

# *The Idea of Haiti*

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RETHINKING CRISIS  
*and*  
DEVELOPMENT

*Millery Polyné, Editor*

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## Cholera and the Camps

### Reaping the Republic of NGOs

MARK SCHULLER

After Haiti's devastating earthquake, the international community responded with a generous outpouring of aid. According to the *Chronicle of Philanthropy*,<sup>1</sup> \$1.3 billion was contributed by private U.S. citizens to nongovernmental organizations (NGOs) within six months, \$1 billion by March 1. Furthermore, at a March 31, 2010, U.N. conference, donors pledged \$5.6 billion for the next 18 months. Former U.S. president Bill Clinton, named U.N. special envoy in 2009, marshaled foreign aid, cochairing the Interim Haiti Reconstruction Commission. Despite the enormous infusion of postquake aid to Haiti, mostly channeled through NGOs, why was Haiti totally unprepared for a deadly epidemic of cholera? The earthquake did not magically transform Haiti, despite Clinton's cheerful slogan of "building back better." By the same token, neither did Haiti's social ills begin on January 12, 2010. Social exclusion—*moun andeyò*—has been woven into Haiti's social fabric since before its independence in 1804.

One obvious change to Haiti's social landscape specifically brought by the earthquake serves as its most powerful symbol, a constant reminder of the continued impotence of the Haitian state and failures of international aid. Called tent cities or camps, the city of Port-au-Prince now bears on full public display scars of the extended misery. At the peak in the summer of 2010, the International Organization for Migration (IOM) registered 1.3 million internally displaced persons (IDPs) living in 1,300 camps, with over 800 within the greater Port-au-Prince metropolitan area. As of September 2011, when this chapter was submitted, there were still 600,000 people living in

distribution in April 2010—most official committees did not involve the population. Less than a third of people living in camps were aware of the strategy or even the name of the committees. Two-thirds of members were men, despite well-documented concerns about gender-based violence. Although to most NGOs managing camps or offering services these committees represent their local participation, it is clear that the structure that NGOs created was ripe for abuse.

Although many committees sprang up organically immediately after the earthquake as an expression of solidarity and unity in an effort to survive, NGOs' relationships with them had several negative consequences, whether intended or unintended. First, most NGOs did not inquire about local participation, leadership, needs deliberation, or legitimacy. As a result, in several cases, the NGOs and self-named committees excluded preexisting grassroots organizations. Some NGOs, the government, and even the landowners themselves created these committees. This was the root of several conflicts. In most cases, the camp committees—many of which were active in the earthquake's immediate aftermath—reported not doing anything because of lack of funds, testifying to an increasing dependency on foreign aid.

These failures are not isolated incidents but symptoms of larger structural problems that require immediate, sustained, and profound reflection and attention. Solutions include involving IDP populations in large community meetings; assessing levels of democracy and participation within committees; and ensuring greater NGO accountability, coordination, and submission to a fully funded local and national government. Housing needs to be recognized as a human right (guaranteed by Article 22 of Haiti's constitution and Article 25 of the Universal Declaration of Human Rights), with concrete, immediate steps to empower people to return to a safe home and basic services (such as water, sanitation, health care, and education) made available to all, regardless of residency status.

#### PHYSICAL CONDITIONS OF THE CAMPS

One is immediately struck by the physical conditions inside the camps, particularly after a rainstorm (an unfortunately quite common occurrence in the summer months). Without exception, sanitation and drainage for rainwater were serious issues. On the morning after a rainstorm, it is common to find

large pools of standing, muddy water—often stretching twenty yards—over which mosquitoes, flies, and other potential disease vectors circle. The state of sanitation is manifested in numerous cases of serious skin problems. In at least one camp, Noailles, the researcher estimated that almost all the children had a rash on their bodies because of the heat trapped inside the tents, combined with disease vectors. I myself contracted a rash after repeated exposure to these unsanitary conditions.

Bracketing the health consequences, this lack of proper drainage and sanitation still represents serious environmental hazards, most notably the smell. Even in camps with latrines, the standing rainwater and mud are pungent, with a scent reminiscent of pig farms. Often, as documented by research assistants and myself, the mud seeps underneath people's tents or tarps, rendering it impossible to sleep or keep personal effects (like voter ID cards, birth certificates, marriage licenses, or photos) dry and intact. "It is also impossible to sleep when the mud seeps in. Imagine; everything around you moves," said one resident.

Those whose houses were destroyed or seriously damaged but nonetheless have their *lakou*, or yard, intact, and those with more than the average economic resources or other means, stay in tents elevated from the ground by cinder blocks recovered from the houses. But those who have these sleeping berths are the distinct minority.

#### Sanitation

People staying at or near their houses and not inside one of the 800 camps within the capital do not have to contend with the problems associated with sharing a bathroom with neighbors. At even the best-managed camps, this is a widespread concern. The Sphere Minimum Standards are clear about how many people should share a toilet: no more than twenty. These conditions are not even being met right in front of the National Palace, where foreign NGOs, dignitaries like former U.S. presidents, and journalists visit. The toilets line the outside of the camp, presenting the appearance of plenty. Hidden from view are rows and rows of tarps and tents.

And this is in a camp that is relatively well taken care of. Away from the glaring gaze of foreigners, there are camps that are far worse off. In Place de la Paix (Peace Plaza), in the Delmas 2 neighborhood, also lining the perimeter,

there was a row of toilets next to the trash receptacles, which was next to the water distribution and the site for the mobile clinic. Strikingly, there were only thirty toilets for 30,400 people. In a small camp in Carrefour, to go to the bathroom people have to ask a neighbor whose house is still standing. Camp leader Carline explains, "It's embarrassing. And even though they are neighbors, it's starting to strain our relationship." They have to buy water and carry it back into the camp.

According to a June 2010 Displacement Tracking Matrix, 6,820 people lived in the soccer field outside of the rectory in Solino. Despite this density, residents had to wait for almost five months for the first toilets to arrive. When asked how people defecate, a resident held up a small plastic bag usually used to sell half cups of sugar or penny candy. "We throw it in the ravine across the street." In the recently discovered camp in Impasse Thomas (CAJIT), housing almost 2,500 people in Paloma, a far-off neighborhood in Carrefour, there were no toilets—either portable or latrines—at least as of August 12, seven months after the earthquake.

These cases are unfortunately not isolated. According to even the most conservative estimates, with some large camps in which assistants had to estimate taken out of the sample, the average number of people sharing a single toilet in the Port-au-Prince metropolitan area is 273 people. Thirty percent of camps (twenty-seven out of eighty-nine) with verified information did not have any toilets at all. Another investigation from LAMP, IJDH, LERN, and the University of San Francisco Law School found similar results, that 27 percent of families had to defecate in a plastic container or an open area. These data were collected seven months after the earthquake, despite the persistent narrative that people are swelling the camps—or faking it, just using the camps during the daytime—primarily in search of services.

Unfortunately, residents' needs don't stop with the installation of toilet facilities; many of those that do exist are not cleaned regularly. Although residents of twenty-five camps reported that their toilets were cleaned every day (37 percent, mostly those with portable toilets), ten camps (15 percent) reported that they are cleaned less often than once per month, and seventeen (25 percent) report not having the toilets cleaned at all (figure 9.1). "They treat us like animals!" said an exasperated resident. She was interrupted by a neighbor: "Worse! Animals live better than us." Some members



Figure 9.1 Condition of a toilet that had not been serviced for six months, Kolonbi camp, January 2012. Photograph by Mark Schuller.

of the Water, Sanitation, and Hygiene (WASH) Cluster are frustrated at what they see as the irresponsibility of NGOs: "We call and call and write report after report. Some just flatly ignore us."

### Water

Central to any public health effort is the provision of safe, clean water. In several reports, the United Nations highlights the distribution of water to 1.2 million people as a success of the ensemble of agencies and NGOs. Like sanitation, there were still large gaps in water distribution to IDP camps seven months after the earthquake. Take, for example, the case of Bobin, in a ravine outside of Pétionville, in a popular neighborhood off of Route des Frères. As of seven months after the earthquake, the 2,775 residents still had no water. A single PVC pipe that had cracked offers some people a couple of buckets whenever the government turns on the tap for paying clients. Many people use the rainwater in the trash-filled ravine. Some individuals had the



opportunity to fetch water from a nearby tap, either privately owned or at a nearby camp. Residents mentioned that NGOs had talked about installing a water system, but seven months after the earthquake, it still had yet to materialize.

Several other camps, particularly in Cité Soleil and CAJIT in the hills above Carrefour noted above, were without water as the research team investigated. Said Olga Ulysse, CAJIT leader, "Carrefour is blessed with many little springs. But the problem is that they are running under the destroyed houses and the decomposing bodies." The other choice is to walk downhill to the adjacent camp, pay for a bucket of water, and carry it back up the hill.

Of the camps where assistants could obtain reliable information, thirty out of seventy-one, or 40.5 percent, of camps did not have a water supply, and three others (4.1 percent) had a nearby PVC pipe that was tapped outside the camp. With the notable exception of the WASH Cluster—which is distinguished as the only U.N. cluster cofacilitated by the Haitian government, accountable to the people and not the NGOs, and characterized by an activist, hands-on approach to filling the gaps in services—people from all levels of the aid industry repeated the refrain that providing life-saving necessities encourages dependency. A possibility that seemed not to have been considered was to work with the Haitian government to provide lower-cost, sustainable water lines and taps that, even though not free, could have been maintained by community groups as they existed before the earthquake.

"People are only living in the camps in order to get the free services," said a particular NGO worker, but it could have been one of many. This discourse has wide currency in aid circles and foreign parliaments, including the U.S. Congress. In addition to this issue, several commentators pointed to the issue of profit making. According to a person who works at a foreign development agency, private water company owners persuaded President René Préval to stop free water distribution because it was cutting into their profits.

#### *Health Care*

Several gaps remained within the coverage of health care facilities inside the IDP camps. At its peak, only one camp in five had any sort of clinic facility on site. This number does not account for quality. For example, in one camp,

Carradeux, a tent was provided by UNICEF that resembles a clinic, but it was completely empty as of July 2010: no medicines, no first aid supplies, and no nurse practitioners were present on researchers' five visits to this camp. "I'm a nurse," executive committee member Elvire Constant began. "But we don't have the means to serve the population. UNICEF knows the tent is here, but they have never come by, not even one day, to negotiate with us, to tell us whether it could be a mobile clinic or a health center."

A couple hundred meters inside the camp, a tent from U.S. NGO Save the Children, whose purpose eluded everyone I asked, was empty and ripped past the point of providing any shelter as early as July 2010 (figure 9.2). Carradeux is an officially managed, planned relocation site, and it was therefore supposed to be an example for others. Indeed, the researcher who visited the camp gave this camp a score of 3 out of 10 in overall quality, with 1 being acceptable and 10 being the worst imaginable. Most other camps were given higher scores, meaning the conditions were worse.

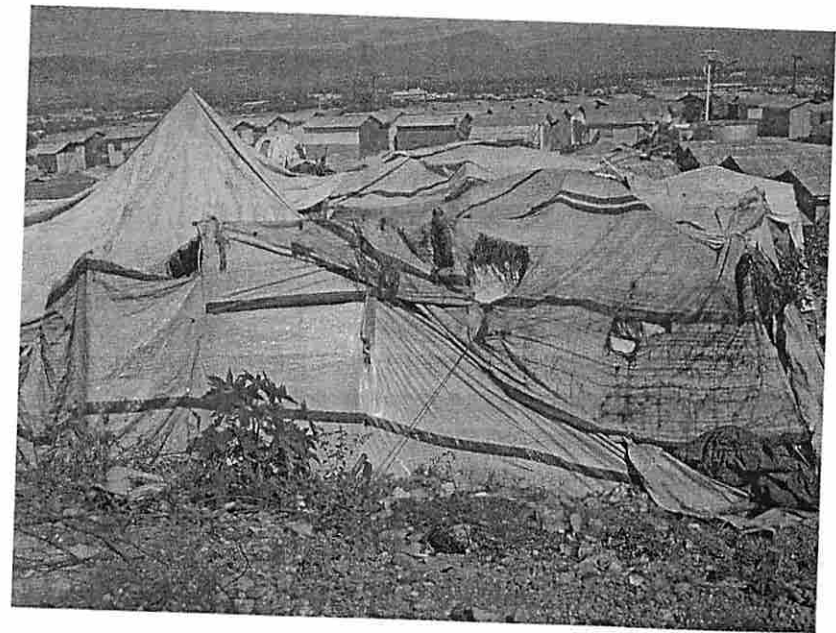


Figure 9.2 NGO clinic abandoned by July 2010, Carradeux camp. Photograph by Mark Schuller.

According to residents, the median time to walk to the nearest clinic was twenty minutes, with the mean being twenty-seven minutes. Five camps were so isolated that residents told researchers that it took ninety minutes to reach the nearest clinic. The same could be said of pharmacies. Although in the earthquake's immediate aftermath, medications were given to residents free of charge, this practice stopped early on in most camps' neighborhoods. Nine out of eighty-five responses, 10 percent, of camps had some form of a pharmacy on site. The mean time to walk to the nearest pharmacy was twenty-five minutes, with the farthest being two hours. To borrow Agamben's words, Haiti's IDP camps are only repositories of bare life.<sup>7</sup>

#### CHOLERA

The lack of sanitation services became the prime breeding grounds for illnesses such as cholera, which struck Haiti with great force. Cholera claimed over 6,300 lives as of the summer of 2011, nine months after the outbreak. Despite the millions of dollars in new pledged aid to Haiti to combat the disease, little progress was made during the first several months after the outbreak. Using the same random sample of 108 IDP camps, a team of three Université d'État d'Haïti students investigated forty-five camps in January 2011 that, as per the previous August 2010 study, had lacked either water or toilets. The results show a minimum of progress: 37.6 percent instead of 40.5 percent still did not have water, and 25.8 instead of 30.3 percent of camps still did not have a toilet. Cité Soleil, which had demonstrably fewer WASH services as of August, showed the most dramatic improvement. The primary reason was that the WASH Cluster, cochaired by the Haitian government agency Direction Nationale de l'Eau Potable et de l'Assainissement (DINEPA), took a hands-on approach to problem solving. Although the other eleven U.N. clusters met in the U.N. logistics base, where Haitians were prevented entry and meetings were held in English, a foreign language, a DINEPA official met with local government and NGO staff in the various city halls across the metropolitan area. After the cholera outbreak, DINEPA set a goal of 100 percent coverage within Cité Soleil.

The cholera outbreak—combined with the continued lack of services—was a key factor in the rapid depopulation of the IDP camps. According to the IOM, only 810,000 remained in camps as of January 7, 2011, down from

almost twice that before the cholera outbreak. One in four of the camps that researchers visited had disappeared since the summer of 2010, eight because of IDPs' fear of cholera and three because of landowner pressure. Given little progress since the outbreak, most of the patterns remained. Camps with NGO management agencies were still far more likely to have needed services, resulting from NGOs' primary roles to convene service actors; this became increasingly evident by 2011.<sup>8</sup> Municipality involvement was still a factor in services, with far-flung Croix-des-Bouquets and Carrefour still lagging far behind in service provision; however, some progress was made in Cité Soleil IDP camps because of a concerted effort led by the Haitian government.

At the time of writing, people were still dying of cholera. In fact, the 2011 rainy season heralded a recrudescence in the waterborne illness. Despite this, NGOs pulled out of providing WASH services in the camps; as of October 2011, only 7 percent of camps had water services.<sup>9</sup> What explained the outbreak in a country that hadn't had one in over a century? Fingers were pointed every which way. Unfortunately the structure of the humanitarian response to the earthquake bears significant responsibility.

#### NGOs' RESPONSIBILITIES IN CHOLERA

As is generally known in Haiti (evidenced by graffiti), U.N. troops brought cholera to Haiti. One of the world's leading experts on cholera, French epidemiologist Renaud Piarroux, said clearly that the first cases of cholera were immediately downstream from the U.N. base in Mirebalais.<sup>10</sup> This report was suppressed but was finally published in July 2011. This thesis was proven with genetic evidence in another independent, peer-reviewed article in August 2011 comparing the genetic makeup of the cholera strain in Haiti with that of Nepal.<sup>11</sup>

Despite the U.N. troops' clear signature on the epidemic, generally the international response failed to protect IDPs and other Haitian people from the outbreak. Haiti's increased vulnerability to the disease was predictable, especially after the gaps in services in the IDP camps and the surrounding poor communities. According to the WASH Cluster's own database, not even a majority of residents had regular access to WASH services before the cholera outbreak. Only a third of the camps had access to water.

Why, given this information, was more prevention work not done? Why, despite the figures put out by NGOs and the international community and dutifully reported in the media about service delivery, was there a systemic failure? "In short, a lack of accountability," said one international aid worker. Even before the earthquake, donors' reward structure worked against collaboration, coordination, communication, and participation. The earthquake didn't solve these structural problems. By infusing the system with ever-increasing cash, it only got worse. A solution proposed after the posttsunami experience was the so-called cluster system introduced by the U.N. There are twelve clusters, each responsible for ensuring effective and coordinated action in a sector (for example, education, health care, and water and sanitation). Despite the promises, the cluster meetings excluded local voices: all but the WASH Cluster were held in a U.N. base where access was closely guarded, and many were held in English. They were also performative, not deliberative: instead of focusing on problem solving, the meetings tended to be spaces to communicate messages or to promote an NGO or for-profit service, for example. Again, the notable exception was the WASH Cluster. In the end, no single individual agency could take the blame for the collective failure. No individual agency could be compelled to provide needed services in the camps. The one agency that could, the Haitian government (national or local), was still underresourced despite the billions in aid sent to Haiti. Despite public discourse by both U.N. Special envoy Bill Clinton and Secretary of State Hillary Rodham Clinton about the importance of rebuilding Haiti's government infrastructure, it only received 1 percent of the emergency funds.<sup>12</sup>

Several NGOs, including Médecins Sans Frontières and Partners in Health, individually led valiant efforts to bring lifesaving services to the IDP camps. There are lessons in their best practices, such as the latter's explicit coordination with the Haitian government, but the failures, particularly to close the huge gaps, require attention and analysis if the epidemic is to be stopped in Haiti or prevented in other disaster situations. Neither international nor national NGOs are structurally accountable to the Haitian population. They have no incentive or requirement to go outside their turf even though the disease does not respect camp boundaries (figure 9.3). The gaps in services persisted, and people's response was to flee: in November 2010, all 546 people

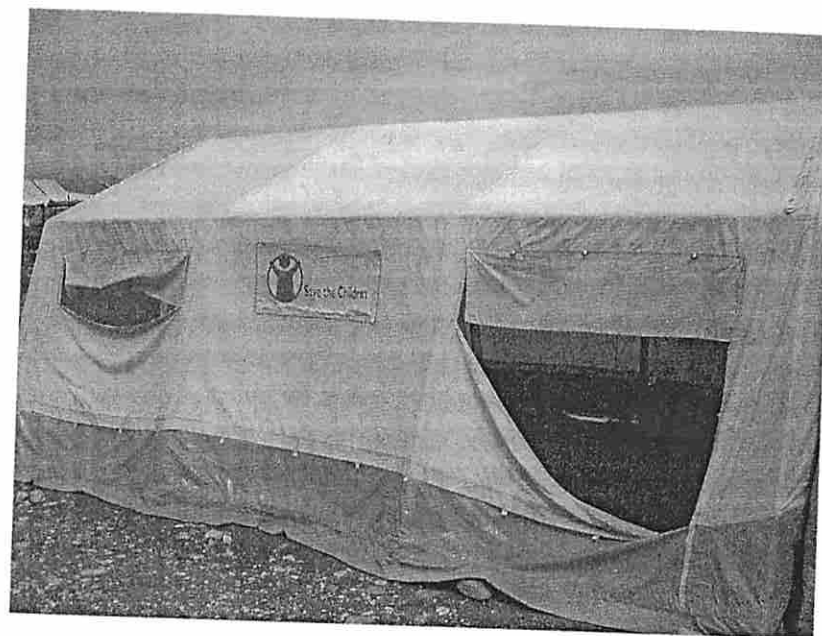


Figure 9.3 Carradeux camp, highlighting the boundaries of haves—served by an NGO—and have-nots. Photograph by Mark Schuller.

staying at an Adventist church in Carrefour fled the day that eight people had contracted cholera. No water or sanitation services were in this camp; church officials had also pressured residents to leave. Closing this gap would require a greater role and resources flowing to the government, at least minimally.

With very little capacity to even adequately play an oversight role, not to mention offering incentives to NGOs, the Haitian government has little ability to help. To sum up, according to a Haitian government WASH official, "The bottom line is we have no carrots and sticks. NGOs are private agencies and pretty much can do what they want." Many in Haiti speculate that this is exactly the way the international community wants it: with foreign agencies in control, and the Haitian people and even the government on the sidelines.<sup>13</sup>

Although it might be argued that the response to the cholera outbreak was actually better in the camps, the data are inconclusive and subject to interpretation. Even if true, the lack of services within the neighborhoods directly



resulted from the weakened capacity of the government to provide what would be the most cost-effective and permanent, sustainable solution. With the exception of Spain, which had funded DINEPA (the Haitian government WASH agency), donors—with the complicity of NGOs receiving donors' aid—did not invest in the public capacity to provide water and sanitation services in the neighborhoods, for reasons discussed above.

#### HISTORY OF NGOS IN HAITI

Many Haitian scholars have written about the history of development associations, including NGOs and peasants associations.<sup>14</sup> Arguably the most influential work was an M.A. thesis by ethnology student Sauveur Pierre Étienne, who qualified international governmental organizations' implantation as an invasion.<sup>15</sup> Borrowing heavily from a previous work by Mathurin and collaborators, Étienne discusses the history of NGOs in the country. The political climate under the Duvalier dictatorship, particularly François Duvalier, was hostile to NGOs, but a small group of foreign agencies worked in the country. As Richman's and McAlister's chapters in this volume argue, religious NGOs were tolerated. In exchange for U.S. support for the succession of power to Jean-Claude Duvalier, the United States demanded acceptance of NGOs, particularly Protestant groups.<sup>16</sup> The ouster of Jean-Claude Duvalier in 1986 provided an opening for foreign agencies—international financial institutions such as the World Bank and the International Monetary Fund as well as bilateral agencies such as the United States Agency for International Development (USAID) (see also Arthur's chapter in this volume on the connection between USAID and Duvalier)—to implement neoliberal policy reforms such as trade liberalization, floating the currency, and privatization.<sup>17</sup> Duvalier's ouster, supported if not engineered by the United States, was also an opening for NGOs. According to official records, only forty NGOs were legally registered and recognized before 1971, when Baby Doc took over from his dead father; by contrast, from 1986 (when Duvalier fled) to 1990 (the first democratic election), at least thirty-one NGOs opened offices in Haiti.<sup>18</sup> By 2005, the Ministère de la Planification et de Coopération Externe (Ministry of Planning and Foreign Cooperation) officially recognized 343 national and international NGOs, inching up to 400 just before the earthquake.<sup>19</sup> Ministry staff estimated double this number as of August 2010, seven months after

the earthquake. In 2009, U.N. special envoy Bill Clinton declared there to be 10,000 NGOs in Haiti, blurring the distinction from community-based organizations to international nongovernmental organizations, a number that has since become true through its continued repetition.

Critiques of this invasion abound from across the political spectrum in Haiti. Étienne and Lwiji had a public argument, each trying to outflank one another in terms of whose critique of NGOs was more radical.<sup>20</sup> Both were also vocal critics of Aristide. Aristide supporter Paul Farmer offered a note of caution about NGOs, saying that they "aren't necessarily more democratic than *elected* governments."<sup>21</sup> In addition to these critiques from the left, Haitians on the right are similarly critical. A general mistrust is reflected and structured in the two foundational regulatory documents of the NGO system, Jean-Claude Duvalier's decree about NGOs on December 13, 1982, and the revision decree of military dictator General Henri Namphy of September 14, 1989. The preamble to both decrees declared the legislation necessary to protect national sovereignty.

Ordinary citizens were also critical of what they saw as corruption—how NGOs got rich off people's misery. Said one, "When they come to give the country aid, only the bigwigs see it. They only give us a coating of dust." Many people began speaking of an insular, privileged NGO class who acted as intermediaries.<sup>22</sup> Since the earthquake, these critiques have only gotten louder. Graffiti denouncing NGOs have become a common occurrence in Port-au-Prince after the earthquake, particularly after the cholera outbreak in October 2010. NGOs appear to many to lack the will to help. Said one frustrated youth, "NGOs know the problems to resolve, but they want you to be in misery before they give [it to] you, make you suffer." And another: "They have the means to help. If they don't help, NGOs wouldn't exist. And it's because of these problems that they exist. If all problems were resolved there would never be NGOs." How did NGOs that began as private voluntary agencies with a shared mission and commitment to service become these behemoths roundly trashed and distrusted by the Haitian people?

#### CHANGES TO NGOS

As many scholars noted, NGOs as a structure began as private, voluntary associations—most tied to faith-based communities, but some secular—that



raised the majority of funds for their work.<sup>23</sup> Many practitioners recall that these nonprofit associations were close-knit and self-sacrificing, as well as focused on a shared mission. It is arguably still true for grassroots organizations that raise most of their money from members.

The system was remade after shifts in donor discourses, policies, and practices. After the end of the cold war, donors like USAID and the World Bank did not need strong centralized states to compete against the Soviet bloc. In fact, they discovered that states were too strong, centralized, corrupt, and removed from the people. So they began directly financing NGOs instead: the 1990s saw a tenfold increase in NGOs, from 6,000 worldwide in 1990 to an estimated 60,000 by 1998.<sup>24</sup> Currently, there are so many NGOs that we can't even guess at their number.<sup>25</sup> This rise in the number of NGOs is matched with an increase in funding through them. Globally, in 2005, NGOs channeled anywhere from \$3.7 to \$7.8 billion of humanitarian assistance,<sup>26</sup> and \$24 billion in overall development funding.<sup>27</sup>

In addition to the general economic model favoring NGOs, foreign aid is often caught up in geopolitical struggles, such as Haiti in 1995. Republicans who had just taken over Congress were looking to expose President Clinton's inexperience in foreign policy. Returning exiled president Aristide to power was his only success story to date, unlike Rwanda and Somalia. So Congress forbade USAID to fund Aristide: all USAID funds were to go toward NGOs. Other bilateral donors such as Canada and multilaterals such as the U.N. and the European Union followed suit. More generally, Haiti is often a laboratory for new donor policies, from eradicating the Haitian pig population after a swine fever outbreak and structural adjustment in the 1980s to the *Cadre de Coopération Intérimaire* and the performance monitoring in the first decade of this century—not to mention U.N. clusters after the earthquake.<sup>28</sup>

I conducted a multiyear ethnographic analysis of two local women's NGOs both working in HIV/AIDS prevention. One received primarily private funding from an array of European NGOs and the other strictly public funding. The differences in the two NGOs' management and relationship with their recipient populations was striking: the publicly funded NGO offered far less space for participation than the NGO with private NGO partners.<sup>29</sup> From this basis and on the basis of secondary research, hypotheses about the shifts in NGOs as a result of donor policies are possible—for example, that

donor policies and the huge infusion of cash have corrupted NGOs. Policies like results- or performance-based management have centralized decision-making authority and closed off avenues for meaningful local participation. Rather than an open, participative, democratic process, NGOs are increasingly rewarded for a bean-counting approach that reduces people to statistics. On top of this, pressures of upward accountability and the pressures to spend (and get more contracts from the donor) undermine the relationship with local communities. Consequently, corrections and changes made from on-the-ground experience are increasingly difficult.

The byzantine reporting requirements also cut off intra-NGO communication. Staff who work in the field and who are the direct points of contact with aid recipients are increasingly removed from decision-making authority. Local needs deliberation has become increasingly irrelevant, as NGOs have to follow the project cycle and do exactly as they're told to implement donor priorities, or they risk their funding being pulled. The reporting requirements create top-heavy NGOs with more resources directed toward higher-paid full-time administrative staff to keep up with them, with at least one full-time accountant versed in USAID or other donor reporting requirements and software. Job ads—often written in English—explicitly ask for these competencies.<sup>30</sup>

Despite much rhetoric on accountability to beneficiaries and the emergence of principles and standards such as Humanitarian Accountability Partnership and Sphere, the reward structure actively discourages local participation, open lines of communication with aid recipients and within the office, and collaboration and coordination with the state or other NGOs. The reporting and other requirements imposed by donors reorient NGOs to be more concerned with accountability from above, not from below. If an NGO fails a community, the community has no recourse. Beneficiaries have no direct contact with the donors or even NGO directors. If a state-sponsored development project failed or lined the pockets of insiders, citizens would be in the streets protesting, because there is at least in theory some accountability, some responsibility, to the citizenry and politicians can be voted out of office. But at the base, NGOs cannot be compelled to work better or work in underserved areas, because they are first and foremost private voluntary initiatives. This is why any NGO can point to individual successes after the

earthquake while huge gaps in water and sanitation services remained a year after the earthquake.

Because donors' relationships with NGOs trump others through ever-powerful reporting and management regimes, there is little incentive to cooperate with one another. NGOs are, structurally speaking, competitors with one another and the Haitian government itself. Why share information or coordinate with an entity that is competing for the same resources? Often these relationships erupt in hostilities, but is it any surprise that given this, and donors' systematic undermining of the state's oversight/coordination capacity, only a fraction of NGOs in Haiti even bother to submit the bare minimum, annual reports, to the Haitian government? According to staff at the Minister of Planning and Foreign Cooperation, only 10 to 20 percent gave their reports to the government. In many cases, donors' policies actually encourage NGOs to disregard the authority of the state. NGOs often pay employees three times as much as the equivalent government ministry, what World Bank researcher Alice Morton termed raiding.<sup>31</sup>

Therefore, far from representing individual moral failures, or a Haitian mentality, as Schwartz would suggest,<sup>32</sup> actors within the system are in fact behaving in a quite understandable fashion responding to the power structure, inequality, and the rewards system of the aid enterprise.<sup>33</sup> Official donors' reward structure works against collaboration, coordination, communication, and participation. This reward structure is within the purview of international aid agencies to change.

## CONCLUSION

As this is a volume on the idea of Haiti, the rapid spread of cholera is a reminder that ideas have material consequences. The idea of Haiti being a paradigmatic failed state and having been dubbed the Republic of NGOs by the *Economist* became a self-fulfilling prophesy, writing the Haitian government out of any responsibility in the emergency response. At the end of the day, no one was responsible for ensuring adequate WASH services to stop the spread of the disease, ironically except in Cité Soleil, where the government took a hands-on role and declared 100 percent coverage. Although this success—because the government asserted a role as coordinator and policy maker—may be dismissed as symbolic, it is an important symbol. Even in

Cité Soleil, progress can be made if the NGOs work to support the government's plan. A full year after the outbreak of cholera, it was announced that the government would be working with NGOs to vaccinate against the disease, an idea that was long in coming. Again, this could symbolize new articulations of how the international aid apparatus can work with the Haitian government. It is only sad that this new discourse is written with the lives of 6,500 people who perished while these ideas were finally being sorted out.

## NOTES

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3. Valerie Kaussen, "States of Exception: Haiti's IDP Camps," *Monthly Review* (2011): 37–42.
4. See the International Organization for Migration December 2011 Haiti Shelter Report, <http://www.iom.int/>.
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13. Janil Lwijijs, *ONG: Ki gouvènman ou ye?* (Pòtoprens: Asosyasyon Inivèsite ak Inivèsitèz Desalinnyen—ASID, 2009); James Petras, "Imperialism and NGOs in Latin America," *Monthly Review* 49, no. 7 (1997): 10–17.

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