

HIV/AIDS, Security and Democracy

Seminar Report

Wednesday 4 May 2005

Clingendael Institute, The Hague

Netherlands Ministry of Foreign Affairs

In cooperation with:

Harvard University

Netherlands Institute of International Relations 'Clingendael'

Social Science Research Council

Co-sponsored by:

UNAIDS

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Seminar Background and Objectives

Seminar Rationale¹

Since the first infections in the late seventies, we have come to realize that AIDS is much more than merely a health threat. It has strong economic, social, cultural and political implications, some of which are immediately noticeable. Many more will only manifest themselves in the future. While the epidemic strikes individuals, its force is such that AIDS also threatens to cause the collapse of families, communities and, potentially, even states. In Southern Africa in particular, where infection rates are the highest, we see state institutions seriously weakened at the very moment that the affected population's need for government services is in fact growing. Some governments are already unable to provide the essential services and carry out the basic functions necessary for sovereignty. This gradual collapse of governance functions illustrates a new form of state collapse: going out with a whimper rather than the more familiar bang associated with civil war in a capital city. We don't know the implications of this 'fading state', what it means for government services and administration to quietly evaporate on account of AIDS or what association it may have with other aspects of militarization or human security. But even if we remain sceptical about AIDS actually *causing* state collapse, there are very serious questions about how to handle HIV/AIDS policies and programmes in fragile states with weakened governance structures. It is highly plausible that, even if AIDS is not the major cause of a state collapse, it will be one of the major impediments to strengthening governance structures and supporting reconstruction. For these reasons, we need to be even more alert to the dangers of state collapse in the era of AIDS.

Although the impacts of HIV/AIDS on security and democracy might be most striking in sub-Saharan Africa, other regions are not exempted. Governments and societies in the CEE/CIS, South East Asia, the Americas, the Pacific and the Middle East are becoming increasingly aware of the risks posed by HIV/AIDS and the need to strengthen prevention efforts.. Nor should we forget about AIDS in the European Union and the United States. Infection rates are increasing almost everywhere whether within concentrated populations or among the general population. Low prevalence cases should not slip our attention.

Seminar Objective: Advancing the International Research and Policy Agenda

Fortunately, the world is responding and AIDS is becoming more central to political, social and economic agendas at national, regional and international levels. In his recent report 'In Larger Freedom', United Nations Secretary-General Kofi Annan calls for a new security consensus, one that includes deadly infectious diseases and, in particular, HIV/AIDS. By adopting resolution 1308 in 2000, the UN Security Council already recognized the relevance of the AIDS epidemic for its mandate. And the 2001 Special Session of the UN General Assembly paid greater attention to the security threat.

¹ This paragraph draws on the conference background papers as well as the opening remarks by H.E. Mr Bot, Netherlands Minister of Foreign Affairs and Mr Piot, Executive Director of UNAIDS.

But we cannot be complacent about the threat and our actions so far. A successful campaign against AIDS requires expertise, targeted action and public support. To do so effectively, policymakers must be able to make informed decisions. The last three years major advances have been made in evidence-based research around the globe. Policymakers, militaries, practitioners, civil society organizations and many others have moreover responded with a variety of measures. We are just starting to learn the 'best practices' in particular cases. And little is known about the 'lessons' these hold for other cases and contexts. What has been missing so far is a more systematic effort in bringing these efforts and experiences –among and between the research, policy and practice communities—together and identify the major gaps in our understanding.

The Netherlands Ministry of Foreign Affairs, together with its co-organizing partners, has taken on this challenge and hosted a first seminar to define research and policy agendas in the field of HIV/AIDS, security and democratic governance.

Set up of Seminar and Follow-up Activities

The high level policy seminar 'AIDS, Security and Democracy' aimed to benefit from the joint expertise from leading research experts and policy makers. In order to set out a clear agenda for policy considerations, the seminar was preceded by a two-day expert meeting to discuss the evidence base of links between AIDS, security and democratic governance, the shorter and longer term implications of an AIDS epidemic and the related policy ramifications. The findings of this expert meeting have been presented at the policy seminar. These conclusions and recommendations form the core body of this report.

The seminar precedes major upcoming international events such as the UNGASS meeting (2 June 2005) and UN Security Council meeting to follow-up on Resolution 1308 (18 July 2005). Also the upcoming summit of world leaders to review the UN Millennium Declaration offers an important forum to discuss HIV/AIDS, security and democratic governance concerns. The Netherlands Ministry of Foreign Affairs, together with interested partners, intends to use these events to further discuss the agenda and mobilize support.

The seminar has furthermore launched the idea of a follow-up initiative around HIV/AIDS, security and conflict to strengthen the links between communities working in research, policy and practice, and to obtain clear results in terms of policy action. This initiative was well received by participants at the seminar, the outlines of which are briefly described in the final section of this report.

Organization

The expert meeting and high level policy seminar 'AIDS, Security and Democracy' have been organized at the initiative of Ms Laetitia van den Assum, Ambassador-at-large for HIV/AIDS issues at the Netherlands Ministry of Foreign Affairs. Co-organizers include Harvard University, the Netherlands Institute of International Relations 'Clingendael', the Social Science Research Council and the Africa Department of the Netherlands Ministry of Foreign Affairs. The seminar and preceding expert meeting have been made possible by the generous support of the Department of Political Affairs of the Netherlands Ministry of Foreign Affairs and UNAIDS.

Conclusions and Recommendations

This section contains the conclusions and recommendations of the expert meeting to the participants at the high level policy seminar. These conclusions and recommendations were presented by Alex de Waal of Harvard University and the Social Science Research Council.

Overview

We have examined the evidence for the links between HIV/AIDS, security and governance. The evidence base, although still weak and incomplete, is significantly stronger than it was just a few years ago. This evidence allows us to refute some of the more extreme and alarmist predictions and to challenge some of the accepted wisdoms. The problems are significant and demand attention, but they are not catastrophic. More importantly, the problems are likely to be amenable to policies and programmes that have been changed based on targeted research and syntheses of existing information. The evidence obliges us to be much more precise about the factors contributing to HIV transmission in the military and during conflict, the ways in which the epidemic contributes to crises, and the ways in which specific forms of governance contribute to the best policies and programmes concerning HIV/AIDS. The meeting has resulted in immediately actionable outcomes including a more diverse and specific set of programmes for different militaries, as well as a targeted research, learning and policy engagement initiative that can contribute to a range of more effective policies.

1. AIDS in the Military

We are concerned about HIV/AIDS in the military for four reasons. (i) Soldiers are people. (ii) Soldiers can be an important driver of the epidemic. (iii) Armies are a good entry point for HIV/AIDS programmes. (iv) The military is a key pillar of national security.

We have not identified a single pattern for AIDS in the military, but rather a diversified set of different patterns of HIV/AIDS infection. The prevalence of HIV in an army depends upon its age and rank structure, type of recruitment, deployment and military culture, and HIV/AIDS policies in place, as well as the level and kind of HIV/AIDS epidemic in the population.

We need to develop more detailed policy and programme recommendations for armies suitable to their particular circumstances, including responses appropriate for low prevalence armies. For this, we need evidence, including sex-disaggregated data and information on behavioural patterns. We should be concerned with the pattern of infection within the military as much as with overall prevalence levels.

Weaknesses of the evidence base should not be a reason for discontinuing existing best practices. Enough is known to be certain that a problem exists and that immediate measures are needed to respond.

2. Military Responses and Responsibilities incl. the Mandatory Testing Question

Armies are instituting a number of important responses to HIV/AIDS, and there is a need for operations research in order to document them and to identify their implications for policy and programming. Responses include comprehensive health checks prior to recruitment or promotion, ARV provision to serving individuals and perhaps family members, programmes targeted at associated civilian populations (including commercial sex workers) and social support to individuals affected by AIDS and their families. These responses have implications for the social responsibilities of militaries, their budgets, international donor relations, and other issues.

The challenges of peacekeepers are distinct from those of armies as such and demand a different set of responses.

The issue of voluntary versus mandatory testing is particularly important and the dilemmas demand investigation. The issue is important in its own right, because armies have indicated that testing is a priority, and because it unlocks a wide range of other policy issues. All armies that can test do so. But mandatory testing is complex, expensive, open to human rights debate including legal challenge in some countries, and has far-reaching consequences for the administration of an army and civil-military relations. Operations research is needed into the implications and correlates of different testing policies, so that policies can be adopted based on evidence.

There is some evidence that the stresses of arduous training regimes and combat suppress immune function, with possible implications for the progression from HIV to AIDS. This needs further investigation.

3. The Police, Other Uniformed Services and International Civil Servants

Similar considerations apply to police forces and other uniformed services, and we find that research and policy debate are less far advanced for these groups. The context of security sector reform frames these issues. Policies on HIV/AIDS for peacekeeping forces also have implications for civilian personnel deployed by international organizations.

4. HIV in Conflict and Post-conflict Situations

The evidence available makes it clear that we can no longer make simple assertions about the links between conflict and HIV/AIDS. Depending on the context of the epidemic and the precise impacts of the conflict on population vulnerability, there will be different outcomes. In some cases, the impact of conflict or refugee crisis may include lower levels of HIV. Data from Uganda, Ethiopia and elsewhere support this claim. A mounting body of evidence suggests that the greatest risks for HIV transmission occur in the post-conflict phase including the period of disarmament, demobilization and reintegration of former combatants. Examples include Mozambique, Angola and Afghanistan. Evidence on HIV in conflict and post-conflict situations needs to be finely-tuned to the different components of conflict and post-conflict situations and how these translate into changing patterns of vulnerability.

Research on these issues should contribute to the formulation of more finely-tuned interventions. Encouraging evidence that conflict can, in some cases, protect against HIV should not be taken as reason for discontinuing current programmes.

5. HIV in Fragile and Collapsed States

Sustaining and developing HIV/AIDS policies and programmes in fragile and collapsed states, especially those that are simultaneously suffering a high-prevalence AIDS epidemic, is both important and difficult. This situation poses extremely difficult policy dilemmas that need to be explored and debated.

There is a need for an improved evidence base and policy dialogue on these challenges. We may need to develop new forms of long-term humanitarian action, recognizing that AIDS response is an integral part of humanitarian action, and that the crises of fragile states compounded by AIDS will be with us for many decades, so that recovery from crisis and the regeneration of state capacity may be extremely slow. Development aid also needs to be sensitized to this context. There are major limitations on top-down vertical interventions but also practical difficulties with community-based programmes in the absence of effective state policy. There are roles for the private sector and NGOs. Specific situations demand different types of response.

We need to develop early-warning and prevention mechanisms appropriate to state failure in the context of HIV/AIDS.

Operations research is needed along with a dialogue on the politics of state rescue in the context of AIDS. The latter dialogue needs to include regional and sub-regional organizations.

6. Gender

We are concerned with many aspects of gender relations in and of themselves. These concerns include domestic violence, rape (of both women and men), the disempowerment of women including impoverishment and exploitation, and the impact of war and militarization on men's behaviour. We do not yet have a clear picture of the significance of these aspects of gender relations on the epidemiology of HIV.

In the case of rape, it appears that the principal means whereby rape increases a survivor's vulnerability to HIV is through how it increases long-term vulnerability, through a range of physical and psychological health impacts, stigmatization and impoverishment, over and above the short-term risks associated with the act of rape itself. This has important implications for the kinds of services that should be provided to rape survivors.

Gender analysis is central to the analysis of AIDS. We need to better define risk factors associated with gender before, during and after conflict. Attention needs to be paid to cultural norms that promote certain forms of masculine identity and behaviour, especially in armies.

MSM and transgender people are important groups marginalized in policy in many countries, including armed forces and conflict situations.

7. Governance, Participation and AIDS Efforts

Leadership is pivotal to efforts against HIV/AIDS. Social activism has been a consistent element in effective mobilization against AIDS across the world. The links between the media, electoral accountability and AIDS efforts are complex and ambiguous. Important policy-relevant questions arise from the evidence we have examined, but without additional research the answers to these questions cannot at present be specified. Many activities to promote leadership and the media to strengthen efforts against AIDS are already being undertaken and these should be continued.

Public opinion surveys are a useful multi-purpose tool for AIDS policymaking and programming. They enable us to measure the effectiveness of the attempts of leaders, the media and public information campaigns to affect public opinion, and evaluate social marketing initiatives. Along with other data sources, public opinion surveys can also assist in refining the agenda of identifying the key components of leadership and governance for effective efforts against AIDS. Other important research methods are also important and should be explored.

A pivotal governance challenge is to create the political space that allows society and government to focus upon HIV/AIDS and develop a political commitment to effective responses. Specific policies include enabling a free press and civil society activism, providing a platform for PLWHA, south-south exchanges of experience and small-scale assistance to grassroots organization with simplified reporting mechanisms.

In this area, as others, low-prevalence countries need to focus on a range of pertinent issues rather than waiting for a major epidemic to unfold.

8. HIV/AIDS as a Threat to National and International Governance

Many possible links between the HIV/AIDS epidemic and national and international governance have been postulated. There is very little empirical evidence in support of any of them, partly because the issue is so complicated, partly because of the impressive resilience of affected societies and partly because the impacts unfold over a very long time. For example the links between AIDS and terrorism are entirely speculative. It is likely that the very serious loss in life expectancy that is unfolding in southern Africa will have adverse implications for governance, and that social resilience has its limits.

Several specific issues demand research attention with possible policy implications. One is the challenge of the government of a poor country retaining national sovereignty and democratic decision-making while it is heavily dependent on donor funds for its budget including health programmes. A second is identifying the particular cases in which institutions, including legislatures and service departments, are failing to function in part because of human resource losses due to AIDS, and identifying remedies. A third is better investigation of the coping mechanisms of affected families and communities, identifying its costs and limits. Related to this is whether coping with AIDS prevents citizens from becoming fully engaged in a society's democratic life. These issues are best explored with the full participation of PLWHAs.

Follow-Up: AIDS, Security and Conflict Initiative

The outstanding policy and research agenda remains very broad and challenging. In the area of HIV/AIDS and democratic governance, further exploration of links is needed before more specific policy recommendations can follow. Contrary, in the field of AIDS, security and conflict much more progress has been made already, in terms of research and policy. To advance the agenda, we have decided to limit the scope of immediate follow-up activities to the latter field. It includes a focus on post-conflict settings as well as work to improve our understanding of processes at work in fading/failing states.

At the final session of the seminar, an independent and targeted policy, research and learning initiative was proposed that can help to move these issues as part of the global debate on HIV/AIDS, security and conflict. The focus of such an initiative is to:

1. Strengthen links between communities working in research, policy and practice.
2. Obtain results in terms of policy action by engaging policy-makers.

The outputs will include additional research and analysis of specific issues as well as the publication of a comprehensive report that targets senior policy makers and practitioners by:

1. Establishing the evidence base.
2. Analyzing existing policies, programmes and policy actions.
3. Making policy recommendations.

The timeline for the Initiative is approximately 18 months.

Inception Phase

A specific plan, including a governing structure and support functions, can be ready before the end of the third quarter of 2005. Other issues the plan needs to address include fundraising and the establishment of a 'steering committee' or 'high level panel' to give the Initiative the necessary authority, representation and engagement with policymakers, governments and international agencies.

Preliminary discussions have indicated that such an Initiative is welcomed by a number of key players and several of these expressed interest during the Clingendael seminar. New funding would be required but it is also expected that the results of work already undertaken or planned under existing programmes could become available to the Initiative. The co-organizers have accepted the responsibility to prepare a plan as outlined above and to consult potential partners about its scope, directions and operational aspects.

Annex I – Seminar Programme

Tuesday 3 May:

Opening dinner at Paviljoen De Witte

Pellenaerstraat 4, Scheveningen

- 19:00 – 19:45 Reception
- 19:45 – 20:00 Opening by Ms Laetitia van den Assum
Netherlands Ambassador-at-large for HIV/AIDS issues
- 20:00 – 22:30 Dinner and Keynote Speech by Mr Alan Whiteside
Director HEARD, University of KwaZulu-Natal

Wednesday 4 May:

- 08:45 – 09:15 Registration and Coffee

Panel One: Opening

Chair: Ms Laetitia van den Assum

- 09:15 – 09:25 Opening by H.E. Mr Bernard Bot
Netherlands Minister of Foreign Affairs
- 09:25 – 09:40 Keynote speech by Mr Peter Piot
Executive Director UNAIDS

Panel Two: Evidence

- 09:40 – 10:00 The 'State of Knowledge' on AIDS, Security and Democracy:
Report from the Expert Seminar
Mr Alex de Waal, Harvard University
- 10:00 – 10:15 Commentary by Mr Ulf Kristoffersson
*Chief of the UNAIDS office on AIDS, Security and Humanitarian
Response*
- 10:15 – 11:00 Discussion
- 11:00 – 11:30 Coffee and Tea Break

Panel Three: Policy

Chair: Mr Georg Frerks, Utrecht University

- 11:30 – 12:30 Agenda Item I; The Nexus between HIV/AIDS, Conflict and State Fragility
Recommendations: Mrs Pamela DeLargy, Chief Humanitarian Response Unit, UN Population Fund
First Discussant: Mr Jeremy Stickings, Senior Social Development Advisor, Conflict and Humanitarian Affairs Dept., DfID
- 12:30 – 13:30 Lunch
- 13.30 – 14.30 Agenda Item II: HIV/AIDS and the Military (incl. Peacekeeping Forces)
Recommendations: Mr Stuart Kingma, Director Civil-Military Alliance to Combat HIV/AIDS
First Discussant: General Tsadkan Gebretensae Bayru, Chief Executive Officer, Center for Policy Research and Dialogue
- 14:30 – 15:30 Agenda Item III: HIV/AIDS, Governance and Development
Recommendations: Mr Alan Whiteside, Director HEARD, University of KwaZulu-Natal
First Discussant: Mrs Jacinta Maingi, HIV/AIDS Coordinator Eastern African Region, World Council of Churches
- 15:30 – 16:00 Coffee and Tea Break
- 16:00 – 17:00 The Way Forward – Priority Agendas and International Cooperation
Ms Laetitia van den Assum
- 17:00 Reception

Annex II – List of Participants

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