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The Force of Absent Things: HIV/AIDS, PEPFAR Vietnam, and the Afterlife of Aid

Alfred Montoya

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Abstract This article examines emerging strategies employed by nongovernmental organizations working in HIV/AIDS prevention and control in Vietnam that have been put to work in the recent past in the context of precipitous declines in US funding for such work through the President’s Emergency Plan for AIDS Relief (PEPFAR). These strategies foreground specific personalities in an instrumentalization of experience, expert knowledges, and identity in a delicate balance between projecting strength and indicating urgent need. These strategies are played out in the realm of social media, facilitated through information communications technologies (ICTs) that are quickly restructuring forms of sociality and the tradecraft of identity politics. These technologies and the strategies they enable turn on and modify a relatively new configuration of Homo sapiens that I have elsewhere termed the Human. This article explores its special usage in an Asian context in ICT-enabled networks, against the background of an epidemic and its looming projected increases in morbidity and mortality.

Keywords: HIV/AIDS · Vietnam · Human · Networks

1 Introduction

“At the first, at that time, Vietnam did not receive free medication for patients. Very difficult to find, for us, ARV [antiretroviral therapy],” said the doctor, director of a Catholic clinic in the Go Vap district of Ho Chi Minh City. “You understand? No medication means that many people, if they got HIV, died. The disease was death at that time.”

We had been discussing the history of his clinic, a small operation serving the local residents of its bustling district, funded almost exclusively through private donations and the clinic’s network that consisted of partnerships with the local Catholic community. His clinic treated mainly unskilled laborers employed in nearby Korean and Taiwanese factories, artisans like local carpenters, and poor students from the delta

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who find their way to Go Vap for its informal and cheap housing. Go Vap is one of the last remaining of the relatively central districts that is still affordable for the working class as the city rapidly gentrifies and residents are priced out of the downtown districts. According to the doctor, these processes have increased its reputation as something of a vice district of sex workers, informal gambling and pool halls, and petty crime.

Because of the dire situation in the city and the lack of access to treatment at the time, many of the clinic's early HIV/AIDS patients suffered tremendously, not only from the overwhelming and agonizing effects of the virus on their bodies but also from profound social stigma and exclusion. As the toll mounted, the clinic purchased an isolated property in the rural Cu Chi district to serve as a hospice for the dying. Dubbed the Grass House in the late 1990s, it is still in use. "[In those days] many died, especially of loneliness, abandonment," the doctor said. "There the trees and the water did not discriminate against them."

In the early 2000s, however, things began to turn around. In 2004, the US President's Emergency Plan for AIDS Relief (PEPFAR) selected Vietnam as a focus country for its global fight against HIV/AIDS, with the first PEPFAR funds arriving the next year, accompanied by an army of administrators, consultants, trainers, health professionals, and experts from around the globe. "At that time we were very lonely, and with no one to stand behind us," the doctor continued, "but day by day, with the help of your country, we began to succeed."

For a decade PEPFAR funds poured into the country, helping the Vietnamese to build one of the most comprehensive HIV/AIDS prevention and control apparatuses in the region, providing technical and logistical support across the entire spectrum of anti-HIV/AIDS programs, including funding ARV, counseling and testing, and methadone maintenance for injection drug users. At its height, in 2008, according to a PEPFAR program officer I spoke to in the summer of 2015, PEPFAR delivered nearly US\$100 million and alone made Vietnam among the largest recipients of US aid in Asia. However, since that peak, funding has been drastically cut. That same program officer reported that by 2018 PEPFAR funding will fall to about \$30 million a year. Socially, economically, and politically, these rapid reductions in support have placed PEPFAR's local partners, including the government of Vietnam, in difficult straits, as they have suddenly been asked to sustain vital, often life-saving programs with a fraction of their budgets. At another meeting a US Agency for International Development (USAID) officer told me that they were in the process of determining which of their funded programs were "essential core elements" and which were "noncore services," services that, "if we don't pay, others will pay, and [the patient] will not die because of it." These included provisions for patients' transportation, community or home-based care, hospital fees, and laboratory work. One PEPFAR program officer told me explicitly that important programs have suffered or vanished as a direct result of these cuts. These cuts have especially affected the ability to field outreach workers for most at risk populations. "There is a lot of work that went into educating drug users that has been stopped because of funding cuts," he said. Epidemiologically, these declines have imperiled the tremendous gains PEPFAR has made in the fight against HIV/AIDS in Vietnam since 2005 as new gaps in service and resources are opening for the least well off. Practically, these reductions have shifted much of the burden of service delivery from formerly well-funded local PEPFAR partners to charity and faith-based organizations such as the

doctor's Go Vap clinic, or onto patients themselves, who are increasingly being asked to pay for care and treatment. "Here, every month I must call my brother," said the doctor, whose brother is a small business owner and active member in the local Catholic community. "We got in the situation of asking, begging, please, please help us."

The doctor showed me around the cramped clinic, its tiny pharmacy, and the even smaller administration office. He led me through a hot, narrow hallway, made even narrower by the sagging cardboard boxes that lined it, almost shoulder high. "The dead ones we put here," he said, indicating the dusty boxes with casual gruffness, boxes that held the closed files of patients who had died. He estimated that the clinic currently served about a thousand persons living with HIV/AIDS (PLHA), some of whose files were also kept in the boxes in the hall because of lack of storage space. Many of these PLHA, he said, were poor students, working-class residents of the district, local female sex workers, and men who have sex with men (MSM). Some members of these latter groups, he explained, were people who had found the clinic in Go Vap after suffering discrimination or mistreatment in government clinics in the more central districts. All had received basically free or subsidized care and treatment at the clinic, a clinic whose ability to provide such services was in danger. I asked the doctor what would happen to these people without future sustained support for the clinic. He paused to consider his words. "The Grass House is waiting for them," he said, after a moment, "and then the death."

This article explores the effects of the dramatic and dangerous decline of PEPFAR support for the Vietnamese HIV/AIDS apparatus it built and sustained for a decade. This article describes how these declines condition new appeals now being made on the basis of a new inflection of the Human and human rights by newly desperate organizations. These appeals indicate what shape the Human is taking and may take in the near future. This article explores the role of absences, both in terms of how absence is a necessary characteristic of the contemporary figure of the Human and in terms of how the lack of sustainable support for HIV/AIDS prevention and control is driving a potential reconfiguration of this figure. *Absence* here is taken up as an "alerting to misplaced presence," meaning, following Brian Rappert and Wenda [Bauchspies \(2014: 1\)](#), a way of "provid[ing] a remedy to misperceptions about the solidity of what is deemed present," in this case that of the contemporary figure of the Human. More conventionally, *absence* here is used to signal a lack, both identifying a deficiency and directing a reprimand ([Rappert and Bauchspies 2014: 1](#)). This article is a pointed critique of the abrupt withdrawal of PEPFAR resources from the fight against HIV/AIDS in Vietnam. [Bauchspies \(2014: 58\)](#) has also critiqued the role absence plays in mainstream development narratives, which uncritically posit the "introduction" of science and technology as a remedy to underdevelopment, enshrining them in this narrative. Used thus, "the coupling of science and technology as instruments of development is still serving the western club as when they were instruments of colonialism and imperialism" (59). [Rappert \(2014: 41\)](#) asserts that "absences are a constant accompaniment to social life and social research" and that the "fashioning of absences could help cultivate mindfulness about the conditions for social life and social analysis" (46). This article also seeks to provide some empirical grounds (see [Frickel 2014: 87](#)) for the exploration of absence proposed by these scholars, examining not only the way absence functions conceptually, but looking at how a specific Asian information communications technology (ICT)-enabled network of aid is created to respond to an existing set of absences while creating new ones in the context of a looming epidemic.

If, following Michel Foucault following Kant, the task of philosophy is to “explain what today is, and what we are today” (Foucault 1996 [1989]: 359), I hope to show how absence figures within the social and biopolitical worlds inhabited by those infected or affected by HIV/AIDS in Vietnam, how it is one of the bases of, and conditions an engagement with, a contemporary figure that structures much of what we believe ourselves to be today.

2 The Human

The current HIV/AIDS apparatus in Vietnam was built upon, and found its legitimacy by undermining, the older local HIV/AIDS apparatus, a system that in the main took a “social evils–based orientation to the virus and involved a policing or quasi-military approach to epidemic prevention as it structured itself around the protection and purging of the People (*nhan dan*). This figure originated in Marxist-Leninist thought and was shaped by Vietnamese authorities during the First and Second Indochina Wars in Vietnam (Montoya 2012). “The People” is a figure that emerged in Vietnam during the war against the French, with the Vietnamese Communist Party call for the “mobilization of the entire (largely rural) population against a foreign aggressor” (Robert 2005). Robert argues that this representation relies on identifying and purging an enemy/other; defining this enemy constitutes the People’s own identity. The figure of the People was accompanied by a metaphorization of the social body, particularly within the post-1954 Democratic Republic of Vietnam, which gained traction in the Second Indochina War. Within this discourse Hanoi represented the partition of Vietnam as an “amputation of the nation,” Hanoi casting itself as the true untainted Vietnam and disqualifying the Saigon regime as contaminated by its collusion with foreigners. In government documents on HIV/AIDS, from roughly 1992 until 2003, the People appears almost without fail as a figure under dire threat and in whose name the whole country, at every level (“every person, family, street, commune, office and organization” [Communist Party of Vietnam 1995: 1]), is being mobilized to restore. Through fear-based media campaigns, large-scale police actions against sex workers and drug users, and the official marginalization of HIV-positive citizens, the government sought to control AIDS by controlling the people and behaviors thought responsible for its transmission in an enforcement mode, a focus that worsened rather than ameliorated the epidemic (Montoya 2012). These campaigns also had the effect of intertwining biology, citizenship, and ethics, rendering HIV/AIDS a biological marker of sociomoral “contagion.”

By contrast, the PEPFAR-sponsored apparatus initiated in 2004 formed around a competing figure, that of the Human, a global risks- and rights-bearing figure that emerged in the post-World War II period and today structures how we go about the business of humanitarian intervention worldwide. As of 2004, HIV/AIDS threatened the health and disposition of “humans” (*con nguoi*), not the People (Socialist Republic of Vietnam 2004). *Con nguoi* is the same “human” found in evocations of human nature (*ban tinh con nguoi*) and sometimes in human rights (*quyen con nguoi*). Similarly, *loai nguoi* means “human,” as in crime against humanity (*toi ac chong lai loai nguoi*). By contrast the term *nhan dan*, the People, retains a quasi-moral significance, preserving the Marxist inflection of “the multitudes” or “the masses.” It is the “People” in the People’s Committee (Uy Ban Nhan Dan) or the People’s Army (Quan Doi Nhan Dan).

No subsequent piece of HIV/AIDS legislature in Vietnam mentions the People as its object. After this point a new US-funded apparatus coalesced around this new object with a mode of operation quite distinct from the old enforcement-based model, in fact, using interventions that had been seriously limited or disqualified under the old HIV/AIDS regime. In a certain manner of speaking, it was at this juncture that HIV/AIDS prevention and control in Vietnam became, literally, humanitarian.

In the 1990s HIV/AIDS was taken up as a local sociomoral problem, a threat to the long-standing figure of the people, a figure that was to be guaranteed through an equally long-standing and long-employed system: the reeducation camp, the punitive sexually transmitted infection clinic, the quasi-military operation, the propaganda campaign. In the 2000s, the virus was taken up as a health problem with a technoscientific solution, a global threat to a global figure, the Human, a figure whose integrity could not be secured through categories or spaces of exception, only through the inculcation of different notions of personal rights and individual risk (Montoya 2012).

However, the Human is a little-examined figure despite the fact that untold volumes have been devoted to humanitarianism in virtually every discipline, and still more to the history and practice of human rights, a domain that has emerged as a specifically modern juridical framework (Riles 2006) with universal ambition that purports to secure the integrity and dignity of this very figure. This work has included patient considerations of anthropology's engagement with these rights, rationalities, and personalities (Goodale 2006), their politics and performance (Fassin 2001a, 2001b, 2005, 2008; Ticktin 2006; Malkki 1996), the specific missions and histories of implementing non-governmental organizations (NGOs) (Redfield 2005, 2006; Feldman 2007a, 2007b; Fischer 1997), and their limitations and problematic interface with local populations (Swidler 2007; DeLuca 2008; Riles 2006; Wilson 2006). Outside of anthropology, numerous scholars in a wide range of disciplines have taken up similar tasks. Many have focused on arguing for a particular genealogical understanding of or historical timeline for the notion of human rights (Hunt 2007; Ishay 2004; Lauren 2011) or the problem of their representations, publics, and circulation (Bradley and Petro 2002). Others have limited themselves to the examination of the fraught production of the document most commonly associated with the topic, the United Nations Universal Declaration of Human Rights (Johnson and Symonides 1998). Moreover, in a telescoping of the orders of observation, others have dedicated their efforts to illuminating the history of critical considerations of the history of human rights (Moyn 2011).

Hannah Arendt, by contrast, posed a series of problems regarding the figure of the Human in her monumental *Origins of Totalitarianism* (1962) when she wrote, "From the beginning the paradox involved in the declaration of inalienable human rights was that it reckoned with an 'abstract' human being who seemed to exist nowhere" (291). This abstraction, despite resting on tenuous foundations, was nonetheless compelling.

Man of the twentieth century has become just as emancipated from nature as eighteenth-century man was from history. History and nature have become equally alien to us, namely, in the sense that the essence of man can no longer be comprehended in terms of either category. On the other hand, humanity, which for the eighteenth century, in Kantian terminology, was no more than a regulative idea, has today become an inescapable fact. This new situation, in which "humanity" has in effect assumed the role formerly ascribed to nature or

history, would mean in this context that the right to have rights, or the right of every individual to belong to humanity, should be guaranteed by humanity itself. It is by no means certain whether this is possible. (298)

For Arendt, the problem of the stateless refugee provoked an immediate and serious crisis for the domain of knowledge, discourse, and practice then attempting to consolidate itself around this abstract Human, a domain that we have come to refer to as “humanitarian” or focused on “human rights.” Refugees who were no longer part of a nation-state and who had recourse suddenly only to their status as human beings, that is, to their bare life as members of the species, found quickly that this provided little benefit or security. Arendt identifies this as a crucial demonstration of the fundamental emptiness of the figure, and the tenuousness of the inalienable rights it supposedly commanded by virtue of its existence, with reference only to itself.

The conception of human rights, based upon the assumed existence of a human being as such, broke down at the very moment when those who professed to believe in it were for the first time confronted with people who had indeed lost all other qualities and specific relationships—except that they were still human. The world found nothing sacred in the abstract nakedness of being human. And in view of objective political conditions, it is hard to say how the concepts of man upon which human rights are based—that he is created in the image of God (in the American formula), or that he is a “representative of mankind,” or that he harbors within himself the sacred demands of natural law (in the French formula)—could have helped to find a solution to the problem. (299)

Indeed, far from being clarified, or representing a resolution, the Human, through the latter half of the twentieth century, emerged as a site of contestation, giving weight to itself primarily through elaboration of the rights said to be proper to it and, consequently, of the risks it acquired because of these rights. This was particularly true during the Cold War. The competing interests and ideological positions of the United States and Russia, from the time of the UN commission that drafted the Universal Declaration of Human Rights, contributed to shaping this figure, providing it with rights emphasized by the Soviets (social and economic rights, concerned with access to economic resources and communal obligations/protections) and those stressed by the United States (civil and political rights, concerned with individual freedoms, free speech, etc.) (Johnson and Symonides 1998: 43). In fact, in many ways, the figure’s ill-defined “abstraction” or “emptiness” perfectly positioned it to accept these diverse new elements that took the form of rights and risks, allowing it to function as a cipher upon which a new universality could be projected. Far from being a handicap, the self-evidential but ambiguous nature of the Human, became an essential aspect. The drafting committee of the Universal Declaration of Human Rights, after its arduous deliberations, asserted, “We agree about the rights but on condition no one asks us why” (Hunt 2007: 20). Because of its essential formlessness, explanations and exactitude could in fact undermine its force. As Hunt noted, “An assertion that requires argument is not self-evident” (20). Tobias Rees’s (2014: 460) work on the emergence of the global health apparatus as a “humanity plan” also notes this: “Humanity is present through its absence. It is rather a future, something we work toward. It is not a reality, yet.” According to Rees, bioscientists and health humanitarians are increasingly

defining humans biologically, in inclusive, global terms, beyond the confines of the social and the “national society-fostering logic” of the nation-state that defined twentieth century humanitarian thinking (470). For these actors, the nation-state is “a failed humanity project, precisely because the humanity that the nation-state secures is always an exclusive one, one focused on the nation—on the national society—only” (270). In this radical perspective, statelessness “appears in a different, (almost) positive light,” this “positivization of the stateless” representing a “major mutation of the 250-year-old space that has opened up the possibility of humanity” (471). In short, the Human draws its force, in part, from its very absence.

Absence plays another essential role in the functioning of the discourse surrounding the Human. Devin Pendas (2002) argues that human rights discourse and practice prioritizes representations of suffering and a victim-oriented perspective such that it is impossible to tell a human rights story without telling a victim’s story. He goes so far as to call this relationship between the representation of victimization and the functioning of human rights a “fundamental linkage” (37). This is because, in his estimation, human rights are latent, invisible, as long as they are not infringed upon. Since 1945 human rights have come to concern both positive and negative liberties (freedom to and freedom from), in contrast to the doctrine of “natural right” from which they were derived, Enlightenment era “natural right” in Pendas’s estimation is concerning itself only with negative liberties (Pendas 2002: 37). Human rights are something kept in reserve until needed, fundamentally retroactive and restitutive. Pendas claims that this quality makes it so that human rights are only ever mobilized after the fact, or after the victimization event, and cannot function to prevent mass atrocity without the support of other frameworks such as the rule of law or claims of memory (Pendas 2002). Human rights discourse thus operates most easily as a discourse of past, if recent, violation, with less traction even in the near future, as a discourse of risk. This form has no trouble engaging certain kinds of difficulties as acute emergencies but also explains why casting poverty and other structural forms of violence (Farmer 2004: 307) as human rights problems is virtually impossible. Absence or, rather, the useful but constraining negative space of human rights claims allows for the forceful conceptualization of some types of difficulties as urgent problems against which mobilization can and must then occur. However, this emphasis simultaneously represents a kind of myopia, as other classes of difficulties remain, outside of this purview, almost inconceivable as a “human rights” or “humanitarian” problem.

For instance, it is only in the past decade that poverty itself has been conceived of as a human rights violation (see Sane 2004; Arnspenger 2004; Mbonda 2004; Koubi 2004). Pierre Sane (2004: 271) compared the human toll of the Rwandan genocide to the gigantic annual loss of life from poverty-related disease, and our seeming tolerance for this widespread death in the case of poverty as it becomes normalized or naturalized: “What, then, is the basis of the ethical double standard which leads us to accept the poverty manufactured by our society, even though it kills more surely and methodically than machetes and militias? Is there a single moral or ethical justification for this central contradiction between the equality proclaimed in the granting of rights and growing inequality in access to life-giving resources?” Sane, a former UNESCO assistant director-general for social and human sciences and secretary general of Amnesty International, continues, “As long as we consider poverty as a quantitative, natural deficit to be made up, the political will to reduce it will not be energised. Poverty will

only cease when it is recognised as a violation of human rights and, as such, abolished” (272). Sane then imagines that conceiving this chronic form of structural violence as a human rights issue will transform it conceptually into an acute emergency, the kind that I have argued above is proper to the figure of the Human. Poverty would be considered

a massive, systematic and continuous violation of human rights, its persistence would no longer be a regrettable feature of the nature of things. It would become a denial of justice. The burden of proof would shift. The poor, once they have been recognised as the injured party, would acquire a right to reparation for which governments, the international community and, ultimately, each citizen would be jointly liable. A strong interest would thus be established in eliminating, *as a matter of urgency*, the grounds of liability, *which might be expected to unleash much stronger forces* than compassion, charity, or even concern for one’s own security, are likely to mobilise for the benefit of others. (272; italics mine)

Even so, this reconceptualization of poverty was not without controversy. Scholars pointed out that poverty “cannot be defined by law” as “the criteria of evaluation of the cases to be treated rest on an economic, financial, and monetary definition” that are relative and often vague (Koubi 2004: 327), which poses a problem for a group of rights that take a juridical-legal form (Riles 2006). Other scholars’ work in this area required some linguistic contortions, conceiving poverty as a violation of a “right to non-poverty” (Mbonda 2004: 278).

3 “Good, and Helpful, and Necessary”

Far from the hot, swarming narrows of Go Vap, in the tree-lined relative quiet of Ho Chi Minh City’s District 3, I was welcomed into the archdiocese health outreach office, a modest space whose door opens directly on the rear facade of the colonial-era Archbishop’s Palace. There, the Catholic priest who directs the numerous Catholic-sponsored HIV/AIDS programs in the city began to describe the new difficulties they were facing in light of the impending end of support from the United States. He emphasized the need, particularly in programs that deal with persons infected or affected by HIV/AIDS, for the development and maintenance of strong relationships, emphasizing reliability and trust. “To set up is easy, but to run and maintain, it is different,” the priest said. “This service [HIV/AIDS prevention and control] is not an easy service. It needs experience and capacity and ability to set up relationships. Otherwise it will fail.”

The workload for his programs, scattered in districts throughout the sprawling city, was increasing, even as their external funding dwindled. For example, he told us that the Archbishop’s office budgeted only about US\$5,000 per year for the much-frequented nearby clinic they supported, a clinic that served about a thousand patients. The remainder of the clinic’s operating budget came from donations, and they relied increasingly on unpaid volunteers to staff it. Likewise, one of the major contributions the church made to HIV/AIDS services since the beginning of the epidemic in Vietnam, had been the housing and staffing of hospice services for the dying. He estimated that since his tenure began in 2007, two thousand patients had died in Catholic hospices in the city, a number he ruefully projected might increase as PEPFAR funds dried up. He maintained that the church had been a good partner to the PEPFAR office in Saigon

and stressed that they were reliable, efficient, conscientious managers of PEPFAR funds. “The CDC [Centers for Disease Control and Prevention, a PEPFAR partner that doles out funds to some local subpartners] sees we have so many patients, but we keep expenses so low.”

The CDC’s support for ARV to the Catholic services will end in 2016, a fact the priest reported with some trepidation as these are expensive medications that HIV-positive people require to suppress their viral loads. He noted the CDC’s emphasis on quantitative measures of program outcomes, such as output of services, number of patients seen, drugs dispensed, number of patients who received this or that service. He clearly regarded such accounting as useful, but difficult, and time- and labor-consuming. “We don’t have that privilege. We just work on our feet. We are a very small place, but the patients are so many,” he said. “The only problem is that projects from CDC will end. This year we are feeling much pressure, but we can only do as much as we can. Our counselors, they practice every day, and they learn from their own experience, own failures.”

It was this personal commitment, sacrifice, training, and human capital that he was hopeful would be enough to carry their programs through and make up for deficiencies in material resources. “Everything we do is good, and helpful, and necessary for the people,” he said.

Two watchwords that peppered my conversations with PEPFAR and Ho Chi Minh City Provincial AIDS Committee program officers concerning these reductions were *socialization* (*xa hoi hoa*) and *integration* (*long ghep*). The former was used to describe the process of shifting the burden of supporting services for clients from the government or other institutions, to “society,” that is, to the individual clients themselves. This is, of course, the inverse of how the term is typically used in the West to indicate the shouldering of such responsibilities by the state for its citizens. Vietnamese citizens were now increasingly being asked to pay for HIV-related services that had formerly been free as they had been covered by PEPFAR. The second term, *integration*, referred to the consolidation of HIV-related facilities and personnel in the city. This meant, practically, the closing of stand-alone services for methadone, voluntary counseling and testing, ARV therapy, and the like and their bundling into “one-stop-shop” locations. This also referred to the streamlining of staff, such that three offices that operated with five outreach workers and five HIV testers and five ARV counselors would now be responsible for the same outcomes, but with a staff of ten persons total. This would mean either cross-training and multitasking staff members or overloading single-tasked personnel.

Under these conditions, local and international NGOs and governmental organizations alike are increasingly in the business of trying to determine which of their services are “essential” or “core” services. These are services that, in the words of one USAID program officer, are directly related to life extension and whose costs cannot be borne by other actors.

Additionally, local NGOs whose PEPFAR support is dwindling have taken up new strategies to make up for these declines. The most obvious has been the tendency toward falling back upon the resources of and donations from the networks in which these service providers are embedded. In the case of the faith-based service organizations described above, this meant drawing more heavily upon donations or volunteers from the network of Catholic parishes in the archdiocese of the city or well-heeled

Catholic individuals with faith-based appeals for support or service. Elsewhere, this has meant drawing from the organizations' constituents, or the communities that they serve. One such organization, the Happiness Group (the group and its members' names have been changed for their protection), which was founded to prevent and control HIV/AIDS within the LGBTQ community, has likewise developed a robust social media and public event strategy that strategically focuses on activating a network of young, gay, media-savvy, professional men. This strategy relies on the discursive and practical shaping of young, primarily urban, cosmopolitan, professional identities through ICT-enabled networks, identities that are then linked to a community to which they are said to have a responsibility. The Happiness Group's strategy turns on weaponizing or instrumentalizing experience, individualizing and personalizing HIV/AIDS and HIV/AIDS-related issues through an extended social network mediated and facilitated by ICTs.

Other scholars have produced excellent work on the interface between the politics, science, and technology of HIV/AIDS prevention and control. [Joao Biehl, Denise Coutinho, and Ana Luzia Outerio \(2001\)](#) examined how technological developments in the HIV/AIDS field have restructured the ways clients interact with these technologies and form their individual subjectivities. This work is deeply encapsulated by [Vinh Kim Nguyen's \(2009\)](#) notion of "viropolitics," the range of political, social, and technological elements that have clustered around HIV—from state policy at the most macro level, to the micropolitics of the management of risk and intimate behavior/pleasure. For Nguyen, HIV/AIDS provided an organizing framework for the dissemination of standardized political and social technologies across the globe, likewise reshaping subjectivities, biologies, and social relations. Some scholars have specifically focused on the use of social media for HIV/AIDS outreach, arguing that online outreach overcomes some of the obstacles to traditional organizing. "Since social media is not limited in terms of its ability to reach out to the population, regardless of location, it is particularly well suited for community-based HIV prevention" ([Huang et al. 2016: 540](#)). STS scholars have also taken aim at the generation of "representations" of the HIV/AIDS epidemic through epidemiological and medical technologies (see [Montoya 2013; Chilundo and Sahay 2005](#)), the role of science and technological innovation in responding to and sustaining the model of exceptionalism through which we engage with the epidemic ([Benton 2015](#)), and have highlighted the role played by media, enumerative accounting practices, and "vernacular" or narrative practices in the prevention and control of HIV/AIDS (see [Benton 2012; Montoya 2012, 2013](#)), as well as documented the forms of knowledge production and "credibility struggles" that shaped how the epidemic was understood and intervened upon ([Epstein 1996: 3](#)). The interventions of community members, activists, and scientists resulted in the "multiplication of the successful pathways to the establishment of credibility and diversification of the personnel beyond the highly credentialed" ([Epstein 1996: 3](#)). Steven Epstein's work traces the difficulties of knowledge making within a politics of trust and distrust and examines the transformation of conventional knowledge-making practices at the intersection of social movements and science. In this same vein, [Baltazar Chilundo and Sundeep Sahay \(2005: 247\)](#) argue that

prevalence rate should be seen as a representation, an informational construct created through the information systems that register, report, and analyze these

figures. Also important is the manner in which these figures get used by the relevant authorities. As it has been forcefully argued by various researchers, especially from the domain of Science and Technology Studies (STS), representations, and how they are constructed and used, are influenced by various social, political, and cultural conditions.

This article takes Chilundo and Sahay's point as a launch pad, reading across the grain of how these representations (prevalence, youth infection rate, etc.) are used by a specific community under new conditions of austerity, how these are instrumentalized in ICT-enabled group identity formation that encourages participation in the HIV/AIDS and community work of this group. By doing so we may better understand how we "do" health humanitarianism in the twenty-first century and gain some purchase on the figure of the Human that underpins it.

A social media strategy that utilizes ICTs sidesteps the danger of potential "outings" of constituents as gay or HIV-positive inherent in offline meet-ups, allowing constituents (who may become potential donors and volunteers) from the gay community a measure of control and comfort. These technologies "have the potential to provide a platform to overcome cultural and religious barriers to public discourse and hence prove to be more efficient vehicles for social marketing of sexual health information compared to traditional communication methods" (Khawaja, Ali, and Khan 2017: 111). These researchers also suggest a "multiplier effect" as high user responsiveness to official posts "allow it to be spread well beyond the subscribers of the page, as any user activity on the post is made visible to the user's social circle, who may in turn choose to interact with the information, further spreading it," potentially leading to "viral dissemination" (116).

The news items, events, celebrations, informational campaigns, and other community-relevant material, posted on social media through the individual members' accounts, or the Happiness Group general account, act to turn (individually shared and solicited experiences of) exclusion, disqualification, and isolation into something of an advantage, toward building in-group solidarity among these new participants. This is accomplished through a delicate balancing act performed by the group members and their communications officers, between projecting group strength and indicating urgent need. These requirements, I argue, point toward the ways the integrity and dignity of the Human will be secured in its next era, these strategies central to the "good, helpful, and necessary" work of HIV/AIDS prevention and control in the near future. This is a security established increasingly within the new technology-mediated tradecraft (bespoke, targeted, personalized, then polarized) of identity politics.

4 *Toi Can Dam (I Am Brave)*

As of 13 September 2017, the Happiness Group's Facebook site has about 4,672 people following/"liking" it. The group page provides contact information about the group and functions as a platform for HIV/AIDS- and LGBTQ-related news, and for promoting new campaigns and group initiatives. It is a very active and well-maintained site, with Facebook assuring visitors that the group's messaging monitors "typically repl[ies] within a few hours." The Facebook page is also linked to a group Twitter

account begun in mid-2014, which boasts about 180 followers and links to additional content on Pinterest, tumblr, and YouTube. Advocacy materials were also available for smartphone download from the page. Leaders link their personal Facebook pages to the group site, allowing for more finely tuned and personalized content. One group leader, with an affinity for the latest fashion, posts updates and images from European runway shows alongside news stories relevant to the international and Vietnamese LGBTQ communities. Another uses his personal page to recruit volunteers for the group's events, as well as employees for the group's social enterprise, a coffee/juice stand near their Ho Chi Minh City office. Video content generated by the group's marketing department showcases group events, provides brief tutorials regarding health issues, and, most often, short testimonials by participants and allies. New campaigns are launched on the group site and then disseminated by individuals who are part of the group's network of volunteers, employees, and allies on their individual pages to their individual networks. In contrast to other NGOs working in HIV/AIDS in Vietnam, this group's promotional content is of high production value, almost entirely in Vietnamese, and in the main accessed online, speaking to the group's focus on a predominately young, local, urban (and male) professional/service industry demographic. Only at the end of 2015 did some content appear translated into English, with English subtitles, or accompanied by pop music in English.

According to [Jason Morris-Jung \(2015\)](#), internet-based technologies only became widely available in Vietnam in the early 2000s, primarily in Vietnam's major cities. Today, Vietnam has nearly 40 million internet users, which is nearly 43 percent of the national population ([Morris-Jung 2015](#)). This access and usage are heavily skewed toward wealthier, urban populations. An estimated 8.5 million Vietnamese citizens utilize social media, with Facebook the most popular interface in Vietnam, a new Vietnamese user joining every three seconds ([Morris-Jung 2015](#)). Facebook's popularity in Vietnam, does not extend across Asia. WeChat, KakaoTalk, and LINE dominate the social media landscapes in China, South Korea, and Japan, respectively ([Clayton 2013](#); [Shona 2016](#)). In the case of China, this is shaped, at least in part, by the government's so-called Great Firewall that blocks Facebook, Twitter, and YouTube ([Shona 2016](#); [Rose 2016](#)), though there is some suggestion that the dominance of non-Facebook platforms in these major markets has to do with simpler interfaces, emphases on graphics, and the early adoption of communicatively useful and entertaining features such as "stickers" and emojis ([Clayton 2013](#)). Because of this, health NGOs in these places utilize different platforms for fundraising, promotion, and information delivery (see [Xingting et al. 2017](#)). Vietnam, for its part, is in line with other Southeast Asian countries, such as Thailand, Singapore, Indonesia ([Shona 2016](#)), and the Philippines ([Rose 2016](#)) in terms of the dominance of Facebook. My conversations with young Vietnamese men and women suggest a migration to Facebook from older messaging or chat room platforms, like Zing (a local social media platform that also supported online gaming) and those provided by Yahoo, in the latter half of the 2000s. In late 2008, Facebook added fifty-five languages that could be translated and supported on its platform, including Vietnamese, accelerating this migration. The Vietnamese government's attempts to impose a Chinese-style block on Facebook during that time was famously unsuccessful, with workarounds easily accessed and widely employed. One of the media outreach workers from the Happiness Group explained their selection in an email this way:

Currently, we are developing a communication campaign not only on Facebook but also on Twitter, YouTube, LinkedIn, and Instagram. Facebook is the most popular social network in Vietnam with more than 80% of the population having at least 1 Facebook account. Facebook users in Vietnam spend 2 hours per day surfing it on average. Advertising on Facebook gives us specific options in selecting target audience and geographical localization and help us save a lot of costs as well. (personal communication, 21 September 2017)

It is also worth mentioning that during the summer of 2017 Facebook reached the 2 billion monthly user mark, making it by far the *world's* most popular social media platform, much of this growth fueled by its expansion in the developing world (Con-[stine 2017](#)).

As mentioned above, one significant strategy employed by the group is the personalization of HIV/AIDS issues, including the stigma associated with being HIV positive, and/or a member of the LGBTQ community, as well as the risk of becoming infected through unsafe practices. One recent post, addressed to the group's target demographic and meant to drum up support for the group's International Condom Day event in late February 2016 is a good example of this strategy:

OPEN LETTER

Dear: Friends, youth and students of colleges and universities in Ho Chi Minh City [Thân gửi: Các bạn thanh niên, sinh viên các trường cao đẳng, đại học tại Tp.HCM]

Communications on HIV/AIDS is not uncommon in society, or in the school environment. This is not a new problem, but [such communication] is always necessary for the public, especially the youth.

Today the world has made great progress in the prevention and treatment of HIV, helping to save the lives of hundreds of millions of people, as well as extending the life expectancy of people living with HIV. However, some recent research worldwide, as well as from Vietnam, shows that the number of new people infected with HIV every year is increasing, especially among youth ages 15 to 24. Specifically, out of every four people diagnosed positive for HIV, one is a youth, aged 15 to 24. (group communiqué, 2016; translation mine)

This introduction performs two subtle maneuvers. First, it acknowledges, and neutralizes the possibility that the young people it is addressing may not be receptive to additional information or outreach regarding HIV/AIDS. It implies awareness of the effects of message fatigue and/or the fact that young people may no longer have the same concern regarding the virus as their older cohorts who lived through the epidemic in Vietnam in the pre-PEPFAR, pre-ARV days. Second, it skillfully, with reference to international scientific research and statistical/quantitative authority, communicates the dangers specific to this cohort of people. It asks that the recipients of this message recognize themselves as part of a cohort to which they heretofore may not have known they belonged. This is a cohort whose membership is virtually unrefusable, defined in this way through age and shared risk. This kind of communication, this introduction asserts, is vital for these young people because they are presumably in danger. These youth must now, it implies, take responsibility for their individual health security and in solidarity with their age-mates, for the cohort as a whole.

This communication was part of the launch of the Happiness Group's large-scale public event for International Condom Day 2016, for which they planned a flash mob dance/performance competition and bike-a-thon in downtown Ho Chi Minh City. A series of calls for volunteers and competitors went out to city universities and colleges with information on how to register your own team to participate in the event. Students were called upon to participate in the action "for the prevention and control of HIV/AIDS and against discrimination against people living with HIV, without restrictions on the type and form of [the group's] performance." The day's festivities would be capped by a "gala night," with later postings focusing on the judging of the teams' performances by Oanh Yen, Miss PanContinental 2015. Each communication encouraged potential performers by reminding them that "individuals and teams representing universities and colleges can register to participate for the opportunity to win prizes and valuable gifts."

This effort was preceded by other condom-promotion and information campaigns that equally turned on generating personal buy-in by participants and allies. In the fall of 2015 the group created a series of personalized cartoon characters based on the group's staff and printed them onto stiff paper or cardboard using a template that allowed the printout to be folded into a small carton or cube the perfect size for storing a cache of condoms for personal use.

These characters could be created quickly digitally and were easily modified. Participants, staff people, donors, and allies were treated to physical and/or digital cartoons of themselves as condom boxes (of course, stamped with the group's logo and contact information). Some of these ended up replacing individuals' Facebook profile pictures for a time. Some interesting work has been done on Facebook profile picture selection, social psychology, and identity (Kapidzic and Martins 2015; Wu, Chang, and Yuan 2015) and profile picture activism (Chapman and Coffe 2016). Others have identified curated profiles on social networking sites as a reflection of aspirations to a certain kind of social connectedness, as "hoped-for selves" (Zwier et al. 2011). Happiness Group leaders remarked that members of the community responded well to these creative caricatures because of a general interest shared by members of the gay community in Saigon for cute, anime-style entertainment. Clever, youthful, playful, and most important, personalized, this campaign was, according to my informants, very successful and took off on its own.

Other campaigns equally focus on instilling a new, more aware, more politically correct orientation, by personalizing changes in speech and attitude. For a campaign focused on sensitivity toward PLHA, a series of images was posted on Facebook in 2015 under a banner which read "ASKING ABOUT HIV STATUS IS NECESSARY AND IMPORTANT! But remember that, more than ever, they need you to be strong, with a heart open to sympathy." The images challenge the viewer to respond to the question "What should you say?" (*Ban nen noi gi?*), below two hashtags that read "#stopstigmatizing" (#ngungkithi) and "#livingwithHIV" (#songcungvoHIV). Each image offers two options concerning what one should say. The incorrect, crossed-out options include "[You've been] 'infected' for how long already?" and "Why [are you] 'infected'?" The correct options for these insensitive and stigmatizing questions are given as "Have you received the [proper] treatment yet?" and "There is treatment," respectively.

These campaigns, and others like them, mobilize a particular set of dispositions and vocabulary, toward forming a shared, normative group awareness. In our discussions and interviews, group members incorporated technical acronyms and words from English, including the seemingly apolitical, neutral epidemiological term *MSM* (men who have sex with men) in their everyday speech. The group described this term as feeling “young,” “updated,” “modern,” a term that in the words of one participant “was easier to spread out amongst themselves,” that is, compelling and catchy. This term within epidemiology was intended to mark males who, though they did not necessarily identify as gay or bisexual, nonetheless had sexual contact with other males; the term eschewed the psychosocial or sociopolitical identities associated with the other terms and focused, in good technoscientific fashion, simply on practices and behaviors with health impacts.

These small, seemingly neutral interventions reflect a subtle emphasis on in-group versus out-group dynamics. The Happiness Group’s new inward-looking support-recruitment strategy, focused on young, professional, Vietnamese males rather than international governmental or nongovernmental/private donors, turned on their ability to inculcate a sense of belonging, of solidarity with a specifically Vietnamese gay community, and subsequently a responsibility to support the group in its work. I was told by the group’s marketing and communications officer that the group was specifically focused on targeting clients, students, and office workers, those with regular and consistent access to the internet through laptops and smartphones. This, of course, means a specific socioeconomic and social demographic. The campaign that perhaps best exemplified this new orientation was launched in late October 2015, with the uploading of thirty text-based images to the group Facebook page, each with a short declarative sentence beginning with the subject “I.” The main image read, simply, “I Am Brave” (*Toi Can Dam*), and was accompanied by a call to the community to provide content for each of the image/statements, which included “I Am Active” (*Toi Chu Dong*), “I Accept” (*Toi Chap Nhan*), and “I Share” (*Toi Chia Se*), as well as to link it to their personal Facebook pages. The accompanying post called upon the community to share their personal stories of bravery, acceptance, activity, and so forth, under an all caps heading which read “SHARE YOUR STORY TODAY!”

Share your story on your (friend) “wall” using the hashtag #ido. The organization (Happiness Group) will find and choose interesting, meaningful and constructive stories to edit and repost (on the group page). (During the campaign authors of) the chosen articles will receive a meaningful gift from the I Do Campaign

- I Am Active, Living Happy and Healthy.
- Solutions/ideas for services/locations for the prevention and treatment of HIV that are friendly and of quality for the (male) gay community.
- Stories which demonstrate the results/impact of social stigma on increased risk for HIV transmission in the [male] gay community.
- Stories of people living with HIV to rise above the pain to live/survive, and to be loved.
- Your [*ban than*, close/intimate/dear friend] own stories, about your actions to protect yourself [*ban than*] and the community from the risks of HIV infection.

- [Stories concerning] love overcoming the HIV disease. (group communiqué, 2015; translation mine)

The message, in Vietnamese and untranslated, also gives potential participants the option to post their stories anonymously using a link to an attractive and user-friendly Google Form that is provided, and assures them that they have “complete freedom to create your own message.” The aims of the “I Am Active, Living Happy and Healthy” campaign are spelled out on the posting. “To encourage community initiatives for change and awareness,” and to “activate your (*ban than*) care and health/wellness, including sexual health and HIV, in the community of young gay men, knowledge and modern lifestyles.” Participants were encouraged to tell not only their own stories, but those of people they knew. The social media platform enabled instant personalization and linkage among individuals and between participants and the group—a readymade, observable, quantifiable field of potential clients, volunteers, and donors who were actively putting themselves and their stories into circulation together and making themselves available for contact and activation. This was also a field, obviously, into which the group could readily dip for volunteer and financial support.

The group’s delimitation of the categories/topics under which these stories were submitted conditioned the general tenor and much of the content of the submissions; stories of isolation (broken or prolonged), confusion and longing, the overcoming or enumeration of obstacles and discrimination, love stories, both thwarted and fulfilled. One story posted to the group’s message board began, “I have quite a closed life, always yearning/longing for a love most sincere/true [*mot tinh yeu chan thanh nhat*] without knowing how to look for it.” This young man, who identified himself as a twenty-five-year-old resident of Phu Nhuan district, beseeched readers to introduce him to places related to the “cultural world” of the gay community, thanked the group for the opportunity to post, and wished them the constant improvement of their activities. The design of the submission categories made for a set of stories that were very familiar to members of this community. In fact, such stories arguably worked to form the basis of the very notion of “the community” the Happiness Group sought to serve but was simultaneously constructing around itself through identity and issue politics. These stories are effective because they documented experiences that were unfortunately quite widespread (see [USAID and UNDP 2014](#); [Horton 2014](#); [Peltzer and Pengpid 2016](#)), and thus with which their target audience easily identified. This strategy is also in line with recommendations from scholars that nonprofits shift from using online information messaging as one-way communication, toward using social media platforms for more dialogic interaction ([Huang et al. 2016](#)).

In a focus group with Happiness constituents in the summer of 2015, participants shared similar stories of adolescences marked by isolation, confusion, and offhanded and often violent comments by family members and neighbors. This was especially true of the majority of the young men who had fled their rural towns in the delta. They, almost to a man, described the inability to express their identities within the stifling claustrophobia of the countryside. They shared stories about their introduction to the Happiness Group and the life-altering benefits of their participation, in some cases, connections which literally saved their lives. They had found, generally speaking, a bit more acceptance in the teeming cosmopolitan diversity of the city and had the benefit of virtually all now belonging to the professional middle class. These were exactly the

type of men, young, gay, media (and social media) savvy, and professional, to whom these types of campaigns appealed. It was among these men that a community was being cultivated, a local, active, and engaged community that rested on an acknowledgement of shared history, shared risks, and vitally, shared responsibility. It is this last element, that ability of such campaigns to quickly, almost instantly, cultivate buy-in, to inculcate a sense of shared burden for combating this looming, specific, and personalized risk, which is the fulcrum upon which the new strategy as a whole turns.

As a group of researchers exploring the recruitment of gay and bisexual men for an HIV/AIDS intervention write, “Over the past few decades, the internet has become a venue not only for gay and bisexual men to interact with each other, but also for researchers and providers to engage with key populations” (Grovet al. 2016: 380). They argue that the internet itself has “undergone major transitions with the uptake of mobile devices, the expansion of social networking websites like Facebook, and growth of the app marketplace including the use of geosocial-sexual networking apps” (380). The key difficulty these researchers identified was bridging the gap between (online) stated willingness and intention to engage with HIV/AIDS interventions and “actual . . . uptake and adherence” offline (390). Under such conditions of extensive internet penetration among certain sectors of Vietnamese society, HIV/AIDS-related social media campaigns may be effective for increasing informational and emotional support among PLHA. However, in a study among Chinese PLHA, scholars established that, though this was the case, differences in strength of online relationships between PLHA and general societal stigma against PLHA blunted the effective online delivery of information and psychosocial support (Chen and Shi 2015).

The Happiness Group has begun, in the face of rapid declines in PEPFAR support, in the time of “socialization” and “integration,” to experiment with new campaigns with new, specific local targets, and consequently, with a new emphasis on the kinds of communication strategies that are most effective for these targets. This has resulted in a robust set of campaigns on social media, anchored by local offline events (galas, mixers, HIV testing or education events). These, in contrast to the general trend of the past decade, do not seek to extend themselves toward international participation, or seek an international audience. These are campaigns that are tailored for, in fact, thrive precisely among, a specific local audience. In fact, I was told by the Happiness Group’s director, that the strength and quality of this particular group’s social media and marketing content are the result of a PEPFAR grant the organization received in 2012 that was earmarked specifically for MSM outreach through social media. Funding reductions from international sources have accelerated this pivot toward social media communication. The group’s director told me that funding cuts have threatened the group’s ability to field the kinds of peer educator and “approach” fieldworker positions that used to form the backbone of the group’s recruitment strategy. “The offline approach will not be effective anymore without these workers,” he said, implying that social media would become the most cost-effective recruitment and information-delivery option available to the group. The marketing and communications officer added that this year the group would step up the production of short, 60- to 90-second media clips for posting on their Facebook site focused on various topics, and featuring well-known local personalities and staff members, who were themselves acquiring quite a social media presence in their own right. Additionally, he said, the group sends out a monthly

email newsletter that currently reaches eighteen hundred individuals. “For this, there is no cost to us,” he added.

The future in this kind of outreach, organization, and mobilization, it seemed, was bright, even if the set of conditions that conditioned this pivot were obviously bleak. “Now teenagers will continue to grow up, the number of people in the LGBT community will continue to grow,” said the director of the Happiness Group, “There will be no one to approach them. Those people will need to find information themselves and the social media will help them.” These statements are part of a broad theme I found among many local activists with whom I spoke, a pervasive commonsense notion concerning the new value of “technology.” There was a broad consensus that in the absence of the material resources that had funded “classical” HIV prevention and control interventions (offline recruitment, physical outreach, offline information delivery/education, etc.), that innovative uses of ICTs could seamlessly make up the difference; that technology could save us and, more specifically, could save us *money*.

5 The Afterlife of Aid

In Vietnam, as some of my informants indicated, HIV prevention and control as it was practiced in the boom times of the early 2000s is on the wane. “In the beginning it was like being in the rainy season, without enough pipes to channel the huge flow of PEPFAR dollars,” said one former PEPFAR program officer I interviewed. “Now,” he said, with a sad smile, “it is the dry season.”

The apparatus that was constructed with PEPFAR funds organized itself around the figure of the Human, that global rights- and risks-bearing figure that successfully supplanted the formerly dominant figure of the People upon which the Vietnamese government had built its “social evils”-based anti-AIDS programs. That apparatus is now entering a period of austerity. In the absence of this material support, responsibility for the maintenance of this apparatus is being shifted to local organizations and to individuals. Vietnamese authorities and Vietnamese citizens are being asked to take “ownership” of programs that the United States no longer feels obligated to support, despite the fact that it is becoming clear that no other entity, including the Vietnamese government, could possibly sustain the system that was developed by PEPFAR (see [Le 2017](#)). If for Hannah Arendt human rights were precarious because they relied on the legitimacy of the nation-state for their force, perhaps today they are equally precarious in their reliance on the dollar, vertical funding, and siloed programs. In the absence of this support, new strategies for securing the integrity and dignity of the Human have arisen, some of which require a new tradecraft focused on identity formation, targeted marketing, and the kind of niche politics only possible through the use of ICTs and social media. The one-size-fits-all figure of the Human, while still central to the work of the organizations we have discussed, is by necessity of the absence of international attention and support, slipping into bespoke local tailoring.

Organizations tailor their marketing and promotion to a select, niche community, one that is an aspiration, something to be created, as much as a real feature of the social landscape. In the Vietnamese cases we have examined this has meant eschewing the usual pathways upon which marketing has been directed (external, international, English-speaking). As these sources of funding have begun to retreat, Vietnamese

HIV/AIDS organizations have turned inward, toward local middle-class professionals with disposable income and newly inculcated with a sense of belonging in and responsibility for the newly formed community. This strategy turns on the ability of the organization to personalize and then polarize (to borrow a series from Saul Alinsky, community organizer and author) this issue, providing participants with the framework upon which they can craft a new identity. This identity is young, successful, urban, upwardly-mobile, gay, and male, a global citizen with a cosmopolitan interest in taking his place in the fight against the threat HIV poses to himself and his brothers. Beyond volunteering and fundraising, such individuals can even be called upon to generate new content for the organizations, as well as to take it upon themselves to disseminate this content through their own online social networks. If for Arendt the problem was that the “abstract human that seemed to exist nowhere” was a vacant, essentially empty vessel, these organizers in Vietnam are finding innovative ways to fill it in for themselves, instrumentalizing personal experience, and engaging in a furious balancing between projecting group/community strength, and indicating urgent need.

Whether this strategy is as epidemiologically and politically effective, and as cost-effective, as is widely believed, turns necessarily on how closely individuals identify with their communities and how seriously they take the threats that they are told they face. How to translate online activism to offline activity is, of course, the million dollar question in this and other domains. Complicating this issue is the looming threat of other kinds of “absences,” notably large numbers of potential near-future dead and a return to the horrors and indignities of the pre-PEPFAR, pre-ARV period if sufficient attention and support cannot be drummed up from Vietnamese sources, especially outside of the most affected populations these new strategies focus on mobilizing. This reatomization or reindividualization of the issue of HIV and the responsibility for its combat may have pernicious results in that it may once again reinforce the notion that such issues “belong” to certain communities and that the larger society has no stake in supporting this fight. The second, potentially dangerous absence has to do with who is not being represented or accessed under this new strategy. Obviously, the identity being crafted/solicited in the above case is one that potentially excludes people living in rural areas with much different lifestyles and social and sexual networks, working-class people in either rural or urban areas, anyone without regular internet access, and MSM who do not identify as gay or who remain closeted for specific socioeconomic, political, religious, or cultural reasons. These groups may *again* find themselves excluded from, turned off by, and subsequently underrepresented in such programs that assert an overtly urban, upwardly mobile, “out” gay male identity. Most obviously, they may not belong to such networks at all, online or offline, or be less inclined to “follow” or “like” Facebook pages or Twitter streams with content that is considered overtly gay if it meant disqualification by their own social networks. The absence of these individuals in terms of representation, and consequently participation, reflects the limitations of this type of niche-marketing-based strategy, a strategy that by definition cannot be easily extended to encapsulate these same outliers any more readily than its offline predecessors.

The final absence that carries force pertinent to the issue of HIV/AIDS prevention and control in Vietnam has to do with the twofold useful emptiness of Arendt’s “abstract human.” The emptiness of the Human allows it to operate as a universal and universalizing cipher, without sociocultural or other specific excluding elements,

which can encapsulate the whole of the species. The second emptiness refers to the “negative space” of human rights claims and the Human; that is, as stated above, its utility/urgency is defined in/by a lack (Pendas 2002). The Human and the rights said to be proper to it can be identified and mobilized only after the fact, making certain types of difficulties understandable as “humanitarian” or “human rights” problems, but making other types of difficulties challenging to apprehend as such.

Thus, those working against HIV/AIDS in Vietnam, and Vietnam itself have entered the afterlife of aid, a time of urgent scrambling, hard decisions, a retreat from the general battlefield to fight important, but local, and limited, rearguard actions. In stark contrast to the promise of the boom times of the recent past, the Vietnamese are living through the time of “integration” and “socialization,” where the robust support of a decade ago has withered to simple “technical assistance.” “HIV/AIDS is in its evening time,” said one former program officer from the Ho Chi Minh City Provincial AIDS Committee, as she contemplated the broad smooth waters of the Saigon River on an afternoon in late July 2015. She used the phrase *cho chieu*, which means “evening” or “waning” but refers, literally, to the end of a long, hard market day, when everyone, exhausted, simply wants to go home.

The long-term effects of this rapid decline in support cannot be predicted, but these declines do indicate something about what international donors believe to be their responsibility toward their fellow humans, and the form this figure takes in the twenty-first century. Despite Western claims concerning the universality of human rights and the sacredness of human life, it would appear that such considerations have found their upper limit in Vietnam, not for the first time, in terms of dollars and duration. The days in which we pledged to “pay any price, and bear any burden” in the struggle against “the common enemies of man,” tyranny, poverty, disease, and war, and to do so not from self-interest but “because it is right” may be drawing to a close (Kennedy 1961). Such pledges, possible, and in fact necessary, under a particular twentieth-century configuration of politics, ethics, and technology, rested upon a figure that was exactly as historical and contingent as Arendt warned. As new configurations of politics, ethics, and technology emerge, this older figure, with its productive emptinesses and aspirations to the universal, may soon be effaced, and as Foucault (1971: 387) suggested of the modern figure of Man, vanish, “like a face drawn in sand at the edge of the sea.”

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