Beyond normal politics: HIV as a security issue

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Introduction: Securitisation

- Presenting an issue as a ‘security’ issue is a discursive move which takes it beyond normal politics, legitimating extraordinary actions.
- This ‘securitising move’ presents both risks and opportunities: risks in terms of limiting rights and re-constructioning agendas; opportunities in the sense of a higher profile and new pathways for action.
- A number of attempts have been made to present HIV as a security issue during the course of the last 10-15 years, some nationally based some international. Perhaps the most noteworthy being the UNSC discussion in January 2000 and the passing of Resolution 1308.
- Important to note:
  - The success of the securitising move is not directly dependent upon an evidentiary base, but on facilitating conditions – ie the ability to persuade an audience that the issue is a security issue.
  - Not all securitising moves are successful.
  - Securitisation is not a binary state whereby an issue is either securitized or not; rather it is a spectrum where different actors may be located at different points.

Securitising HIV

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1 This outline paper reflects ongoing work at the Centre for Health and International Relations, University of Aberystwyth, and in particular work conducted by the author with Dr Simon Rushton. Please see http://www.aber.ac.uk/chair for more details.

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• In the early part of the last decade a number of links were discursively made between HIV and national/international security. Specifically:

  o That high prevalence might affect state stability and lead to regional instabilities.
  o That the security sector (specifically militaries but also police) were especially vulnerable to HIV and that their operational performance would be adversely affected by likely high prevalence rates.
  o That peacekeepers (a) might act as a vector for the spread of the disease, suggesting that their deployment should be limited in some circumstances; (b) that peacekeepers were vulnerable to HIV once deployed, and that this might therefore act as a deterrent against their deployment.
  o That conflict acted as a vector for the spread of the disease.

• For some, making these links could provide additional political capital, creating new pathways for response. Traditional development paradigms had not limited the spread of HIV in the 1990s and new political leadership was required at the turn of the millennium. By linking HIV with security, a sense of emergency could be established which would lead to improved measures to control the spread of the disease.

• By the early years of the last decade a consensus seems to have been established that HIV was a security issue: in the policy world (UNSC); amongst policy advocates (ICG, Justice Africa etc); and in academia (Altman, Elbe etc).

The Not-so Perfect Securitisation

  o Impressionistically, securitisation not only happened, but worked: emergency actions were undertaken in terms of funding (PEPFAR, Global Fund etc) and introduced policies to limit the spread of HIV. High level political engagement was apparent including HIV featuring in G8 summits.

  o Picture however is more complicated requiring greater nuance in terms of analysis and more complex understanding of the social (i.e. security) implications of HIV. Specifically as regards the points above:
    o More recent research suggests that links between HIV and security are indirect and subject to intervening variables. Although some argue that the evidence suggests links do not exist, it is more likely that intervening variables need to be taken into account making the relationship less direct and threatening.
    o Although aid for HIV and political prominence clearly increased during the last decade, it is unclear how much of this was due to securitisation and how much to a renewed humanitarian emphasis prompting development assistance (eg MDGs, Gleneagles G8).
Tracing the effects of securitisation on key decisions regarding HIV does not lead to the conclusion that it was a major influence on policy (though nor was it absent).

- There has been a tendency to view the securitisation of HIV as a binary condition: that by the early years of the last decade it was successfully securitised but that as new empirical evidence began to emerge in the middle-end of the decade (eg ASCI) the consensus was eroded. Our research however suggests that the consensus was never as strong as might have been imagined, and that the reaction has similarly not been as strong. Instead multiple players take up different positions along a securitisation spectrum and these positions change over time due to a variety of reasons, not simply empirical evidence.

**Conclusion**

- The discursive move to establish HIV as a security issue was followed by an increase in political attention and emergency actions suggesting that HIV had been securitised and placed beyond normal politics.
- Our research suggests that this is far too definitive a judgment, and that HIV was neither fully securitized, nor were the policies and actions undertaken in the last decade directly and solely attributable to this process. But neither do we suggest that securitisation did not occur, nor that this did not have some bearing on the political process.
- In a positivist sense, it can be argued that links exist between high prevalence and security, but these links are more complicated than first imagined and remain sometimes poorly understood.
- In a discursive sense, has the debate moved on from HIV being constructed as a security issue?