded within the DSEI but answered to the FOIRN *Diretoria*. This Department consisted of five community organisers drawn from FOIRN's pool of *lideranças* skilled in mediating between "white" institutions and their communities (some of whom had AIS training and others of whom had worked as teachers and/or catechists for the Salesian Mission). Each was assigned to one of the sub-regions of the DSEI (which coincided with FOIRN's own political sub-regions) and tasked with travelling around it to monitor the performance of the health teams and mediate in disputes that arose between community members and "white" professionals. During these field trips, they were expected to keep in regular contact with the local elected *conselheiros*, passing on news of planned DSEI activities and relaying to DSEI headquarters any problems or proposals that

emerged from the sub-region. They arranged the timetable of Local Indigenous Health Council meetings, provided logistical support to the *conselheiros* and organised the agenda – as well as almost invariably (from the records I examined in the FOIRN archive) being the ones who took the minutes. The Department was also responsible for training newly-elected *conselheiros*, with the assistance of other FOIRN leaders and non-indigenous professionals from the DSEI.

The picture which emerged from my interviews with *conselheiros* and with the staff of the *Departamento de Controle Social* was of an approach which focused on *regulation* – monitoring compliance with established rules, rather than promoting reflection on how those rules might be altered to better serve indigenous rights and interests. This regulation was directed both at the work of the DSEI's health staff ("white" professionals and AIS alike) and the functioning of the *Conselhos*. The former were monitored to forestall or defuse conflicts arising from insensitive behaviour and to report on poor performance in relation to the DSEI's targets, and the latter to ensure that they fulfilled the formal requirements of the *controle social* system with regard to regularity of meetings, proper election of *conselheiros*, etc. – with several interviewees remarking how seriously the department's community organisers took their task of educating and orienting the elected *lideranças* who made up the *Conselhos*.

This impression was reinforced in 2006, when the FOIRN *liderança* who had become the new head of the operation renamed it the "Supervision Department" (*Departamento de Supervisão*). The "white" professionals complained that the department could not claim to supervise their work because its members were not themselves trained health professionals – but this was not the "supervision" that FOIRN had in mind. The change in name made it even clearer that the department saw its role as exercising *controle social* in its original sense of "social oversight" – acting as a counterweight to bureaucratic and expert power in the health system. In exercising this role, it was effectively positioning itself as the legitimate channel for representation of service user interests. In the process, however, it both predefined those interests as confined to the proper fulfilment of pre-established service delivery plans and reduced the service users' elected representatives, the *conselheiros*, to an auxiliary function whose role was

essentially to interpret the DSEI's practices to their communities and to rubber-stamp its planning decisions – when according to SUS logic the department should have been an auxiliary service enabling the *Conselhos* to operate as the sites of *controle social* over the DSEI and the arbiters of its choice of priorities and practices.

The *Departamento de Supervisão* represented the culmination of FOIRN's political strategy in health service provision. It was able to pursue its regulatory function despite the apparently blatant conflict of interest represented by the fact that FOIRN was itself formally responsible for the management of the services which were the object of the *controle social* it sought to promote. This was possible because in practice it was regulating the performance of "white" professionals and not FOIRN directors, as the day-to-day running of the DSEI was left largely to non-indigenous managers who were jointly appointed by FOIRN and FUNASA. FOIRN's *Diretoria* signed the cheques and intervened in decisions which they classified as relevant to their "political" remit, such as the location of new *pólos-base* and health posts – but these interventions did not challenge the basic technical rationality of the non-indigenous managers' decisions in the way that UNI sought to do in Acre. Disputes did occur between FOIRN *lideranças* and "white" technical staff, but they had nothing like the frequency or intensity of the clashes which marked UNI's management of the Alto Juruá and Alto Purus DSEIs.

Above all, this was possible because there seemed to be no fundamental difference in approach to health service delivery or priorities between the indigenous and non-indigenous managers: in fact, whenever the content (as opposed to the bureaucratic process) of the DSEI's service provision was debated it was usually the more "progressive" professionals among the "white" technical staff who seemed to be calling for a more "flexible", "differentiated" or "intercultural" approach. As Renato Athias and I have written, FOIRN's apparent imperviousness to calls to "indigenise" the practices of the DSEI included a failure to incorporate the pajés' agenda discussed in Chapter 6, as "the traditional healers' association CERCI... made little headway in its efforts to promote a broader understanding and inclusion of traditional healing practice within the

DSEI, despite CERCI's status as a FOIRN affiliate and the supportive statements made by many FOIRN leaders" (2007: 84).

Although there were accounting problems in the DSEI under FOIRN's management, and some stories circulating in the São Gabriel gossip about misuse of district resources by "white" managers and FOIRN *Diretoria* members alike, these never reached the level of the scandals which brought down UNI, and FUNASA audits were unable to demonstrate the existence of corrupt practices. Throughout their stewardship of the DSEI, FOIRN's leaders were broadly successful in projecting an impression of solidly reliable bureaucratic management, and in the words of FOIRN *Presidente* Domingos Barreto Tukano, "the Rio Negro DSEI got a reputation as one of the Districts that didn't create any problems".

With the changes in FUNASA's political strategy discussed in Chapter 4, however, this position became increasingly hard to maintain. In 2004 there were repeated transfer delays while FUNASA shifted responsibilities away from FOIRN and into its own regional office in Manaus, finally leading to a complete breakdown in coverage as DSEI staff went unpaid for three months, which contributed to a reported 35% rise in infant mortality in the DSEI (de Souza 2004). Mobilisation by several *Movimento Indígena* organisations – which included a symbolic occupation of the FUNASA office in Manaus – failed to get the agency's centralisation measures reversed, and by 2005 the *Diretoria* were convinced that FUNASA's apparent determination to reduce contract-holders to the status of mere payroll management agencies was making FOIRN's political position untenable. This became even clearer after a series of FUNASA-imposed budget cuts left the future of the *Departamento de Supervisão* in doubt. Having initially set out to avoid management responsibility while retaining strategic control and oversight, FOIRN risked being left carrying that same management responsibility without the resources necessary either to fulfil it adequately or to maintain the *controle social* structure that had underpinned the organisation's political strategy.

As the relationship between FOIRN and FUNASA deteriorated, senior FUNASA managers began to talk explicitly about their determination to end all outsourcing arrangements with *Movimento Indígena* organisations, and signalled

an intention to reopen negotiations with the São Gabriel da Cachoeira Municipal Health Secretariat. This increased the tension with FOIRN still further, since as I described in Chapter 3 the October 2004 municipal elections had been won yet again by a white politician – but only after he fought off a determined challenge from Pedro Garcia, a Tariano leader from Iauaretê and former FOIRN director, who ran as a PT candidate. Pedro Garcia's defeat resulted from a last-minute split in the *Movimento Indígena* vote, attributed by observers to the decision of a group of Baniwa leaders from the Içana Valley to accept the inducements to switch sides that were offered by the (PMDB) Governor of Amazonas State. FOIRN's leadership were concerned that handing control of the DSEI over to the mayor would not only strengthen his hand politically but risked further deepening the split within the *Movimento Indígena*.

Caught between the rock of FUNASA's intransigence and the hard place of municipalisation, the FOIRN *Diretoria* declared that it was their avowed intent to abandon the outsourcing contract, but that before going ahead with this they would consult their *base*. In 2006 they held a series of local *conselho* meetings to debate the issue, which voted overwhelmingly against FOIRN's giving up the contract. The *Diretoria*'s response was to agree to keep the contract as a temporary measure, while stepping up the search for a potential contract-holder who would provide an acceptable alternative to the municipality. In late 2006, they found their alternative: the São Gabriel Association of Nursing Technicians (ATESG), a union formed by mid-level nursing staff in the municipality who were themselves mostly of indigenous origin and therefore had some ability to bridge the worlds of *Movimento Indígena* politics and "white" health policy – the fact that ATESG had absolutely no project management experience was considered a secondary issue. By the time of the 2006 *Assembléia*, the deal had been done: the non-indigenous management and technical team who had been in charge of the day-to-day running of the DSEI were transferred *en masse* to ATESG, and FOIRN announced that it was returning to its original strategy of dealing only with *controle social*.

In the event, however, this strategy was hampered by the fact that FUNASA had no intention of funding FOIRN's *controle social* operation now that the DSEI's

immediate payroll management problem had been solved. The *Departamento de Supervisão* withered away as funding for salaries and travel dried up, and the local *conselho* meetings became less and less regular. The only functioning *controle social* institution was now the *Conselho Distrital de Saúde Indígena* (CONDISI), which was chaired by FOIRN Vice-President André Baniwa. André and his vice-chair Luiz Brazão (a Baré nursing technician and ATESG co-founder who had for many years been a member of the SSL team working with the Hup'däh) ensured that in addition to the obligatory airing of local complaints and demands, CONDISI meetings included debates on the general direction of FUNASA policy. They prepared a plan for the Rio Negro to become a pilot site for the transformation of DSEIs into autonomous management units – which had supposedly been official policy since the 2006 National Indigenous Health Conference (discussed in Chapter 9). This plan was endorsed by the CONDISI and taken up by allies like SSL, but without coherent *Movimento Indígena* support at the national level it failed to get much traction.

André's strategy for re-energising the debate at the grassroots also foundered on the fact that without the resources to hold local indigenous health council meetings, the *conselheiros* who came to the CONDISI meetings had few opportunities to spread the word beyond their own communities. The DSEI *controle social* system had become dependent on *Departamento de Supervisão* staff making regular visits to the far-flung sub-regions of the DSEI to ensure that information flows were maintained; now the Department had effectively ceased to exist, the *conselheiros* lacked both the preparation and the resources needed to take its place. This impasse persisted into 2008, when the *Movimento Indígena* in general and André in particular began to turn their attention to the municipal elections. Following the victory of the FOIRN-backed candidates André, now deputy mayor, secured the nomination of the non-indigenous DSEI manager Luís Lopes as Municipal Secretary for Health. The invisible but carefully-patrolled boundaries between the Indigenous Territory of the Upper Rio Negro and the Municipality of São Gabriel da Cachoeira, between the DSEI and the Municipal Health Secretariat, between FOIRN and the local government, began to dissolve – and a new experiment in indigenous-led governance began to take shape.

8.2.4 Analysis: the path of the "strategic bureaucrat"

In seeking to analyse the paths taken by different *Movimento Indígena* organisations, many observers seem to slip into a kind of cultural determinism. John Hemming, for example, describes the Rio Negro indians as "gentle, regimented and law-abiding", culturally very distinct from Gê-speaking groups like the Kayapó with their "fighting spirit" (2003: 618). Within the *Movimento Indígena* itself, it is not uncommon to hear the peoples of the Rio Negro described as "*índios organizados*", and this is a stereotype which FOIRN's leaders seem to cultivate as a badge of pride. There is no doubt that existing social institutions and practices – both pre-contact ones and others acquired from the long years of living under the Salesian Mission – have contributed to the greater cohesion and more "orderly" approach of the Rio Negro *Movimento Indígena*. Nevertheless, just as a focus on the corruption and chaos of the UNI experience of DSEI management risks ignoring the strategic political choices that were made by the *Movimento Indígena* leadership in Acre, simply attributing the path followed by FOIRN to the "bureaucratic" vocation of its leaders risks ignoring the ferocious dedication and political skill with which they kept the Rio Negro *Movimento Indígena* on course – preventing it from either being ripped apart by the conflicts that abound under its apparently placid surface or being crushed by FUNASA's bureaucratic machinery, and steering it in a direction they adopted not as a default option but as a strategic choice.

When I first set out to analyse the experience of the Rio Negro DSEI, my overriding concern was to understand why a structure that had indigenous leaders in senior management positions, an indigenous majority on the District *Conselho*, a whole department of community organisers dedicated to encouraging indigenous participation and a plurality of indigenous nursing technicians among the health teams who actually delivered the services had managed to remain so resolutely *un-indigenous* in its practices. This question was thrown into sharp relief by the failure of the pajés – who had the double legitimacy of belonging to a FOIRN-affiliated *associação* and claiming to represent sources of spiritual and normative authority which FOIRN's leaders had been brought up to respect

deeply – to bring about any significant shift in FOIRN's position on the sort of services the DSEI should be delivering or the arrangements for providing them.

FOIRN leaders interviewed during my research were quick to attribute the organisation's failure to "indigenise" the practices of the DSEI – from its top-down *sanitarista* planning practices to its stale and legalistic *Conselho* deliberations – to the sheer difficulty of dealing with the opaque and unresponsive FUNASA structure and the mass of bureaucratic demands imposed by the "white" health system. I would argue, however, that while the difficulty of translating indigenous agendas into the hermetic discourse of the SUS and the paralysing effect of FUNASA bureaucracy were by no means insignificant, this path was not simply predetermined by external factors. The fact that FUNASA needed to keep FOIRN on side after the failure of its original outsourcing arrangements, and the evidence of FUNASA's willingness to accept previous innovations such as the creation of the *Departamento de Controle Social*, suggest that at least in the period between 2002 and 2004 (and possibly for some time afterwards), FOIRN's leaders actually had considerable room for manoeuvre within which they could have proposed more innovative approaches for the DSEI – but they deliberately chose not to use it.

In my view, this is because the pursuit of the strategic aims of the regional *Movimento Indígena* required its leaders to demonstrate the capacity to manage the bureaucratic institutions of the white state. For FOIRN, the point of becoming involved in DSEI management was to learn how to run it as a "white" institution – not to transform it into something different and "more indigenous". This is illustrated by the approach of the *Departamento de Controle Social*, which in seeking to address the "bureaucratisation" of the *Conselhos* of which many interviewees complained focused not on changing the "white" deliberative practices which dominated them but on intensifying the training which *lideranças* received to help them to engage with those practices. It is also present in the discourse of FOIRN *Presidente* Domingos Barreto Tukano at the 2006 *Assembléia*, in which he depicted the organisation's management of the DSEI as a model of probity and competence which had been faced with unreasonable and politically-motivated behaviour on FUNASA's part. At the final District-level *Conferência*

held before FOIRN formalised the decision to give up its contract with FUNASA, Domingos stated that "it was important for FOIRN to take on a contract with the federal government, as we learned to manage [public] funds, which is an important thing for an indigenous institution".

In January 2009 this strategy seemed to have borne triumphant fruit, as a former FOIRN President and Vice-President took office as the elected Mayor and Deputy Mayor of São Gabriel da Cachoeira. As of mid-2009, the reports coming in from São Gabriel suggest that the indigenous-led administration has been struggling; the municipal finances are in disarray, the political parties that came together in the winning coalition are once again at odds, and it is proving hard to deliver practical actions that give substance to the FOIRN-backed leaders' grand talk of implementing a "municipal masterplan" and an "integrated regional indigenous development programme". However, these problems are common to virtually every new government elected amid huge expectations for transformative change and talk of historic shifts in the political centre of gravity, and this does not necessarily mean that the potential of their election for transforming the underlying assumptions of representation is any the less. My hunch is that the new indigenous-led administration in São Gabriel will not prove transformative in its actions and practices – because this has never been part of FOIRN's approach. Instead, if the new municipal administrators are able to demonstrate the formidable capacity for understanding, imitating and ultimately controlling "white" institutions that the Rio Negro *Movimento Indígena* has demonstrated throughout its history, they will succeed in delivering what – by regional standards at least – will be a bureaucratically competent performance in government.

This, in turn, will contribute to a much greater strategic objective: demolishing the racist stereotypes of indigenous incapacity that have long been used by official *Indigenismo* and private interests alike to justify the subordination of Brazil's indigenous peoples. This is a strategic objective which is extraordinarily difficult to achieve – racism that has become entrenched over five centuries will not disappear because of a few years' counter-example in one corner of the Amazon – but the Rio Negro *Movimento Indígena* has demonstrated

that it knows how to play the long game. If UNI's "strategic unruliness" served to challenge the legitimacy of the rules under which white society required the game to be played, FOIRN's "strategic ruliness" could contribute to shifting the external representations of indigenousness on which those rules are founded.

This interplay between rules and unruliness is central to the tension that I have highlighted in this thesis between *inclusion* and *transformation*. In the final part of the thesis, I explore how this plays out in the relationship between indigenous representation and the representation of the democratic process itself, contrasting "democracy as inclusion" with "democracy as transformation" and concluding by examining the potential for moving from the former to the latter by transforming representation itself.

PART IV

REPRESENTING DEMOCRACY

Chapter 9   Indigenous Representation and New Democratic Spaces

9.1   Democracy as Inclusion? The National Indigenous Health Conference

Pousada do Rio Quente, Caldas Novas, Goiás, 28 March 2006*. It is 10:30 in the morning and the heat in the huge marquee erected in the pleasure garden of the Rio Quente spa resort is already stifling. It is intensified by the steam from the water running past out of the hot springs which give the resort its name and its raison d'être. The 700 delegates to the 4th National Conference on Indigenous Health sit slumped in their chairs, as on the central stage the National Health Council representative – an earnest young man from the Catholic Health Pastoral – reads through the Conference Statutes which establish who can participate and how. His microphone-amplified voice booms from the speakers, as the keener delegates strain to read the text projected onto the screens beside the stage. "Questions of Order may be introduced in the Thematic Plenaries", he reads, "but only on an Ad Referendum basis". No one asks him to explain what that means, though when I check later with my SSL colleagues (all seasoned* Conferência *participants), even they have no idea. Then there is a commotion: a group of late-arriving delegates from Bahia are demanding voting rights, despite the fact that their names are not on the FUNASA-approved list. An indigenous woman delegate from Manaus takes the microphone and argues for their inclusion: "A* Conferência *is supposed to be open, it's not right that they should come all this way and not be allowed to participate". "No", replies the young man from the National Health Council, "*Conferência *participation is restricted, there are rules on who can take part". A second indigenous woman takes up the microphone and declares "They are our relatives, we're not going to exclude them just because of some set of Statutes that are not of our making". Issô Truká, an indigenous representative on the National Health Council and member of the organising committee, replies "The* Conferência *is open but within the limits of legality – we can't breach the rules to which we have all just agreed". A Xavante man marches to the front and demands his right to speak. "We have a delegation of Xavante chiefs waiting outside", he shouts, microphone in clenched fist, every inch the warrior, "and if you let in these people from Bahia we will force you to let in our chiefs as well!". The motion to give the group from Bahia delegate status is put to the vote, and defeated by a two-to-one margin. There are cheers from some delegates – both indigenous and white – as this threat to the orderly and procedurally-sound running of the* Conferência *is averted.*

This chapter examines the engagements between indigenous representatives and the "white state" that emerge from the new democratic spaces of the Indigenous Health Subsystem. As I noted in Chapters 2 and 5, these Subsystem *controle social* institutions are versions of the *Conselhos* and *Conferências* through which the *Movimento Sanitarista* has sought to hard-wire service user participation into the governance of the SUS. But they are versions with their own specific

characteristics, shaped by the peculiarities of FUNASA's authoritarian and rent-seeking version of *sanitarismo* and the different political geography of the Subsystem, with its ethnic territories, *pólo-base* coverage areas and "Special Indigenous Health Districts". Picking up on the distinction introduced in Chapters 1 and 2 between "democracy as inclusion" and "democracy as transformation", I examine what we can learn about different meanings and practices of Brazilian democracy through ethnographic "thick description" of how it is represented in and around three different "new democratic spaces": a National Indigenous Health Conference; a policy seminar convened by the National Health Council; and a Local Indigenous Health Council operating at the *pólo-base* level in a small and remote municipality in Acre.

9.1.1 The Conference

The scene described at the start of this chapter, which took place on the first day of the *IV Conferência Nacional de Saúde Indígena* (CNSI) in March 2006, highlights two key sets of tensions which ran throughout the conference: between inclusion and exclusion, and between legitimation and delegitimation. In both, the "rules of the game" – their interpretation and the power dynamics around efforts to reshape or uphold them – played a central part. This is not in itself remarkable. Struggles over the making and remaking of rules, and their application to including or excluding representatives and representations, are a central feature of the institutions of Brazilian democracy in general and health system *controle social* in particular. Andrea Cornwall provides a "thick description" of one such set of struggles in a municipal *conselho* in Northeastern Brazil which explores the general SUS tendency to devote more energy to discussing the process of democratic practice – what the paper calls "deliberating democracy" – than to examining the issues which are supposedly the object of democratic deliberation (Cornwall 2007). What gave the struggle over the rules a particular resonance in the case of the CNSI was the fact that during the *Conferência* this general SUS tendency became entangled with two other significant dynamics: a political showdown over the legitimacy of one of the

agencies promoting the conference – FUNASA – and a complex set of issues around "intercultural" representation of the deliberative process among participants from two different *sanitarista* traditions and over a hundred different indigenous groups[57].

The CNSI was both a general example of the politics of symbolic inclusion of Brazil's indigenous minority, discussed in earlier chapters, and a very specific case of an attempt at more binding inclusion of indigenous representatives by two branches of the "white state" with their own distinct agendas: the National Health Council and FUNASA. The opening-night ceremony was a grandiose but crass attempt by FUNASA to represent symbolic inclusion, to which seasoned *Movimento Indígena* activists participating in the conference reacted with barely-concealed scorn. At the start, 34 indigenous people – one for each DSEI – who had apparently been chosen for the photogenic qualities of their traditional dress rather than for their status as politically legitimate representatives, were paraded along the front of the stage to deposit a single item of "traditional craftwork" onto a pile. The idea that a single piece of one group's material culture could somehow "represent" the diverse peoples of pluriethnic DSEIs set the tone for a systematic attempt throughout the *Conferência* to persuade delegates to identify with their DSEI (i.e. their FUNASA management unit) rather than with their ethnic group, *Movimento Indígena* organisation or status as a representative of service users, professionals or management. Similarly crude and unconvincing was the organisers' claim that the choice of venue for the conference (a spa resort several hours' drive from Brasília) was not due to FUNASA's desire to keep dissenting indigenous voices away from the journalists and decision-makers of the capital but rather to the appropriateness of such a sylvan setting for a gathering of indigenous people – a stereotyped representation of "indians as children of Nature" that many indigenous participants found laughable, especially when they found out that they were expected to be so happy among the manicured lawns and ornamental ponds of the spa park that they ignored more practical

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[57] I have already drawn on part of the material in this section for an article co-authored with Andrea Cornwall that was published in a special issue of *Social Science and Medicine* on "Future Health Systems" (Cornwall and Shankland 2008).

considerations such as the lack of hammock-hooks in the bedrooms and the absence of indigenous dietary staples like fish and manioc flour from the canteen menus. The opening ceremony's foregrounding of cultural diversity was in any case rather undermined by the composition of the panel of "authorities" who presided over it: of the fifteen members of this panel only one (Carmem Pankaruru, Chair of the National Forum of Indigenous Health District Council Presidents) was indigenous, and she was not asked to speak.

If FUNASA attempted – however crassly – to promote symbolic inclusion by adapting some external trappings of the conference to signal its authentic indigenousness, the National Health Council (*Conselho Nacional de Saúde*, or CNS) followed an opposite logic: attempting to include the indigenous participants (and by extension FUNASA and the Subsystem itself) in the "SUS epistemic community" by disciplining them into the proper exercise of deliberation according to SUS rules. Every session of the *Conferência*, from the plenaries to the group sessions, had at least one CNS representative either chairing or "assisting", to ensure that the rules were rigorously adhered to. This included the laborious reading-through of "house rules" agreements pre-drafted by the CNS itself – as in the scene described above – where the texts were so larded with abstruse Latinate legal terminology and SUS jargon that even among the white participants only hard-core *sanitaristas* could understand them. It also included the setting and enforcement of strict rules for who could speak and how, and for the inclusion and exclusion of proposals, which initially could only be presented in written form and in Portuguese, despite the large number of indigenous delegates who were non-literate or only semi-literate in Portuguese.

This generated an understandable backlash, particularly among delegates who found themselves being silenced for "going off the point" or "taking too much time" when using traditional deliberative styles; as one *Movimento Indígena* leader from Acre remarked to me, "They say they want the indians to speak, but then they only give us three minutes and there are many of us who can't express our thoughts in that time". One of the most thoughtful indigenous members of the organising committee, José Ângelo Nambiquara from the National Forum of CONDISI Presidents, told me that he was deeply frustrated by the CNS

imposition of SUS-standard deliberative rules on the conference: "We need a *Conferência* that has a differentiated way of holding discussions... these norms are not our norms, there are people here who've never seen a *Conferência* before". In the thematic debate on *controle social*, José Ângelo gave voice to a position which I subsequently heard many indigenous representatives espousing: the right of indigenous people to choose whether or not they opted in to the laws which the Brazilian state claims must apply universally to all its citizens. When he argued that "white society makes laws, but they often don't make sense for us – we need to evaluate these laws to see whether they are valid for us", he put his finger on the universalism/relativism dilemma that, as I discussed in Chapter 2, is central to Brazilian *Indigenismo*.

By insisting on a conference that rigidly adhered to orthodox SUS deliberative practices, the CNS may simply have been seeking to preserve the CNSI from any subsequent challenge to its formal legitimacy (though one CNS representative told me during the *Conferência* that he at least had a different agenda, namely forcing the Subsystem into the fold and ensuring that it submitted to the same norms as every other part of the SUS). The organisers told me that the imperative to guarantee a formally legitimate outcome was behind one of the most unpopular of the decisions imposed by the CNS, the herding of people into four large "thematic plenaries" rather than the small-group discussions which had been used at the National Health Conference three years earlier. This decision was explicitly intended to avoid the problem which the National Health Conference had faced with the accumulation of a mass of amendment proposals which took so long to work through that the final plenary ran out of time, rendering its report incomplete and therefore legally non-binding (as discussed in Chapter 2). This orthodoxy-upholding approach, however, guaranteed the CNSI's formal legitimacy at the expense of depriving it of political legitimacy in the eyes of many indigenous participants, who simply did not see it as representing a deliberative process with which they could identify.

9.1.2 Deliberation meets manipulation

There was another critical factor undermining the political legitimacy of the CNSI: dissent over the tactics used by FUNASA to ensure that the *Conferência*'s deliberations returned the verdict it wanted. Most of the items on the agenda were uncontroversial, not least because many were merely restating principles of the existing National Indigenous Health Care Policy (participation, respect for traditional medicine, management autonomy for the DSEIs) that FUNASA had been ignoring for years and was confident it could continue to ignore. One, however, had senior FUNASA management rattled: a motion to take management responsibility for the Subsystem away from the agency and vest it in a new Special Secretariat of the Ministry of Health. This motion was voted down in the final plenary amid scenes of frantic lobbying by both sides. Generalised confusion reigned; the poor handling of the vote by the CNS representative chairing the session led several delegates to tell me that they thought they were voting for the motion when actually they had voted against it. It was an open vote, which required delegates – including health workers on temporary contracts which could be renewed or terminated at the whim of the DSEI manager – to raise their badges for or against the motion while sitting in DSEI groups under the watchful eye of FUNASA staff who had been detailed to ensure compliance.

After the decisive vote, one of my SSL colleagues (who happens to be of mixed descent and wears her straight black hair long in a style favoured by indigenous women) was relaxing in the hot springs with a group of indigenous women delegates when she was mistaken for one of them by a passing FUNASA manager. He asked her where she was from, and on being told "Bahia State" replied "The Northeast should be congratulated, you voted as a block... the FUNASA people there prepared the indians really well, just like we did in Mato Grosso do Sul". FUNASA's approach to "preparing the indians really well" extended beyond holding DSEI meetings where the dire consequences of opposing the agency were spelled out; they also included packing delegations with leaders who were already on the payroll, and barring dissenters elected in the local and district preparatory conferences, who (as several subsequently told

me) turned up at their local airports to find that the tickets for their flights to the conference had mysteriously not been issued.

During the final plenary session, anger at these tactics boiled over into a concerted attempt by *Movimento Indígena* leaders and sympathetic health professional delegates from the Amazon and parts of the Centre-West (particularly the Xingu) to de-legitimate the *Conferência* as a whole. Immediately after the vote in which the proposal to take responsibility away from FUNASA was defeated, the entire Xingu delegation walked out of the final plenary. They were accompanied by Douglas Rodrigues of the São Paulo Medical School, who had been openly lobbying for the proposal. As the session dragged on after midnight, and more and more indigenous representatives complained that they had been coerced or misled into voting with FUNASA on the crucial motion, several dozen delegates (including all the senior *Movimento Indígena* representatives from the Amazon) left the main marquee where it was being held and took over one of the resort's restaurants, where they initiated a parallel debate. They summoned the senior CNS representative and accused him of presiding over the "manipulation" of a supposedly democratic process, and then proceeded to draw up a statement in which they denounced the whole CNSI as flawed and illegitimate. This denunciation was subsequently taken up by a group of NGO and university-based *indigenistas sanitaristas*, who issued an open letter in which they stated that "the problems in the process under which the *IV Conferência Nacional de Saúde Indígena* was held very seriously compromise its representativeness and the legitimacy of its proposals, as the supreme body for making proposals concerning the National Indigenous Health Policy, as set out in Law No. 8,142 of 1990" (ANAÍ, CIMI and MSA/UFMA 2006: 4).

Ultimately, however, this attempt failed as the CNS refused to declare the *Conferência* invalid, leaving FUNASA's critics with only the argument that political legitimacy must trump procedural legitimacy – a hard one to sustain when the broader Brazilian democratic debate is so centred on the importance of the rules that grant procedural legitimacy to new democratic spaces, in turn helping to protect them against attempts by the country's more authoritarian forces to dismiss them as illegitimate drag-anchors on decisive government action.

Once the initial anger had died down, the *Movimento Indígena* did not close ranks behind the position of declaring the conference a wholly illegitimate exercise. There were three principal reasons for this. The first is that some representatives argued that disqualifying the *Conferência* as a whole would also de-legitimate proposals which they had fought hard to approve – including reaffirmation of the principle of "DSEI autonomy", which had become a major focus of *Movimento Indígena* mobilisation in the face of FUNASA's moves to recentralise decision-making in the Subsystem. The second is that there were very real divisions within the *Movimento Indígena*; the willingness of so many *lideranças* to side with FUNASA was not wholly due to bribery or coercion, as it also reflected the belief of many (particularly in the Northeast) that FUNASA was a more reliable ally than a Ministry of Health run by advocates of SUS municipalisation orthodoxy – considered all too likely to hand control of indigenous health to the mayors who were seen as the most dangerous enemies of representatives' communities. The third reason is that many (perhaps most) of the grassroots indigenous delegates did not actually regard the CNSI as illegitimate: deeply flawed as the process was, the *Conferência* had after all succeeded in building a politically significant sense of inclusion.

9.1.3   From inclusion to engagement

The first component of this was, paradoxically, the effort at *exclusion* mounted by FUNASA and the CNS, respectively for political and procedural reasons. In the incident that I described at the start of this chapter, the delegates voting to exclude the late arrivals from Bahia were not all FUNASA lackeys. Many of them were indigenous service user representatives who expressed the view that they themselves had mobilised politically and worked hard to secure their own inclusion, and that this entitled them to delegate privileges (specifically, the right to vote on motions) which should not simply be handed out to any gatecrasher who turned up after the *Conferência* had already begun. This is a good example of the sociological truism that inclusion of some tends to operate via exclusion of

others, establishing an insider/outsider dynamic that strengthens the cohesion of those left on the inside.

For many indigenous delegates, this was linked to a broader sense of symbolic inclusion which was nothing to do with FUNASA's attempts to represent a folklorised faux-indigenous identity for the *Conferência*; it derived from the simple fact that the "white state" had paid for them to fly all the way from their remote communities in the country's periphery and stay in a luxury hotel at its core, just a few hours from the national capital, in order ostensibly to ask for their opinion on its proposals for the health services that were supposed to serve them. For seasoned *Movimento Indígena* activists it may have been a hollow farce and a transparent attempt to replace participation with manipulation. But for people whose previous experience of the state was confined to everyday racism from municipal functionaries, and police and judicial connivance at abuse of their rights – or even, if they lived in a designated "national security area", casually brutal incursions by army and federal police units who treated them as presumptively guilty of collaborating with Colombian or Peruvian guerillas and drug-traffickers – this was a meaningful demonstration that they existed as citizens, that they were no longer invisible to the power centres of the "white state".

I interviewed many first-time *Conferência* participants from remote communities who were delighted at the sense of inclusion that they derived from simply being present at the CNSI. When the Brazilian national anthem was played at the end of the *Conferência*, most of the indigenous delegates stood up spontaneously, and several sang along loudly and with evident pride. One delegate was wearing a T-shirt with the slogan "I can be what you are without ceasing to be what I am: an indian!". As I discussed in Chapter 2, these representatives saw no reason to become less proud of being Brazilian as they became more proud of being indigenous – and the experience of *Conferência* participation had actually strengthened both identities.

That does not mean, however, that they were blind to FUNASA's manipulative behaviour or happy with the rigid enforcement of SUS deliberation rules by the CNS; they just hadn't been expecting anything different, from what

they saw (quite correctly) as an event organised by the "white state" for its own purposes and run according to its own rules. They may not have agreed with those purposes, but in the absence of a clearly-defined alternative policy platform around which to mobilise, their efforts went into learning as much and as fast as they could about the rules – with a view to engaging more effectively at other times and in other spaces. Interviewee after interviewee referred to the copious notes they had taken, the insights they had gained from talking to indigenous representatives from other regions and the wealth of information they would be able to relay back to their communities – information that they felt would be invaluable in the everyday struggles for accountability in the *pólos-base* and DSEIs. For them, manipulated inclusion was inclusion none the less, and learning the rules of the new democratic spaces of the Indigenous Health Subsystem was the first step towards using the openings presented by Brazilian democracy to seek a better deal from the "white state".

As I have described in Chapter 8, this determination to engage as "rule-bound" participants in the democratic process by no means excluded indigenous representatives' simultaneous willingness to engage in "unruly" practices in pursuit of the same aims. Direct action to protest at FUNASA's failings continued unabated after the *Conferência*, spreading to DSEIs (such as the Alto Juruá in Acre) where it had not been common before (Weis 2006). These protests were often led by regional *Movimento Indígena* representatives. Even where they were started spontaneously by angry leaders at the *base*, the regional indigenous movement organisations frequently backed them with vocal calls for FUNASA to lose its responsibility for the Indigenous Health Subsystem. The *Movimento Indígena* was no longer formally insisting on the illegitimacy of the CNSI, but this behaviour signalled that in practice it included a significant faction that considered the vote maintaining responsibility in the hands of FUNASA to be non-binding.

While taking every opportunity to brandish this vote as evidence of the legitimacy of its continued role, FUNASA also gave its own signals that the deliberations of the CNSI could be considered non-binding. In fact, the only *Conferência* decision which senior FUNASA managers seemed to believe was binding was the one which left control of the Subsystem in their hands; they

systematically avoided taking any concrete steps to implement a motion regarded as equally important by the *Movimento Indígena*: the call for DSEIs to be "transformed into management units with political, financial and technical-administrative autonomy" (FUNASA 2007: 73). When I came to work on the VIGISUS consultancy two years later, participants in our workshops identified lack of progress on administrative decentralisation and DSEI autonomy as one of the most important problems that still needed to be addressed (Consórcio IDS-SSL-Cebrap 2009: 213).

The *IV Conferência Nacional de Saúde Indígena* did not, therefore, achieve the binding inclusion – or capture – of indigenous representatives which both FUNASA and the CNS had sought for different ends and in different ways. Nevertheless, it did succeed in representing at least a weak version of "democracy as inclusion" – one that, however flawed, undoubtedly contributed both to strengthening many delegates' sense of citizenship and to helping them acquire useful experience of political engagement with the "white state". In the next section, I will examine a case in which indigenous representatives appeared to shift the rules of that engagement, moving from "democracy as inclusion" to "democracy as transformation".

9.2 Democracy as Transformation? The National *Controle Social* Seminar

Auditorium of the Phenícia Bittar Hotel, Brasília, 27 November 2008. *As the speeches go on, the discontented murmuring at the back of the room becomes more audible. It seems that many of the indigenous participants feel that what they are hearing is very different from what they were expecting to hear at this National Health Council event – officially entitled "The National Seminar on Management and* Controle Social *Challenges in Indigenous Health", but billed by those promoting it as a decisive moment for efforts to bring to an end the longstanding impasse over FUNASA's much-criticised stewardship of the Indigenous Health Subsystem. Yesterday, on the eve of this event, two days of tense discussions culminated in an unprecedented agreement between pro- and anti-FUNASA indigenous leaders and the issuing of an open letter, jointly signed by representatives of all four of Brazil's macro-regional* Movimento Indígena *organisations, that called for responsibility for management of the Subsystem to be taken away from FUNASA. This was an unexpected outcome for many observers – not least for FUNASA's senior managers, who had paid to bring most of the participants to Brasília for the National Seminar in the expectation that they would defend the institution's performance in managing the Subsystem. Now, however, the euphoria generated by the* Movimento Indígena*'s new-found unity is fading fast, as the National Seminar is looking like becoming much less of a decisive moment than participants were led to expect.*

The Minister of Health was expected to make a big policy announcement at the opening of the event, but he has not turned up. The representative he has sent in his place (the National Secretary for Strategic and Participatory Management, who is in charge of liaising with the controle social *institutions of the SUS) has plenty of warm words and reassurances to offer – the Ministry wants to create a Special Secretariat for Indigenous Health, recognises the importance of indigenous participation, doesn't want to hand control over to the municipalities – but no concrete proposals for immediate action. In particular, there is no clear response to the open letter's demand for FUNASA's involvement in the Subsystem to be ended.*

Now Issô Truká, the indigenous leader from the Northeast who chairs the National Health Council's indigenous health committee, is making an impassioned speech about the Ministry's bad faith and lack of understanding of "our different realities" and the huge challenges facing the Subsystem. But the urgency of his rhetoric seems to be contradicted by what he is actually proposing. There are rumours that the Minister is poised to issue a decree transferring FUNASA's indigenous health care responsibilities to another branch of the Ministry (in other words, doing what the open letter requested), but Issô says that this decree would be "yet another act of genocide against our peoples", because it risked bringing disruption to the health services provided by FUNASA. Instead, Issô is arguing for time to "consult the base*" before any hasty decisions are taken and that then those decisions should be formalised through a bill properly discussed in Congress, not a ministerial decree. One of his arguments is that the work of the IDS-SSL-Cebrap consultancy team is still ongoing, and that our technical recommendations must be absorbed and discussed before any political decisions*

are taken. People who recognise me from the regional workshops we have been running in different parts of Brazil start looking pointedly in my direction, and I sink into my seat and try to look inconspicuous: I am here as an invited observer, not a speaker, and have no wish to be put on the spot by Issô.

Other senior Movimento Indígena *figures follow Issô in calling for calm, for hasty decisions to be avoided, for the* base *to be consulted. The discontented murmuring grows. Weren't these very leaders the ones who signed the public letter in the name of the regional organisations they are supposed to be representing here? What has happened overnight to make them change their minds, or at least their tone? There are rumours that Issô has been staying at the house of a FUNASA manager here in Brasília. Has he been offered some kind of material inducement to argue for a delay in plans to take responsibility for the Subsystem away from FUNASA? And why is the Ministry not seizing the opportunity to bring a swift end to its confrontation with FUNASA? Is it true that the PMDB Congressmen who nominated FUNASA's senior managers have threatened to vote against the government unless the Minister stops criticising their protégés, and if so does this mean that the President himself is backing away from the promises he made to the* Movimento Indígena *after the last wave of protests against FUNASA?*

As the discussion is opened up to questions from the floor, the speakers find themselves facing a barrage of challenges on what they are actually advocating. The Xavante representatives are particularly vocal: one leader says "people here have been changing their discourse, moving away from what we agreed – and as a Xavante warrior I cannot accept that", another adds "we don't want any more delays while our people are dying... if the process isn't speeded up our warriors will close down the regional FUNASA office", while a third threatens "to take up the borduna *[war club] again". The Xingu delegation also speak up: the Kayabi chief Mairawë, a legendary figure in the Xingu since the days of the Villas Bôas brothers, says that the speakers "seem to know a lot about white people's laws, so much that they pay more attention to them than to what we have discussed among ourselves, the lessons our* lideranças *have passed on". The younger Xingu leader Marcello Kamayurá challenges Issô and his fellow temporizing speakers Jecinaldo Saterê Mawê (representative of the pan-Amazonian* Movimento Indígena *organisation COIAB) and William Domingues Xacriabá (representative of the National Forum of CONDISI Chairs) to "stop sitting on the fence wondering which side to jump down, and remember that you will have to answer to the people who are here from the* base, our lideranças*".*

In their responses, Issô and Jecinaldo seem to be backing away from their original positions, insisting that they seek only to represent the wishes of the lideranças *in the best possible way. Jecinaldo – whose organisation has clashed with FUNASA in the past, but who recently has been taking a more conciliatory stance – is more forthright than Issô about the need for FUNASA to be replaced, but he qualifies this by repeating calls for more in-depth discussion, and for a phased process rather than a sudden switch. Angry muttering continues from participants who are unhappy at this failure to give an unequivocal endorsement for the "FUNASA out" position they felt had already been agreed.*

William is the last of the speakers to respond, and the only one to do so unequivocally: "We have heard all we need to hear – if we aren't representatives

of our peoples, then what are we doing here? FUNASA shouldn't even be part of these discussions, because it has been sickening for a long time, and right here and right now we are declaring its death". There are cheers, and a sudden surge of people from the back of the auditorium: the Xingu delegation, some two dozen men, women and children in full war-paint and feathers. They occupy the space in front of the speakers, who are looking dazed by the suddenness of this move, and begin to stamp and chant. The indigenous representative sitting next to me turns round with a broad grin and says "it's a funeral dance – they're dancing to celebrate the death of FUNASA!".

With indigenous and white participants alike cheering the dance, and photographers jostling for the best view of the exotically-adorned dancers, the Seminar was adjourned. When the proceedings were reconvened later that day, the discussion focused entirely on how to organise the transition of responsibility for the Subsystem from FUNASA to the Ministry, with no more talk of consulting the *base* before a decision was taken. This brilliant *coup de theâtre* by the Xingu delegation demonstrates that the skilful representation of indigenous authenticity and unruliness can still lead to political victories, neutralising the paralysis that the suffocating process of "inclusion via FUNASA" has often imposed on the *Movimento Indígena*.

In the confrontation between pro-FUNASA and anti-FUNASA factions, the politics of authenticity and legitimacy played a central role. Issô is a very skilful political operator and a powerful speaker, but he comes from a small Northeastern group who have been in permanent contact with non-indigenous society for three centuries and no longer speak their indigenous language. Jecinaldo is an important Amazonian leader, but he represents a particular *Movimento Indígena* politics where mandates come from the elected leaders of formally-structured organisations, not from old chiefs in feather headdresses. William is a more complex figure: his descent is from the Xacriabá people of Minas Gerais in Southeastern Brazil, who have experienced a protracted and devastating "acculturation" process similar to that suffered by the peoples of the Northeast, and he lived in Brasília and worked in a variety of urban jobs before taking up the role that led to his involvement with the Forum – but that role involves working for the CONDISI in an Amazonian DSEI where most of the groups have been in permanent contact with non-indigenous society for only a

few decades. It may have been this experience of dealing with groups where political decisions are framed by ritual displays of warrior spirit and chiefly *gravitas* that made William respond more effectively than either Issô or Jecinaldo to the stern challenges coming from the Xavante and Xingu delegations. In the event, it was his response that re-forged the united political position that was falling apart in the face of participants' increasingly angry responses to the apparent backsliding of the *Movimento Indígena*'s national representatives – backsliding to which he himself had contributed, in his role as representative of a FUNASA-sponsored institution for indigenous health service user participation.

9.2.1 Tactics against transformation

So, in this incident a policy seminar convened by the National Health Council saw appeals to traditional values bring representatives who had "gone over to the white state" back into the fold, and the *Movimento Indígena* re-forge the coalition that had won the recognition of indigenous rights in the struggles over the 1988 Constitution: was this, then, a demonstration that indigenous political action could indeed fulfil the transformative potential of Brazilian new democratic spaces? The answer, of course, is yes and no.

Yes, because after the Xingu delegation's "funeral dance" neither FUNASA nor the Ministry could any longer pretend that there was no mandate for change. By performing authenticity so convincingly, the Xavante and the Xingu delegation blew away the arguments that change would only be legitimate if it was endorsed by a lengthy process of local-to-national consultation – in effect, a repetition of the discredited *Conferência* process from 2006. By going over to the position endorsed by traditional "village-based" leaders like Mairawë, urbanised "indigenous politicians" like William gave their own demonstration of unruliness, serving notice to FUNASA that whatever inducements it offered it could never be certain that it had sewn up their support, as more primordial loyalties could always be invoked. Between them, the Xingu delegation, the Xavantes and William signalled that the *Movimento Indígena* reserved the right to withdraw its consent from attempts to bribe or discipline it into conformity with the formal

practices of democracy-as-inclusion, as symbolised by the *Conferências* and *Conselhos* – but by making this statement *inside* a "new democratic space", they effectively reaffirmed the potential of Brazilian democracy to accommodate transformatory political action.

No, because the victory was a fleeting one, and by the end of the National Seminar the following day FUNASA had made up much of the ground it lost in that dramatic opening session. It achieved this by regrouping its wavering indigenous supporters –Issô at their head – and mobilising them to ensure that the detailed proposals for the Transition Working Party entrusted with overseeing the handover were as favourable to FUNASA as possible. Sure enough, the list of Transition Working Party members that emerged from the group discussions of the Seminar's second day was packed with FUNASA staff and FUNASA-friendly indigenous representatives, and senior FUNASA managers were soon broadcasting the possibility that their institution might after all emerge from the "transition" confirmed as lead agency for the Indigenous Health Subsystem. Indeed, at the time of writing six months on, the Transition Working Party has still not concluded its work and some observers doubt whether FUNASA will effectively be ousted from the Subsystem despite the firm undertaking given at the National Seminar that the situation would be resolved by the 2009 "Indigenous April", a traditional period of indigenous mobilisation and protest in Brasília around the official national commemoration of the "Day of the Indian" on April 19, which has now come and gone without any definitive policy announcements (Conselho Nacional de Saúde 2008b: 2).

In this second phase of the National Seminar, the Xingu delegates lacked the command of committee-room procedure and politics that was needed to out-manoeuvre old hands like Issô. Most of them had in any case headed off at the end of the first day, after celebrating their symbolic victory. By the end of the Seminar there was a sense of business as usual reasserting itself, with the Xingu delegation's dramatic intervention appearing not as a decisive shift but as an aberration – which in a sense it was, because it turned out that they had gatecrashed the event, since Issô and his FUNASA-friendly co-organisers had not included them in the invitation list. In fact, they had only been able to participate

in the Seminar and the two days of *Movimento Indígena* meetings which preceded it because they had come to Brasília for a completely different meeting, but had been alerted by Douglas Rodrigues and his colleagues from the São Paulo Medical School to FUNASA's mobilisation of other *lideranças*, and decided to stay on in the capital to have their say.

By doing so, however, they had served notice on FUNASA and the Ministry that indigenous acquiescence could not be taken for granted, whatever formula was finally reached for the management of the Indigenous Health Subsystem. Just as FUNASA had been forced to learn to deal with armed occupations of its offices and the kidnapping of its health teams whenever the *lideranças* felt that their rights were being trampled on, the Ministry could expect similar treatment if it failed to engage respectfully or perform satisfactorily. This may well have been a factor in the lack of conviction displayed by the Minister's emissary at the Seminar: while the *sanitaristas* in the Ministry had no reservations about the need to humble FUNASA – regarded both as an affront to SUS orthodoxy and a stain on the ethical reputation of the health system as a whole – they were by no means sure that they wanted to take on responsibility for the dangerously heterodox Subsystem, with its non-municipalised organisational principles, non-standard working practices and unruly clientele.

9.2.2 Non-bindingness

This lack of conviction, combined with FUNASA's refusal to admit defeat, reinforced the pervasive impression of *non-bindingness* that had already been apparent at the *Conferência* and (as discussed below) is such a marked feature of the indigenous health *Conselhos*. The National Seminar was not strictly speaking *deliberativo*, in the SUS *controle social* sense of being empowered to make binding decisions. But it was promoted by an institution, the National Health Council, whose formal decisions certainly were legally binding, and it was billed in advance (that is, when its FUNASA-friendly organisers thought that it would return a favourable verdict) as a moment for settling the long-running debate over FUNASA's mandate to continue running the Indigenous Health Subsystem. It was

thus not only the indigenous *lideranças* who were being "unruly" in Gore's sense of refusing to abide by decisions that were *legal* but not *legitimate* (1993); just as FUNASA had done with the CNSI vote on guaranteeing DSEI autonomy, the institutions of the "white state" were also reserving the right to de-legitimate decisions that they found politically inconvenient.

As I discussed in Chapter 2, there is an extensive literature on the failure of SUS *controle social* institutions to guarantee accountability and policy responsiveness, but this is rendered somewhat less problematic by the fact that the SUS epistemic community can use those institutions to reproduce broadly shared representations of health and maintain consensus on the general direction of policy. In the case of the Indigenous Health Subsystem, the very different representations of health analysed in Chapter 6 and the mutual incomprehension and mistrust that are deeply rooted in the history of encounters between indigenous peoples and the "white state" mean that the failure to achieve bindingness in spaces that are supposedly *deliberativos* has much more serious implications.

The National Seminar also failed to fulfil its transformatory democratic potential because it was not "deliberative" in the classic sense employed by Jürgen Habermas and his followers in the writings discussed in Chapter 1. The temporizing *Movimento Indígena* leaders who were symbolically routed by the Xavante's representation of warrior anger and the Xingu delegation's representation of dignified traditional authenticity may indeed have been on FUNASA's payroll. But this does not mean that they were actually *wrong* to argue for a calmer, more carefully-reasoned transition process than the "FUNASA out" faction were proposing. As I know from the experience of working on the VIGISUS consultancy, the challenges facing the Indigenous Health Subsystem are technically, managerially, politically and socially complex. While the dead hand of FUNASA has made the situation a lot worse, simply wishing it away will not bring an instant end to all the Subsystem's problems. The *lideranças* who led the "FUNASA out" revolt were making a profoundly democratic gesture by refusing to legitimate a stitch-up that disregarded the anger and frustration of their *base*. Yet they were also acting anti-democratically by closing down reasoned debate until

their immediate demands were met. I would argue that this reinforces the proposition, arising from my discussion of theories of "deliberative" and "discursive" democracy in Chapter 1, that deliberation is ineffective unless it is solidly underpinned by rules and practices of representation that can claim broad legitimacy.

Thus, Brazilian democracy as represented in the National Seminar retains its transformative potential at the symbolic level, but shows no sign of developing the inclusionary deliberative practices that would enable it to become transformative in its substance – that is, in its scope for influencing both the content of policy and its implementation to the point where it makes a better job of reconciling in practice the divergent logics of the rights to universal health service provision and to recognition of social difference that are enshrined in Brazil's Constitution.

This does not mean, however, that the new democratic spaces of the Brazilian Indigenous Health Subsystem are failing to serve as catalysts for change – just that this change is emerging though a messier process of confrontation and bargaining than the deliberative-democratic ideal would lead us to expect. In the next section, I examine this process through the case of a Local Indigenous Heath Council in one remote corner of the Brazilian Amazon.

9.3 Democracy as Bargaining? The Local Indigenous Health Council

***DSEI Alto Juruá** Pólo-Base**, Marechal Thaumaturgo, Acre, 19 July 2007**. Some two dozen indigenous people fill the kitchen, which as the only room of any size in the* pólo-base *has been pressed into service as an impromptu meeting hall now that the evening meal has been cleared away. Most are in their twenties or thirties, and three-quarters are men. The majority are wearing shorts and T-shirts, though two of the Ashaninka are wearing their traditional ankle-length* kitarentsi *robes and three young Kaxinawá AIS have painted their faces with black lines of genipap juice, forming their people's characteristic geometrical designs. Sitting on benches pushed back against the walls or squatting on the floor of sawn planks, they form a rough circle whose focal point is Davi Waine Ashaninka, Chair of the Local Indigenous Health Council. I am the only non-indigenous person present, and I am seated slightly self-consciously next to Davi, having been introduced by him as a friend and SSL member who has been studying ways of strengthening* controle social. *Now that I have finished delivering the brief explanation of the rights and responsibilities of the Indigenous Health Councils with which Davi asked me to begin the meeting, I am trying to make myself as inconspicuous as possible.*

Davi has launched into a lengthy description of his work on behalf of the Conselho, *which has centred on a long-running battle with the municipal authorities over the use of the federal funds transferred to them for provision of primary care services to the municipality's indigenous inhabitants. As he describes his tireless efforts to get the mayor to account for the money he has already spent, some of his audience listen intently, while others appear distracted or murmur to their neighbours. I get the impression that most of them have heard it all before; Davi has made the struggle for accountability the keynote of his work with the* Conselho, *and the main plank in his campaign for re-election as Council Chair, which has seen him accompanying the* pólo-base *health team to every village in the municipality over the last couple of months.*

Davi has called this meeting to take advantage of the presence in town of several lideranças *and most of the municipality's indigenous village health workers (AIS), summoned to attend a two-day refresher course delivered by a team of young trainee nurses from a private evangelical university in Southern Brazil, whose trip has been paid for by a federal government volunteering programme. The ostensible reason for the meeting is to discuss strategies for action in the face of the mayor's continued failure to provide full transparency on the accounts, but Davi has neither mooted any specific proposals nor asked for suggestions from the floor; his main purpose seems to be to reassure his constituency that he is representing their interests assiduously and to burnish his credentials as a "warrior" for their rights.*

Davi's speech tails off, as if he is unsure how or even whether to open a debate. A brief silence follows, which is suddenly broken by Chico Apolima-Arara, leader of a group of people of indigenous descent who are claiming rights to land along the River Amônia, in a region between the Ashaninka territory and the town of Marechal Thaumaturgo that is currently gazetted as part of the seringueiros' *Upper Juruá Extractive Reserve. "We've had enough of this mayor's lies", he says,*

"and now it is time to show that we are not just playing – I say we should occupy the new health post". This *"new health post"* is a fine recently-constructed building where the municipal health secretary has established his office; it is the focus of much indigenous resentment because it is rumoured that the money to build it was diverted from federal indigenous health transfers, but the DSEI health team have not been allowed to move there from the pólo-base, *which is a leaky wooden shack perching on stilts over a rubbish-strewn and mosquito-infested gully. As Chico finishes, a chorus of angry agreement is led by Valdo, one of the Kaxinawá AIS, causing Davi to grow visibly more tense – Valdo and his fellow Kaxinawá AIS Ruinete are longstanding political rivals and critics of Davi's leadership of the* Conselho. *Soon, several* lideranças *have offered to bring warriors and storm the municipal health secretary's office.*

Davi calls for calm, and then launches into an impassioned defence of "rule-bound" rather than "unruly" political action. He points out that he has already persuaded the Acre branch of the Attorney-General's Office to open an investigation into the municipality's use of the federal transfers, and that if the mayor is found to have corruptly misused the funds he could be removed from office and jailed. He reminds his audience that the AIS have at last started to receive salaries, and that several new pieces of equipment have in fact been purchased with funds released by the municipality after previous Conselho *resolutions and letters to the mayor. Above all, he argues that displays of warrior anger are unsophisticated and backward-looking, and that other communities are now recognising this; he has just come from Cruzeiro do Sul, where he persuaded an angry group of Jaminawa from another municipality to abandon their attempt to close down the DSEI headquarters in protest at its "abandonment" of them, and instead agree a revised activity schedule with the FUNASA manager that provided for more frequent health team visits.*

"You all know me, and know that I used to think just like you do", he continues, "but now I have realised that what is needed is to be político, *to take action that promotes* articulação, *and not just* brabeza". *"Político", as an adjective rather than the substantive meaning "politician", is applied approvingly to leaders who are smart political operators. "Articulação" is the idea of achieving connectedness via networking and collaboration. "Brabeza" is a regional term which means "anger" or "fierceness", but is unmistakeably associated with the old* seringueiro *term for indigenous people who resisted contact: "índios brabos" or "wild indians". Davi is telling his audience that they have a choice between acting as modern, sophisticated democratic citizens or as ignorant, backward "wild indians".*

Davi's argument seems to have given people pause for thought. There are grumbles of dissent from the Kaxinawá, but Chico Apolima-Arara decides the issue by launching into a paean of praise for Davi's courage and tenacity in harrying the mayor, and goes on to declare his support for Davi's re-election as chair of the Local Indigenous Health Council. He concludes, however, by serving notice that a resort to unruliness remains on the cards, and should be part of Davi's strategy in bargaining with the mayor and health secretary: "You tell them that our communities are angry, and that if things don't change they will start to see buildings being occupied".

This section examines *Movimento Indígena*-state engagements around health services in the Municipality of Marechal Thaumaturgo, which is described in Appendix A1. Before the collapse of UNI led to the "municipalisation" of indigenous health service delivery in the DSEI Alto Juruá, the municipality had not functioned as a unit of indigenous political organisation. The *Movimento Indígena* was organised at the indigenous territory level and that of the sub-region, rather than by municipality. Among Marechal Thaumaturgo's indigenous groups, the River Breu Kaxinawá and the River Amônia Ashaninka had relatively well-established community associations which obtained support for some initiatives in the "Projects Market", with the River Amônia Ashaninka, as the municipality's most numerous and best-networked group, securing the strongest flow of resources from state-level, federal and international sources through their organisation APIWTXA. The sub-regional *Movimento Indígena* organisation OPIRJ (*Organização dos Povos Indígenas do Rio Juruá*), based in Cruzeiro do Sul, claimed to represent the communities of the region, and invited their *lideranças* to participate in its *Assembléias*, which they did with varying degrees of assiduousness. The River Amônia Ashaninka had played an important part in establishing OPIRJ after a predecessor organisation foundered, and Francisco Pianko Ashaninka had gone from leading APIWTXA to head OPIRJ, before being invited to join Jorge Viana's administration as Special Secretary for Indigenous People.

Apart from the highly-visible River Amônia Ashaninka, the indigenous peoples of the region were for many years largely relegated to the role of extras in a "Forest Peoples' Alliance" led by powerful *seringueiro* social movement organisations, who had a major power base in the Upper Juruá Extractive Reserve (REAJ) which covers two-thirds of the municipality and most of its non-indigenous rural population. In the last decade, however, the *seringueiro* organisation responsible for running the Reserve, ASAREAJ, has suffered a dramatic loss of prestige after political divisions and corruption allegations left its leadership failing to secure success in the "Projects Market" – with the result that the mayor and *vereadores* (elected municipal councillors) have consolidated their position as the principal power-brokers in the municipality, having seen off the challenge from

social movement organisations who once threatened to displace them (Shankland 1998). At the time of my visit to Marechal Thaumaturgo in 2007, the wily mayor Itamar de Sá was leading his third municipal administration, having opportunistically switched parties from the PMDB to the PT as Jorge Viana's "Government of the Forest" established its political hegemony in Acre.

9.3.1 Struggling for accountability

The principal bone of contention in the struggles with the mayor which Davi and his fellow *lideranças* were debating that evening in July 2007 was the monthly transfer of funds allocated by the Health Care Secretariat (*Secretaria de Atenção à Saúde*, SAS) of the Ministry of Health for the provision of primary care services to the indigenous communities of the municipality. This "SAS money" had grown in significance as the federal government struggled to ensure some service delivery via the municipalities after the crisis in FUNASA's outsourced service provision model in 2004-5. In 2005 Marechal Thaumaturgo was receiving nearly 50,000 *reais* per month (some US$20,000 at current prices), and by 2007 this had risen to almost 70,000 *reais* per month (over US$35,000 at current prices). Since this money was deposited by SAS directly into the Municipal Health Fund along with all the other transfers from the Ministry of Health, it was tempting for an impoverished municipality that was trying to provide primary care to a population of 8,500 people scattered over an area of almost 3,000 square miles to put it to use elsewhere, rather than reserving it exclusively for indigenous health services. As the "SAS money" for indigenous health services amounted to a per capita allocation over three times that provided by the Ministry for the municipality's population as a whole, the mayor would have been under some political pressure to share the cash around in any case – even if he had scrupulously avoided the failings of which Davi accused him, which included diverting indigenous health funds into questionable building projects and using them to bankroll party workers who had never set foot in a health post.

Davi's accusations were formally recorded in a Federal Police deposition as part of his submission to the Attorney-General's Office in September 2006. In

addition to the accusations about "ghost functionaries" on the municipal payroll, the police deposition-taker recorded Davi as stating

> that several items of equipment acquired with [SAS funds] are used neither by the indigenous population nor for their benefit, including for example the dentistry equipment which was acquired but has never been used by the indigenous population; that Senhor Juliano, the dentist responsible for providing services to the indigenous population, told him that the equipment has been withheld from use with the indigenous population by order of the Mayor and the Municipal Health Secretary of Marechal Thaumaturgo; that of the boats and canoes which are on the list of items acquired [with SAS funds] only one is in use for work with the indigenous population, and he has never even seen the others; that the television set and air-conditioning unit that were acquired by the indigenous health team to assist in their work with indigenous people are currently being used by the Municipal Health Secretary at her home address... (Departamento de Polícia Federal 2006: 1)

Davi's struggle to hold the mayor to account and ensure transparency provided an almost textbook case of the type of *controle social* which the visionaries of the *Movimento Sanitarista* had imagined when they created the SUS system of *Conselhos*. Indeed, although it began as a struggle for the redistribution of money, by the time I visited Marechal Thaumaturgo in July 2007 Davi's campaign was squarely centred on attempting to uphold the *Conselho*'s right to information, which he was pursuing with an intensity resembling that famously displayed by the Rajasthan-based MKSS movement in India – which, as Rob Jenkins and Anne-Marie Goetz have pointed out, bucked the general trend among rights advocates whereby "the right to information... is invoked dutifully rather than passionately" (1999: 608).

The focus had shifted onto access to information and away from the redistribution of the misappropriated "SAS money" because Davi had been at least partially successful in achieving the latter in the previous phase of his campaign. This success had not been achieved easily. He was elected to the *Conselho* when it was established in 2005; apparently his election was *in absentia*, as Davi told me that he had been away on a visit to another community when the meeting was held and only discovered his new role when he returned to Marechal Thaumaturgo some time later. As I discussed in Chapter 7, however, he seems to have been groomed for the role by the Pianko "royal family" of the

River Amônia Ashaninka, and undoubtedly owed his surprise election to the political influence of APIWTXA and its former leader Francisco Pianko, who by now had assumed his new role as Special Secretary for Indigenous Peoples in the Acre State Government.

Despite this heavyweight backing, Davi's initial efforts to persuade the mayor to put the "SAS money" to its originally intended use were met first with stonewalling and then with threats. After describing his anger and frustration to the SSL team and other *Movimento Indígena* participants in the Morada Nova workshop in August 2006 (as described in Chapter 8), Davi returned to Marechal Thaumaturgo and set about implementing a two-pronged strategy: mobilising the *lideranças* of the municipality's indigenous communities to demand change from below, and summoning the FUNASA manager and the DSEI Indigenous Health Council (CONDISI) chair from Cruzeiro do Sul to hear his allegations at a special meeting of the Marechal Thaumaturgo *Conselho*. Faced with this "sandwich strategy" of "state-society convergence" (Fox 1996), the mayor and his Health Secretary had little choice but to agree to a formal undertaking with FUNASA that established how the "SAS money" would be used. This included a commitment to upgrade the infrastructure of the *pólo-base* and to guarantee the payment of salaries to the AIS, some of whom had trained with the CPI-AC and Health Unlimited / SSL / UNI projects (described in Appendix A1) long before the DSEI was even established, and who by mid-2006 had been working without guaranteed remuneration for over a decade. The agreement also included an undertaking to provide regular accounts to FUNASA and to the *Conselho*.

9.3.2 From accountability to bargaining

When Davi went to make his Federal Police deposition a month after this meeting, he was not protesting at the mayor's failure to deliver on his financial promises, which had begun to come through[58], but at the refusal both to put right past injustices (from the inclusion of "ghost functionaries" to the misappropriation

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[58] In fact, Davi's deposition included a statement that "since the signing of the formal undertaking... relations between the indians and the municipal functionaries have improved substantially" (Departamento de Polícia Federal 2006: 2).

of the *pólo-base* TV set) and to honour the commitment to ensure transparency by providing the *Conselho* with full access to the municipality's health accounts. Davi was never fully successful in either cause, but he did win a series of concessions and gradually moved the *Conselho* closer to a position where its pursuit of transparency and rights to information was an accepted part of the municipality's political landscape, and the focus of bargaining rather than of outright rejection by the mayor as it had been initially.

As I noted in Chapter 5, Local Indigenous Health Councils like the one in Marechal Thaumaturgo are not legally endowed with *deliberativo* status, which means that their decisions are advisory and not binding. On reading through all the documentation (including minutes of *Conselho* meetings, the agreement between FUNASA and the municipality and the documentation of Davi's deposition for the Attorney-General's Office), it is striking that this is never mentioned. Even Mayor Itamar de Sá seemed to accept both the legitimacy and the legality of the *Conselho*'s actions at the same time as he made every effort to resist implementing them: Davi told me that the mayor had said to him (either with sarcasm or with grudging respect) that the Local Indigenous Health Council was the only one of the municipality's array of *Conselhos* that was actually functioning and attempting to fulfil its role of holding him to account.

Ironically enough, therefore, the decisions of this advisory *Conselho* actually turned out to be more binding than those of the *controle social* institutions that were statutorily endowed with *deliberativo* status. This is not to say that in Marechal Thaumaturgo accountability relations were established clearly and unequivocally – Davi complained to me in a telephone conversation a few months after the August 2006 agreement that whenever he tried to resolve an infrastructure problem the buck would be passed: "the municipality say the responsibility lies with FUNASA and FUNASA say it lies with the municipality". There were also accountability complications with his own position as a salaried employee of the indigenous health service who also sought to uphold the rights of the users of that service (as described in Chapter 7). Nevertheless, he was able to secure a remarkable degree of clarity and bindingness by transforming a fairly low-status advisory *Conselho* into what Vera Schattan Coelho, writing about the

challenges of *controle social* in the SUS, calls a "dynamic political institution" (Coelho 2004: 35).

This transformation came about because the *lideranças* of the municipality's indigenous communities chose to take the Local Indigenous Health Council seriously as a site for pursuing their rights claims and engaging with the "white state", which meant that even those who were rivals and/or critics of Davi regularly mobilised to ensure a strong turnout at *Conselho* meetings. This, in turn, owed much to Davi's own representative practice, which as I described in Chapter 7 included frequent travel to share information and solicit opinions among Marechal Thaumaturgo's different indigenous territories, rather than following the example of other *Conselho* chairs and treating as his *base* only his home community of the River Amônia Ashaninka.

Despite this effort to display even-handedness, Davi's success undoubtedly owed a great deal to the fact that he was politically sponsored by the "royal family" of his home community – one of whose members, Francisco, he was able to call in at critical points to signal to the mayor that the State Governor was taking an interest in the case of Marechal Thaumaturgo's indigenous health funds. This, in turn, gave him access to national and even global networks: Davi was able to get Amazon National Radio in Brasília to run a story on his struggle for accountability because of the "celebrity factor" of the River Amônia Ashaninka, and was invited by Francisco and Benki to join the group escorting Danielle Mitterand on her visit to the municipality. This high level of visibility served to protect him from the wrath of the mayor, who in Davi's words "wasn't finding me very handsome" after the opening of the case by the Attorney-General's Office. Being too well-known to be easily "disappeared" is a valuable factor in a region where hired gunmen still find employment in intimidating or permanently silencing those who challenge powerful people too vigorously.

By the time of my visit, however, the mayor's anger seemed to have died down, the recalcitrant TV-appropriating Municipal Health Secretary had been replaced, and Davi himself had toned down his rhetoric of denunciation – to the point where he found himself playing rabble-rouser-turned-peace-maker at the meeting which I described at the start of this section. This change of tone was

attributed by Davi's critics to his having been "bought" by the mayor and/or FUNASA – but even if he had done some kind of deal (possibly related to the search for political support for his cherished aim of becoming Chair of the Alto Juruá CONDISI), his shifting strategy certainly had its own political logic. He and I had several long conversations in which he passionately argued for the need for indigenous representatives to move beyond *brabeza* to *articulação*, and he cited as evidence for the wisdom of this approach his own success in securing allies who ranged from the Attorney-General's Office to my SSL colleagues and I.

After the initial victory in forcing the mayor to spend some of the diverted "SAS money" on high-priority issues identified by the *Conselho*, and the escalation when the mayor's backtracking on transparency led Davi to lodge a formal denunciation with the Attorney-General's Office, both sides seemed to settle into a new pattern of accommodation. Davi regularly telephoned me with updates, and while he was often frustrated with yet another delay in delivering accounts or fulfilling a promise to buy long-overdue equipment, there was no more talk of threats from the mayor or of indigenous mobilisation to occupy municipal buildings. One significant factor may have been the advent of the campaigning season for the 2008 municipal elections; Davi himself claims to have kept aloof from the campaign, but he was present at meetings where the *Movimento Indígena* agreed to support the same candidate as the mayor (who could not stand himself, having served his maximum term length). If an election-time deal was struck, however, it was part of a wider pattern of mutual recognition even against a background of continuing disagreements: the mayor recognised the legitimacy of the *Conselho* while continuing to try to evade its demands for full transparency, and the *Conselho* accepted the validity of the path of "rule-bound participation" advocated by Davi while reserving the right to resort to unruly direct action if the mayor reneged on too many promises.

Above all, the deal held because the indigenous health service was working – not perfectly by any means, but much better than before Davi initiated the *Conselho*'s confrontation with the mayor, and better too than when the *Movimento Indígena* (in the shape of UNI) was responsible for managing the DSEI. There were still occasional complaints that poorly-trained or insensitive

professionals were failing to respect indigenous culture, the AIS remained frustrated that FUNASA was failing to deliver the refresher training that was supposed to go with the salaries that they were finally being paid, and logistical problems still cropped up as a result of resources being siphoned off by the municipality, albeit less blatantly than before. Overall, though, there was a sense that these were problems that the *Conselho* could and should deal with, by continuing to put pressure on the mayor and Municipal Health Secretary locally, and by linking up with other *Conselhos* through OPIRJ to press for change in FUNASA's management of the DSEI as a whole. In Marechal Thaumaturgo, the "democratisation" of indigenous health services had come to mean not symbolic gestures of inclusion or isolated attempts at transformative political action, but a routine of battling, manoeuvring and bargaining between actors who now knew each other well, and who recognised one another's legitimacy as players in the same game – in other words, good, old-fashioned interest-group pluralism.

In the final chapter of this thesis I will explore what we can learn about the representation of democracy in the new democratic spaces of the indigenous Health Subsystem from the way that actors with a history of violent mutual hostility moved towards routinised bargaining under the aegis of the Marechal Thaumaturgo Local Indigenous Health Council, setting this experience alongside those of the CNSI and the National Seminar. I will then link my findings from this section on "representing democracy" with those of the previous sections on "representing people" and "representing health", to offer some concluding reflections on the role of representation in opening up paths to the renewal of contemporary democracy.

Chapter 10. No Democracy without Representation

10.1 Representation, bindingness and democracy

In this concluding chapter, I will reflect on the emergence of bindingness in the new democratic spaces of the Indigenous Health Subsystem that are discussed in Chapter 9 and reflect on its implications for our understanding of Brazil's hybrid democracy as a whole, in the light of the trajectories of movement-state engagement and the deep social and political inequalities that I discussed in Chapters 2 and 3. In reflecting on the wider implications of the Brazilian experience I will return to the work of some of the democratic theorists discussed in Chapter 1, drawing in particular on the account that John Dryzek (2005) gives of the challenges for "deliberative democracy in divided societies". Based on the conceptual framework outlined in Chapter 1, I will argue in support of my provocative claim in the title of this chapter that there can be "no democracy without representation", before reviewing my findings on the representation of issues, objects, people and perspectives from chapters 4, 5, 6, 7 and 8. Finally, I will ask what these findings tell us about the potential for transforming representation both for marginalised minorities and for other groups, thereby contributing to broader democratic renewal in and beyond the current crisis of "representative democracy".

I argued in Chapter 1 that *bindingness* is a key indicator of the democratic legitimacy of representation processes. One of my strongest findings from Chapter 9 was that no one type of space could be guaranteed to deliver it – and that where it did emerge this was often in new democratic spaces (such as Marechal Thaumaturgo Local Indigenous Health Council) whose status was not *deliberativo* (i.e. legally empowered to make binding decisions) at all. However, it could be argued that the findings presented are not "representative" because none of the three "new democratic spaces" profiled in the chapter actually represents the classic *deliberativo* institution for which the Brazilian health system is becoming known: the health *Conselho* operating at the level of decentralised executive management for that part of the system (i.e. the municipal level in the SUS and

the DSEI level in the Indigenous Health Subsystem). As I explained in Chapter 5, it is the DSEI-level Indigenous Health Councils (CONDISIs) that have *deliberativo* status in the Subsystem.

When I first planned my research in the Amazon, my intention was indeed to focus on CONDISIs and I did collect a good deal of data on them, including dozens of interviews with *conselheiros*, observation notes from the Juruá and the Rio Negro and hundreds of pages of photocopied meeting minutes. However, it soon became abundantly clear not only from my DSEI-level research but also from the debates at the CNSI, from my observation of discussions at meetings of the National Forum of CONDISI Chairs and from the subsequent analysis that I carried out with the VIGISUS consultancy team (Consórcio IDS-SSL-Cebrap 2009) that non-bindingness was the rule rather than the exception for these spaces.

A recurrent issue was that CONDISIs were emptied of their bindingness by representatives on both sides of the service user/service manager divide, through the practice of claiming that real decision-making power lay elsewhere. *Movimento Indígena* representatives frequently complained that their FUNASA opposite numbers would agree to something only to qualify this agreement by saying "but I don't know whether Manaus/Rio Branco/Brasília will sign off on it". Conversely, DSEI managers described their frustration with indigenous representatives who signalled agreement with *Conselho* deliberations but then insisted that this agreement could be reversed "if the leaders in the villages don't approve it". As the experience of the CNSI and the National Seminar showed, national-level policy actors (whether they were FUNASA managers or *Movimento Indígena* leaders) could also be very selective about which decisions they treated as binding. In Chapter 7 I analysed the roots of this issue in divergent conceptions of representation and governance; the point to stress here is that the formal endowment of a new democratic space with *deliberativo* status is clearly not enough to ensure that its deliberations will be treated as binding by either indigenous representatives or the representatives of the "white state".

However, one thing I have learned in the course of researching this thesis is that if we look for democratic outcomes only in the spaces where theorists and lawmakers tell us to look for them we may end up being disappointed – and that

in our disappointment we may miss the very real transformations that are going on elsewhere in the multivalent universe that is contemporary democracy. While I was looking for bindingness in the deliberations of the CONDISIs and failing to find it, other encounters in other spaces were consistently throwing up evidence that despite the Indigenous Health Subsystem's enormous failings and frustrations the things that the CONDISIs were supposed to promote (accountability and inclusion, as well as bindingness) were indeed happening – they just weren't happening where they were supposed to.

There is no doubt that despite the weakness of its formally *deliberativo* institutional architecture, a kind of bindingness is emerging in the Indigenous Health Subsystem. It is emerging as a by-product of noisy national-level clashes over policy like the one at the National Seminar, complex regional-level engagements like those in Acre and the Rio Negro and messy local-level struggles for accountability like the one in Marechal Thaumaturgo. Whatever the legal status of the National Seminar and of the display of paint-and-feathers authenticity that legitimated its decision that FUNASA should be replaced as the agency responsible for the Subsystem, the Ministry of Health agreed to be bound by this decision even though this required it to make a major change to its bureaucratic structures in the interests of a marginalised minority who account for less that half of one per cent of the Brazilian population. For all the messiness of the relations between indigenous leaders and white politicians in Marechal Thaumaturgo, these relations have shifted over time from tense confrontations permeated by the threat of violence into routine tussles over accountability and service funding whose participants agree at least in principle on the bindingness of those tussles' outcomes.

When I was looking at the CONDISIs, my journalist's instinct to "follow the story" told me that the scenes played out in them offered only glimpses of the real story of indigenous representation in the Indigenous Health Subsystem. Much of what made the story make sense was going on elsewhere, in other new democratic spaces, between them and outside them, including interactions with the old democratic spaces of representative democracy and its dubious machinery of elections and parties. This is not unique to the Indigenous Health Subsystem; in

her ethnography of a municipal SUS *Conselho* in Pernambuco, Andrea Cornwall (2007) drew attention to the importance for such institutions of the tracks and traces of the political and power relations established in these "other spaces". As I searched for these tracks and traces in the Subsystem, I concluded that the binding decisions observed in one space were likely to be the outcome of multiple interactions that had taken place across many other spaces.

Following all these interactions and establishing attribution was all but impossible: did the mayor of Marechal Thaumaturgo agree to Davi's demands because he made a deal with the FUNASA manager, because the story on national radio had embarrassed him, because of the imminent *Ministério Público* investigation, because Davi was able to use our workshop to mobilise support from other *Movimento Indígena* groups at the regional level, because the disputed funds were needed to provide health services to the home community of an indigenous leader who had the ear of the Governor, because the chiefs on the *Conselho* threatened to storm the municipal health secretariat? I realised that the probable answer in this case and many others was "all of the above". Eventually, I concluded that the only scale on which it made sense to analyse the changing relations of representation in the cases I was studying was at the systemic level: in other words, the emergence of bindingness in these unexpected places was an indicator that something was shifting in the whole constellation of spaces.

I contend that what was shifting was the representation of Brazilian democracy. By this I mean that the idea of democratic engagement as something that has at least the *potential* to generate bindingness is starting to form part of the way both indigenous representatives and agents of the Brazilian state think about their interactions – that it is starting to make its way into what Pierre Bourdieu (1990) calls their dispositions or *habitus*. The evidence presented in this thesis is by no means conclusive, but I think it provides enough grounds at least to take the possibility seriously. In the next section, I analyse the potential significance of this trend in the broader context of Brazilian democracy and inequality.

10.2   Deliberation, democracy and representation in a divided society

It is worth remembering that a century ago the most frequent outcome of an encounter between indigenous and non-indigenous representatives in the rubber-rich rainforests around Marechal Thaumaturgo would have been a bloody battle, that the last documented massacre of an entire indigenous village in the region occurred less than half a century ago, that the last attempt to assassinate a Forest Peoples' Alliance leader there was little more than a decade ago and that armed confrontations between indigenous people and illegal loggers are still taking place in the headwaters of the municipality's rivers. At the regional and national level, relations between the *Movimento Indígena* and the state still carry the legacy of five centuries of alternating genocide and paternalism, a struggle to redefine citizenship in the Constitution that saw nationalists brand Brazil's original inhabitants as "un-Brazilian" traitors and a decade of acrimony and mismanagement in the Indigenous Health Subsystem. If any kind of bindingness is emerging out of political interactions between groups that carry that much baggage, then something remarkable is going on.

Given this baggage, the field of relations between the *Movimento Indígena* and the state in Brazil could reasonably be assumed to be stony soil for the kind of process envisioned by the advocates of deliberative democracy whose work I discussed in Chapter 1 – particularly the mainstream accounts of deliberative democracy that have been criticised for associating deliberation too closely with a particular version of consensus-seeking bourgeois rationality, denying expression to other discursive practices and stripping politics of the "passion" which is ignited when conflicts are expressed rather than repressed (Young 1990; Mouffe 2005). Such criticisms have led other advocates, notably John Dryzek (2005), to examine whether deliberative democracy (or Dryzek's preferred version, "discursive democracy") can actually take root in "divided societies" where discursive mismatches reflect not only different cultural reference-points but also deep-rooted inequalities and social divisions, and where contentions that have often been expressed violently seem to make consensus unattainable. This is a key question for democracy in all its forms, not only for deliberative or discursive

variants. Objections such as those examined by Dryzek can easily elide into arguments that some "divided societies" are just not "ready" for democracy – arguments that have been fuelled by the recent upsurge in violence associated with election cycles in South Asia and Sub-Saharan Africa.

Brazil is certainly a profoundly "divided society": extremely unequal, very violent and riven with cleavages along class, regional, ethnic and race lines (among many others) that derive from a traumatic history of genocidal settler occupation, slavery, patriarchy and authoritarianism. Yet my research findings have left me inclined to agree with Zander Navarro that it is "the most democratic country in the world, as well as one of the most unequal". Brazilian democracy has not done away with inequality in the ways fought for by democratic socialists, nor produced clean, efficient and decisive governance of the kind hoped for by (neo)liberal democrats, nor generated a politics that is decisively shaped by the rational public sphere dreamed of by deliberative democrats. Arguably, however, it has achieved something that is at the same time greater than any of these and a precondition for their construction: in little more than two decades since emerging from military dictatorship, Brazil has created a nation of citizens and embedded a notion of citizenship for which democratic practice and democratic values are absolutely constitutive (Cornwall, Romano and Shankland 2008).

This achievement is not unique to Brazil among large and unequal developing democracies, with India being the most widely-cited example. However, as Heller (2000) points out, India's success – despite a head start of four decades over Brazil – is patchier than most national-level generalisations suggest, and much more evident in some states (such as his own case study, Kerala) than in others. In this thesis, I have deliberately set out to examine cases where progress in the construction of democratic *habitus* seemed least probable. My research took me to some of Brazil's most peripheral and socially-polarised regions – the kind of setting in which the "authoritarian enclaves" described by Jonathan Fox (1994) could be expected to flourish – and focused on the spaces where the state encounters the indigenous peoples who are among the most marginalised and unruly groups of Brazilian citizens, and whose own political values and practices militate against sustained engagement with the wider polity.

For all the myriad problems I have identified, the extent of the advances in democratic inclusion in those unpromising places and spaces suggests that democracy is becoming rooted to an extent that is truly remarkable given the profoundly divided nature of Brazilian society in general, and the issues that pervade relations between the state and indigenous Brazilians in particular.

John Dryzek concludes his call for a "discursive democracy in divided societies" that offers "alternatives to agonism and analgesia" by suggesting that

> Contributions to its development could come from the following:
> - deliberative institutions at a distance from sovereign authority,
> - deliberative forums in the public sphere that focus on particular needs rather than general values,
> - issue-specific networks,
> - centripetal electoral systems,
> - a power-sharing state that does not reach too far into the public sphere,
> - the conditionality of sovereignty, and
> - the transnationalization of political influence. (2005: 238-9)

In this thesis, I have sought to show that Brazil's "hybrid democracy" in general and its reliance on sectorally-distributed new democratic spaces in particular mean that it meets most if not all of Dryzek's criteria. Its deliberative new democratic spaces are not "at a distance from sovereign authority" by design, but the frequent non-bindingness of their decisions shows that they are often so in practice. Their sectoral emphasis allows them to "focus on particular needs rather than general values" – though as I have sought to show for the health sector, the framing of "sectoral" issues cannot be separated from culturally- and ideologically-defined "general values". Some of Brazil's most important democratic achievements – from the creation of the SUS to the Constitutional recognition of indigenous rights – were driven by "issue-specific networks", or epistemic communities. The country's federal constitution and use of proportional representation ensure that its electoral systems are "centripetal" in both the sense of political geography (Melo 2007) and in the ideological sense that no party can govern except from the centre[59]. The state is "power-sharing" in that it has

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[59] For the last fifteen years the key political struggle in Brazil has been between the centrist PSDB and the centre-left PT, whose main allies have been respectively the centre-right PFL (now DEM) and the centrist-clientelist PMDB.

formally consented to institutionalised *controle social* by citizens and "organised civil society"; it "does not reach too far into the public sphere" in the sense of controlling the media and public debate. Its sovereignty is "conditional" in the sense that its federal Constitution and dispersed power structure allows it to avoid the winner-takes-all electoral contests that lead to what Dryzek calls "the deadly numbers game", as well as in the sense that it accepts the legitimacy of both rule-bound and unruly forms of public contestation of its decisions. Finally, the success of a demographically insignificant minority like Brazil's indigenous people in securing both recognition and redistribution has been significantly influenced by their access to international alliances deriving from "transnationalization of political influence".

However, Brazil has fulfilled Dryzek's criteria without becoming a deliberative democrat's paradise. It has retained a public sphere where particularistic and exclusionary discourses continue to flourish alongside those of universal rights and inclusive citizenship, and a set of governance arrangements that continue to foster corruption, inefficiency and unresponsiveness in the exercise of state power. In doing so, it has demonstrated that his criteria may be necessary but are certainly not sufficient for fulfilling the high hopes that democracy's advocates have for its potential to promote equity, efficiency and deliberativeness. I argue that this is because like many other advocates of deliberative, discursive or participatory democracy Dryzek has missed out on the chance to emphasise the central importance of *representation* for the achievement of this potential.

In Chapter 1, I outlined a framework for understanding representation that should be capable of accounting for the ways it manifests itself in the multiplying spaces of contemporary "multivalent democracy" (Keane 2009), especially – given their relevance to the Brazilian model of "hybrid democracy" – the new democratic spaces of the "participatory sphere" (Cornwall and Coelho 2006). This framework both recognised the importance of the traditional political science definition of "political representation" as "acting substantively for others" (Pitkin 1967) and argued for the need to complement this narrow definition with other ways of "representing people". Drawing on literature from cultural studies and

anthropology (particularly the emerging field defined by Brazilian anthropologists as "the anthropology of the political"), I labelled these other ways "representation as signification" and "representation as mediation". I then drew on recent work by Bruno Latour to argue that any discussion of representation in contemporary democracies should take into account the representation of "things" – understood as the objects and issues around which those who are "representing people" come together in literal or virtual "assemblies". Finally, I argued that we should analyse how those assemblies themselves are "represented"; that is, how different institutions and practices come together to "represent democracy".

It is on the basis of this conceptual framework, backed up by the findings of my research, that I make the claim in the title of this chapter, namely that there is "no democracy without representation". This claim has a weak (theoretical) sense, which is that no democratic process can operate without processes of representation, as even where no one is "acting substantively for others" (that is, where all the people who can claim an interest in the outcome of an assembly participate directly in it), the process will still be shaped by representations of the issues at stake and of the process itself. It also has a strong (normative) sense, which is that democracy cannot fulfil its potential and thereby claim to be "truly democratic" unless the forms of representation on which it depends also fulfil their potential to promote both inclusion and transformation.

In the next section, I will review the findings of this thesis on the different dimensions of representation outlined above, before concluding with some thoughts on what these findings tell us about the potential for moving towards what might be called "transformative representation in divided societies".

10.3   Representation and health policy in the Brazilian Amazon

I have sought to show in this thesis that many of both the extraordinary successes and the continuing failures of Brazilian democracy can be attributed to questions of representation. I have used the particular case of engagements between indigenous representatives and the state around health policy to examine these questions in all the dimensions identified in my conceptual framework.

In the part of the thesis entitled "Representing Health", I have shown how the representation of health has been constructed within two different *sanitarista* traditions: the rights-based, radically inclusionary SUS version and the top-down, often authoritarian version to which FUNASA is heir. I have examined the representations of health that mark the discourses and practices of different indigenous actors, especially the traditional medical specialists known as *pajés*, and noted that these share with FUNASA's version of *sanitarismo* a representation of health as a field of power in which different groups of specialists struggle over the right to direct and discipline the lives of non-specialists. This analysis of "representing health" has sought to demonstrate that movement-state engagements over the Indigenous Health Subsystem have been caught between two framings of "health": as a great cause of rights-based health sector reform to which formerly excluded actors are being actively recruited but without the opportunity to influence the content of the reform proposals; and as a nexus of struggle over material and symbolic resources. Both framings conflate "health" with "the health system", and both are largely silent on what it would take for that system to contribute more effectively to ensuring that indigenous people, who have the worst health indicators of any group of Brazilian citizens, can come to live longer and healthier lives. By promoting inclusion, these representations of health have helped to broaden Brazilian democracy – but by not allowing for the transformation of policy content they have failed to deepen it.

In the following part of the thesis, "Representing People", I have shown how the representation of indigenous people has been constructed in Brazil, and in particular in two regions of the Amazon with strong *Movimento Indígena* traditions. I have examined how the representation of indigenousness must be carefully calibrated in both discourse and visual symbolism in order to avoid the pitfalls of strategic essentialism and to strengthen the impact of political action by minority groups which together represent only a fraction of one per cent of Brazil's total population. I have explored how indigenous representatives are chosen for the new democratic spaces of the health system and how they represent their own roles as mediators. This mediating role operates in two directions: scouting out paths for action in a political and social environment still

perceived by most indigenous people as alien and hostile; and socialising the mediators' own constituencies into more rule-bound forms of engagement with the "white state". I have also examined two contrasting experiences of *Movimento Indígena* representation that have involved movement organisations "acting substantively for others" by participating directly in the management of health services. In the Acre case, the regional organisation UNI pursued a strategy of "institutionalised unruliness" which eventually led to its collapse but which nevertheless maintained a space of possibility for more transformative political action. In the Rio Negro case, the regional organisation FOIRN turned rule-bound engagement into its central political strategy, in line with its broad goal of challenging racist stereotypes of indigenous incapacity. Taken together, the multiple ways of "representing people" examined in this section demonstrate the dynamism and creativity of indigenous political action in Brazil and suggest that the country's "hybrid democracy" creates openings that can be enthusiastically embraced by the most marginalised and "unruly" of minorities.

In the final part of the thesis, I turned to the new democratic spaces in which representation takes place, demonstrating that they are themselves sites for "Representing Democracy". In the first case, a national conference on indigenous health policy, the host institutions (FUNASA and the National Health Council) sought to represent "democracy as inclusion": although this was successful on the most basic level of encouraging indigenous representatives to recognise that an effort was being made to include them, the lack of openness to indigenous discursive styles and the crude manipulation of the deliberative process ensured that this inclusion was shallow and allowed no scope for transformation of either the process or its policy outcomes. In the second case, a seminar promoted by the National Health Council which became a site of confrontation between supporters and opponents of FUNASA's continued role in the Indigenous Health Subsystem, it was a group of indigenous participants who demonstrated the potential for such spaces to represent "democracy as transformation", though the pervasive non-bindingness of such spaces ensured that this remained more of a fleeting glimpse than an enduring example of transformation. In the third case, a Local Indigenous Health Council in a small Amazonian municipality, struggles for

access to information and resources evolved into a more routinised process of bargaining over priorities and demanding accountability that closely resembles the ideal type of *controle social* practices originally envisaged for this kind of "new democratic space" in the Brazilian health system, despite its unlikely setting. Taken together, these examples demonstrate both the impressive capacity for inclusion of Brazil's new democratic spaces and the difficulties which they face in enabling the country to move towards a more transformative form of "deliberative" or "discursive" democracy.

In conclusion, then, I will examine what the cases I have examined have to tell us about the relationship between representation and inclusion, and what they suggest might be required for representation to move from promoting inclusion to enabling transformation in new democratic spaces, and through them in broader democratic development.

10.4   Transforming Representation

In much of the analysis in this chapter, I have focused on the absence or emergence of *bindingness* from the democratic engagements that I have documented in this thesis. This is because bindingess is a very significant indicator of the legitimacy of democratic processes. As I argue in Chapter 1, the shift from "democracy as inclusion" to "democracy as transformation" is only possible when democratic *decisions* not only involve formerly excluded *people* but are shaped by formerly excluded *perspectives*, and then shape new *practices*. These new practices can only take root if actors feel themselves bound by the legitimacy of the process to adhere to those decisions.

As the discussion at the start of this chapter makes clear, in the case of the Indigenous Health Subsystem the legitimacy of those processes where bindingness is in evidence generally does not derive from the legal mandate of the space in which the decision is taken. I argue that it derives instead from the cumulative effect of different representation processes, operating in the multiple interlinked spaces that together make up Brazilian democracy. These processes are together creating a democratic *habitus* that makes it possible for the first time in Brazil's history for indigenous representatives and the state to engage in routine

bargaining on a reasonably equal footing, albeit for the moment only in certain conditions and in cases where the issues ("things", to use Latour's term) at stake are understood ("represented") by the both sides in roughly the same way.

This issue of "representing things" is fundamental, because my analysis of interactions in the Indigenous Health Subsystem has shown that representation processes can frequently lead to real change when what is at stake is the allocation of material resources (money, boats, radios), but have much more difficulty in making progress when what is at stake is the definition of what health practices matter (drug distribution, vector eradication, shamanistic blessings) and which experts (doctors, pajés, AIS) should be empowered to control the lives of indigenous non-specialists. In particular, the rules of deliberation in the new democratic spaces of the SUS and the Subsystem tend to exclude or ignore indigenous discursive practices which are themselves an integral part of "representing health" and which carry with them important situated knowledges and historically excluded perspectives.

Brazil's version of "hybrid democracy" has been extraordinarily successful in promoting inclusion, both via the creation of new democratic spaces to provide for the representation of formerly excluded groups and via "rights-based" material redistribution broadening access to standard services. There is, however, a real risk that the process will stop before realising its transformative potential. This is because the Brazilian state is becoming so good at "managing inequality" through these mechanisms, defusing the potential for destabilising social conflict by ensuring that differences find expression within the spaces of the democratic system and that there are material rewards for participation, that efforts to secure more fundamental changes may end up struggling to get a purchase. This is because "social energy" (Bebbington and McCourt 2007) may be diverted into training members of formerly excluded groups to practice "representation as mediation" (a form of representation in which they both scout out threats and opportunities within the state and help to discipline their constituencies into the "correct" ways to engage with it) and to bargain effectively over resources in new democratic spaces. My research has provided some evidence that this may indeed be happening in the Indigenous Health Subsystem.

However, my research has also provided evidence that more transformative notions and practices of representation are alive and well. These may operate at the ideological level, like the pajés' demand for expert status equal to that of "white" doctors. They may be unruly but deployed within new democratic spaces provided by the "white state", as in the case of the Xingu delegation's intervention in the national seminar. They may be unruly and "outside and against the state", as in the occupation of FUNASA buildings by Kaxinawá warriors in Acre. Or they may be "strategic bureaucratic" interventions to occupy key sites within the "white state", as FOIRN has done first with the Rio Negro DSEI and now with the municipal administration.

All these examples show that the *Movimento Indígena* is fully aware of the fact that the more fundamental shifts implied in the notion of "democracy as transformation" require changes in practices that impinge on powerful knowledges, entrenched interests and deeply-embedded ideological representations of citizenship, social policy and health – and that it is developing the representation strategies to pursue these shifts.

Here in the North, in the midst of our "representation crisis", our states need to learn from Brazil on the value of reconfiguring democracy to encompass meaningful and potentially binding representation in a plurality of new and old democratic spaces that can guarantee the inclusion of representatives of marginalised minorities. And our citizens need to learn from the *Movimento Indígena* how to occupy these spaces while simultaneously challenging the state on the multiple fronts of representing things, representing people and representing democracy.

Appendix A   Field sites, action research and positionality

In this Appendix, I situate my research in the contexts of the two Special Indigenous Health Districts where I carried out my meso-level fieldwork (DSEI Alto Juruá and DSEI Alto Rio Negro) and the two micro-level sites where I carried out in-depth case studies (the Municipality of Marechal Thaumaturgo within the DSEI Alto Juruá and the Hup'däh territory of the Middle Tiquié in the DSEI Alto Rio Negro). For each site, I describe the research process and its implications for my positionality in the light of my previous engagements with the region.

A1   The DSEI Alto Juruá

The *Distrito Sanitário Especial Indígena do Alto Rio Juruá* (Upper Juruá River Special Indigenous Health District, or DSEI Alto Juruá) is one of the two Indigenous Health Subsystem management units based in Acre, the other being the DSEI Alto Purus, which covers the Eastern half of the state and neighbouring areas of Southern Amazonas and Northwestern Rondônia. The DSEIs were established by FUNASA as part of a health system reform process which I describe in Chapter 5. As I noted in Chapter 3, Acre's regional *Movimento Indígena* organisation UNI (the Union of Indigenous Nations of Acre and Southern Amazonas) agreed in 1999 to take on management contracts for both DSEIs; after experiencing the problems that I analyse in detail in Chapter 8, UNI was forced to relinquish these contracts in 2004, triggering a crisis which led to its subsequent collapse.

Although my research in Acre also included extensive state-level work and four visits to the state capital, Rio Branco, most of my time there was specifically focused on micro-level fieldwork in the DSEI Alto Juruá. I chose this DSEI for practical reasons: I was more familiar with its indigenous territories (having worked there in the 1990s as part of the project described below), and the SSL colleagues with whom I was collaborating also wanted to start their project there rather than in the DSEI Alto Purus. I also believed that the Juruá's particular history and identity, and its remoteness from the state capital, would throw up more of the key issues around representation which I wanted to explore.

The administrative centre of the DSEI Alto Juruá is located in Cruzeiro do Sul, the largest town in the Juruá Valley and site of the only hospital offering high-complexity services outside the state capital (see Figure 2). Cruzeiro do Sul is an hour by scheduled flight from Rio Branco, and can be reached by road in anything from ten hours to several days, depending on weather conditions (the road is mostly unpaved and often becomes impassable during the rainy season). The DSEI covers 28 indigenous territories, most of them accessible only by air or river, which contain 98 villages inhabited by a total of 10,600 people belonging to 11 different ethnic groups (FUNASA 2005b). These territories are distributed across eight different municipalities – Feijó, Tarauacá, Jordão, Cruzeiro do Sul, Mâncio Lima, Rodrigues Alves, Porto Valter and Marechal Thaumaturgo – which have a combined non-indigenous population of some 180,000 people (IBGE 2007). Following the collapse of the outsourcing arrangements with UNI, FUNASA handed responsibility for local service management in the DSEI Alto Juruá to the municipal health secretariats, who already manage most primary care services for the non-indigenous population.

During my fieldwork, I made brief visits to three indigenous territories (Katukina/Kaxinawá in the municipality of Feijó, Kaxinawá da Colônia 27 in the Municipality of Tarauacá and Katukina de Campinas in the Municipality of Cruzeiro do Sul) as part of a strategy of following key indigenous representatives from regional-level spaces back to their home villages, although the research did not include any conventional "village ethnographies". In order to analyse the implications of the shift from UNI to municipal management, I also carried out a more in-depth case study of engagements around indigenous health services in one municipality, Marechal Thaumaturgo.

This municipality covers 7,744 square kilometres (approximately 3,000 square miles) along Acre's border with Peru in the upper reaches of the Juruá Valley, some 300 kilometres (or two and a half days' boat journey) from the administrative centre of the DSEI Alto Juruá in Cruzeiro do Sul. Marechal Thaumaturgo was established as a municipality only in 1992, having formerly functioned as an administrative subdivision of Cruzeiro do Sul, and at the time it achieved municipal status it had neither a post office nor a bank, and the municipality's only telephone was installed in the new mayor's house (Shankland 1998: 55). Since then it has grown and its

infrastructure has been upgraded somewhat, but it remains a remote and predominantly rural place. The Brazilian Statistics Institute estimated a total population of 8,455 for Marechal Thaumaturgo in 2005, with fewer than 2,000 people living in the only urban settlement of any size, the municipal centre of Vila Thaumaturgo (IBGE 2006). In its 2005 District Plan, FUNASA recorded an indigenous population of 1,052 in the municipality, indicating that indigenous people accounted for approximately one in eight of Marechal Thaumaturgo's inhabitants (FUNASA 2005: 4). This population was recorded as belonging to four different ethnic groups (Ashaninka, Kaxinawá, Jaminawa and Arara) who inhabited four formally-recognised indigenous territories – it thus excluded the Kontanawa and Apolima-Arara, two groups who are currently claiming land and cultural rights in the municipality but whose process of "ethnogenesis" (discussed in Chapter 7) had not yet reached the stage of formal recognition at the time the District Plan was drawn up.

I originally travelled to Marechal Thaumaturgo at the invitation of the chair of the Local Indigenous Health Council, Davi Waine Ashaninka, whom I had met at the first of the workshops which I co-organised with SSL colleagues as part of the project described below. Davi subsequently became a "long-distance key informant", as even when I was back in São Paulo he would phone me regularly to give me updates on the long-running saga of his struggle for accountability with the local mayor, which I discuss in detail in Chapter 9. In addition to genuine friendship, there was calculation involved on both sides of this relationship: Davi gave me valuable data, and I gave him access to political opportunities, including an invitation to give an account of his struggle at a meeting in the Federal Senate in April 2008, which my SSL colleagues and I had organised with the help of Senator Tião Viana of the Acre PT.

This level of engagement with both the *Movimento Indígena* and the political authorities in Acre was only possible because of the prior history which I had there both personally and through my association with SSL. This history began with a primary health care training and institutional development project, covering the Juruá Valley region of Acre, on which I worked for the London-based NGO Health Unlimited (HU) between 1990 and 1996.

When I joined HU in 1990, their Latin America programme had already been funding a health project under the joint responsibility of UNI and the Rio Branco-based NGO *Comissão Pró-Índio do Acre* (CPI-AC) since 1987. However, when UNI and CPI-AC acrimoniously parted company in 1989, the UNI leadership declared themselves solely responsible for the project – but failed to provide HU with any reports indicating what they were actually doing to implement it. HU had no permanent office in Brazil, but now realised that they needed someone who could keep an eye on the project. After I met Tim Bowyer, their Latin America regional manager, during a visit to Rio Branco (where I was researching an article and he was trying to re-establish contact with UNI), HU offered me the job. I was 23 years old and completely unqualified for any technical health project management responsibilities, but this was the amateurish world of NGOs in the 1980s: what mattered was that I lived in Brazil, spoke Portuguese, could write intelligible reports in English and was willing to work for a £200 per month volunteer's allowance as long as HU paid for me to travel regularly to Acre, a region with which I was becoming increasingly fascinated.

As I indicated in Chapter 2, I had become something of a "groupie" of the Forest Peoples' Alliance, and I lost no time in persuading HU that they should seek funding for an expanded project which covered not only the indigenous peoples of the Juruá but also their key partners in the Alliance, the *seringueiros* of the Upper Juruá Extractive Reserve. This was the cause of my first run-in with the UNI leadership, who broke publicly with the Alliance (in the process described in Chapter 2) just as we were setting up the expanded project. After some tense negotiations, we agreed to run the work in Acre as two distinct sub-projects, governed by separate cooperation agreements (one between HU and UNI and one between HU and the *seringueiro* association ASAREAJ).

Over the six years in which I worked with UNI we had many other clashes. These were usually over the Rio Branco-based UNI leadership's habit of unilaterally overruling the workplans we had carefully negotiated with both the "white" technical staff whom HU had hired to work with them and the grassroots indigenous representatives whom we had invited to participate in an attempt at "bottom-up participatory planning". Sometimes the clashes were over (generally small) amounts

of money that went missing, and one particularly serious incident led me to recommend that HU suspend project funding for six months until UNI sorted it out and ejected those responsible for misappropriating the money. When I complained that their arbitrary behaviour undermined the project's legitimacy with the grassroots representatives who participated in the planning process, made the technical team very angry and thus hard to manage and also played havoc with my reporting logframes and cashflow projections, the UNI leadership retorted that they were the legitimate representatives of the indigenous peoples of the region and that to question their political judgement was to act in the tradition of "500 years of oppression". I soon got used to being called a "gringo imperialist" by the PCdoB-supporting CIMI activists who advised UNI.

Although some of those clashes were professionally challenging and personally painful (especially for someone as wet behind the ears and idealistic about the cause of the *Movimento Indígena* as I was), they taught me a lot about the possibility of partnership strategies based on negotiating with the representatives of marginalised groups rather than on patronising them and assuming – as CIMI did – that their erratic behaviour was a sign of their victimhood rather than of their agency. I felt a definite warm glow of vindication when Manuel Gomes Kaxinawá, one of the UNI leaders with whom I had worked (and who was subsequently implicated in the organisation's DSEI management disaster) told me during my fieldwork that he looked back on the HU-UNI project experience as a very positive one because "even though we fought a lot we respected each other".

Manuel's comments were made soon after he was elected as coordinator of UNI's successor organisation OPIN, when I and a group of SSL colleagues were discussing with him our plans for the project that subsequently became the principal framework within which I carried out my fieldwork in the Juruá. This project, entitled "A Participatory Investigation of Indigenous Health and *Controle Social* in Acre", or *Projeto IPAC* for short, was an action research initiative which aimed to facilitate a process of critical reflection among representatives of the Acre *Movimento Indígena* on their experiences of engaging with the state around health policy and services.

The origins of Projeto IPAC lay in contacts that indigenous representatives from Acre had made in 2005 with Maria Bittencourt and Elvira Toledo, two SSL members who had worked on the HU-UNI project which ran from 1989 to 1997. The contacts included a request for SSL to return to Acre and help the *Movimento Indígena* to deal with the aftermath of UNI's disastrous foray into health service outsourcing. Maria and Elvira had been part of the group of Brazilian anthropologists and health professionals who came together in 1994 (with my participation and support as HU Brazil Country Manager) to create SSL as an NGO vehicle for implementing the final phase of the Acre project and taking its experience into new partnerships with *Movimento Indígena* organisations in other parts of Brazil. Along with Hélio Barbin, the medic who had led HU's project with the *seringueiros* in Acre, they became my co-researchers on Projeto IPAC. Maria, Elvira and Hélio's knowledge and insights – and those of our Acre-based research assistant, Silvana Lessa – significantly shaped both the process of my fieldwork and my analysis of its findings. Our collaboration was both professional and institutional: we planned the fieldwork jointly and facilitated the project workshops together, and I used my IDS contacts to raise funding from the Citizenship DRC research programme on "Deepening Democracy in States and Localities"[60] to allow SSL to match the grant it had received from the HU-supported Latin American indigenous health network Red RAICES to implement Projeto IPAC.

Two of the four fieldwork trips which I made to Acre between November 2005 and September 2007 were scheduled around Projeto IPAC workshops, and the official purpose of the last trip (which included the "observant participation" in the Acre State Health Conference that I describe in Chapters 4 and 5) was to work on follow-up activities that had been agreed with the *Movimento Indígena* and the State Health Secretariat at the last of those workshops. Even though I had made it clear all along that I was working on an individual PhD research project alongside Projeto IPAC, I was invited to the State Health Conference as a "representative of the SSL

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[60] "Deepening Democracy in States and Localities" is a sub-programme (convened by Vera Schattan Coelho of Cebrap and Bettina von Lieres of the University of the Western Cape) of the Development Research Centre on Citizenship, Participation and Accountability (Citizenship DRC, www.drc-citizenship.org), a major DFID-funded international research programme convened by the Institute of Development Studies (IDS) at the University of Sussex. Before starting my DPhil I worked for three and a half years as Research Manager for the Citizenship DRC, based at IDS.

team". By the end of the project, I was thus clearly positioned as an SSL person and my research as somehow a continuation of my previous work in Acre – which, of course, in many senses it was.

On the solo field trip to Acre which I made at the start of my fieldwork in 2005, I sought out the FUNASA manager of the DSEI Alto Juruá and the indigenous representatives on the District Health Council (CONDISI) to propose a collaboration agreement. Although the CONDISI agreed to my work going ahead and its members subsequently participated enthusiastically in the Projeto IPAC workshops, a formal agreement to work with the DSEI required FUNASA's official consent, and despite verbal expressions of interest from the DSEI manager and his *controle social* support officer this was never forthcoming. I suspect that this was because FUNASA saw no benefit to them in helping me and/or SSL colleagues to provide training and advisory support that might strengthen *controle social* in the DSEI, as they feared (rightly enough, as it turned out) that we would help the indigenous representatives to develop a political strategy which reduced their dependence on FUNASA. Through Projeto IPAC we provided the training and advisory support anyway, but we had to do it in spaces that we convened ourselves with the *Movimento Indígena* organisations, and our limited funding meant that what we provided was much less than it might have been had the DSEI agreed to pay for all meeting and travel costs from the *controle social* support budget which it supposedly held for this very purpose.

The enthusiastic response among *Movimento Indígena* representatives first to my collaboration proposal and then to Projeto IPAC reflected the fact that they associated my SSL colleagues and I with a period when movement-NGO collaboration on primary health care had contributed both to the wellbeing of their communities (who had no access to any other provision, since government services were nonexistent at the time) and to the political credibility of the movement – despite the frequent clashes that had marked the HU-UNI collaboration. At the start of my fieldwork period they were still reeling from the shock of the DSEI outsourcing disaster and the collapse of UNI, and trying to understand how a massive increase in government spending and a significant expansion of the role of the *Movimento*

Indígena in health service provision could have led to what they described as a disastrous health and political situation.

On the health side, this situation included an infant mortality rate which remained at two to three times that of the state's non-indigenous population, despite greatly increased public spending on indigenous health services[61], while in the political side it included the fact that indigenous leaders at all levels were at odds over the strategic direction UNI's successor organisation should be following. Just as I wanted to understand the roots of what I perceived to be a crisis of social movement representation, and my SSL colleagues wanted to understand the new landscape of indigenous health policy and politics in Acre (so they could decide whether or not to plan new projects in the state), the indigenous representatives with whom we worked wanted to understand what had gone wrong and identify potential strategies for change. This created a particularly conducive environment for shared engagement in critical reflection, which as Bruce Albert notes is difficult to facilitate in circumstances where "indigenous communities or organizations and their leaders, as well as supporting NGOs, always hope that the anthropologist's work they commissioned or encouraged will lead to a legitimation of their own cultural and political empowerment project" (Albert 1997: 58). In Acre, the hegemonic "political empowerment project" of the regional-level *Movimento Indígena* had been shattered, and at the time of my fieldwork the multiple (often competing) "political empowerment projects" of different sub-groups were still emerging uncertainly into the space left suddenly open by UNI's collapse. This was very different from the situation with which I found myself engaging alongside a different SSL team in my second case study region, the DSEI Alto Rio Negro.

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[61] In 2006 the two indigenous health districts covering Acre, DSEI Alto Juruá and DSEI Alto Purus, reported infant mortality rates of 83.7 and 58.8 per thousand live births respectively, while the rate for the state as a whole was 29.5 (data from FUNASA Annual Management Report 2007 and www.tabnet.datasus.gov.br, accessed 9 May 2009).

A2   The DSEI Alto Rio Negro

The *Distrito Sanitário Especial Indígena do Alto Rio Negro* (Upper Rio Negro Special Indigenous Health District, or DSEI Alto Rio Negro) is the largest and most populous of the seven Indigenous Health Subsystem management units based in Amazonas. When it was established in 1999, the DSEI was managed by a consortium that included SSL, the Salesian Mission and the São Gabriel da Cachoeira Municipal Health Secretariat. As I describe in detail in Chapter 8, the regional *Movimento Indígena* organisation FOIRN (the Federation of Indigenous Organisations of the Rio Negro) took over from this consortium in 2002 and managed the DSEI under contract to FUNASA until 2006, when it handed over responsibility to a local health workers' association.

The DSEI Alto Rio Negro covers a vast area (almost 300,000 square kilometres) which extends for over 500 kilometres of the course of the Rio Negro and across the basins of its major tributaries the Uaupés and Içana (see Figure 3). It includes all the indigenous territories of the Upper and Middle Rio Negro, which have a combined population of some 29,600 people belonging to 23 different ethnic groups and living in 652 different communities (Consórcio IDS-SSL-CEBRAP 2009: 409). These communities, which vary in size from several hundred people to a handful of households, are almost all accessible only by river or (in the case of Maku-speaking "deep forest" groups like the Hup'däh) on foot, though some are within reach of airstrips built by missionaries or the military. The DSEI headquarters is in São Gabriel da Cachoeira, and in addition to São Gabriel its territory includes the municipalities of Santa Isabel do Rio Negro and Barcelos; as the three municipalities have a combined non-indigenous population of around 50,000, this means that indigenous people account for almost 40% of the entire regional population (IBGE 2007).

During my fieldwork I made four trips to São Gabriel da Cachoeira and two brief visits to Santa Isabel and Barcelos, as well as a total of five visits to Manaus (including one that took place during my post-fieldwork consultancy period). These visits were intended to give me an overview of the DSEI and insights into the engagements between FOIRN, FUNASA and the state and municipal governments. In order to gain a better understanding of the micro-level dynamics of representation

in the DSEI Alto Rio Negro I selected one sub-area, the Middle Tiquié, for two extended field visits. The Middle Tiquié is inhabited by around 6,000 indigenous people belonging to half a dozen of the Upper Rio Negro's 22 different ethnic groups, often living in mixed communities. The most numerically significant groups in the communities that I visited were Tukano, Desana and Hup'däh, though I also met people who identified themselves as Barasana and Tuyuka. During these visits I was based in the mixed Tukano/Hup'däh village of Barreira, and also visited eight other villages (Taracuá-Igarapé, Boca da Estrada, São Luís, São José I, São José II, Santa Luzia, Nova Fundação and São Sebastião), as well as the larger settlements of Taracuá and Pari-Cachoeira, sites of the former boarding schools of the Salesian Mission and now home to other non-indigenous structures, including army bases.

I chose the Middle Tiquié because it was the region that had the largest concentration of Hup'däh settlements, and I wanted to investigate the interethnic political dynamics around the efforts of this hyper-marginalised group to secure representation in the *controle social* and *Movimento Indígena* spaces of the region. I had heard about this struggle from SSL colleagues, as the organisation had a field team working on a health and education programme with the Hup'däh. I ended up carrying out much of my local-level fieldwork while "temporarily attached" to this team, with the implications for my positionality that I discuss below.

SSL's project with the Hup'däh was only the latest phase in a history of work in the region which at the time had been ongoing for over a decade. The first phase of the organisation's engagement with health projects in the Rio Negro followed a feasibility study which Renato Athias, István van Deursen Varga and I carried out in 1994 for Health Unlimited (HU). Renato (an anthropologist who had just finished a period as head of Oxfam's Brazil country office) was one of the group that had founded SSL that same year. He had a long history of working in the Rio Negro (mainly with the Hup'däh), and was therefore a logical choice to lead the mission. István was a doctor who had worked with the Yanomami (whose territory borders the Rio Negro), and I was the manager responsible for HU's Brazil programme. Our visit to the region was triggered by an invitation from Rio Negro leader Álvaro Tukano, who had been put in touch with me by former national *União das Nações Indígenas* leader Aílton Krenak. When we arrived in São Gabriel da Cachoeira it

turned out that Álvaro Tukano was no longer a member of FOIRN's *Diretoria* – but fortunately his successors had heard about our work with UNI in Acre and were interested in discussing a collaborative project.

As I discuss in Chapter 8, we were immediately struck by the marked different in FOIRN's political approach in relation to UNI's. While UNI had insisted on directly controlling the project budget and line-managing the team, FOIRN wanted us to take day-to-day management responsibility for any future project, but to give them oversight responsibility for our plans and the final say on "political" issues such as the choice of which sub-regions would be given priority. The SSL team would be based inside FOIRN's headquarters, and would split their time between primary care and village health worker training in the upriver communities and providing health policy advisory support and training to FOIRN's senior managers, the *Diretoria*.

This division of labour proved very successful over the following five years, in which SSL both implemented a large HU-funded programme of its own and supported FOIRN's efforts to bring together the different service providers (including the missionaries, who had field hospitals throughout the region, and the military, who ran the regional hospital on São Gabriel) to work within a common framework negotiated with the indigenous leaders. This laid the groundwork for the sharing of responsibility that was agreed when the DSEI was created in 1999 and FUNASA came looking for outsourcing partners. However, as I discuss in detail in Chapter 8, the outsourcing arrangements soon ran into serious difficulties, and by 2001 SSL had decided not to renew its contract with FUNASA.

At this time I was back in the UK and in only occasional contact with SSL, but when I returned to São Gabriel da Cachoeira with Renato in April 2004 (to work on a case study for a DFID-funded research project) I quickly realised that this decision had significantly affected the relationship between SSL and FOIRN. By then FOIRN had taken over the outsourcing contract and the *Diretoria* were struggling with the same problems with FUNASA that had made SSL refuse to renew its contract – but, as they pointedly told us, they felt a strong sense of responsibility to the *base* (their grassroots constituency), and as a result had not flinched from the challenge as SSL had done. SSL had now concentrated its field work in the DSEI in a much smaller area and was focusing on the Hup'däh people, whom the organisation had identified

as having by far the worst health status of all the Rio Negro's groups. SSL's team in São Gabriel continued to provide technical health advice to FOIRN, and this was clearly still valued – but there was a definite sense that the balance of power had shifted and that for FOIRN the SSL team were useful but ultimately dispensable allies.

This was compounded by the SSL team's identification with the Hup'däh, who are positioned at the bottom of the ritual hierarchies which inform rionegrine political thought. When I returned in late 2005 to negotiate fieldwork agreements with both the SSL team and FOIRN, I found that SSL's advocacy for this marginalised group's rights had led them to be identified by FOIRN as surrogate representatives for the Hup'däh – giving rise to the complex issues which I examine in Chapter 8. However, because I was identified with other SSL members (such as Renato Athias) who were not permanently based in São Gabriel but did provide FOIRN with higher-level policy advisory support during visits to the region, the *Diretoria* treated me somewhat differently from the local SSL team. It turned out that FOIRN was interested in a cooperation agreement with me because of the thematic focus of my research: they were already discussing giving up their DSEI management contract and returning to their initial focus on overseeing indigenous *controle social* of the services, which is what I was researching. Under the agreement which we reached, they gave me access to their archives and political authorisation to interview FOIRN members in São Gabriel and to carry out community-level research in the Tiquié, and I gave them advisory and training support on *controle social*.

Although my agreement with FOIRN did not necessarily specifically position me as a member of the local SSL team, for the micro-level fieldwork in the Tiquié my relationship with the team was absolutely fundamental. We came to an agreement that had something of the same logic of reciprocity as my arrangement with FOIRN: I helped with the training courses that they were running for Hup'däh community health workers and teachers, and they gave me a "temporary identity" as a team member. This meant, of course, that in all my interactions with the Hup'däh (as well as their Tukano-speaking neighbours) in the Middle Tiquié I was positioned as an "SSL person". Since they regarded the SSL team as their key allies, this undoubtedly made it very much easier for them to accept my presence and trust my intentions in

asking them about their perceptions of FOIRN and the DSEI and their choice of representation strategies – but it undoubtedly also influenced the way they answered my questions.

Unlike the FOIRN arrangement, my agreement with the SSL team also had a material dimension, as in exchange for contributing to their food and fuel costs I was able to use one of their boats and stay at their base camp in Barreira. Given the huge distances involved (and consequent extremely high travel costs), and the need for local knowledge in planning my travel around the Middle Tiquié sub-region, this was extremely useful. There was more to it than practicality, however: the team (nurse Patrícia Torres, teacher-trainer Lírian Monteiro, nursing technicians Luiz Brazão and Alair Pimenta and boatman/cook Jaílson Gonçalves) became friends, companions, colleagues and key informants – and at one point they also became my co-researchers, as we all worked together (along with Renato Athias, who was doing one of his own field trips at the time) to facilitate a workshop that I designed at which *conselheiros*, community health workers and village leaders came together to discuss their perceptions of *controle social*.

In the Rio Negro as in Acre, therefore, my fieldwork was as much a collective as an individual project. It was also as much a set of activities carried out by "Alex the SSL member" as a piece of research carried out by "Alex the IDS DPhil candidate". This identification as "Alex the SSL member" – or even, as Issô put it in the incident which I narrated in Chapter 1 – "our friend Alex" – has inevitably influenced multiple aspects of my research, from my choice of case study sites, to the stories which key informants chose to share with me or keep from me, to the collective brainstorming processes which gave rise to much of the analysis that is included in this thesis. It is also what made the research possible in the first place, and turned the research process into one which I believe did make a positive if small contribution to the struggles for justice in which I was an "observant participant".

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