

# Local Governance and Public Goods in Malawi

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**Abstract** This article outlines the impact of local governance institutions on public goods provision in contemporary Malawi. Three cases – on safe birthing, market management, and public safety – are presented. These demonstrate that coordination between agencies and rule enforcement are important to the delivery of public goods. Undermining coordination are jurisdictional overlaps and uncertainties, capacity weaknesses, politicisation of public services and resource constraints. Policy shifts originating with donors and major regime changes compound the problem. Conflicting rules and norms emerge during transformations, and their not being enforced contributes to their not being obeyed or adopted by citizens. It is also important to work with local beliefs and perceptions, since doing otherwise can undermine attempts to provide public goods. Citizens and local leaders do join together, launch self-help initiatives and work with local and state officials to deliver public goods, but for various historical reasons these collaborations generally remain small and weak, and do not endure over long periods in Malawi.

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## 1 Introduction

In Malawi, as in most of sub-Saharan Africa, the under-provision of basic public goods is a key factor in the persistence of widespread poverty, while public goods provision is strongly related to patterns of local governance. But exactly which local governance institutions are associated with better or worse provision? This article explores that question, drawing on material gathered in 2009 from urban sites in the north (Rumphi), centre (Kasungu) and south (Ndirande township, Blantyre) of the country. Public goods provision was scrutinised in four fields: safe birthing (reducing rates of maternal mortality), security and public order, water and sanitation, and the enterprise environment and markets. Although information was gathered on provision from the pre-colonial period forward, here the focus is on how public goods were supplied during the three regimes of H. Kamuzu Banda, Bakili Muluzi and Bingu wa Mutharika. Proximate determinants of the adequacy of provision were identified and tested as the fieldwork progressed. These are:

- The strength of the sanctions regime
- The presence or absence of cohesive communities capable of sustaining collective action

- The extent to which the relevant actors and agencies coordinate their activities.

Taken together, these explain a good deal about why public goods are adequately provided in some areas and periods and not others.

This article discusses the three causal variables briefly before providing examples of how they have influenced the provision of the various public goods over time and place. It is shown that the nature of the state and politics in each period had an impact on how these variables were structured and operated, and thus on the provision of public goods in the four fields.

## 2 Proximate determinants of the provision of public goods

Initial analysis of the data collected during the fieldwork suggested that certain institutional configurations were associated with better public goods delivery. Further analysis showed that these configurations are related to the nature of governance – specifically, how various local leaders interact with, rule and motivate their people. The nature of local governance is in turn influenced by the regime in power centrally. For example chieftaincy became more or less prominent, local

assemblies' powers waxed and waned, and party officials' actions changed over time as the authoritarian H. Kamuzu Banda regime (1965–94) gave way, following the democratic transition, to the governments of Bakili Muluzi (1994–2004) and Bingu wa Mutharika (2004–present). We begin by discussing the three proximate determinants that seem to affect the delivery of public goods at local level.

### **2.1 The strength of the sanctions regime**

When rules, norms and regulations are clearly delineated and enforced, whether by state officials, community leaders or traditional authorities, public goods are more likely to be adequately created and distributed. A lack of sanctions – where commands and rules are not backed by credible threats and punishments – permits individuals and groups to behave in ways that are not socially responsible. Some sanctions are more subtle than others. For instance, enforcement may include imprisoning or ostracising rule breakers. But just as effective is instilling beliefs and standards – norms of behaviour – so that individuals and groups wish to comply.

### **2.2 The presence of cohesive groups capable of sustaining collective action**

The presence of a cohesive community, however rooted, facilitates – but does not guarantee – the voluntary collective action which is critical to the provision of some public goods. Groups are formed in various ways – through shared identities, common experiences, collective ideologies and beliefs, etc. Some are deliberately created while others emerge organically. Members tend to share trust (at least within limits), methods of working and goals. Economic development is fostered by individuals and groups who can initially draw on the benefits of close community membership, while acquiring the skills and resources to participate in wider networks beyond community level at a later date. In other words, bonding can be a defensive mechanism to reduce risk and uncertainty and to provide protection, whereas bridging between small groups is more proactive and generates linkages that offer new opportunities (Woolcock and Narayan 2000; Easterly *et al.* 2006).

### **2.3 The coordination of activities horizontally across jurisdictions**

The delivery of public goods is, in part, dependent on the horizontal collaboration, in an efficient

and sustained manner, of various key administrators, leaders and agencies, especially where there are jurisdictional overlaps or gaps. To do effective development work, various actors need to integrate their policies, divide the work, coordinate their activities, combine funds, share information, assess results in common, etc. Problems arise when they do not; when agencies operate in the same arena without coordination; or when there are gaps between their jurisdictions and people living in these are ignored. The relevant agents are numerous and include chiefs, city and state officials, supervisors of parastatals, religious leaders, heads of community-based organisations (CBOs) and non-governmental organisations (NGOs) and donors.

## **3 The delivery of public goods**

Data were collected using ethnographic methods in three quite different urban settings<sup>1</sup> over a period of four months in 2009, and similar research has continued in one location (Ndirande) for a further ten months in 2010. Here, only three cases are presented to illustrate the richness of the material being collected and the extent to which the three proximate variables can begin to explain variances in the delivery of public goods. Only a very basic discussion of the three post-independent regimes is provided, but it is sufficient to understand how national and local governance impact upon these institutional configurations and public goods provision.

### **3.1 Crime and policing: Neighbourhood Watch and the Kasungu police listening post**

H. Kamuzu Banda's government was notoriously strict on rule enforcement. Where corruption, disobedience or disrespect were found, they were addressed by local Malawi Congress Party (MCP) officials, including the Malawi Young Pioneers (MYP) or the Malawi Youth League, working in tandem with the police. Under Muluzi (1994–2004), discipline became lax and popular perception was that there was 'too much freedom'. Governance reforms contributed to this, in that regulations barring detention without trial, setting *habeas corpus* standards, ensuring bail was granted within 48 hours of arrest, and establishing a new court system were part of the transition. Crime rose dramatically in the Muluzi years as the MYP was disbanded, and the police force did not grow sufficiently to take up the slack. This resulted in delays in evidence

gathering and court appearances, which when combined with bail regulations meant that suspects – even those caught red-handed – were released by the police back into the communities where they had committed crimes. Informants also say that under Muluzi, people also came to feel they could do what they wanted to promote their self-interest, regardless of others, and that it was not considered politically correct (or safe) for neighbours to try to stop them.<sup>2</sup>

Quite soon after Mutharika came to power in 2004, people noticed a change. Malawians say that the current regime is similar to Banda's, although less 'oppressive'. Civil servants also recognise the difference between the current and former presidents: for instance, one senior policeman in Kasungu told us: President Mutharika is 'serious' and has set a new tone within the police service (C and K, 17 August 2009, see Guide, below). In fact, before the 2009 election, we found people in the north calling Mutharika 'little Banda' and joking that they were 'voting for the MCP' when they actually meant Mutharika's DPP (Democratic Progressive Party). A return to relative order is welcomed by the bulk of the population after ten years of deteriorating services and insecurity. But what has been most surprising to researchers is the willingness of citizens to give up some of the freedoms acquired at the transition, especially regarding detention and mobility.

One reform promoted by donors after the democratic transition was improving security through retraining the police, introducing community policing and building security infrastructure. This programme included the formation of neighbourhood watch (NW) committees, in which local leaders – generally chiefs – were to establish a volunteer force to guard their neighbourhoods at night. Without sufficient equipment, training, wages or police support, these NW units have repeatedly dissolved and been revived to disband again. One outcome of the NWs' ongoing struggle against repeat offenders was a decision – apparently made by groups independently of one another – to establish a curfew. The time at night when this applies varies from place to place (10 pm generally) and it refers only to pedestrians. Citizens and NWs have also called for the police to close bars before midnight as a method of getting thieves off the street, but without the

same success.<sup>3</sup> There has also been pressure on the police to keep criminals in jail rather than allowing them to go free on bail while evidence is gathered and they await court hearings.<sup>4</sup>

Characteristic of the current regime's emphasis on reviving a rule-based regime is the Kasungu Police Listening Unit, a joint effort of the police, the town assembly and the market committee.<sup>5</sup> The initiative was formally launched by the town's Chief Executive Officer (CEO), the deputy police superintendent and the market master in mid-September 2009. In his remarks at the inaugural meeting, the CEO said that the Town Assembly has by-laws from 1998 when local government was formed, one of which is about security:

We want now to tighten the security here at the Kasungu bus depot and market premises. We want to secure visitors here who travel from different places. I want Kasungu to have a clean record on security at the depot and market. I want Kasungu town to be attractive and disciplined. I want the police to get rid of all robbers and thieves who steal things from people travelling to various places. Let me warn you – those who steal people's assets – in this depot, I am ordering the deputy police superintendent that 'if you catch a thief here, please do not grant bail'. I repeat this, 'do not grant bail'. I want Kasungu *boma* to be free from theft. What you should know is that Kasungu *boma* is the home of former President Dr H. Kamuzu Banda. So we must be exemplary. To him peace and order always [were important]... I urge you to tip the Kasungu police on suspects so that we get rid of all criminals... In 1994–2006 we had a lot of criminal cases, so now we want to get rid of these crimes. If you are caught, no bail shall be given. I am not threatening you, but the assembly shall not accept bail (A, 16 September 2009, see Guide, below).

The Deputy Superintendent of Police added that 'we had a lot of challenges as far as security is concerned' at the market and depot but, 'since 2005 we have been trying to confront these problems and as Kasungu police, we promise to work hand-in-hand with Kasungu Town Assembly, to combat crime... Peace and order will be good from now. Let me repeat what the Chief Executive has said. He has ordered that

once you are caught, no bail shall be granted. So be careful, keep away from theft... We must work hand-in-hand with the vendors and if you know some of the suspects, tip the police'. Slightly less effusive was the market master, who thanked the authorities for using market revenues well and for being accountable. At the same time, though, he urged the police not just to pick anybody anyhow. 'You need to arrest those [acting] against the law; criminals must be arrested'. Finally he added, 'I agree that police, please, once a criminal is caught, do not grant bail' (A, 16 September 2009, see Guide, below).

This case provides evidence of both coordination between various agencies to deliver public safety and an emphasis on rule enforcement. A recent visit to Kasungu indicates that the Unit is functioning, and that the town officials are still working with the market committee and the police to ensure the bus station and nearby market remain orderly (W, 30 June 2010, see Guide, below).

### **3.2 Safe birthing, traditional birth attendants and hospital deliveries**

It took President Mutharika some time to sort himself out politically, but one advantage he had for consolidating his rule was the Heavily Indebted Poor Countries (HIPC) debt relief, which increased government spending and enabled the recruitment of more staff (training of doctors and nurses, hiring of more health surveillance assistants (HSAs) and the purchase of equipment, etc.). That said, the building of new infrastructure and the coordination of government inputs do not seem to have kept pace with the policy reforms. A combination of new rules and an inability to implement them has meant that while some changes have been made, they are not enough to guarantee better service delivery. Coordination of groups and leaders to ensure delivery of goods remains weak in some areas, as do community initiatives to provide self-help. The example of efforts to reduce the maternal mortality is provided here.

The reasons given for high rates of maternal mortality (984/100,000)<sup>6</sup> in Malawi are similar to those given elsewhere in Africa. Doctors at Queen Elizabeth Central Hospital (QECH) in Blantyre listed these as: a lack of appropriate care when heavy bleeding accompanies delivery; eclampsia and hypertension; prolonged labour

and a ruptured uterus; septic abortions and peritonitis; being left alone during labour; a lack of transport to health facilities; a shortage of staff on labour wards (resulting 'in women giving birth on their own, and in some cases babies may fall from their beds leading to death'); incorrect drug treatment; youthful childbearing; HIV/AIDS complications; lack of blood supply; and delivery by traditional birth attendants (TBAs) and other untrained and ill-equipped persons (M, 4 and 5 August 2009 and A, 16 October 2009, see Guide, below). The fact that women are in danger during pregnancy and childbirth has entered the language as a proverb: *Ali ndi pakati*, meaning pregnant women are at a crossroads between life and death (M, 3 August 2009, see Guide, below).

#### **Traditional birth attendants**

For years, Malawi sought to train and register its TBAs, as they were frontline providers of maternity care and represented an improvement on delivery by unskilled female relatives in areas under-served by doctors and midwives. Recently a long-time trainer of TBAs explained their role to us:

They were certified and registered with the clinics in their areas. They would get all the requirements they needed, which was called 'delivery kit.' It included gloves, papers, basins, buckets, things to lay on the floor. They were taught how to boil water for delivery and the like. At the end of each month there were supervisors to check up on them. They would visit them anytime to see what they were doing whether good or bad. The aim was to see if they were following the rules of hygiene to avoid diseases. The supervisors, who would be either HSAs or nurses directed by the clinic, would visit them without notice. These TBAs had a very good relationship with the hospital at large. They were known by the ministry or the District Health Officer (Z, 2 October 2010, see Guide, below).

But in-keeping with international guidelines, in mid-2009 the government changed its policy and banned the use of TBAs. The state radio broadcast this edict far and wide (*NyasaTimes*, 17 and 19 June 2009, see Guide, below). The ban remained until late 2010.<sup>7</sup> But during those 15 or so months TBAs were being encouraged by

hospital staff to send women to clinics to deliver, though their 'retraining' was not implemented everywhere. Even where it had been, all TBAs had not stopped practising and we found active TBAs in all three urban sites.<sup>8</sup>

But the decree did mean that more women were coming to (already overburdened) clinics than before, and that TBAs, who once received equipment from health centres, were no longer provided with delivery kits. Thus, TBAs operating outside the health system were having to use bare hands to deliver babies or to turn breech babies around (M, 4, 10 and 11 August 2009, see Guide, below).

#### *Hospital avoidance*

Why do women use TBAs when a health centre is nearby? In parts of Ndirande, many of the roads are narrow, stony pathways which are impassable to vehicles. Thus, an ambulance (if there was one)<sup>9</sup> or a car or minibus would not be able to reach women in such high-density areas. In Kasungu and Rumphi, where each district hospital has an ambulance, distances are greater and often women start labour and do not reach the hospitals before delivering. But there are other more socially rooted reasons why women choose to deliver at home, despite the government's instructions otherwise.

Kasungu hospital appears well managed and relatively clean, although even here there were cases of women in the maternity ward sleeping on the floor, under the beds of other women. Overcrowding was reportedly due to the ban on TBAs and encouragement to come to hospital given by the media and HSAs in the surrounding areas to pregnant women who might previously have delivered nearer home. The Kasungu district hospital's maternity ward's facilities were the same as before the ban, and incapable of receiving the additional intake. Therefore, those awaiting labour – including women sent to the hospital weeks ahead of delivery because problems were foreseen or because due-dates were uncertain – often stayed in the 'guardian shelter',<sup>10</sup> which was also inadequate. At Ndirande clinic there is no guardian shelter, and women who need special care were referred to QECH, although they do not always end up there because coordination between the two facilities is not sufficient to ensure mothers follow clinicians' orders.

Though encouraged to deliver in a clinic or hospital and taught that home deliveries are more dangerous, many women prefer to stay away. In discussions with guardians and patients, a number of reasons rooted in local beliefs and perceptions were given for the preference for home deliveries:

The nursing staff – especially trainees and younger female nurses (as opposed to older, more experienced nurses and male nurses) – are 'rude' and 'arrogant', give preference to their friends and richer women, chastise women for not following rules and demand too much of them. 'A patient's dignity is stripped off and they become objects of abuse and laughter' (N, 13 September 2009, see Guide, below).

Women in Kasungu hospital's guardian shelter told us that the HIV/AIDS test is 'compulsory' and the test 'scares some mothers to shun antenatal clinics. Some mothers would commit suicide if they are told [sic.] of their HIV+ status'. One HSA admitted to us in Ndirande that the health committee there deliberately does not tell women beforehand about HIV testing at the antenatal clinic so they are not deterred from attending (N, 11 September 2009, see Guide, below).

Some nurses reportedly ignore women's needs to the point of putting women and babies in danger. Some women and a doctor told us of cases where babies had been born without assistance at the hospital, which had fallen onto the floor because nurses were not available to help. Others claim that some medicines are withheld from them and given to preferred patients.

Some women are afraid their pregnancies will be 'stolen' if they go to hospital to wait to deliver, i.e. they fear women there will use witchcraft to remove their babies from the womb.

Women want to avoid caesarean sections and they fear that a delay during delivery at the hospital will result in the operation being performed. They argue that TBAs are more patient with slow progress and allow women to deliver normally.

Women who have extra-marital sex while pregnant – or who have husbands who have multiple partners (inside a polygamous marriage or outside their single marriage) – fear that their pregnancies will be ‘tied’, meaning that the birth canal will close and they will not be able to deliver normally. To counteract this they believe that they must take herbs given by a traditional herbalist, and this practice is not allowed in the hospital. Instead, ‘tied’ pregnancies are treated by caesarean section, so women who know or suspect infidelity and expect this problem will want to deliver elsewhere.<sup>11</sup>

Women fear that strangers in hospitals may steal their newborn babies.

Women are also scared of using family planning as they have heard that ‘there is no safe method’. ‘Mothers therefore shun the hospital [as they] fear that they will be persuaded to take one of the contraceptive methods’ (N, 11 and 13 September 2009, see Guide, below).

Therefore, in spite of the government’s ban on TBAs, additional funds provided to the Ministry of Health, and new staff and some new construction within the health service, many women who could access maternity wards preferred to deliver at home. The lack of enforcement was the result of the unwillingness and inability of all state agencies to enforce the ban,<sup>12</sup> as well as some public antipathy to hospital deliveries. HSAs were active in raising public awareness of the safety of clinic or hospital deliveries, and in places chiefs took part. For instance, one of our team attended what might be called an inquest held after the death of a woman and baby during childbirth at home in peri-urban Kasungu. Attending the community meeting to explain why the woman died and to emphasise the need for women to go to the hospital to deliver were the chief, an HSA supervisor and the widower (M, 24 August 2009, see Guide, below). Where education rates are higher, as in Rumphu, maternal mortality rates are significantly lower (382/100,000; A, 16 October 2009, see Guide, below), which suggests a likely element in the long-term solution. This case shows how a well-intentioned policy reform can fail because of failure to take account of local beliefs and culture, and a lack of coordination among the relevant agencies – factors which could have been anticipated if there had been greater foresight of consequences.

### **3.3 Market management and politics: the Ndirande market**

One of the most interesting aspects of public goods provision in Malawi is the way that party politics interferes with collective action, the selection and effectiveness of leaders and inter-agency coordination. While this is not the only divisive factor undermining public goods delivery,<sup>13</sup> after the democratic transition in some areas it became one of the most powerful. It is certainly the case in Ndirande market but is also in evidence elsewhere, for example Ndirande water kiosk management and recently in Kasungu market (W, 28 June 2010, see Guide, below).

Ndirande market burnt to the ground in October 2008, seven months before the national presidential and parliamentary elections. In other markets, where there were fires in the same period reconstruction efforts were handled by vendors and local officials. But in Ndirande rebuilding was politicised because Ndirande is ‘the political bedroom of the UDF’. The United Democratic Front is a southern party, which in 2008 was led by former President Muluzi, a Yao (when many vendors are also Yao) and a Blantyre businessman. He was then running for president. He came and gave a speech and donated K2 million to the vendors to cover their losses and start reconstruction. The leader of a second political party gave K3 million. Each of the vendors (whose wares had been destroyed in the fire) reportedly received between K1,000–2,500 as a result. Local Indian businessmen also pledged over K10 million and after that, Mutharika promised K3 million to rebuild the market. Reportedly, a committee based at Blantyre assembly offices was responsible for gathering and spending these funds. In November 2008 vendors were called there to receive money but were ‘told that their money was only K3.5 million and that K800,000 had been borrowed by their [the city’s] boss, who was in Ghana for official duties at the time. This did not go [down] well, and people started protesting’. They marched back to Ndirande and set fire to the DPP office near the clinic. ‘So the President said, “no more money from the government side”’. After that the other pledges failed to materialise too. In the meantime the Minister of Local Government had promised publicly that the government would rebuild the market, requiring some K160 million, and at

year-end 2009 the first phase was nearing completion (W, 25 July 2009; K and C, 31 October 2009, see Guide, below).

The impact of changes in party regimes on the management of the Ndirande market has been very significant. For 30 years under Banda, the MCP was in power and no other parties were allowed to form or to operate; moreover, everyone was in theory a member of the MCP. In Ndirande market there was an elected market committee that represented vendors and an individual committee member was voted to represent their section (dried fish, fresh fish, bananas, hardware, etc.). The committee's role was (and is) to handle disputes between vendors within their sections, to represent their vendors at market meetings, to relay information from the market master to vendors, and to discipline vendors who break section-level and market rules. At the transition to multipartyism, market politics become more complicated. A former (MCP) market chairman explained:

that he lost his power soon after people voted for a multi-party type of democracy through a referendum and there was no respect for market leaders due to too much freedom campaigned [being advocated] by the opposition parties during their campaign. The UDF was announced the winner of the general elections, and the party took charge of the market and theft was on the increase [ever] since then. The market had three party committees: UDF, MCP, and AFORD [Alliance for Democracy] but the UDF committee had more powers. [For example]... if a UDF member insulted an MCP member, the MCP member was first reporting to the MCP party chairman at the market who was reporting to the UDF chairman as the in-charge of the market and together they were resolving the conflict in a balanced way (W, 27 July 2010, see Guide, below).

The difficult transfer of power from Muluzi to Mutharika in 2004–05 – as the latter threw off the UDF yoke and formed and populated the DPP by luring politicians from other parties – had ramifications in the Ndirande market. There were ‘elections of a neutral committee in 2005’ our informant explained, ‘and Mr Zimuka was elected into position but the DPP man, Mr Bernard, started frustrating him and Mr Zimuka

just surrendered and stopped working as a chairman’ (W, 27 July 2010, see Guide, below). Because party-political tension continued in national politics until 2009 when Mutharika and the DPP won a landslide victory, Ndirande market committee politics remained contentious throughout the period. This affected how well the committee represented the interests of vendors and how successfully it helped local government enforce market regulations.<sup>14</sup>

In 2008, a meeting between the President and the market committees was held in Blantyre, and the elected chairman of the market committee went to attend. The situation as it unfolded was explained to us this way:

The elected chair got the message and he informed his Executive Committee members about the issue. But the DPP party decided to pick those who had positions in their party and they went to see the President. A few days later the elected chair heard that there was to be a meeting at the Civic Centre and when he went there with the whole committee, they were surprised to hear that there was an order from above that all the markets in Blantyre should be led by people who are in the DPP party and that the committee was replaced by those who went to see the President (W, 22 July 2009, see Guide, below).

A deputy in the DPP affiliated committee explained the situation differently: ‘[I was] elected into this position at the time Dr Bingu wa Mutharika was forming his party [2005] and those who elected me were members of the DPP, who are also traders in the market. The former [UDF] committee doesn’t operate and they are not involved anywhere since their party lost power. They have also accepted that their powers are gone’ (W, 28 July 2009, see Guide, below). In his version, the old (UDF) committee is effectively dissolved, although we know it still exists and operates.

Crucially, the DPP market committee has the backing of the city ‘assembly’. Blantyre city officials admitted to us that they prefer working with committees affiliated to the ruling party.<sup>15</sup> This is not an unusual situation in Malawi: it is a legacy of the Banda years when committees were MCP-affiliated, and later, as Muluzi became president, UDF loyalists felt justified in taking

control of public works committees (e.g. water kiosk committees in Ndirande). Muluzi actually encouraged it by telling communities that development would accrue only to UDF supporters (Cammack 2000). Granting positions of leadership to public goods committees at local level that generated perks – not unlike nominating senior politicians to cabinet or mid-level supporters to parastatal boards – was one way in which the UDF could reward and retain loyalty. In 2005 when Mutharika consolidated power in the DPP, the UDF members were deposed by DPP supporters (also true of the water kiosk committees in Ndirande). This practice has gained some legitimacy: those who support opposition parties seem resigned to being displaced and not benefiting equally from public goods, and so await the day their party is in power and they can take control of public jobs, committees and funds. This may be labelled ‘a single party mentality in a multi-party context’. It demonstrates again<sup>16</sup> the belief that democracy rewards all citizens equally, no matter who they vote for or who is in power, is not yet entrenched in Malawi.

Evidence gathered in 2009 in Ndirande market suggests that most vendors preferred to work with the old committee, not necessarily because it was UDF affiliated but because it was elected openly. The DPP committee was seen by many to be imposed from above. The DPP committee was weakened further when the chair gave up his market bench and when a dispute arose about who was his deputy. Now the situation is in flux, as the need for a ‘neutral’ committee is recognised by many in the market and some in local government. A new election may be called.

In the meantime, the politicisation of the market committees means that, first, the market master

– a city employee – has a fine line to walk between what city officials perceive to be the legitimate committee and what the vendors feel is representative of their interests. Having clear lines of authority in the market would make his job easier. Second, while section leaders are able to handle disputes and problems among their own vendors, a strong market-wide committee is needed to deal with wider issues – such as demands to rebuild the market more quickly, to construct flush toilets, to install more water taps, to improve nearby roads, to deal more effectively with insecurity, and to move stallholders on the streets into the market.

#### 4 Conclusion

These and other experiences demonstrate that coordination between agencies and rule enforcement is important to the delivery of improved security, safe birthing and market management. Undermining coordination are jurisdictional overlaps and uncertainties, capacity weaknesses, politicisation of public services, and resource constraints. Policy shifts originating with donors and major regime changes compound the problem. Conflicting rules and norms emerge during transformations, and if they are not clarified and enforced (due to weak leadership) this contributes to their not being obeyed or wholeheartedly adopted by citizens. It is also important to work with local beliefs and perceptions, as the fate of the attempts to improve maternal health services has shown. Citizens and local leaders can join together, initiate self-help and work with local and state officials to deliver public goods (e.g. market committees, community health committees, vendors’ savings clubs, neighbourhood watches, etc.). But for various historical reasons these initiatives are generally small and weak, and rarely bridge one to another or endure over long periods in Malawi.

traditional chiefs. Its population is largely migrant and poor and notoriously politicised and volatile. Kasungu is a relatively prosperous market town in the central region, and although attracting migrant tobacco estate workers from all over Malawi, its main population is Chewa. It has a town government but also chiefs retain some powers inside the urban area. Rumphu in the north is a smaller market town, and the seat of the district with the highest development indicators in the country. It has a strong

#### Notes

\* This article draws on field research undertaken by Edge Kanyongolo (K), James Amani (A), Moir Walita Mkandawire (W), Basileke Mwamlima (M), Joel Nkhonya (N), Eveness Zuze (Z) and Diana Cammack (C). Each researcher’s field notes are cited by their initial and a date in the text, with a guide provided below.

1 Ndirande, Malawi’s oldest township, is within the city boundaries of Blantyre, although parts of it are still under the authority of

- Paramount chief (of the Tumbuka) who takes an active role in local politics, as well as local government officials.
- 2 One Malawian commentator explained the change in attitudes this way: ‘There is no[t] much zeal to work... because people have taken democracy as a break from the pressure they were having [from Banda] previously. They were work[ing] for fear, but with the coming of democracy they say “yeah let us now relax; this is the time we have been looking for”’ (AfDevInfo n.d.). Residents in the three sites provided stories about how rules and enforcement procedures were relaxed after the transition, e.g. the lifting of a ban on the sale of auto (spare) parts in open markets – forbidden by Dr Banda (as an anti-theft measure); and the relaxation of the requirement for dipping cattle and inspecting animals for sale as the state’s veterinary services weakened. Talking about payment of business licence fees, a Blantyre city official explained that since 1994 many regulations, including by-laws requiring the payment of fees for business licences, have not been enforced. ‘People’, he said, have done ‘things the way they want since multi-party’, so they wonder why the city, asking for payment now, is being so ‘hard’ on them (C, 31 October 2009, see Guide, below).
  - 3 It is widely held that ‘thieves hide in bars up to midnight then start stealing’ (A, 5 September 2009, see Guide, below). But enforcing these laws is not easy, especially against barkeepers, who, it is intimated, pay bribes to assemblies to get licences that permit late closing. ‘If the police was given power to control these bars’, one Kasungu resident noted, ‘it would have been better’. An Ndirande resident concurred: ‘at Chinsewu and Goliyo bars, people enjoy [drinking] up to 2 am... If police can patrol in bars I think the crime can also end... If they can be closing at 22.00, we can be on the safer side’ (A, 5 August 2009, see Guide, below).
  - 4 This is not a law, although the clerk at Machinjiri magistrate court reminded us that vagabondage is against the law and is punishable by the police and courts. He said that if a person is walking on the streets after, say, 10 pm, he may be picked up by police. The person must explain why they are there, and if they cannot, they will be charged with ‘rogue and vagabond’ and if proved guilty, must pay a fine (C and K, 27 July 2009, see Guide, below).
  - 5 Local government Town Assemblies have not been elected since 2005 and have no legal standing but they still run informally as the Secretariats still exist.
  - 6 Maternal mortality rates range from 807/100,000 to 1,120/100,000, depending on the source. We are using 984/100,000, the number given to us by a health professional in Rumphu (A, 16 October 2009, see Guide, below). The goal for MDG5 is 155/100,000 live births and is unlikely to be met (*Daily Times*, 12 May 2010).
  - 7 Reminiscent of the Banda regime when the president’s remarks on radio were sufficient to set new policy, President Mutharika, upon returning from Cuba, said that he had called upon the Ministry of Health and Gender to never stop TBAs from practising. Instead, they should devise a plan for training them. His instruction was met by applause at the press conference (Z, 4 October 2010, see Guide, below).
  - 8 We were told by the Blantyre District Health Officer that there were 104 TBAs in the district, and that 77 had so far been retrained for their new roles (essentially, directing women to go to health centres for delivery) (M, 14 August 2009, see Guide, below).
  - 9 The city has not had a dedicated ambulance since 2002. The district health office has four ambulances for the whole district, only one of which serves the city (which includes Ndirande) (M, 28 July 2009 and 14 August 2009, see Guide, below).
  - 10 ‘Guardians’ are female relatives of the pregnant women who accompany them in order to assist with the birth.
  - 11 *Mapinga* is the belief that if one of the spouses has extra-marital relations, the pregnancy will be ‘tied’. *Chiyenda mitala* is the belief that a polygamous husband can, by sleeping with another wife, cause a ‘tied’ pregnancy. Breaking of sticks and giving herbs during a ritual ensures a ‘woman delivers immediately’, but these treatments are forbidden within hospitals. ‘This belief is strong and makes most women go for TBAs or deliver on their own’ (N, 11 September 2009, see Guide, below).
  - 12 We were told by a senior official in the Ministry of Internal Affairs and Security (C, 15 July 2010, see Guide, below) that it is not against the law for TBAs to practise, which is why the police do not enforce the ban.
  - 13 Other institutions inhibiting collective action and fostering ‘hedge clipping’ and the ‘tall

poppy syndrome' (where public pressure cuts down innovators) include *nsanje* (jealousy) and witchcraft beliefs. These create a sense of insecurity that keeps people from asserting their rights, aspiring or complaining about malfeasants.

- 14 Ndirande market is slowly being reconstructed and in the meantime it is poorly served with water (there is one tap), toilets, cleaners, and security. The market master (a city official) needs a strong and representative committee to ensure sanitation, health and safety measures are enforced.
- 15 The market clerk at the city told our team: the vendors 'don't have any committee that belongs to politics, but a neutral one'. Then

the city's security official corrected him, 'the city assembly is comfortable to work with committees that are pro-ruling party. Let us not beat around the bush, it's important to have committees that belong to the ruling party since they are respected even here at the assembly and they don't bring unnecessary problems at the market' (W, 29 July 2009, see Guide, below).

- 16 This goes hand in hand with the widespread view that MPs represent their constituencies and have little role in *national* development, which is the President's purview. MPs should instead concentrate on providing private, club and public goods to voters at home.

#### **Guide to field notes and interview citations**

A = James Amani notes  
C = Diana Cammack notes  
K = Edge Kanyongolo notes  
M = Basileke Mwamlima notes  
N = Joel Nkhonya notes  
W = Moir Walita Mkandawire notes  
Z = Eveness Zuze notes

#### **References**

- AfDevInfo (n.d.) *Kamuzu Banda*,  
[www.afdevinfo.com/htmlreports/peo/peo\\_8762.html](http://www.afdevinfo.com/htmlreports/peo/peo_8762.html) (accessed 1 November 2010)
- Cammack, D. (2000) 'At the Crossroads: Freedom of Expression in Malawi', *The Final Report of the 1999 ARTICLE 19 Malawi Election Media Monitoring Project*, March
- Easterly, W.; Ritzen, J. and Woolcock, M. (2006) 'Social Cohesion, Institutions, and Growth', *Economics and Politics* 18.2: 103–20
- Woolcock, M. and Narayan, D. (2000) 'Social Capital: Implications for Development Theory, Research, and Policy', *World Bank Research Observer* 15.2: 225–49