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Published in:
European Journal of International Relations
DOI: 10.1177/1354066111425258
Publication date: 2013
Citation for published version (APA):

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Published version available:
http://ejt.sagepub.com/content/early/2012/01/24/1354066111425258.abstract

This research has been made possible through funding from the European Research Council under the European Community’s Seventh Framework Programme – Ideas Grant 230489 GHG.

All views expressed remain those of the author(s).
HIV/AIDS and Securitization Theory

Colin McInnes and Simon Rushton

‘AIDS is not just a humanitarian crisis. It is a security crisis -- because it threatens not just individual citizens, but the very institutions that define and defend the character of a society.’ US Vice President Al Gore, chairing UN Security Council meeting, 10 January 2000.

The broadening of the security agenda over the past two decades has created the attendant question of what is a security issue? With security no longer limited to the narrow confines of military threats, issues such as the environment, food, energy and migration have all acquired the ‘security’ tag. But as a result the new boundaries of security can appear so vague as to sometimes make the more pertinent question what is not a security issue? Crucially, failure to satisfactorily answer the question of what is (and what is not) a security issue risks turning ‘security’ into an empty signifier, a term readily applicable to any issue and therefore devoid of substantive meaning (Deudney, 1990; Freedman, 1998: 53; Walt, 1991). For over a decade, health has been appearing on national security agendas with some issues, such as pandemic influenza, now apparently well established there. Indeed David Fidler (2007: 2) has even suggested that health is in a ‘post-
securitization’ phase, although others such as Sandra Maclean (2008: 484) have argued that this is overstating the case. Health issues are particularly significant for the broadening security agenda not only because they fall well outside traditional notions of what constitute security issues (indeed Walt (1991: 513) specifically cited HIV/AIDS as something that should not be considered part of the field of security), but also because the positioning of particular health issues on the security agenda appears to be to a great extent unrelated to measures of morbidity and mortality. The potential use of pathogens by terrorists (bio-terrorism), for example, features prominently despite accounting for a statistically insignificant percentage of deaths over the past two decades and despite doubts over the potential of such attacks to kill large numbers of people (e.g. Fidler and Gostin, 2008: 35; General Accounting Office, 1999: 1-2; Klotz and Silvester, 2009; Koblenz, 2010: 114-5). At the same time, other health issues, including tobacco, obesity and infant diarrhoeal diseases, account for very large numbers of premature deaths each year yet fail to appear on security agendas. Thus what constitutes a ‘health security’ issue appears to be determined by something other than a ‘clear and present danger’ to life. This is important for the HIV/AIDS case which we examine in this article because, although HIV/AIDS-related deaths numbered around 1.8 million in 2009 (UNAIDS, 2010: 19) (and have been well over 1.5 million each year throughout the last decade (UNAIDS, 2008: 217)), if mortality is neither a necessary nor a sufficient condition for a health issue to appear on security agendas then we need to provide a different explanation as to how HIV/AIDS has come to be positioned there. ³

³ Our use of the term ‘HIV/AIDS’ reflects its common usage during much of the period under investigation in this article, and is indeed still commonplace in much of the International Relations literature. However contemporary terminology would differentiate more clearly between HIV (a virus spread by human to human contact) and AIDS (a syndrome of infections and diseases which develops in human immune systems weakened by the virus HIV).
It is here that the Copenhagen School’s\(^4\) securitization theory comes into play, with its intellectually robust – although not unchallenged (e.g. McSweeney, 1996) - answer to the question of how some issues and not others make it onto the security agenda.\(^5\) In particular, securitization theory moves away from a positivist criterion-based assessment (such as one based on morbidity and mortality). Rather it views the persuasiveness of a speech act as crucial in elevating an issue out of the ordinary and into the realm of security. Empirically our focus here is on the attempts which were made in the 1990s and early 2000s to construct HIV/AIDS as a security issue. Our starting point is the recognition that by the middle of the last decade there was a widespread assumption that HIV/AIDS had been successfully securitized (Elbe, 2006; Elbe 2010: chapter 1; Fidler 2007; Maclean 2008),\(^6\) with the UN Security Council’s January 2000 meeting on HIV/AIDS in Africa and its subsequent passing of Resolution 1308 being widely seen as evidence of successful securitization (e.g. Elbe, 2005; Prins, 2004). Our previous work (McInnes and Rushton 2010; Rushton 2010a), however, suggested that both the process and outcomes of this securitization were significantly more nuanced than other analyses had suggested. In so doing we opened up a series of questions not only regarding the manner in which HIV/AIDS had been securitized but also – and crucially for the purposes of this article - concerning the nature of securitization processes.

In recent years the Copenhagen School’s version of securitization theory has come under attack on a number of theoretical grounds. In this article we use the case of HIV/AIDS as a basis from which to intervene in some of these debates and open up further theoretical avenues for exploration. In theoretical terms we align ourselves more closely with some of the critics of the Copenhagen School – in particular Thierry Balzacq. However, we do not merely seek to apply Balzacq’s arguments to the

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\(^4\) So called because much of the key work on securitization theory in the 1990s was carried out at the Centre for Peace and Conflict Research, Copenhagen, Denmark.

\(^5\) Amongst those making the claim for the significance of securitization theory are Ciută 2009: 301-5; McDonald 2008: esp. 563; Hacke and Williams 2008: 778-9; Huysmans 1997; Williams 2003: 511.

HIV/AIDS case, but also to advance securitization theory in three ways. First, we introduce the idea of multi-level securitizations. We argue that there were a number of separate but interlinked securitization processes in the HIV case, beginning with a domestic US securitization (in which US security communities attempted to persuade the Clinton administration that HIV/AIDS was a security issue), followed by the attempt by the US, spearheaded by key individuals in the Clinton administration, to forward securitization through the UN Security Council, and finally the attempt by a variety of actors, drawing on the precedent of Resolution 1308, to persuade the global community that HIV/AIDS constituted a threat to international peace and security. In each of these stages the securitizing actors and the audience to whom they were addressing themselves changed. This raises a number of important issues about the actor-audience relationship which highlight the importance of intersubjectivity and stress the role of the audience, the downplaying of which has been one focus of criticism of the Copenhagen School (e.g. Balzacq 2010: 20). It also calls into question the findings of much of the earlier work on the securitization of AIDS which treated the Security Council’s Resolution as proof of successful securitization. We suggest that this is an over-simplistic understanding of what happened in the Security Council, and that in fact Resolution 1308 it is best characterized as a securitizing move. Thus this multi-level understanding of securitization also highlights the need to subject the nature (and motives) of securitizing actors to greater scrutiny.

Second we argue that securitization is not a binary condition – that an issue is either securitized or not. Rather we suggest, via an examination of the HIV/AIDS case, that it is a continuum and that securitization may consequently be partial, with different audience members placed at a variety of positions along this continuum. In identifying a continuum and the potential for partial securitization we engage with a concern of McDonald’s (2008) over how we know when an issue has

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7 It is tempting borrow the term ‘spectrum disorder’ from the medical community to describe this continuum (and thereby reflect the Copenhagen School’s normative bias against securitization). But as Elbe (2005, 2009) points out, the securitization of HIV/AIDS has positive as well as negative effects and therefore we retain the term ‘continuum’.
been successfully securitized. McDonald implies a binary condition whereas we suggest that such a definitive judgment may not always be appropriate. Beyond this, we suggest that practices rather than language may in some cases give a clearer indication of the extent to which an audience has actually been persuaded.

Third, we make an intervention in the ongoing theoretical debate over the relationship between speech acts and ‘empirical reality’, using the arguments of commentators such as Balzacq (2005, 2010) over the limits of the speech act in the process of securitization to look at the role of empirical evidence. Thus we join Balzacq and others in challenging the Copenhagen School’s primary focus (especially in their early work) on performativity. Using Vuori’s (2008) classification, we suggest that the securitization of HIV/AIDS was a claim speech act in that it attempted to raise an issue on decision makers’ agendas. With such claims ‘the speaker has to present or to have proof for the truth of his/her claim and it should not be obvious to both the speaker and the hearer that the hearer knows the truth of the claim already’ (Vuori, 2008: 77). Balzacq (2010: 13) argues that the mere application of ‘the rules’ of a securitizing speech act are not enough, and that ‘to win an audience, security statements must, usually, be related to an external reality.’ Here we push this argument further, suggesting that when doubts are raised about that ‘reality’ the foundations of security issues can be undermined, and that desecuritization can ensue. Specifically we are interested in the manner in which doubts which arose in the mid-2000s over the empirical evidence supporting the securitizing claims, in particular the links between HIV/AIDS and state stability (including prevalence amongst militaries). These doubts over the evidence, we argue, further undermined the extent to which some key Council members were persuaded by the securitizing claims, and ultimately played a role in precipitating a de-securitization of HIV/AIDS. In forwarding this argument we are not suggesting that an empirical ‘truth’ exists independently; rather that the speech act constructs that truth by shaping our understanding of reality (Balzacq, 2005: 181) which
is then amenable to empirical investigation. What we wish to suggest is that the speech act(s) which constituted the securitizing move(s) for HIV/AIDS also established a series of truth claims which could be examined and which, when found wanting, formed part of the de-securitization process.

The article is organised into three sections. The first locates our position within the debates on securitization. Its purpose is to identify our ‘jumping off point’ from which we hope to develop and contribute to securitization theory. The second section briefly presents the conventional account of the securitization of HIV/AIDS which has been presented in the IR literature. The final section builds on the first two, arguing that the securitization process in the case of HIV/AIDS was more nuanced than many have suggested, and using these insights to discuss how securitization theory might be advanced.

**Securitization theory**


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8 More detailed discussions of this are available elsewhere (Elbe, 2005 and 2006; McInnes and Rushton, 2010; Rushton, 2010a; Sjostedt, 2010).
However it is the second centre of gravity which we are more interested in. This features somewhat more strongly in the joint work of Ole Waever with Barry Buzan (especially in *A New Framework for Analysis*, also with Jaap de Wilde, which represented something of a shift from Waever’s earlier internalist work towards a more constructivist-influenced approach) but has been even more clearly in evidence in the work of other securitization theorists. This ‘externalist’ reading leans more heavily towards social constructivism rather than poststructuralism and focuses more on the process of securitization in which the speech act forms the move which initiates the securitization process, leading to an emphasis on the intersubjective rather than the performative aspects of securitization.

In *A New Framework for Analysis*, Buzan et al describe their project (p.5) as to ‘explore the logic of security itself to find out what differentiates security...from that which is merely political’. They argue (p.26) that labelling an issue as ‘security’ takes it beyond the realm of normal political discourse and allows exceptional actions to be undertaken. Crucially, ‘[an] issue becomes a security issue... not necessarily because a real existential threat exists but because the issue is presented as a threat.’ (p.24) The process by which this happens is securitization: ‘the positioning through speech acts (usually by a political leader) of a particular issue as a threat to survival, which in turn (with the consent of the relevant constituency) enables emergency measures and the suspension of ‘normal politics’ in dealing with that issue’ (McDonald, 2008: 567). It is the (re)presentation of an issue as an *existential threat* which makes a speech act a securitizing move. As Ciută notes (2009: 310), the word ‘security’ is not therefore necessary for a speech act to constitute a securitizing move, nor does the use of the word make a speech act a securitizing move. Rather it is this linkage to an existential threat, usually to a state, which is vital, and words such as ‘threat’ or ‘survival’ are equally significant in making a speech act a securitizing move. This is not to endorse the practice of securitization however. Indeed throughout the Copenhagen School there is a normative bias against securitization and in favour of normal politics.
At the heart of securitization theory is what Strizel (2007: 358, 362) refers to as a trilogy of speech act (the securitizing move, which as Williams (2003: 524-8) notes may use images and other ‘communicative practices’ rather than words⁹); securitizing actor (who makes the speech act, usually someone or some body with political standing); and the audience (who accept or reject the securitizing move). The claim of security made through a speech act is therefore not just descriptive but performative – it changes reality by changing the way in which issues are seen (Buzan et al 1998: 46). Importantly, this places security outside an objective condition. According to the internalist position, it is the speech act which is important and its success depends on what Austin terms ‘felicity conditions’ rather than whether the claim of an existential threat is ‘actually’ true or false (see Stritzel, 2007: 361). The question of ‘How real is the threat?’, familiar to traditional Security Studies, has limited significance to the internalist position. But to the externalist position we adopt here, more attuned to social constructivism, the speech act is the beginning of the process of securitization: persuading the audience to accept that the issue is an existential threat is the key to the success of securitization, and this may involve empirical claims. Specifically, in the externalist position Austin’s ‘felicity conditions’ receive much greater emphasis, appearing as ‘facilitating conditions’. In Buzan et al’s *New Framework for Analysis* three such facilitating conditions are identified as necessary for an effective securitizing speech act:

1. it must follow the accepted grammar of security (that is, use accepted terminology and concepts);
2. it must come from an actor in a position of authority to pronounce on security;

⁹ In this context it is interesting to examine David Campbell’s work on the visual economy of HIV/AIDS (Campbell, 2008). In relation to other health issues, Elizabeth Wishnick (2010, pp. 459-61) has argued that the mass culling of chickens and other birds in China in response to avian influenza can be understood as a securitizing act.
3. and that it helps (but may not be necessary) if the object can be generally held to be threatening.

Meeting these conditions does not in itself guarantee that an issue will become securitized: the success of the process also requires that the audience be persuaded. Clearly persuasion is far more likely to occur if the facilitating conditions are met, but securitization processes involve argumentation and persuasion. Success is not an inevitable result of even the most well-crafted speech act. Thus Buzan et al. argue (1998: 25) that the ‘definition and criteria for securitization is constituted by the intersubjective establishment of an existential threat with a saliency sufficient to have substantial political effects.’ Others (e.g. Balzacq, 2010) have criticised the emphasis placed by the Copenhagen School on the ‘rules’ of a successful securitizing speech act and the tendency to downplay the element of intersubjectivity (and consequently the importance of audience and context), factors which play a far greater role in more strongly sociological/constructivist readings of securitization theory. Following this line of reasoning it might be inferred that in presenting HIV/AIDS as a security issue there is no prima facie requirement to meet objective criteria which demonstrate that it is an existential threat. Rather, the existence of such a threat must be agreed upon intersubjectively through the securitizing process. However, this in turn requires that the audience be persuaded by the securitizing actor’s claims – in Balzacq’s terms (2010: 22) ‘securitization usually takes the form of argumentative processes rather than that of a self-referential performative’. This opens the door for empirical ‘evidence’ in support of the securitizing claims to play a much more significant role than internalist versions of securitization theory would admit. The types of evidence required will depend upon the types of securitizing claim being made. As we show below, in the HIV/AIDS case these claims focussed on the link between HIV prevalence and state stability, on prevalence rates amongst militaries and other uniformed services, and on the claim that armed conflict is a vector of HIV transmission. It might be expected that securitizing actors would generally seek to demonstrate the veracity of the claims which they make. In fact what we show below in the
HIV/AIDS case is more interesting still. What we find is a phenomenon whereby the securitizing move used a series of claims for which little hard ‘evidence’ was needed (or, indeed, offered) in the initial securitizing process, not least within the United States. But when evidence was later presented to the Security Council challenging these securitizing claims, persuasion was undermined and a process of de-securitization set in motion. Thus we view the relationship between speech acts, audience perception and empirical evidence as a nuanced one. Claim speech acts of the type which preoccupy us here frequently make use of empirical evidence to support the securitizing claims; the audience’s perceptions may be influenced by their view of the robustness of that evidence; and subsequent doubts about the evidence underpinning the securitization process can negatively impact upon audience perceptions. For us, then, security issues are socially constructed, but the securitization process is not divorced from empirical considerations.

Following publication of *New Framework for Analysis*, and to a lesser extent Buzan and Waever’s 2003 *Regions and Powers*, development and criticism of securitization theory has focused on a number of issues. These include the role and nature of the speech act; what constitutes an audience and the politics behind this; who has authority as an actor and why; the appropriate balance between speech act, audience and context; the link between threats, referent objects and securitizing actors; the significance of empirical variation and consequently the problem of context; and the perceived ‘moral ambivalence’ of securitization theory (see for example: Balzacq, 2005; Ciută, 2009; Hansen, 2000; McDonald, 2008; McSweeney, 1996; Stritzel, 2007; Williams, 2003). It is not our intention to engage with all of these debates but rather to start from a particular position and to develop securitization theory further along this trajectory. From the discussion above it will already be apparent that our focus is on the process of securitization and of particular interest is the work of Balzacq, in particular the arguments he makes which increase the importance of the audience and context within which a speech act is made. Balzacq is skeptical over what Bourdieu
calls the ‘magical power’ of the speech act to operate independent of context, power relations and practices (Balzacq, 2010: 1 and 3). Instead he argues that the speech act ‘does not construct reality but shapes our understanding’. This is vital to our discussion of HIV/AIDS because, as with other such ‘external or brute threats’ (Balzacq 2010: 12), to doubt the ‘reality’ of the threat posed by HIV and AIDS is both morally indefensible and empirically absurd. Independent of any socially constructed agenda surrounding HIV/AIDS as a security issue, people continue to die in very large numbers as a result of what remains an incurable disease. Regardless of whether or not HIV/AIDS is securitized, the disease remains a hazard to human life on a massive and global scale. Yet these deaths alone do not demonstrate that HIV/AIDS is a security issue in the narrow ‘national/international security’ sense in which the Security Council addressed the pandemic. Indeed it is notable that, largely to allay fears amongst some members about an expansion of the Council’s mandate, the securitizing claims were not made in terms of human security but rather in the traditional security language of peacekeeping, state stability, military effectiveness and so on. What we are therefore interested in here are the attempts made by a succession of actors to reshape our understanding of the disease through a securitizing move – constructing it as a threat to national security – a move which in turn creates the possibility of different pathways of response. The securitization of HIV/AIDS was an explicit attempt to change the status of the disease, moving it from the realm of ‘normal’ politics to that of an exceptional issue posing an existential threat to states. Thus Balzacq’s argument (2005: 172) that securitization is better understood not as a self-referential speech act, but as a strategic or pragmatic practice whereby discourse is used to increase public awareness or adherence to an idea is particular useful for us. Balzacq suggests (2005: 182) that in these circumstances ‘the success of securitization is contingent upon a perceptive environment’. This environment is not simply the immediate hazard or situation, but the zeitgeist which influences the manner in which the audience hears the speech act (p.192).
Securitizing HIV/AIDS

The securitization of HIV/AIDS, particularly following the UN Security Council’s intervention in 2000, has received considerable attention within International Relations and Security Studies. What has emerged over the last decade has been a more-or-less agreed account of the process by which HIV/AIDS was transformed into a security issue. Here we briefly set out that standard history. It begins in January of 2000 when, under the US Council presidency and during a month-long focus on Africa, the Security Council met to discuss the impact of HIV/AIDS on peace and security in Africa. Importantly from the perspective of securitization theory, the discussion frequently and explicitly referred to the disease as an existential threat to states, especially to their political stability. Typical of the contributions were those of the UN Secretary General, Kofi Annan, and the Executive Director of UNAIDS, Peter Piot, both of whom emphasised the social and economic crises caused by HIV/AIDS and the risk to political stability (United Nations, 2000). Together these statements were widely considered in the literature to constitute a clear securitizing move, one which moreover fulfilled all three of the facilitating conditions for successful securitization detailed by Buzan et al in *A New Framework for Analysis*. First, it clearly followed the accepted grammar of security. Specifically it made the linkage between HIV and security by reference to three arguments, all of which were couched in terms which were widely understood to be legitimate security claims:

(i) That uniformed militaries (including peacekeepers) were especially vulnerable to HIV and might act as agents in the spread of the disease.

(ii) That state stability was at risk in high prevalence areas.

(iii) That conflict (including the post-conflict phase) created significant risks for the spread of the HIV virus.
Second, those making the securitizing move were clearly in a position to pronounce on security issues, if nothing else by virtue of their presence in the Security Council. And thirdly, the object (HIV/AIDS) was presented as threatening not only because it was responsible for the deaths of over one million people each year but also because it was portrayed as ultimately representing an existential threat to those states suffering from a high HIV burden.

In July 2000 the Security Council passed Resolution 1308 which similarly argued (United Nations Security Council, 2000: 2) that that the pandemic, if unchecked, ‘may pose a risk to stability and security’, though its main focus was on the risk to (and from) peacekeepers. On 28 June 2001, following a General Assembly meeting on HIV/AIDS, the Security Council reaffirmed its view that ‘the pandemic, if unchecked, may pose a risk to stability and security’ (United Nations Security Council, 2001: 1). With the three facilitating conditions for a speech act apparently met, and with adoption of Resolution 1308 seeming to indicate acceptance by the audience, in the first half of the decade the Security Council’s intervention was interpreted by many as a scene-changing event and a successful example of securitization. UNAIDS Executive Director Peter Piot was not alone in believing it to be a ‘milestone’ in the fight against HIV/AIDS (United Nations Security Council, 2005: 5). The HIV/AIDS-security linkage was widely repeated in government statements and the academic literature (e.g. Elbe, 2005; Prins, 2004), generally accompanied by a reference to Resolution 1308. In academic circles many (e.g. Altman, 2003; Singer, 2002) took the view that securitization created the potential to gain a higher international profile and resources (reflecting Balzacq’s view of securitization as a pragmatic act and our argument that, following Vuori, it was a claim speech act), although others (e.g. David, 2001; Elbe, 2006; O’Manique, 2006) highlighted the possible dangers of treating HIV/AIDS as a security issue, thereby reflecting the Copenhagen School’s concerns over securitization being seen unproblematically as a ‘good thing’. Either way, it was clear that HIV/AIDS was now near

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10 Although see Elbe 2009: Ch.4 for that author’s later opinion the securitization of HIV/AIDS.
the top of the global agenda, as demonstrated in the few years following Resolution 1308 by its explicit inclusion in the Millennium Development Goals; the UN General Assembly’s Special Session on HIV/AIDS in June 2001; the establishment of the G8-backed Global Fund to Fight HIV/AIDS, Tuberculosis and Malaria in 2002; and the launching of the President’s Emergency Plan for AIDS Relief (PEPFAR) by the Bush Administration in 2003, possibly the largest single issue development aid programme in history and one which, through the inclusion of the term ‘emergency’ in its title, carried clear echoes of security arguments. The disease’s profile was almost unprecedented for a health issue. There was a clear and widespread sense of emergency and an almost universally-recognized requirement for large-scale and sustained global action. HIV/AIDS, the argument went, had been successfully securitized, it had been elevated from normal politics to the status of an exceptional threat. New pathways of response had been created and key to this process had been the actions of the UN Security Council.

HIV/AIDS and securitization theory

We have argued elsewhere (McInnes and Rushton, 2010; Rushton, 2010a) that this orthodox account of the securitization of HIV/AIDS is problematic on a number of empirical grounds. In this section we attempt to use some of those insights to develop securitization theory in three ways. The first is to introduce a discussion of securitization as a multi-level phenomenon consisting in the HIV/AIDS case of a series of separate securitizing moves being made to a range of audiences, from the national up to the global. The second is to elaborate on Rita Abrahamsen’s (2005) suggestion of a ‘security continuum’ - that securitization and ‘normal politics’ are not binary positions but the two
end points of a spectrum - along which different audience members may occupy different positions.

Finally we explore the role of empirical evidence in securitization and de-securitization.

**Multi-level securitization**

Although Resolution 1308 has attracted much of the attention, in fact this was only one stage of what can best be understood as a multi-level securitization process. Indeed HIV/AIDS only made it onto the Security Council agenda at all as a consequence of an earlier securitizing move which had been made within the domestic US policy community. As early as 1987 - a time at which only 11 sub-Saharan African states had reported over 100 cases, and many of the states which now have the highest prevalence levels had still reported under 100 - a US Special National Intelligence Estimate examined the implications of AIDS for the region in detail (Central Intelligence Agency, 1987). Whilst the report noted that much of the information about the disease’s spread in Africa was at that stage ‘anecdotal or based on small medical research programs lacking a strong epidemiological basis’ (p.1) there were clear concerns about the strategic and security implications of HIV/AIDS. These concerns included the manner in which AIDS might threaten the security and stability of states, a linkage which later featured heavily in Gore’s presentation to the Security Council in 2000. The report argued that as a consequence US strategic interests were at stake. A National Intelligence Council (NIC) report on ‘The Global AIDS Disaster’ (Department of State, 1992), which described AIDS as a ‘time bomb’ with severe economic, political and military ramifications, followed in 1990. At the time, however, the idea that HIV/AIDS was a national security threat did not receive high-level support within the Bush (Snr.) Administration and, according to Greg Behrman (2004: 30), the NIC report ‘managed to slip under the radar screen of almost every decision-maker in the U.S. federal government.’

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11 Sources differ on the date that this report was produced. Behrman states that the NIC released it in July 1990, although available copies of the report give the date July 1992. Either way, Behrman’s argument about the relative lack of impact the report had remains valid.
During the 1990s the HIV/AIDS-security linkage began to become more prominent in Washington policy circles. A number of securitizing actors, and a range of speech acts, can be identified. A 1992 report published by the Institute of Medicine did much to dramatise the threats posed to the US by infectious diseases, including HIV/AIDS (Lederberg, Shope and Oaks, 1992). Two years later Laurie Garrett’s influential *The Coming Plague* put forward similar arguments (Garrett, 1994). By this stage decision-makers in Washington were beginning to take notice. In June 1996 the Clinton administration issued a Presidential Decision Directive calling for a greater degree of coordination in the US government’s response to the security threats posed by infectious diseases. As part of this effort the National Intelligence Council produced in 1999 a National Intelligence Estimate on *The Global Infectious Disease Threat and Its Implications for the United States*, which was declassified in 2000, the year of the Security Council’s deliberations. Although the report’s scope was wider than HIV and AIDS, that was one of its key points of focus. Many of the claims which had appeared in the 1987 CIA report were repeated, particularly the concerns about the impact on militaries (now seen to include international peacekeeping forces), social cohesion and the potential for conflict, and the possibility that ‘disease-related embargoes and restrictions on travel and immigration will cause frictions among and between developed and developing countries’ (National Intelligence Council 1999). By the time initial discussion began in 1999 about a possible Council session on HIV/AIDS, the issue had effectively already been securitized within the United States, with a number of key figures in the Clinton administration being convinced of the case.12

The second securitizing move was that made by the US, through an effort headed by a small number of key officials, to position HIV/AIDS on the Security Council’s agenda and then to convince the other

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12 Although not everyone in the Clinton administration was convinced. Bill Wood, US Principal Deputy Assistant for International Organization Affairs, was apparently of the view that HIV/AIDS ‘does not constitute a threat to international peace and security. It should not be in the council.’ (Behrman 2004: 162).
Council members to adopt a Resolution on the subject. The key role in this was played by Richard Holbrooke, President Clinton’s Ambassador to the UN who, following a visit to southern Africa in December 1999, convinced key figures in the US Administration and in the UN that HIV/AIDS should be discussed by the Council. In Washington he found a willing supporter in Al Gore, then-Vice President. Key figures in the UN Secretariat – in particular the Secretary-General himself – were initially less certain that HIV/AIDS was a security issue (Prins, 2004: 941; see also Feldbaum, 2008: esp. Chapter 5), although Annan was ultimately persuaded of the case, stating in the Council at the first meeting on HIV/AIDS (United Nations Security Council, 2000b: 4) that ‘it is entirely appropriate that the Council should be devoting its first session [of the new millennium] to the problem of AIDS.’

Getting from that initial Council discussion to agreement on a resolution was not straightforward. Three of the permanent five members (Russia, China and France) originally opposed the adoption of a Resolution, although they were ultimately persuaded to support it (Behrman 2004: 161-5; Sternberg, 2002; Prins, 2004: 941; Rushton, 2010a). Others, including the UK (Foreign and Commonwealth Office 2000a; 2000b) and many of the major troop contributing counties (UK Mission to the UN, 2000), had qualms about supporting the Resolution. Some doubted whether the issue should be on the Security Council’s agenda at all as queries were raised over whether HIV/AIDS truly fell within the Council’s remit (e.g. Foreign and Commonwealth Office, 2000a) as well as concerns over the allocation of responsibility (who should deal with this security threat?) and the potential financial and political consequences of adopting a resolution on the issue.

Highlighting the importance of the nature of the securitizing actor and the strategies they employ, Holbrooke and his team were successful in overcoming this opposition partly because of the US’s influence in the Council, but also as a result of a variety of other contributing factors including Holbrooke’s own persuasive character, the willingness of key experts to vocally support the securitizing move (notably the Executive Director of UNAIDS, Peter Piot), and HIV/AIDS’ special
status as a global issue. Crucially, few states wished to be publicly seen to oppose action to address such a major humanitarian catastrophe. The adoption of Resolution 1308 was not, then, simply the result of a universal agreement on the validity of the securitizing claims; rather it was adopted despite the fact that significant doubts were present, especially amongst other Permanent Members.

Ultimately, however, the Council members were persuaded to unanimously support Resolution 1308. Whilst we would argue that the Resolution, which stated that HIV/AIDS represents an international threat to peace and security, should not be seen as proof of the successful persuasion of all audience members within the Council, the Resolution’s very existence added an imprimatur of legitimacy to the subsequent attempts to persuade a wider global audience of HIV/AIDS’ status as a security issue. The Resolution directly required action from other parts of the UN System (in particular the Secretary-General, UNAIDS and DPKO), but of more significance in terms of attempts to persuade others of the case that HIV/AIDS represents a security threat is the fact that virtually all later statements on the HIV-security link highlighted the Security Council’s endorsement. In the early years of the decade attempts to persuade a global audience beyond the Council were made by a variety of bodies including multilateral bodies such as UNAIDS, the Global Fund and the G8. Even so, this third level of securitizing moves – the global level - appears to have had only limited impact on the intended audience. The evidence is mixed, but seems to suggest that security has not become a major part of global AIDS responses except in a few cases, the clearest of which is the US reflecting the prior and fuller securitization there. Beyond the US, although the security dimensions of HIV/AIDS have continued to be an occasional feature of policy statements, it is questionable how many governments and agencies actually see and respond to the pandemic in security terms (Ingram, 2005; McInnes and Rushton, 2010a). Many of the most important developments in the global response to HIV/AIDS (including the Millennium Development Goals [MDGs], the 2001
Declaration of Commitment on HIV/AIDS and the creation of the Global Fund) have not rested on security considerations or logics. Indeed one of the ironies of the attempts by Holbrooke and others to show that HIV is not ‘merely’ a development problem is that it coincided with an unprecedented explosion in efforts to promote international development, expressed most concretely through the MDGs.

To understand this more complicated story of the securitization of HIV/AIDS we introduce the idea of securitization as a multi-level phenomenon. The securitizing actors involved in the various parts of the process identified above each addressed a particular constituency or level of analysis. One of the consequences of this multi-level securitization is that at each level the actor and audience changes. To some extent that would be expected with any securitization which originated within a single state and then spread to other states. The HIV/AIDS case, however, suggests an interesting insight about the way in which multi-level securitizations affect our understanding of the relationship between securitizing actors and their audiences. In this case the original audience effectively became the securitizing actor at the second level. Thus, as described above, at the first stage officials within the Clinton administration were the audience. Some of those officials who had been persuaded by the securitizing claims then took those claims forward into the Security Council. For us this dynamic highlights the importance of intersubjectivity in the securitization process, suggesting not only that Balzacq is right to characterise securitization as an argumentative process rather than a performative one, but also that he is right that an ‘empowering audience’ (Balzacq 2010: 8-11) is fundamental to securitization. If persuaded, such empowering audiences can then take up the securitizing claims as their own and seek to persuade others. Indeed what the securitization process in the HIV/AIDS case most resembled was something akin to the ‘norm life-cycle’ which has been described elsewhere in the constructivist literature (see Finnemore and Sikkink, 1998): a norm entrepreneur (in this case a ‘securitization entrepreneur’) was able to first persuade a limited
audience to accept the case that HIV/AIDS is a security issue, and subsequently set in motion a ‘cascade’ through international society (albeit, as we have argued, in practice it only ‘cascaded’ to a limited extent). There may be a need, then, to further interrogate this actor/audience dynamic, and social constructivist work from outside the Copenhagen School, particularly the literature on the role of audience persuasion in norm building, may have much to contribute conceptually in this area.

Partial Securitization, the Security Continuum, and the adoption of emergency measures

This leads us to our second theoretical point, which addresses the range of different opinions which may be present within an audience, even when confronted with the same speech act. The second level of the multi-level securitization of HIV/AIDS which we outlined above offers the starkest example of this. The fact that Holbrooke, Gore and Piot (three of the key securitizing agents) saw HIV/AIDS as a potential existential threat to states seems clear, even if they were partly motivated by an instrumental desire to get greater political attention for the pandemic. But it is apparent that their audience, the 14 other members of the Security Council, placed the issue at very different points along this continuum, with the securitizing claims being highly controversial within the Security Council.¹³

Despite these misgivings, through adopting Resolution 1308 all 15 Council members formally aligned themselves with the securitizing claims. Whilst at first glance the lack of consensus on the securitizing claims vs. the unanimous adoption of the Resolution may appear irreconcilable, there are other contextual factors which can help explain the apparent disjuncture. Many of these relate to the nature of the Security Council as an audience. For one, a dynamic developed in early 2000 in

¹³ For fuller accounts of this story see McInnes and Rushton, 2010; Rushton, 2010a.
which the Security Council felt duty-bound to do something about HIV/AIDS given the growing sense at the time of a humanitarian crisis in sub-Saharan Africa in particular. To oppose such action would have been extremely difficult politically for Council members, and helps explains why they did not feel able to publicly speak out against the Resolution. But the nature of the Council is that, having decided it must do something, the only thing which it could do within its mandate was securitization: declaring the pandemic a threat to international peace and security. Furthermore, this was also a time in which ideas within the international community about what constitutes a security issue were changing rapidly. These changes were perhaps more clearly evident in the Security Council than anywhere else. Wallensteen and Johansson (2004) have noted that in this period the Security Council was beginning to see ‘security’ in a far wider context than they had previously. One result was a number of thematic resolutions in the early years of the new millennium (not only on HIV/AIDS but also on issues such as women and children) as the Council expanded its understanding of its remit to include addressing the root causes of conflict rather than merely attempting to manage ongoing ones. The Council as audience, then, was undergoing a rapid process of change, with previously well-established intersubjective understandings about the boundaries of ‘security’ in a state of flux. What the Council did not do in the HIV/AIDS case, however, was forward a different referent object for security In this respect differing, for example, from its actions in Resolution 1325 on women and armed conflict). Indeed Resolution 1308’s relatively narrow focus on peacekeeping in the operative paragraphs, necessary as a ‘hook’ which had been essential to achieving consensus within the Council (Behrman 2004: 163), and its statements elsewhere in the resolution on state stability and international security reflected the traditional (and state-centric) nature of the Council’s understanding of security. What had broadened was not so much the Council’s concept of security, but rather the range of issues which it saw as threatening security. Finally, the influence of the US within the Council – a product of the broader political context of the distribution of power in the international system – clearly played a role. There are resonances in all of this with the emphasis which Balzacq (2010: 11-15) places on the cultural context within which securitizing moves are
made. Nevertheless, the unanimity around Resolution 1308 masks a more complex situation, with different Council members being persuaded to very different extents by the securitizing claims.

Thus the existing AIDS and security literature – much of which presents Resolution 1308 as proof of successful securitization – perhaps provides an overly simplistic account. This all adds a further complication to the question raised by McDonald (2008) over how we know when securitization has been successful, because here we find an ostensibly successful securitization amongst the Council members (in that they formally accepted the case in Resolution 1308) despite the fact that they were not all in fact persuaded. We offer two theoretical reflections here. The first is that the success/failure question may be based upon a problematic assumption that securitization is a binary either/or state. In reality the situation may be much more complex. Abrahamsen (2005: 59) argues that issues rarely move directly from normal politics to being securitized as an existential threat; rather security issues can move along a continuum, with most falling short of the existential threat required for full securitization:

[M]ost security politics is concerned with the much more mundane management of risk, and security issues can be seen to move on a continuum from normalcy to worrisome/troublesome to risk and to existential threat... The process of securitization is thus better understood as gradual and incremental, and importantly an issue can be placed on the security continuum without necessarily ever reaching the category of existential threat.
Ole Waever has also identified the spectrum between security and normal politics as an area requiring further investigation (2003: 26), noting in a wide-ranging overview of the state of the art in securitization theory that ‘there is a need for more work on de-securitisation and failed acts of securitisation, and finally partial securitisation could be worth exploring.’ One of the reasons for partial securitization may be that some members of an audience are persuaded whilst others are not. This lack of a consensus therefore presents a situation of partial securitization, and depending upon the balance of opinion an issue will be placed at some point along this spectrum. What we wish to suggest, however, is more nuanced than this. HIV/AIDS clearly offers examples of states (the UK being one example) which are neither wholly convinced nor fully sceptical. In other words, different audience members would place the issue at different points on the spectrum between normalcy and existential threat.

The second reflection is that practices may in some cases offer a stronger indication than language that something is being addressed in security terms. In other words, what actors do may tell us more than what they say. One of the central ideas in securitization theory is that securitization legitimates the taking of ‘emergency measures’. Buzan, Waever and de Wilde (1998: 25) are careful to note that there is no requirement in their theory that an emergency response has to actually come about (‘only that the existential threat has to be argued and just gain enough resonance for a platform to be made from which it is possible to legitimize emergency measures or other steps that would not have been possible had the discourse not taken the form of existential threats, point of no return, and necessity’); but they do suggest that in the absence of an accepted legitimate basis for such measures ‘we can talk only of a securitizing move, not of an object actually being securitized. Thus, although the absence of emergency measures may not in itself be conclusive, it may offer an indication that an issue has not been fully securitized. It would be hard to make a strong case that the Council’s actions in relation to HIV/AIDS over the last 10 years has provided evidence that the
Council members have accepted the legitimization of ‘exceptional measures’. Those things which have flowed from the implementation of 1308 are examples of good practice – training peacekeepers in HIV awareness, for example – but hardly constitute an exceptional response. Whilst this may not in itself be conclusive evidence of a failed/partial securitization, the relative absence of meaningful ‘emergency measures’ emanating from the Council does seem to give a better indication of the actual level of persuasion than the unanimous rhetorical acceptance of the securitizing claims represented by the adoption of Resolution 1308. As we now move on to address in the final section, the Council’s subsequent treatment of the AIDS issue seem to add weight to this conclusion, pointing to a situation in which at the global level HIV/AIDS has gradually moved back down the security continuum towards normalcy (though it may be argued that within the US it remains securitized).

De-securitization and the role of empirical evidence

The Copenhagen School’s initial outlining of securitization theory contains within it a warning against securitization, noting two key problems. First, that applying the security label to a wide range of issues risks state involvement where that might prove ‘undesirable and counter-productive’; and second that security is in danger of being '[elevated] into a kind of universal good thing – the desired condition toward which all relations should move... this is a dangerously narrow view. At best, security is a kind of stabilization of conflictual or threatening relations, often through the emergency mobilization of the state’ (Buzan, Waever and de Wilde, 1998: 4). Reservations over securitization are especially evident in Waever’s earlier work which introduces the idea of de-securitization - that is, how an issue might be returned to the realm of normal politics, an idea which also receives attention in New Framework for Analysis (Waever, 1995: 56-7; Buzan, Waever and de Wilde, 1998: 4). These concerns resonate powerfully with the framing of HIV/AIDS as a security issue (e.g. Elbe, 2006). In particular the belief that securitization increases state control creates the potential for a
series of negative impacts with HIV/AIDS, not least in sidelining opposing viewpoints, prioritizing security issues in the prevention and treatment of disease and in curtailing civil liberties. Sjostedt (2010: 158) for example notes how the securitization of HIV/AIDS impacted upon the Clinton administration’s willingness to accept 270 Haitian political refugees because of their extremely high HIV prevalence and the fear that they might act as vectors for the spread of the disease in the US. Commentators have also identified the manner in which the Bush administration’s approaches to HIV/AIDS as an international issue were affected by securitization, leading to criticisms both of policy (including PEPFAR, the centrepiece of the administration’s efforts to address HIV/AIDS (Pereira, 2009)) and implementation, including the way in which aid money is spent (e.g. Ingram, 2007: 525). Fears have also been expressed that basing health policies on security concerns creates an overly narrow focus and in particular may lead to a form of ‘panic politics’ where hasty and urgent responses addressing downstream effects are prioritized over identifying and mitigating upstream causes (for example, Elbe, 2009: 93-4). Despite all of these concerns however, what is striking is that the securitization of HIV/AIDS, however partial, has probably had more positive than negative results. Indeed Stefan Elbe has persuasively argued (2009: 95-101) that there is little evidence that the securitization has had substantial negative effects, while he also identifies a number of positive outcomes including the increase in funding and the manner in which securitization mobilized state action of HIV/AIDS. For Elbe, part of the explanation for this is a shift away from security and its focus on preserving the power of the state which is best accomplished through tight central control, and instead towards Foucauldian ideas of governmentality whereby states are motivated by preserving the life and welfare of their citizens (see also Ingram, 2010).

Certainly what we did witness in the first decade of the 21st Century was an unprecedented level of global effort and investment in HIV/AIDS. ‘Normal politics’ changed beyond all recognition. New programmes and institutions – perhaps most significantly PEPFAR and the Global Fund – have been created to address AIDS. Huge resources have been committed. Back in 1999 global spending on the
AIDS response was just under $900 million (UNAIDS, 2005: 1). By 2009 this had risen to about $16 billion (UNAIDS, 2010: 145). As a consequence the number of people receiving treatment worldwide has increased exponentially. The precise numbers are difficult to track for a variety of reasons, but approximately 5.2 million people were receiving antiretroviral therapy in 2008 (UNAIDS 2010: 8) – a situation which would have been completely unrecognizable only five years earlier when treatment coverage extended to only around 400,000 people (WHO, 2006). It is difficult, however, to attribute these gains to securitization. Many of the most important global developments (including the Millennium Development Goals, the 2001 Declaration of Commitment on HIV/AIDS and the creation of the Global Fund) have not rested primarily on security considerations. Indeed one of the ironies of the attempts by Holbrooke and others to show that HIV is not ‘merely’ a development problem is that it coincided with a resurgence in efforts to promote international development, expressed most concretely through the MDGs. The lesson of the last decade may be that securitisation is not the only way of getting attention: ‘developmentization’ may work too.14

Indeed, we argue here, by the middle of the decade a process of de-securitization appears to have set in at the global level. Identifying this is complicated by the disease being only partially securitized outside the United States, which means that it is not a shift from a clear position but rather a trend away from presenting HIV/AIDS as a security issue.15 Reflecting our earlier rejection of securitization as a binary, for us de-securitization entails not a clear reversal but rather a more subtle move back along the continuum towards ‘normal politics’. Certainly since 2005, the Security Council seems to have backed away from the HIV/AIDS issue. Although it was stated following Resolution 1308 that HIV/AIDS had become a ‘core issue’ for the Security Council (UNAIDS, 2001), by the end of the decade it seemed to have dropped off their agenda entirely, despite the disease still being of pandemic proportions in Africa and continuing (though as yet unrealized) fears of major

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14 For a fuller discussion of this see Rushton, 2010b.
15 Rushton (2010a) has shown, for example, how the frequency of references to security has reduced over time in UNAIDS’s biannual Report on the Global AIDS Epidemic.
outbreaks in other regions. Indeed throughout 2010 there were efforts, notably from UNAIDS, to persuade the Security Council to discuss HIV/AIDS again, 10 years after its initial securitizing move and Resolution 1308. This was to be not simply an anniversary event, but an attempt to reinvigorate the securitization of HIV/AIDS. None of the Security Council presidents for 2010 were willing to pursue this, and at the time of writing attempts are ongoing to hold a session on HIV/AIDS in 2011.

Crucially for our purposes, by the middle of the decade the key empirical claims used to establish HIV/AIDS as a security issue were under sustained pressure. At the time of Resolution 1308 the empirical evidence for the major securitizing claims was somewhat thin, but this did not prevent the disease from being at least rhetorically accepted as a security issue. However in the following years, research – perhaps most notably a paper by Tony Barnett and Gwyn Prins (2005) which was circulated to the Security Council, and work by Barnett and Dutta (2008), Alex de Waal (2005), Alan Whiteside (Whiteside, de Waal and Gere-Tensae, 2006) and others – called into question the evidence upon which some of the key securitizing claims had been based. In particular they presented evidence that state stability was not directly affected by high prevalence rates, that militaries were not as susceptible to the disease as had been initially feared, that prevention methods (including education) could reduce military prevalence rates, that peacekeepers were not necessarily vulnerable to the disease nor a vector for its spread, and that conflict did not necessarily increase prevalence rates. By the end of the decade, the final report of the major international AIDS, Security and Conflict Initiative (ASCI) was able to conclude (ASCI, 2009: 12) that ‘earlier more alarmist relationships that were assumed to exist between national-level state security and HIV and AIDS are not borne out by the evidence’. It seems certain that the de-securitization of HIV/AIDS was fundamentally linked to a growing perception that the evidence not only did not support the earlier

16 It was only in the 2008 UNAIDS report on the global pandemic that for the first time indications of stabilization were apparent in some African countries, though this was far from universally the case (UNAIDS, 2008).
17 For details on ASCI, see http://asci.researchhub.ssrc.org/rdb/asci-hub, last accessed 11 November 2009.
securitizing claims, but in some instances suggested that the opposite might be the case\textsuperscript{18} (for example, the low prevalence rates in Angola were linked to the fact that it had suffered prolonged conflict, whereas previous claims would have suggested that conflict would lead to increased prevalence (McInnes 2010, 2011)).

This is significant in theoretical terms because it suggests not only that arguments appealing to empirical reality (even though they weren’t backed by much in the way of evidence) were an important part of the original persuasion process (thus backing up Balzacq’s position) but also that de-securitization is possible when empirical evidence is available which directly challenges the claims about reality on which the securitization was originally based. Thus, we would argue, appeals to empirical evidence are important both to securitization and de-securitization. In making such a claim, of course, we need to remain sensitive to both agency and social context. The effects of the emerging empirical evidence were uneven in the HIV/AIDS case. Clearly there is no direct link between evidence and (de)securitization. In the United States, the most ardent advocate of securitization and a state which has remained wedded to HIV as a security issue, the emerging evidence about the complexity of the links did not lead to a desecuritization process. What we would suggest is that the growing empirical evidence was used by those who were already sceptical of the link in order to downplay the relationship and move instead towards de-securitization. The empirical evidence did not in itself lead to de-securitization, but rather was vital in creating the space which allowed de-securitizing moves to occur.

\textbf{Conclusion}

\textsuperscript{18} Our claim here is based on extensive interviews in Geneva, New York and Washington with officials close to Council deliberations.
It is difficult to deny that HIV/AIDS is a global tragedy which has caused many millions of deaths and has ruined countless more lives. But it is not obviously a security issue, at least not in the narrow national/international security sense. Nevertheless, for more than a decade the case has been made that HIV/AIDS impacts on the security of states and regions, and therefore requires exceptional action. The UN Security Council, through its discussions on the issue and its passing of Resolution 1308, is generally identified as the crucial actor in securitizing the disease. In this article however we have suggested that the securitizing process has been significantly more complex than is generally recognized in the literature. We argue that although the debates in the Security Council and the passing of Resolution 1308 appeared to conform to the facilitating conditions identified by Buzan et al for a successful securitization, the role of the speech act was less important than contextual conditions. This in turn pushes us towards endorsing later versions of securitization theory, especially the ideas of Balzacq, in explaining the securitization of HIV/AIDS. An examination of the securitizing process also reveals a dynamic which suggests that multi-level securitizing processes might occur in which an issue begins to gain momentum and credibility at a lower level and works its way up to the global level. With HIV/AIDS, the first move was made within the US domestic policy context, the second by key US officials in the Security Council, and the third when the Council’s endorsement was used to legitimize arguments being made to the wider international community.

However, the reservations of other members, when added to concerns over the empirical evidence, meant that HIV/AIDS was not fully securitized and indeed, over the course of the past decade, moved back down the continuum in the direction of ‘normal politics’. This leads us to suggest both that empirical evidence can be important in undermining the credibility of securitizing claims (though not necessarily in precluding the securitization process being initiated), and that securitization is not a binary condition but a continuum along which different actors may be located at different positions. It also leads us to suggest a more complex relationship between actor and
audience. In so doing we are aware that we have opened up other questions to be pursued. Amongst those we would suggest are: the relationship between securitizations at different levels; how to identify various stages along a security continuum; and identifying how and when a partial securitization becomes a full securitization. We are also aware that we have entered an ongoing discussion over the role of context and empirical evidence in securitization. Our intention was not to resolve this discussion but, in identifying the role empirical evidence played in opening up the space for the desecuritization of HIV/AIDS, hopefully contribute something to that debate. We have also suggested the possible uses of constructivist work from outside the Copenhagen school in interrogating the actor/audience dynamic, including the idea of a norm life-cycle.

Finally, it is worth noting that here we have identified three particular ways in which an examination of the HIV/AIDS case can contribute to securitization. However, in terms of future research agendas, this may not exhaust the possibilities. One of the areas we have examined in this article is the ways in which securitization processes can play out sequentially at different levels of analysis. In their most recent work (Buzan and Waever 2009) the Copenhagen School have also been re-examining different levels of analysis, although in a different way, through the concept of macrosecuritizations which ‘package together’ other securitizations. While we would not suggest that HIV/AIDS is a macrosecuritization, it may constitute part of a macrosecuritizing move. What intrigues us is the possibility that HIV/AIDS contributes at one and the same time to two such moves: global health security and state failure. A full examination of this is beyond the scope of this paper, but may offer the basis of a fruitful future research agenda.
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