The Grammar of Threat and Security in HIV/AIDS

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**Title**  

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**Abstract**  
Since HIV and AIDS were discovered in the early 1980s the infection rates have taken on the proportions of a global pandemic. Whilst the rates are still quite low in the Western World there are areas like Sub-Saharan Africa, of which South Africa is a part, where the rates are as high as 25%. In light of this a debate as to how the situation should be handled and dealt with has developed. In 2000 the United Nation Security Council debated HIV/ AIDS as a threat to national and international peace and security. This was the first time a virus or
disease had been debated in this forum. The debate was instigated by, among 
others, the United States. If states in the Western World, where infection rates are 
still low, can view this issue as a threat to security, how are HIV/ AIDS viewed in a 
country like South Africa with a prevalence rate of 25%?

There are those who claim that in order to say that an issue poses a threat to security 
one has to define what constitutes a threat and define the concept of security. Is it a 
subjective value? Could a disease and/ or a virus be declared a security threat and 
what would the logic behind that be?

Following the end of the Cold War the study of security was developed as some 
scholars wanted to widen the traditionally state-centred and military concept of 
security and reconceptualize it so that it would be applicable to non- traditional 
security-threats. The theory of securitization was developed with this purpose. It 
introduces a security-concept that is shaped by a grammar of drama and urgency 
based in a logic of existential threats that call for measures beyond the normal code-
of-conduct. Thus, studies into how military, health, social and political issues etc 
can be defined as issues of security, i.e. become securitized, are made possible.

The aim of this thesis is to, through the theoretical lenses of securitization- theory 
and the discourse theory of Ernesto Lcadau and Chantal Mouffe, establish which 
meanings are involved in the structuring of the issue of HIV and AIDS in South 
Africa. Further we aim to establish whether these meanings can be related to a 
broader security concept, i.e. if there is a case of ‘securitization’ at hand.

We have found, by analysing speeches given by government officials and key 
political documents between the years 1998 to 2002, that there are different trends in 
how HIV and AIDS have been defined, i.e. which meaning they have been given, 
and how these have been structured. Between 1998 and 2000 HIV and AIDS were 
seen as a threat and dealt with as such; they were securitized. In the years that 
followed we argue that there was a more cautious tone; the issue was desecuritized 
as the level of drama and urgency that had characterized the discourse of 1998-2000 
was lowered between 2000-2002. The thesis acknowledges that it is too early to say 
whether this (de)securitizing move will succeed or not as time has yet to see the full 
effect of the move on a full desecuritization.

Nyckelord
Keyword
HIV, AIDS, South Africa, Security, Securitization, Desecuritization, Copenhagen 
School, Discourse Theory
Abstract

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There are those who claim that in order to say that an issue poses a threat to security one has to define what constitutes a threat and define the concept of security. Is it a subjective value? Could a disease and/or a virus be declared a security threat and what would the logic behind that be?

Following the end of the Cold War the study of security was developed as some scholars wanted to widen the traditionally state-centred and military concept of security and reconceptualize it so that it would be applicable to non-traditional security-threats. The theory of securitization was developed with this purpose. It introduces a security-concept that is shaped by a grammar of drama and urgency based in a logic of existential threats that call for measures beyond the normal code-of-conduct. Thus, studies into how military, health, social and political issues etc can be defined as issues of security, i.e. become securitized, are made possible.

The aim of this thesis is to, through the theoretical lenses of securitization-theory and the discourse theory of Ernesto Laclau and Chantal Mouffe, establish which meanings are involved in the structuring of the issue of HIV and AIDS in South Africa. Further we aim to establish whether these meanings can be related to a broader security concept, i.e. if there is a case of ‘securitization’ at hand.

We have found, by analysing speeches given by government officials and key political documents between the years 1998 to 2002, that there are different trends in how HIV and AIDS have been defined, i.e. which meaning they have been given, and how these have been structured. Between 1998 and 2000 HIV and AIDS were seen as a threat and dealt with as such; they were securitized. In the years that followed we argue that there was a more cautious tone; the issue was desecuritized as the level of drama and urgency that had characterized the discourse of 1998-2000 was lowered between 2000-2002. The thesis acknowledges that it is too early to say whether this (de)securitizing move will succeed or not as time has yet to see the full effect of the move on a full desecuritization.
Preface

In the preface to his doctorate thesis – ‘Global Governance of AIDS – Partnerships with Civil Society’ – from 1997, Peter Söderholm wrote that a recurrent question he had gotten in his interviews was ‘why’ he had chosen to write about the AIDS epidemic and not another topic of international relations. Söderholm wrote that he did not have an answer to the question but that “a consequence of studying and writing about HIV/AIDS has been an increasingly felt need to contribute something useful, however insignificant: that is, I wish to offer what I can to the many people I have had the privilege to meet who have helped me realize the relative insignificance of the problems with which I must struggle in comparison with the ones linked to HIV/AIDS that they [people living with HIV/AIDS] must face every day”. This gave his thesis two aims, one scholarly and one of a different kind.

Our aim has been similar and we can only hope that we have at least achieved one. Going into this study we were guided by a tickled mind and ever-growing interest in security studies and South Africa as a developing country facing the epidemic of HIV/AIDS, but we came out of it with something more; the faces of people living with HIV and AIDS and their questions as to why we were doing this and how their situation would be changed if they took the time to answer our questions. We gave them the only answer we could provide and we hope that we have lived up to their expectations with this final product.

We have been two students with years of university studies, both in our own countries and abroad, focused on political science and international relations. One of us comes from a developing country and the other from the west. Neither had been to South Africa before and none had done an academic fieldstudy in this part of the world before. We have taken with us that which we have gathered in knowledge, academic as well as social and cultural; a set of languages and ideological preconceptions and entered a context which was not our own. On the way we have encountered people who have helped us develop and evolve as researchers and to structure and perform our study. Without these this study would most likely look different and for this we thank them; they all play a part in the final product.

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Acronyms

AIDS    Acquired Immune Deficiency Syndrome
ANC    African National Congress
ART    Antiretroviral Therapy
ARV    Antiretroviral
ATIC   AIDS Training and Information Centre
AZT    Azidothymidine
BCM    Black Consciousness Movement
CBO    Community-based Organisation
CDC    Centres for Disease Control
DA    Opposition Democratic Alliance
DNA    Deoxyribonucleic Acid
DOE    Department of Education
DOF    Department of Finance
DOH    Department of Health
DOJ    Department of Justice
DOL    Department of Labour
DOME   Department of Minerals and Energy
DOT    Department of Transport
DOW    Department of Welfare
FBO    Faith-based Organization
GCIS   Government Communication and Information System
IDC    Interdepartmental Committee on AIDS
IMC    Inter-Ministerial Committee on AIDS
HIV    Human Immunodeficiency Virus
IMC    Inter-Ministerial Committee on AIDS
MAD    Mutually Assured Destruction
MOH    Ministry of Health
MEC    Member of Executive Committee
MP    Member of Parliament
MPL    Member of Provincial Legislature
MRC    Medical Research Council
MTCT   Mother-to-child transmission
NAC    National AIDS Council
NACOSA National AIDS Co-ordinating Convention for South Africa
NCOP   National Congress of Provinces
NGO    Non-Governmental Organisation
NIH    National Institute of Health
NIV    National Institute of Virology
NVP    Nevirapine
PWA    People Living with HIV infection or AIDS
Rand   South African currency
RNA    Ribonucleic Acid
SADC   Southern African Development Community
SIV    Simian Immunodeficiency Virus
STD    Sexually Transmitted Disease
STI    Sexually Transmitted Infection
TAC    Treatment Action Campaign (NGO)
TB    Tuberculosis
<table>
<thead>
<tr>
<th>Acronym</th>
<th>Full Name</th>
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<tbody>
<tr>
<td>TRIPS</td>
<td>Trade-Related Aspects of Intellectual Property Rights</td>
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<td>UN</td>
<td>United Nations</td>
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<td>UNSC</td>
<td>United Nations Security Council</td>
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<td>UNAIDS</td>
<td>Joint United Nations Programme on HIV/AIDS</td>
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<td>UNDP</td>
<td>United Nations Development Programme</td>
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<td>US</td>
<td>United States</td>
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<td>VTC</td>
<td>Voluntary HIV Testing and Counselling</td>
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<td>WHO</td>
<td>World Health Organisation</td>
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<td>WTO</td>
<td>World Trade Organisation</td>
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<td><strong>Glossary</strong></td>
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<td>Acquired</td>
<td>means that the HI-virus is not contracted through genetic heritage or casual contact but rather through the individual being exposed to the virus, mainly through a sexual act or blood transfusion.</td>
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<td>Act</td>
<td>an act is a proposition for a bill, a law, to be decided on by the parliament.</td>
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<td>AIDS-related disease</td>
<td>different diseases or syndromes which appear in an HIV-infected body and indicate AIDS or make up full-grown AIDS, e.g. fever, swollen lymph glands.</td>
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<tr>
<td>Antiretroviral drugs</td>
<td>drug that postpones the development of opportunistic infection in a in an HIV positive person.</td>
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<tr>
<td>Bill</td>
<td>a written proposal for a new law. Usually is first debated in the country’s parliament before it is accepted as law.</td>
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<tr>
<td>Ebola-virus</td>
<td>extremely virulent viral disease that was discovered in Africa and Asia in the 1970’s. People that get infected with it have a 50-90% chances of dying.</td>
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<tr>
<td>Epidemic</td>
<td>large numbers of people infected with one virus in a short period of time. In relation to the term pandemic it could be said that a viral disease can be a national epidemic but a global pandemic. HIV/AIDS presents an epidemic on the national level but a pandemic globally.</td>
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<tr>
<td>Immune system</td>
<td>the immune system is the body’s defence mechanism which it uses to fend off viruses and infections of different kinds.</td>
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<tr>
<td>Immunodeficiency</td>
<td>the HI-virus attacks the immune system and makes it weaker, making its ability to defend the body against other viruses and infections deficient.</td>
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<tr>
<td>Incidence</td>
<td>the number of new cases within a defined population during a set timeframe</td>
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<tr>
<td>Kaposi’s Sarcoma</td>
<td>a type of skin cancer common among victims of AIDS.</td>
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<tr>
<td>Nevirapine</td>
<td>name of one of the anti-retroviral drugs administered in South Africa, specially for pregnant women.</td>
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<tr>
<td>Pandemic</td>
<td>term applied to diseases of universal magnitude. See ‘epidemic’ above</td>
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<tr>
<td>Prevalence</td>
<td>the number of infections in a defined population at a set point in time.</td>
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<tr>
<td>Syndrome</td>
<td>AIDS is a syndrome rather than a traditional disease in the sense that when the HI-virus has weakened the immune system the body is vulnerable to other viruses and infections which will serve to further weaken the body. The person will die from these infections in combination with AIDS.</td>
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<tr>
<td>Tuberculosis</td>
<td>chronic bacterial disease in the lungs common in victims of AIDS.</td>
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Chapter 1: Introduction

1.1 Introduction

On July 17, 2000, the United Nations Security Council (UNSC) adopted resolution 1308(2000) which expressed deep concern for “the extent of the HIV/AIDS pandemic worldwide, and the severity of the crisis in Africa in particular”. It stressed the importance to act since the pandemic could “pose a risk to stability and security” if nothing was done. This was one of three occasions this year that the UNSC debated HIV and AIDS from the point of view of a potential threat to peace and security. Their argument for doing so was based, among other things, on the pandemic’s possible effects on a country’s social and economic stability and development potential. Another argument was that the pandemic might be worsened by unstable or violent contexts and as such HIV/AIDS was discussed in relation to peacekeeping.

Prior to the talks in the UNSC the Vice-President of the United States (US) Al Gore had said that HIV and AIDS should be dealt with by the US as a ‘national security issue’ similar to that of the environment. US President at the time, Bill Clinton, also spoke of approaching HIV/AIDS as a threat to national and international security in a proclamation for World AIDS Day, 2000 saying that: "because this spread of HIV has reached catastrophic proportions in many areas of our global community, AIDS has become a national and international security threat". The US and UN spoke of a link between development, human security and HIV/AIDS, establishing a link between them, raising a new level of global awareness.

According to the UN Chronicle one of the outcomes of the UNSC-talks was that HIV and AIDS were no longer, like it had been up until 1998, seen as ‘just’ a health issue but a threat to ‘human security’. The talks called for a different approach for dealing with HIV/AIDS and believed in success since “when top leaders pay attention, changes can happen”. The UN/US discourse on HIV/AIDS could thus be argued to have broadened beyond a traditional medical issue. HIV and AIDS were now included in, and part of, more or less every UN-body’s work and HIV and AIDS had, in the eyes of the UN, become an issue of security.

Although the UN and US acknowledged HIV/AIDS as a security issue it should be remembered that the prevalence rate of HIV/AIDS in the US and majority of the Western World was low compared to that of the developing world. Whilst action was taken in the Western World a debate started in the media and different scholarly circles around the world arguing that others, e.g. South Africa, were not taking action the way they should.

As an actual problem, i.e. in real terms, the need to act against HIV/AIDS, according to Robert L Ostergard Jr, seems obvious when it comes to Africa. The issue for him is how this

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2 UNSC (2000), p1


should be done. The question of how something is to be done is related to how the problem is defined. A policy can be viewed as a declaration that there is a goal that a government aims to reach and the policy spells out how this is to be done, it constitutes the so-called “way to the goal.” For example, direct, short-term threats are defined as imminent and dealt with relatively quickly while indirect or long-term threats are dealt with ‘later’ as other issues come in the way that are more acute. It seems as though, at least rhetorically, the UN and US have been willing to relate their definition of HIV and AIDS to national and international security. An interesting question is how has it been defined in those parts of the world where the prevalence rates are the highest. South Africa is one of these countries. How are HIV and AIDS defined here?

Robert L. Ostergard claims that in order to be able to say if HIV and AIDS pose a threat to security one has to define what constitutes a threat while scholars like Helga Haftendorf and Arnold Wolfers question the concept of security itself. Is it a subjective value? Could a disease and/or a virus be declared a security threat and what could the logic behind that be?

1.2 Aim and Purpose of the Study

The empirical aim of this thesis is to establish which meanings are involved in the structuring of the issue of HIV and AIDS in South Africa.

With the basis in the Copenhagen school and its theory of securitization, enabling a wider concept of security, we have established a second aim. This aim is to establish whether these meanings of HIV and AIDS in South Africa can be related to a broader security concept, i.e. if there is a case of ‘securitization’ at hand.

In order to achieve these aims we will structure our thesis around a set of research questions, formulated as follows: What is the policy concerning HIV and AIDS in South Africa? Which meanings of HIV and AIDS are constituted within this policy and can these be related to security in a broader sense, or more specifically, to the term ‘securitization’ as defined by the Copenhagen School.

1.3 Delimitations

We have chosen to focus on the time-period 1998-2002 as 1998 has been described by President Thabo Mbeki himself as the start of the approach to HIV and AIDS which we see at work today. We have also chosen to limit our study in space in the sense that we focus on speeches and key government policy-documents from the National Government and complement these with interviews with government officials on the provincial level, focusing on the Gauteng province, in our analysis.

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9 Young, p11
10 It should be noted that this view is not isolated to the Clinton-administration. The administration of George W. Bush works along similar lines.
1.4 Previous Research and Possible Research Gaps

“We shall not cease from exploration
And the end of all our exploring
Will be to arrive where we started
And know the place for the first time”
- T.S. Eliot (1888-1965)

Studies concerning HIV and AIDS are often conducted from a medical point of view and the medical side is also often in focus in the media – e.g. in relation to medication or the spread of the HI-virus. The medical side of HIV/AIDS is central seeing as it is a virus and a disease. However, over the last couple of years the impact of the two on society at large, the life of the infected individual and conditions under which HIV spreads have become interesting to scholars outside of medicine as well.

One field in which HIV/AIDS have become mentioned is that of security. One example is the Institute for Security Studies (ISS), Pretoria, South Africa, which has started a project on HIV/AIDS and security. Another trend, though not academic, is the way in which the UNSC and US have related HIV/AIDS to security. This is often done by looking at how the virus and disease affect military forces, i.e. a state’s capacity to mobilize security. The possibility of HIV/AIDS in themselves posing a security threat to a state has been rather neglected and this is the gap in which we place our thesis.

We have chosen to take a step back and study what meaning HIV and/or AIDS are given in the South African government’s policy-discourse because we believe that in order to understand why policy is structured in a particular way it is important to look at how the policy-maker defines the issue in the first place. What is the logic behind the policy? Our point is that “we can describe without explaining, but we can’t really explain without describing”.

The Copenhagen School has placed itself in a new field of security and strategic studies by rethinking traditional tools for security-analysis and reconceptualizing the concept of security itself. Their theory of securitization provides the researcher with a theoretical lens through which e.g. HIV/AIDS can be analysed from a security perspective but also test the boundaries

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12 For studies on HIV/AIDS in relation to security we recommend:
of a wider concept of security. Our aim only covers the first half of this but we believe that our study might cast some light on the latter, theoretical, aspect as well as part of the cyclical nature of research\textsuperscript{14}.

Discourse analysis is also a rather new field and the virtue of using this analytical approach is not an uncontested topic in academic debate\textsuperscript{15}. One of the gaps in the discourse theory of Ernesto Laclau and Chantal Mouffe is the lack of empirically functional analytical tools like those provided by e.g. critical discourse analysis. We have tried to overcome this by combining discourse theory with the theory of securitization that has similar social constructivist basis and uses concepts which might enhance the analytical tools of Laclau and Mouffe.

1.5 Methodology

1.5.1 Research Structure and Analytical Design

We have chosen to do a qualitative study where we combine the methods of fieldstudy, interviews and discourse analysis in relation to our theory of choice and the aim of our study. The way in which the study has developed is deductive as we have used a framework of theory and method in order to analyse our chosen data. The theory and method have in part developed our interaction with the data but the primary and final approach has been deductive.

Our methodological aim has been to find a functional framework that would work well in relation to our aims and research questions and it is our belief that a qualitative approach suits these. Through the process of planning and performing the study, especially on location in South Africa, we have come across a set of possible problems regarding our theory and methods. We will try to make these visible and make clear how we have dealt with them.

It should be noted that we have done this study for its own worth in the context at hand – not sampled it as an example of a general trend. In our introduction we referred to the discourse of the UN and US regarding HIV/AIDS and security but that served as an example of how the issue was defined in that particular, other, context to tickle the mind of the reader\textsuperscript{16}. This strategy works well with our theories/method as they do not assume general or universally applicable results.

\textsuperscript{14} The notion of a cyclical nature of research is presented by Catherine Marshall and Gretchen B Rossman in Marshall, Catherine & Rossman, Gretchen B (1995). Designing Qualitative Research. 2nd ed. London: SAGE, p19


\textsuperscript{15} One example of the debate on discourse analysis is a conference in Hamburg, 11-13 July, 2003 where the methodological aspects of discourse analysis in relation to other methods were discussed under the headline ‘Does Discourse Matter?’. Information about the conference can be found at www.agchange.de

1.5.2 Discourse Analysis

The method of discourse analysis is a useful tool when the aim of a study is to analyse the designated meaning of an object in a specific context. This analytical framework provides a researcher with tools with which to approach a material – whether written, oral or other – in which the use of language as a means to give an issue meaning is analysed. In the constructivist sense language is a necessity for what we think and what we do\(^{17}\) and it is part of an interactive process between the speaker and the audience.

Discourse analysis represents a way of thinking about reality and truth and their relation to discourse as it deals with objects that exist in reality but are given their meaning by how someone portrays them in discourse, creating a subjective truth. Jacques Lacan has claimed that discourse analysis has displaced epistemology when it comes to how we relate to knowledge but whilst discourse analysis studies the *modes* of knowing, epistemology concerns the *roots* of knowing\(^ {18}\). We have used this idea to establish how HIV and AIDS are defined in South African governmental discourse. HIV and AIDS exist in reality but are given a meaning by an actor in a context, creating a ‘subjective truth’.

In the field of discourse analysis we have chosen the discourse theory of Ernesto Laclau and Chantal Mouffe. Their framework is a theory and method combined, i.e. their methodological and analytical tools are structured by theoretical assumptions and the two sides cannot be separated. An effect of this is that their tools cannot be combined with just any theory\(^ {19}\). At the same time discourse theory is not recommended to be used on its own- rather it should be used in combination with other theories\(^ {20}\). The reason is that whilst Laclau and Mouffe do provide the researcher with tools, these are not fully developed. Instead, they encourage a creative development of tools that fit the study at hand without encouraging ‘methodological anarchism’. This relates to Wittgenstein’s thought that empirical research “consists of learning how to use the same theoretical rules differently to suit the particular historical contexts in which they are to be applied”\(^ {21}\).

We have chosen to combine the tools with the theory of securitization. In the central work of the securitization theory: ‘Security – A New Framework for Analysis’, Barry Buzan, Jaap de Wilde and Ole Wæver state that discourse analysis is a good method of choice as the interest of their theory is “when and how something is established by whom as a security threat. The defining criterion of security is textual; a specific rhetorical structure that has to be located in discourse”\(^ {22}\). Securitization theory and discourse theory are both influenced by social constructivism and study constructivist processes with a level of contingency. As pointed out


in the securitization theory it is important that the analyst understands that social constructions can sometimes be sedimented but never fully cemented into ‘structure’.23

Our analysis of the discourse is a macro-analysis of so-called ‘speech acts’. We have studied the material looking for a certain ‘security grammar’ or ‘security logic’ defined by securitization theory. We have not used sophisticated linguistic or quantitative techniques to code micro-level concepts, i.e. we have not looked specifically for the word ‘security’ for reasons which we explain in chapter 2. We have “read, looking for arguments that take the rhetorical and logical form defined here as security.”24

Discourse analysis is hermeneutic in its interpretative approach and attempt to understand phenomena. At the same time, it should be pointed out that both discourse theory and securitization theory aim at interpreting and understanding something through the eyes of an actor, in our case that means through the eyes of the National Government of South Africa, the actor who ‘produces’ the discourse at hand. The theories do not necessarily aim to explain any original purpose, or ‘value’ what is said in the speech acts. They acknowledge that they are dealing with subjective truths, not an objective reality.25

In relation to this we acknowledge that we ourselves bring into the study a set of theoretical and empirical preconceptions, language and concepts, so-called ‘researcher bias’26 that may influence our interpretation. These might not match those of the actors we have studied and those we have interviewed. We have tried to integrate a level of reflexivity in our analysis and acknowledged that in order to understand something we have to interpret it and we do not always share enough common ideas with the context that we are studying to be able to make a just interpretation.27 Discourse theory and securitization theory do not presuppose much about the context in comparison to e.g. critical discourse28. We will examine the two theories further in chapter 2.

1.5.3 Material and Triangulation

The material we focus our analysis on are speeches but we have also looked at press releases, cabinet statements and key policy documents delivered by the National Government between 1998 and 2002. This choice is based on criteria in securitization theory which says that “[t]he analysis should be conducted on texts that are central in the sense that if a security discourse is operative in this community, it should be expected to materialize in this text because this occasion is sufficiently important.”29 We believe that the material we have studied on HIV/AIDS is central in this sense seeing as these present an important way through which the government communicates with different audiences. By studying transcripts of speeches we have accessed a formal account of speech acts performed by the National Government. We have accessed the speeches etc using two websites we find reliable: that of

25 There are those like Michael Quinn Patton who say that hermeneutics pay special attention to context and original purpose and therefore this clarification is important (Patton, Michael Quinn (1990). Qualitative Research Design – An Interactive Approach. 2nd ed. London: SAGE, p84).
27 Gilje, Grimen, p175, 183
28 Winther Jørgensen & Phillips, p 70
29 Buzan et al (1998), p177
the South African government and ‘Policy and Law Online News’. Our searches have been conducted using keyword-searches for ‘HIV’ and ‘AIDS’. The keyword-searches have given us on average 150 speeches per year to study.

Our material also includes data generated in our interviews on location in South Africa and secondary sources made up of other studies and material on the topic of HIV/AIDS in South Africa.

In our discussion we have used the method of triangulation in order to investigate the consistency, or lack thereof, between the results of our analysis with other studies and secondary material. According to Michael Quinn Patton triangulation means that “[b]y using a combination of observations, interviewing and document analysis, the fieldworker is able to use different data sources to validate and crosscheck findings. […] Using a combination of data types – triangulation, […] increases validity as the strengths of one approach can compensate for the weaknesses of another approach”.

We have analysed speeches, interviews and primary sources of information, directly related to the issue, and triangulated the results with secondary data from other studies and documents. This is because even though we, in our fieldstudy, have made observations, we find it difficult to use these as one strong singular source of data. For a stronger argument we have instead put observational data in the sidelines, indicating they are there by the use of fieldstudy as a method and then focused our discussion on these three other sources of data.

### 1.5.4 Interviews

“If you want to know how people understand their world and their life, why not talk to them?”

In our study we have conducted qualitative interviews that have been semi-structured and open-ended, lasting on average about 45 minutes. Our goal has been to achieve firsthand information that would serve as a primary source of data for our discussion.

A rough model for the interviews were developed prior to our fieldstudy, based on our aims and research questions and with the theoretical framework in mind, then further developed in the field through the influence of the cross-cultural character of our study. This is why we chose to conduct our interviews at the end of our stay in South Africa. Interview-data is a cluster of words and when an interview is conducted cross-culturally the researcher will have to be sensitive to differences in language, i.e. the meaning of concepts and words. Our interviews were conducted in English, a language that although it is an official language in South Africa it is not the first language for everyone and not for us. Although our aim is to interpret a meaning we believe that our analytical design and our awareness of possible linguistic differences has helped us to be sensitive in relation to the data provided. It is difficult to assess our influence on the respondents’ answers as to the cross-cultural character of the interviews. Another difficulty has been that our study concerns complex issues of a possible taboo. We are two girls who have asked questions about a sexually transmitted disease.

30 The speeches that have been of most interest to our study, based on our aims and purpose, and that we have chosen to include are compiled in Appendix C.
31 Kvale, p47f
32 Patton (2002), p306
33 Kvale, p1
34 Patton (2002), p391
disease in a developing country. According to people we have interviewed it is difficult to get people to talk about HIV/AIDS and although we cannot say we have encountered any obvious problems the reader should keep this in mind, as have we in our study.

The point of open-ended interviews has been to get a deeper understanding of the designated meaning of HIV and AIDS in government policy and the logic behind it. Open-ended questions also served to limit our influence on the respondents’ answer, enabling him/her to deliver his/her answer more freely than would a closed interview or questionnaire. We have tried to be as open as possible, deliberately naïve, in our questions and have only let the focus on security influence the questions in a specific direction in the follow-up questions\(^\text{35}\). The model for this is described more thoroughly in appendix A.

Our original plan was to conduct interviews with National Government officials but it turned out to be too difficult to get a good sample on this level. Instead we managed to get a good sample on the provincial level. We do not believe that this decreased the value of the data. The interviews served to investigate the views of politicians and policy-makers as to questions directly linked to the aim of our thesis. Our sample of respondents was put together through research into the governmental structure, i.e. some respondents were chosen because of their office; others were found through snowballing or through recommendations from other researchers, respondents or other actors.

We also performed non-governmental interviews involving respondents from academic research institutes, civil society, doctors and medical personnel working with HIV/AIDS which serve the purpose of primary sources of information in the discussion. Apart from these formal interviews we have performed a number of informal interviews. In total we have performed 15 formal and 30 informal interviews.

We have attempted to perform the interviews according to research ethical principles and as such we have informed our respondents of who we are and what we are studying. We have given the respondents the opportunity to be anonymous and whereas all the respondents in our formal interviews have declined, instead allowing us to use their name and title, some of our informal interviews have left the respondents anonymous. Seeing as our study concerns issues that are sensitive we have also reached an agreement with our respondents that the interviews conducted are strictly for our use, in relation to the purpose of our study. In our discussion we use direct quotes and recall general thoughts in order to clearly illustrate and deliver the views of the respondents.

1.5.5 Fieldwork

The information provided through what people say can be limited\(^\text{36}\). This is why we chose to do a field study – it creates the opportunity to observe and listen. Observation not only adds visual information to what you hear but in our case it has also helped in the development of our analytical design both structurally and in relation to researcher bias and reflexivity\(^\text{37}\).

We have discovered first hand that South Africa is a context different from the one we come from. We predicted this as we planned our study and developed our understanding of it in the

\(^{35}\) For a deeper understanding of the different aspects of qualitative research interviews we recommend Kvale, Steinar (1997). *Interviews – An Introduction to Qualitative Research Interviewing*. London: Sage, p29ff

\(^{36}\) Patton (2002), p21

\(^{37}\) Ibid
field. As Nils Gilje and Harald Grimen state, it is in the context that a researcher will find keys to be able to interpret something\textsuperscript{38}.

Our fieldwork includes 7 weeks in the Gauteng province in particular but we have also visited Durban and Cape Town for mainly two reasons. These two cities host a number of research institutes, e.g. Health Economics & HIV/AIDS Research Division (HEARD) at the University of Natal, Durban, where we have conducted interviews with researchers involved in our field of study. Most important is that we have gotten access to their resource-centres which are important sources for compiled and structured primary and secondary data. Durban, situated in the province of KwaZulu Natal on the East coast, and Cape Town, situated in the province of Western Cape on the West Coast, also serve the purpose of two reference points to which one can put the Gauteng province, and South Africa as well, into a comparative provincial perspective. KwaZulu Natal is the province with the highest prevalence rates and it is also the province which was hit hard early on in the history of the epidemic. Western Cape on the other hand has had quite low prevalence rates and Gauteng province is, in terms of its population, prevalence rates and also geographical location more or less situated in between the two.

As part of our fieldwork we have visited governmental offices as well as different non-governmental organisations, care-groups etc. Some of the visits have included formal or informal interviews and others have served the purpose of observation for the benefit of our analysis. One way in which we have conducted direct observation has been through visits to different areas in the Gauteng province, rich and poor, those with high prevalence rates and those with low, government and private projects and anyone who could help us understand the context of South Africa in general and the Gauteng province in particular. Through this we have become aware of what Michael Quinn Patton says of direct observation\textsuperscript{39}, namely that direct observation enables the researcher to see and learn things that would never come out in a formal interview. All of these observations have been overt in the sense that we have always, for research ethical reasons and with respect to the different individuals, disclosed our identities as researchers and stated the purpose of our visit. On the other hand we have, for the same reasons as stated in relation to our interview model, not necessarily stated our interest in HIV and AIDS in relation to security.

In order for the observational fieldwork to serve its purpose we used a combination of sources in order to locate the places we chose to visit, the people we chose to see and the way in which we related to the information given to us. In the same way as with the interviews we chose a combination of snowballing, recommendations, archives, resource centres and firsthand searches on the Internet and in project catalogues etc.

1.5.6 Validity, Reliability and Intersubjectivity

We have earlier pointed out some of the problems we have located in relation to the different methodological aspects of this study – that of observations, of interviews, of discourse analysis and interpretation etc and they can all be related to the aspects of validity, reliability and intersubjectivity in our work. The researcher is the instrument of research\textsuperscript{40} and we have tried to structure or study methodologically to raise the value of these three aspects but there are still aspects to consider.

\textsuperscript{38} Gilje & Grimen, p188f
\textsuperscript{39} Patton (2002), p263
\textsuperscript{40} Maxwell (1996), p27; Marshall & Rossman, p59; Kvale, p147
There are still the issues of our skills as researchers and the preconceptions we carry with us as mentioned earlier. We have studied a developing country with a complex history which makes the study of a constructed meaning difficult. Our theories have helped us approach the issue with an open mind since they do not assume e.g. a state-centrism or class antagonism.

A qualitative study of this kind puts the concept of intersubjectivity in a complex research context. Due to the focus on ‘interpretation’ the role of the researcher becomes very important. We believe that it is possible to re-enact our study but the bias and reflexivity of the researcher doing it might not be the same as ours. Not only have we carried with us our individual ‘luggage’ but also that which we have created in relation to each other through cooperation, making our role two-dimensional.

1.6 Disposition

*Chapter one* serves as an introduction to the study, providing the reader with an introduction to the topic, a presentation of the aim and research questions structuring the analysis and discussion and also a methodological presentation. In *chapter two* we will present our main theory of securitization and also the discourse theory of Ernesto Laclau and Chantal Mouffe which serves as the method for our discourse analysis although it does have theoretical aspects tied to it that we have combined with securitization theory. *Chapter three* present a short background into HIV/AIDS and the context of South Africa whilst *chapter four* contains our empirical analysis. *Chapter five* features our theoretical analysis and discussion and will be followed by concluding remarks in *chapter six.*
Chapter 2: Theory

“Every concept like ‘security’…has a story to tell: a story of their own coming to presence”.

2.1 The Theory of Securitization

2.1.1 Security – a Concept of Many Meanings

“The term ‘security’ is as ambiguous in content as in format: is it a goal, an issue-area, a concept, a research program or a discipline?”

The concept of security came to evolve during and following the Cold War. During the Cold War security came to be related to e.g. nuclear threats and today we use terms such as ‘food security’ and ‘human security’. Do these three examples circle around a uniform concept? What is security?

Many have theorised around the concept of security. Helga Haftendorf asked in 1991 what security really is, both in format and content. She concluded that national, international and global security “all relate to different sets of issues and have their origins in different historical and philosophical contexts”, meaning that there is no ‘one’ single concept. A pioneer in the field of security studies, Arnold Wolfers, posed a similar question in the early 1960s, a time of Cold War MADness, of an evolving mutually assured destruction. By re-evaluating and re-interpreting security he came to the conclusion that it did not have one single uniform meaning. In fact, it might not have a precise meaning at all. Wolfers also questioned the efficiency and meaning of national security as a measurement of standard or a “meaningful guide for action”. Security had become a value which could serve as a goal, an intermediary goal or as a means to strengthen other values and “security, in an objective sense, measures the absence of threats to acquired values, in a subjective sense, the absence of fear that such values will be attacked”.

2.1.2 Traditionally Narrow vs Non-traditionally Wide Concepts of Security

The 1980s saw an attempt to broaden the concept of security beyond the traditional, state-centred concept confined to military-political threats and military force. The new so-called ‘wideners’ argued that this traditional concept was too narrow to be applicable to ‘new threats’ posed by economic and environmental issues. According to Barry Buzan: “the image of a ‘new world disorder’ began to dominate perceptions of the future, bringing with it a new security agenda” after the Cold War. Wideners argued a wider, more constructivist approach to security analysis but traditionalists were critical because the intellectual coherence of the concept could suffer. They feared that if everything, or anything, could be designated an issue of security then, in the end, nothing could be. One example in relation to HIV/AIDS was stated by William F. Buckley in the National Review, 2000, when the US government had

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42 For more information on this debate, among other things related to the debate around the development of strategic and security studies, we recommend:
44 Ibid, pp150-159
45 Ibid, p150
46 Buzan (1997), p8
spoken of the African AIDS-epidemic as a threat to US national security. He said: “if everything is a national security problem, then nothing is”48.

It is in this context that the Copenhagen School developed49. It is linked to the Copenhagen Peace Research Institute50 (COPRI) as some of its most prominent members like Barry Buzan and Ole Wæver are or have been on its staff51. The school of thought came about in the 1980s and 90s through a project on European Security and gained international interest and debate in major journals. According to Buzan: “it constructs a more radical view of Security Studies by exploring threats to referent objects, and the securitization of these threats, that are non-military as well as military”52. Among the main theoretical works of the school can be mentioned Barry Buzan, Jaap de Wilde and Ole Wæver’s book ‘Security – A New Framework for Analysis’ and Ole Wæver’s article ‘Securitization and Desecuritization’ in Ronnie Lipshutz ‘On Security’.

The Copenhagen School and its theory of securitization do not break away entirely from traditional security-theories. Instead of redefining security they aim to reconceptualize, widen and deepen the concept53. They take into consideration the complexity of doing so and centres the theory around the so-called ‘logic of security itself’, “to find out what differentiates security, and the process of securitization, from that which is merely political” 54. Traditional concepts of existential threats, emergency measures and survival are found in securitization theory but as means to distinguish between securitization and politicization. Securitization theory believes that the quality and nature of threats, measures and survival differs from one sector to another and are easier to define in some sectors55. Different states have different thresholds for what they designate a threat56. Barry Buzan stated in 1997: “security is a generic term which has a distinct meaning, but varies in form”57 and the theory provide measures for an analysis through the eyes of an actor, using his speech to create a discourse that he wants his audience to adopt.

2.1.3 Securitization

Securitization can be described as an “extreme version of politicization”58, located somewhere between non-politicization and Clausewitz’s idea of war as politics with other means. This makes security a political phenomena59. Buzan, Wæver and de Wilde state that: “Although in one sense securitization is a further intensification of politicization […], in another sense it is opposed to politicization. Politicization means to make an issue appear to be open, a matter of
free choice, something that is decided upon and that therefore entails responsibility, in contrast to issues that either could not be different (laws of nature) or should not be put under political control (e.g. a free economy, the private sphere, and matters for expert decision). By contrast, securitization on the international level (although often not on the domestic one) means to present an issue as urgent and existential, as so important that it should not be exposed to the normal haggling of politics but should be dealt with decisively by top leaders prior to other issues. Security becomes a political construction applicable to a range of issues and securitization becomes the “politics of existential threats.” Another definition of politicization is to perceive something politically significant. In relation to this a securitized issue could be seen as existentially significant.

2.1.4 Desecuritization

In comparison with securitization, desecuritization is a process to take the drama and urgency out of an issue and keeping it in ‘normal’ politics. Desecuritization follows the same process as securitization, explained below, but theoretically it is based in the idea that “[n]ational security should not be idealized”…”[basically], security should be seen as negative, as a failure to deal with issues in normal politics.”

The question whether to securitize or desecuritize something is a qualitative choice of whether to act, despite of, or due to, the effects the choice might entail. Ole Wæver in particular argue that security and its applicability is not widened to promote or allow more securitization, the choice of conflict and mobilization, but rather to enable a possible broader scope of securitization. The point is not to elevate security to a universal good because the long-term, and possibly also short-term, goal is desecuritization in order to avoid a security dilemma. The logic behind desecuritization is to take an issue out of “emergency mode and into the normal bargaining processes of the political sphere” to change its type of significance. Desecuritization is not equal to politicization; rather it exists in-between politicization and securitization seeing as security, drama and urgency are still present, although actively scaled down in discourse.

2.1.5 The Security Act

Securitization is a two-step process. The first is the so-called securitizing move through which a securitizing actor is attempting to securitize an issue through discourse, using a so-called speech act. A speech act is a term used in language theory and serves as a specific rhetorical structure of a speaker’s intentions and beliefs or his relation to the audience. Buzan et al say: “[i]t is not interesting as a sign referring to something more real; it is the utterance itself that is the act. By saying the words, something is done.”

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60 Buzan et al (1998), p29
62 Wagnsson, p18
63 Buzan et al (1998), p8, 29
64 Wæver (1995), p46ff
65 Buzan (1997), p11
67 Buzan (1997), p11
69 Buzan et al (1998), p26
Through the speech act an issue is staged as posing an existential threat to a so-called referent object. The securitizing actor tries to construct a shared understanding of what constitutes a threat and should be met as such with rules and codes of conduct that would not apply in a case of politicization. The situation is similar to when normal law is surpassed by martial law in a state of emergency like war. Buzan says that “[t]he securitizing formula is that such threats require exceptional measures and/or emergency action to deal with them”70. The act implies that “if we do not tackle this problem, everything else will be irrelevant (because we will not be able or will not be free to deal with it our own way)”71. We quoted Buzan et al earlier saying that on the domestic level the level of urgency is not always as high and this can be related to the possibility of desecuritization as an alternative to securitization72.

Securitization-discourse concerns subjective rather than objective threats and these can be natural as well as man-made and they are often poorly understood73. The security agenda of securitization is also often more diverse and less global compared to that of e.g. the Cold War. An issue can be of importance to a great number of actors but it can also remain of concern to but a few74.

Although securitization is a matter of speech a securitizing move is not defined by the simple presence, utterance, of the word ‘security’75. In the words of Charlotte Wagnsson, “[t]he securitizing actor can only follow a ‘grammar of security’, constructing a plot that includes an existential threat, a point of no return and workable solution, and then hope for the audience’s acceptance of the plot structure” – thus creating a platform from which to work76.

The audience’s acceptance of the plot structure constitutes the second step of a securitization: the security act. It can be illustrated by awareness and debate linked to the discourse used by the securitizing actor77. A full securitization includes and needs both steps. The process of securitization is an interaction, of intersubjective politics, wherein an actor, by means of argument, manages to make his audience accept his views, creating a platform from which he can break away from the ‘normal’ or traditional rules in order to act. Whilst a policy can be implemented, securitization is a social quality, an intersubjective process and therefore “security (as with all politics) ultimately rests neither with the objects nor with the subjects but among the subjects”78.

Whether an audience will accept a securitizing move depends on so-called facilitating conditions, conditions of language and society. An actor has to use an efficient grammar of security which the audience can understand and relate to. The relationship between the securitizing actor and his audience and the features of the threat itself thus become important for the possibility of a full securitization79.

72 Ibid, p26-29
73 Buzan (1997), p12
74 Wæver (1995), p46
75 Buzan et al (1998), p27
76 Wagnsson, p2
78 Ibid, p31
79 Ibid, p32f
The core of the two steps is the logic of security itself mentioned earlier. It is made up of three components: the existential threat, the emergency act and the break away from normal codes of conduct. These are derived from what Ole Wæver calls “the most classical of classical cases: war”. The logic is what disables the word ‘security’ from indicating a securitizing move. If the word is to be used it has to be so in the context of this logic.

2.1.6 The Securitizing Actor and His Audience

In traditional security theory the main actor is usually the state; that is not the case in securitization theory. A state or other subject have equal possibilities to be the securitizing actor or an audience; at least in theory. Because the structure in which actors exist is not symmetrical the power to securitize something becomes asymmetrical and dependent on whether the actor is a “generally accepted [voice] of security”. Power is never absolute and cannot be conclusively monopolized. In comparison to traditional security theory this means that securitization theory does not presuppose anything about the strength of the actors, making security an “area of competing actors”. The state is still rather privileged due to its virtue of being a traditionally accepted voice of security and this often makes securitization state-determined although not state-centric. Whilst the securitizing actor is important, since the study of securitization is done through his/her/its eyes, the securitization process and the logic that shapes it is more important. The securitizing actor’s role does not overshadow the role of the audience or other actors either. Buzan et al claim that “to study securitization is to study the power politics of a concept”. The securitizing actor is in fact identified by it.

Securitization is an interactive process and the interaction between speaker and audience is influenced by whether the securitization is ad hoc or institutionalised, if the threat is assessed as recurrent or persistent. For a persistent threat securitization can become institutionalised, i.e. implicitly linked to urgency. One example is the dikes in the Netherlands. Buzan et al say that: “[not] every act is presented with the drama of urgency and priority”. The Dutch dikes are not un-securitized but the level of urgency and drama in speech concerning them is more implicit today.

We have stated that different actors have different threat-thresholds and that traditionalists criticise wideners for a security-concept that enables securitization of anything. Since all actors have a theoretical ability to securitize, the Copenhagen School distinguishes between different levels of significance: small-scale and large-scale securitization. Different securitizing acts have different levels of effect; some only concern a small group or an individual whilst others are global in scope. The point is not to assess a value or validity of the

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80 Wæver p54
82 Ibid, p24
83 Ibid, p31
84 Ibid, p37
85 Ibid, p37
86 Ibid, p41, 168f
87 Ibid, p32
88 Ibid, p27
89 Buzan (1997), p15, 28
threat-assessment and securitization but rather to look at how valid the audience finds the speech act. Whether the subjective threat-assessment is an objective, real threat is not important.

2.1.7 Security – A Framework For Analysis

The logic of securitization is central to the operability of the theory. As stated earlier securitization is not a case of creating and implementing a policy or simply designating something a security issue. Further, securitization theory is not the study of actual, objective, threats but subjective threats defined in an intersubjective process. It is not the study of a subjective threat in relation to an actual threat in order to value the threat-assessment of the securitizing act either. The analyst studies the threat-assessment through the logic of securitization and its effects. The fallout from the act is more interesting than the threat assessment itself. Within this lies the theoretical framework for securitization studies and the concepts around which the theory evolves like securitizing move, act, actor, logic etc. Below we will add concepts to these and develop the analytical tools further.

As mentioned earlier one way of identifying a securitizing actor is by studying the securitizing logic. It is important to establish whether a securitizing actor is speaking as an individual or as part/on behalf of an organizational structure. This can be difficult as e.g. the environment does not have an organizational structure with established spokespeople. When former White House press secretary Ari Fleischer briefed the press corps he represented the White House but when the leader of a green group speaks about the environment he does so representing his green group, not the environment. This is a question of legitimacy as to who can represent whom saying what.

Securitization theory has five different levels of analysis which serve as the securitizing actor’s ontological referents. These include: the international system, international subsystems (e.g. the EU), units (states), subunits (e.g. lobby-groups) and individuals and serve as tools to locate referent objects and securitizing actors as well as the dynamics of interaction.

There are also three different analytical units: referent objects (the unit to which a threat is posed and whose survival is in focus); the securitizing actor and the so-called functional actors (an actor who influences the process although is neither of the other two units).

The referent object can be more or less any unit but its scale and size is important for the effects of a securitizing act. Referent objects can be found on the system-level (e.g. that of human kind), middle-level (e.g. a nation) or micro-level (e.g. an individual). Studies have shown that the most influential is often the middle-level, in part due to the facilitating conditions explained earlier. Due to the distance between the object and the speaker’s audience it might be easier for an actor to structure his security grammar in relation to a referent object on the middle-level than on the system-level. The micro-level suffers from its

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92 Buzan (1997), p18
94 Ibid, p41
95 ‘Ontological referents’ means that they are referents through the eyes of an actor – i.e. the securitizing actor. Thus they do exist objectively, they only show where things happen, not why they happen.
lack of a strong ripple effect on society at large because of what Buzan et al call ‘security legitimacy’. The middle-level is favoured by rivalry between different actors and this rivalry is self-reinforcing in that it strengthens the collective feeling in a way that the system and micro-level cannot do as well. It may be easier to relate to the middle-level.

A third analytical aspect of securitization is the use of sectors. While traditional security studies tend to focus on the military-political sector securitization theory is multi-sectoral and its agenda diverse. The point is to enable a focus on the interaction and relationships among units in a sector. As stated earlier, security is generic in term but differs in form and therefore the form and logic of securitization may differ from one sector to another. Each sector can also have more specific values that they want to protect. The Copenhagen School uses five sectors: the military, environmental, economic, societal and political sectors. Closely linked to these are the so-called functional actors. They are part of the systems of interactions within the sectors and they may influence the securitization in different ways. One example can be a polluting factory in an area where a green group is trying to secureitize the environmental situation. The analytical purpose of sectors is to use them to disaggregate a whole, study the parts and then, in order to enable a broader understanding, reassemble the parts in order to see how they relate to each other.

2.2 Discourse Theory – Method and Theory

2.2.1 Discourse Theory as a Theory

The term ‘discourse’ and the idea of discourse analysis are both old and relatively new to the academic field and as such it is not void of debate, or controversy. The term discourse has been described as “rooted in desire, a desire to communicate with an other” but others say it is “a specific way in which we speak of or understand the world.”

One feature of discourse analysis is that it is not solely linked to one academic discipline. Discourse analysis recurs in linguistics, sociology, politics etc but its meaning is not homogenous to all disciplines and approaches. Discourse analysis deals with the systematic analyses of discourses, specific ways in which we describe and understand the world, reality. Our choice of method in this study is the so-called ‘discourse theory’ of Ernest Laclau and Chantal Mouffe. Different approaches to discourse and discourse analysis are based in different grand theories like e.g. Marxism. Discourse theory is developed through the deconstruction and criticism of Marxism and Laclau and Mouffe use post-modern/post-structuralist as well as social constructivist ideas. To them discourse is a totality of objects and the relations between these in the way that e.g. ‘Thatcherism’ was a political totality which constituted the meaning of different objects and defined the relationship between them.

98 Buzan (1997), p15
100 Van Dijk, p1; Bergström, Göran & Boréus, Kristina (2000). Textens mening och makt: Metodbok i samhällsvetenskaplig textanalys. Lund: Studentlitteratur, p221
102 Winther Jørgensen & Phillips, p7
103 Punch, p226
104 Bergström, p 223; Winther Jørgensen & Phillips, p7
105 Winther Jørgensen & Phillips, p32
in a political discourse. Of importance is that discourse constitutes the totality, it is not constituted by reality.

Discourse theory is influenced by Marxism’s use of antagonism but criticises the class-based antagonism and deconstructs it in order to reconstruct an antagonism based on identity. This is why Laclau and Mouffe call their theory post-Marxist and post-Marxist, i.e. their theory is ‘beyond’ Marxism but at the same time a further developed Marxist theory. In their central work, ‘Hegemony and Socialist Strategy – Towards a Radical Democratic Politics’ Laclau and Mouffe write that “left-wing thought today stands at a crossroads” seeing as “the ‘evident truths’ of the past – the classical forms of analysis and political calculation, the nature of the forces in conflict, the very meaning of the Left’s struggles and objectives – have been seriously challenged by an avalanche of historical mutations which have riven the ground on which those truths were constituted”.

Further they state that “there is no one discourse and one system of categories through which the ‘real’ might speak without mediations” because “just as the era of normative epistemologies has come to an end, so too has the era of universal discourses”.

One idea of social constructivism is that we perceive the world according to historical and cultural premises to which there is a contingency. Social processes influence our perception and there is a connection between ‘knowledge’ and the social world because we act according to how we perceive the world. In its linguistic form, post-structuralism, according to Marianne Winther Jørgensen and Louise Phillips, indicates that we access the world through language, we give it meaning through discourse.

In relation to this, discourse theory say that objects have no ‘self-unfolding’ essence. The meaning of and relation between objects are contingent and up to us to determine through the use of language, discourse. Discourse organizes and constitutes this meaning and relation through so-called articulation. The point here is that language is not a neutral means of communication, it is a means to shape our image of ‘reality’. In politics language constitutes politics through the value-laden words that are used. In the field of discourse language can be seen as the manifestation of, or the way in which, we can see, read or hear discourse. All social practices like speech, text and act are part of this discourse, making its definition broad. An important theoretical point is that Laclau and Mouffe believe that

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106 Winther Jørgensen & Phillips, p31
108 Laclau & Mouffe (1993), p1
109 Ibid, p3
110 Ibid, p3
111 Winther Jørgensen & Phillips p11f
112 Ibid, p15
113 Laclau, Mouffe (1993), p96; Bergström, p221
114 Laclau, Mouffe (1993), p96
115 Bergström, p234
116 Ibid, p234f
117 Ibid, p228
discourses constitute the world fully – there is no non-discursive world. This does not imply that there is no physical reality outside of discourse. It means instead that things happen independently of what we do but we determine what we perceive it as. An earthquake can be a natural phenomena or the wrath of God depending on which discourse we use and how it constitutes the meaning of the object. Objects and practices are given their meaning depending on the discursive context they exist within and this context is not fixed. The determination of a meaning, a discourse, is an interactive process between a sender and a receiver and between them and e.g. a text.

2.2.2 Discourse Theory as a Method

Discourse theory can be described as a means to describe “the way in which social practices articulate and contest the discourses that constitute social reality. These practices are contingent and can never completely exhaust a field of meaning.” This idea has been presented above.

Discourse theory is a means for the study of how social reality is constructed discursively and of how the meanings that discourses give to objects evolve and change. Discourses are contingent and never permanent, a fact which creates so-called discursive wars. Every discourse wants to provide a dominant meaning to an object, be hegemonic, but the field of possible or alternative meanings is never exhausted and discursive hegemony is therefore more or less impossible. As a result antagonism between discourses and hegemony become important in a discourse analysis.

One aspect of the contingency and changing nature of discourses is the unstable nature of language. Language does not mirror ‘reality’; instead it gives us discursive access to it. There are some important concepts which Laclau and Mouffe use in their theory that serve as a basis for the analysis itself. The basic concepts are discourse, antagonism, hegemony and articulation and around these are the concepts of sign, element, moment and nodal point.

Laclau and Mouffe define discourse as “the structured totality resulting from the articulatory practice.”

A simplified way to describe a discourse is to compare it to a fishnet. The fishnet is a structure of knots that combine threads together in a totality. If the net is the discourse then

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118 This makes their discourse theory different from the historical materialism and Marxism itself which argue that discourses are constituted by the social world itself, or those like the critical discourse analysts who divide the world into a discursive and non-discursive world. (Winther Jørgensen & Phillips, p25ff)

119 Laclau, Mouffe (1993), p108

120 Bergström, p223, 235


122 Bergström, p221; Winther Jørgensen & Phillips, pp31


124 Winther Jørgensen & Phillips, p13

125 Bergström p221; Winther Jørgensen & Phillips p15

126 Laclau, Mouffe (1993), p105

127 Laclau and Mouffe have used the metaphor of a brick wall but we choose this metaphor instead. We are aware that it is often linked to Sassure’s ide of a structuralist discourse (Bergström, p228, Winther Jørgensen & Phillips, p16f).
the knots are the objects within the discourse and the threads are the relations between these. A knot or object which does not have a meaning is called a sign. When a sign is given a meaning it becomes an element. An element is not linked only to one discourse; it can exist simultaneously in different discourses, giving it multiple definitions and a floating character. In the discursive wars different discourses will aim to reduce the meanings of this element and make it their own – i.e. to turn into a moment. The moment can develop further and become a central object of the discourse. This means that it has the power to affect the meaning of other elements and moments as well - it has become a nodal point, a node in a wheel around which other objects circle\textsuperscript{128}. At this point the discourse excludes all other meanings apart from its own from the nodal point\textsuperscript{129}. Examples of nodal points are democracy within political discourse, the body in medicine and people in national discourse – they all affect the meaning of other objects when these are put in the same context\textsuperscript{130}.

Relations between different elements/moments are established through articulation, i.e. it is articulated or given. Once a relation is established between two or more elements/moments their respective meanings will be modified. This is similar to how the nodal point affects other elements/moments but more balanced or even. In a case where the object is an actor his or her position in the net, their identity is called its subject-position. An actor can exist in several discourses at once, e.g. a woman can be a woman, a mother, a wife, an employee etc. Due to the constituting character of the discourse the actor’s position will determine how he or she view the world\textsuperscript{131}. When it comes to objects, a rock can e.g. be a weapon or a piece of art. As will be explained below it is when these different discourses meet that hegemonic discourses are developed\textsuperscript{132}.

Antagonisms indicate a lack of consensus between different discourses. In early drafts of discourse theory antagonism was defined as that between enemies but the approach has broadened. The lack of determinism has affected the developed approach and places antagonism as the dynamics of e.g. political frontiers, borders between different political discourses. As for social antagonism there is the conflict between identities. One actor can feel that his ‘self’ and the development of his identity is prevented by the presence of an ‘other’\textsuperscript{133}.

The ultimate aim of antagonism is hegemony, the domination of one discourse over others. Which discourse is the hegemon can be difficult to define. This often only becomes clear in a crisis – i.e. when every institution and discourse collapses and face a total identity crisis at which point several discourses would try to solve the situation and one, the hegemon, would succeed and create the new framework for identity and meaning\textsuperscript{134}. In this situation, and in a discursive war, elements as well as nodal points can become so-called floating signifiers, i.e. they become open for interpretation. Within a discourse a nodal point works in the way described above but when this discourse is put up against other discourses, e.g. if modern medicine is put up against discourses of traditional or alternative medicine, the nodal point,

\textsuperscript{128} Winther Jørgensen & Philips, p33; Howarth & Stavrakakis (2000), p7  
\textsuperscript{129} Winther Jørgensen & Philips, p33  
\textsuperscript{130} Ibid  
\textsuperscript{131} Bergström, p231  
\textsuperscript{132} Laclau, Mouffe (1993), p105  
e.g. the body, becomes a floating signifier. Within each discourse the nodal point is set but between the discourses it is articulated differently, it is ‘overflowed with meaning’\textsuperscript{135}.

One feature of discourse theory relates to the identity of actors and describes a logic of difference or equivalence. In a discursive war a discourse will come across elements with antagonistic relations between them that need to be neutralized. A discourse can do so by using the logic of equivalence, creating a common ground or identity that enables a group of actors who normally would not cooperate to work together; or the logic of difference through which antagonisms are encouraged in order to break bonds of equivalence and “displace antagonistic polarity, while endeavouring to relegate that division to the margins of society”\textsuperscript{136}. An example of the logic of equivalence is the Black Consciousness Movement in South Africa during apartheid which brought together groups within the non-white population of the country and an example of the logic of difference is the welfare states in post-war Europe\textsuperscript{137}.

\textsuperscript{135} Torfing, p301; Winther Jørgensen & Phillips, pp34-35
\textsuperscript{136} Howarth (1998), p277f
\textsuperscript{137} Ibid, p278
Chapter 3: Background
3.1 The Birth of Contemporary South Africa

The history of South Africa is long and characterized by some as violent and strenuous, especially when it comes to the latter half of the 20th century. South Africa the colony was formed by the Dutch in 1652 when they cast anchor in Table Bay, today known as Cape Town\textsuperscript{138}, and from that day onwards modern South Africa has developed.

Dutch and British settlers mark the early history of the colony. The Dutch had a goal to segregate the black population from the white whilst the British opposed slavery and racism. Modern South Africa was established through the Union Act of 1910, and together with the Land Act of 1913 the segregation between the black and white populations was formally initiated\textsuperscript{139}. The black population saw their freedom restricted by passport-laws and their access to land diminished to small reservations. In 1948 this societal structure took on a legal form - apartheid\textsuperscript{140}.

Apartheid was the principle for inter-racial relations for almost 50 years to come and during this time black resistance and liberation groups like the South African Native National Congress (SANNC) were active. As these groups grew stronger the government decided to ban all opposition\textsuperscript{141}. The ban did not work and in 1989 President F.W. de Klerk openly admitted the failure of apartheid policies, thus strengthening the dismantling of the system\textsuperscript{142}. In 1990 de Klerk declared himself in favour of a democratic South Africa and shortly afterwards the leader of the African National Congress (ANC), Nelson Mandela, was released after 27 years behind bars. Over the time to come the structure for segregation was abolished and a new constitution was developed\textsuperscript{143}. 1994 saw the first general democratic elections in South Africa and Nelson Mandela was elected to the Presidential seat.

3.2 Demographic Structure

The South African population is a complex compilation of different groups, integrated as well as segregated. The 2001 census established that among the 44 million South Africans 79% were black African, 9,6% were white, 8,9% coloured and 2,5% Indian/Asian\textsuperscript{144}. Today the country has 11 official languages, 9 tribal\textsuperscript{145}, plus English and Afrikaans.

\begin{itemize}
\item The black people were divided into tribes and kingdoms scattered across the area. Among these were Zulu, Xhosa etc, all of them still present in the area to this day.
\item Davidson, Basil (1984). \textit{Afrika – En kontinents historia}. Barcelona: Bonnier Fakta, p165
\item SANNC was renamed the African National Congress (ANC) in 1923 (Ibid. p87).
\item Worden, p137; Wachtmeister, Claes-Adam (1990). ‘Mot Ett Nytt Sydafrika’. In \textit{Världspolitikens dagsfrågor} nr 12, 1990, p2
\item Worden, p137
\item The nine native languages are: IsiNdebele, IsiXhosa, IsiZulu, Sepedi, Sesotho, Setswana, SiSwati, Tshivenda and Xitsonga.
\end{itemize}
3.3 Political System

Since the elections of 1994 South Africa has been a multiparty democracy in that suffrage and participation is available to all. The new South African Constitution was adopted in 1996 with the aim to establish a constitution which everyone could accept and stand behind, “the collective wisdom of the South African people which has been arrived at by general agreement”. This was not an easy task considering that the country was in transition from apartheid to something new, developed by former resistance movements now turned political parties together with parties who had worked within and as part of the apartheid regime. The constitution serves as supreme law and defines all aspects of government, the division of power between legislative, executive and judicial branches as well as the bill of rights etc. Its legislatures (both provincial and national) use a proportional representation with party lists and proportional allocation seats system so it is not a constituency based system. Furthermore, the existence of the National Council of Provinces (NCOP) enables representatives of the 9 provinces to participate and make their voices heard in a common forum. The provinces have their own governments.

Map 3.3: The Nine Provinces of South Africa.

3.4 The Basics of HIV/AIDS

HIV and AIDS were discovered in the late 1970s and published scientifically in Morbidity and Mortality Weekly Report on June 5 th, 1981, making it globally recognized. This leaves a timescape of about 20 years in which we have developed and dealt with the issue.

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147 Ibid, p17f, 195f, 198
When HIV was first discovered in South Africa it was defined as HIV-1, clade B, primarily found in the gay community. This made homosexuals a high-risk sub-group in society. In 1987 it became clear the heterosexual community came into focus as clade C of the virus was discovered\textsuperscript{150}. The first response to the virus came in the mid-1980s with surveillance systems and databases in place to map the situation. These efforts were followed by medical efforts intended to e.g. create a safe blood supply\textsuperscript{151} and administrative efforts to structure the response, creating counselling and training centres etc\textsuperscript{152}.

South Africa faced a full-grown national epidemic at the start of the 1990s and this became one of the first issues which the new post-Apartheid government, established after the first democratic elections in 1994, had to deal with\textsuperscript{153}. As the incidence of HIV/AIDS increased throughout the world a global ‘pandemic’ was born in which South Africa was among those hit the hardest.

### 3.5 HIV/AIDS and Policy in South Africa

The South African constitution states that access to basic health care is a fundamental right\textsuperscript{154} and the health authorities are found both on the national and provincial levels of government. Whilst the National Department of Health deals with health policy, legislation and norms and standards of care, the provincial health departments provide and render the service but they also make policy applicable to their own province. Local Government is also active in the field of preventive and promotive health\textsuperscript{155}. Thus, HIV and AIDS are dealt with on more levels than one, although tasks and responsibilities differ. One such difference came about through a policy of devolution following the 1994 elections. Through this, power and authority over budget decisions were given to the provincial governments, meaning that the government could no longer give the provincial government funds earmarked for HIV/AIDS purposes alone. The provincial budget was instead given in bulk and divided between different interests by the provincial government itself\textsuperscript{156}. In this system AIDS tended to get isolated in the health units of the Provincial as well as National Government and the level of action differed from one province to another\textsuperscript{157}.

Through the years there have been different attempts at awareness campaigns, vaccine-initiatives\textsuperscript{158}, anonymous notification systems\textsuperscript{159} as well as administrative efforts. One of the


\textsuperscript{153} Whiteside & Sunter, p118, 146f

\textsuperscript{154} Ibid


\textsuperscript{156} Whiteside & Sunter, p121

\textsuperscript{157} Ibid p120

\textsuperscript{158} Ibid p121.

\textsuperscript{159} Ibid p122
first major policy responses was the creation of NACOSA, the National AIDS Convention for South Africa in 1992. It consisted of representatives of more or less all sectors of society, creating a non-governmental network with the goal to develop a national AIDS-plan for the government. The plan was finalized in 1994 and adopted by government. The plan’s key issues are in focus to this day but the plan itself was never implemented.

In 1997 came a review from the Medical Research Council (MRC) of the national response to STD/HIV/AIDS called ‘Review the Past, Work Together, Plan the Future’. This acknowledged that the different levels of government were facing restructuring at the same time as “the HIV/AIDS/STD epidemic represents major and immediate threats to the health and well-being of all citizens in South Africa”. Therefore, along with the issue of tuberculosis (TB) the review stated that HIV/AIDS/STD programme management was “top priority”. Following this a National AIDS Control Programme was established to develop the work of NACOSA, allowing the participation of a number of sectors in South African society.

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160 Ibid p119
161 McKerrow, p3; Whiteside & Sunter, p119
162 McKerrow p6; Whiteside & Sunter, p119
163 Whiteside & Sunter, pp119f
164 Busse et al (1997), p2
165 Ibid
Chapter 4: Discourse on HIV/AIDS by the National Government of South Africa between 1998 and 2002
4.1 Government Discourse From 1998-2002

In a letter to US President Bill Clinton, various world leaders and UN Secretary General Kofi Annan in April, 2000, the South African President Thabo Mbeki stated that 1998 had seen a radical stepping up of the campaign against AIDS. Due to UNAIDS-reports which indicated that two thirds of the world’s cases of HIV and AIDS could be found in Sub-Saharan Africa the South African government had decided to change their approach to the issue. Up until then the government’s effort had been focused mainly in the Ministry and Department of Health. This does not mean that 1998 saw the first policy on the subject; nor that the government made a clean break from past policies. It means that in 1998 the policy on HIV/AIDS took on a new form.

1998

In 1998 the Government AIDS Action plan was developed which “sought to address the problems of low-level commitment by politicians in high office, and the overcentralisation of the national strategy against HIV/AIDS”. The result of this Plan was an Interministerial Committee on AIDS (IMC) that was to approach HIV/AIDS more broadly than the Department of Health had up until now. Another result was the so-called ‘Partnership Against AIDS’.

In an address to the inaugural session of the 12th Conference of Heads of State or Government of the movement of non-aligned countries in September, Nelson Mandela stated that South Africa was still an infant democracy affected by the “constraints and difficulties produced by an international environment” and there was a need to “remake our common world a new” in light of different types of violence, amongst them that of “malaria and HIV/AIDS which kills”. Mandela further stated that “[t]he first concern is to make sure that everyone is aware of the threat of AIDS to the young people of South Africa, and to enable them to understand the centrality of the youth in the AIDS crisis”. The minister of education described the pandemic in November as “hitting us where it hurts most – on our youth.”

In 1998 the government decided not to continue to provide pregnant women with the Azidothymidine (AZT) antiretroviral drug (ARV) due to that the cost of AZT-drugs posed a “further strain on a already limited health budget” and that breastfeeding, being one way to transmit HIV from mother to child (MTCT), would still be an issue. This followed upon the

169 Centre for Health Systems Research & Development (2002), p65
170 Ibid
‘South African Medicines and Related Substances Control Amendment Act’ in 1997 in which the government was allowed to do parallel importation\textsuperscript{175} as well as voluntary or compulsory licensing\textsuperscript{176} of drugs. Pharmaceutical companies argued against the Act and it was never implemented and the drugs not provided.

As the epidemic showed no signs of diminishing the Minister of Health, Dr NC Zuma, stated in March that “[g]overnment notes with concern that HIV/AIDS continues to be a serious public health problem in South Africa”\textsuperscript{177}. It was further stated that “[g]overnment is of the view that through mass mobilization and partnerships with all stakeholders including business, the trade union movement, NGO’s and CBO’s, in the religious community and all those who individually and collectively are active in the AIDS campaign, South Africa will be able to reverse the course of this pandemic”\textsuperscript{178}. Dr Zuma’s point was that South Africa had a unique “but somewhat difficult opportunity – to transform our society, our economy, and most of our institutions, including our health care system” and that South Africa was a “microcosm of the world” where there were “huge disparities in health statues within the country”\textsuperscript{179}. The most difficult challenge to this was TB and HIV/AIDS\textsuperscript{180}: “the fight against the spread of HIV/AIDS threatens to be our Achilles heel, negating our national efforts at reconstructing our country”\textsuperscript{181}. In early October there was a government communication stating that President Mandela was to address the nation on AIDS and that “[t]he aim of this 10 minute stoppage is to create a sense of national urgency and understanding about the HIV/AIDS crisis – with an appeal to the South African population from the highest authority”\textsuperscript{182}.

The ideas presented above were furthered through the ‘Partnership Against AIDS’, launched on October 9\textsuperscript{th} in a broadcast to the nation by then Deputy President Thabo Mbeki. The introductory lines of the declaration read: “HIV/AIDS is among us. It is real. It is spreading.\textsuperscript{183}"

\textsuperscript{175} Parallel importation means that a country can choose to buy a drug from a market which holds a lower price than that of the country’s own market. Drug companies can sell their drugs for different prices in different countries/markets and parallel importation thus allows a country to get around this and buy a drug at a cheaper price (\textit{HIV/AIDS and the LAW – A Resource Manual} 2\textsuperscript{nd} ed. (2001). Johannesburg & Cape Town: AIDS Law Project and the AIDS Legal Network, p111)

\textsuperscript{176} Compulsory Licensing means that a licence can be issued by a government or court for production of a patented drug to an actor other than the drug company. This action is regulated in the WTO’s Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS) to be valid without regulation “in conditions of emergency or extreme emergency” through the agreements article 31. (\textit{HIV/AIDS and the Law – A Resource Manual}. 2\textsuperscript{nd} ed., p110)

\textsuperscript{177} Voluntary Licensing on the other hand means that a company can voluntarily give up its licence, enabling other companies to produce the drug. (World Trade Organisation (WTO) Intellectual Property – Overview of TRIPS Agreement. Available: http://www.wto.org/english/tratop_e/tratop_e/tratop_e/intel2_e.htm#patents [031022])


\textsuperscript{179} ‘Speech by Dr NC Zuma, Minister of Health, at the 50\textsuperscript{th} anniversary of the National Health Service – London 02 July 1998’, 980702. Available: http://www.gov.za/search/searchdb.htm [030422]

\textsuperscript{180} Ibid 980318


We can only win against HIV/AIDS if we join hands to save our nation"183. The declaration stated clearly that HIV/AIDS was among ‘us’ and that ‘us’ included everyone. It spoke of the fact that at the same time as there were those already infected with HIV and living with AIDS that did not mean that everyone else was safe – quite the opposite. The declaration said that “the danger is real” and that “many more face the danger of being affected by HIV/AIDS” seeing as “HIV/AIDS walks with us. It travels with us wherever we go”184. The point was that the virus and disease could be found in religious groups and churches, in contexts of sports and dance as well as the workplace and classroom “because it is carried and transmitted by human beings”,185 and that one could be infected as well as affected. Thus, the declaration did not target a specific sector of society for reasons other than to make the point that everyone was at risk. The issue was not addressed as a specific health problem or social, socio-economic or socio-political problem either. Instead the fact that a person’s HIV-/AIDS-status was not always disclosed or even known in life or as a cause of death was mentioned as well as the link between HIV/AIDS and ways of life. The role of sex and abstinence was mentioned but also the right to a life of choice: “[y]ou have the right to live your life the way you want to”186.

According to the declaration: “[t]he power to defeat the spread of HIV and AIDS lies in our Partnership: as youth, as women and men, as businesspeople, as workers, as religious people, as parents and teachers, as students, as healers, as farmers and farm workers, as the unemployed and the professionals, as the rich and the poor – in fact, all of us. […] We can only win against HIV/AIDS if we join hands to save our nation”187. One point was the effort from one human being to another, “they [those living with HIV/AIDS] are human beings like you and me. When we lend a hand, we build our own humanity, and we remind ourselves that, like them, each one of us can become infected”188. The Partnership did not call for isolated awareness, i.e. specific awareness campaigns etc, instead it called for a round the clock campaign of spreading the awareness from one person to the next plus the “search for a vaccine and cure” and mobilisation of “prevention, to offer support to those affected and to destigmatise HIV and AIDS and to continue our search for a medical solution”189. The partnership was in many ways a statement of a danger and the threat of there not being a cure for HIV or AIDS. “Nothing can prevent infection except our own behaviour. […] [our] unity is our strength. The simple but practical action that we take today is tomorrow’s insurance for our nation”190. Nelson Mandela later, at the end of November, stated in an address to the Foreign Correspondence Association that the Partnership was to “turn the tide of a disease that threatens our nation with a crisis that could undo all our efforts”191.

In the process leading up to the Partnership-declaration Deputy President Mbeki was quoted in a Government Communication, concerning a Partnership-summit in September, saying that

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184 Ibid
185 Ibid
186 Ibid
187 Ibid
188 Ibid
189 Ibid
190 Ibid
191 ‘Address by President Nelson Mandela to the Foreign Correspondence Association, Johannesburg, 26 November 1998’, 981126.
“AIDS has emerged as a challenge which requires that we mount a joint national offensive for our own survival. [...] This requires a new, focused initiative that builds on the work being done currently at various levels, but that can also make the maximum impact on stemming the tide of the epidemic”192. The communication further said that “[the] key message of the summit is that AIDS is no longer just a health problem but the most serious crisis ever to face South Africa, with the potential to devastate this country’s economic and social reforms”193.

On the international World AIDS Day, December 1st, 1998, President Nelson Mandela delivered a keynote address in Mtubatuba where he mentioned the Partnership. He said: “AIDS is one of those problems that are beyond the capacity of any one community, or any province to solve on its own, or even any one nation alone. To win we must join hands in the Partnership Against AIDS, and also work with other nations as part of the international community”194. In relation to this Mandela mentioned the need to break the silence on AIDS: “it is the silence that leads us, when we see all the signs in our friend’s face to speak of anything else, rather than ask, ‘Do you have AIDS? How can we help? [...] It is the silence that is letting this disease sweep through our country”195. Mandela’s vision was that communities that had been hit by AIDS should be able to say to the country: “Come and witness the reality of AIDS; see the devastation in our community; see the fresh graves; see the courage of those who live with the infection and of the children who have lost their parents” [...] “We are grateful to a province that has the courage to declare that it has a high rate of infection. We admire the brave men, women and children who are with us today to say: We are the human face of AIDS – we are breaking the silence! If we are to succeed then all of us must follow these examples and take responsibility for dealing with this problem”196. Mandela also related the effort needed to fight HIV and AIDS to past historic victories: “South Africans have overcome obstacles which others thought were insurmountable, because we joined hands to work for good of all rather than remaining divided by less important things”197. In his new year’s message later the same month Mandela stated that: “By launching the Partnership Against Aids every sector of civil society declared its commitment to help turn the tide against this epidemic”198.

In an address to parliament on the debate about HIV/AIDS Dr Zuma, Minister of Health, stated: “HIV/AIDS continues to be the most important public concern in the world”199. Further he said that “HIV/AIDS is one single most important threat to the country’s social stability, economic prosperity and to our very survival as a nation”200 and pointed to the potential burden of HIV/AIDS to the health services, the economy and so on. At the same time Dr Zuma said that “while the situation is cause for alarm its not all doom and gloom” as a “properly coordinated effort” had proven successful in other countries. The problem was ‘sufficiently serious’ as AIDS affects all. Zuma finished his address by stating that “we have

193 Ibid
195 Ibid
196 Ibid
197 Ibid
200 Ibid
the power to contain the epidemic” and that “a people united can never be defeated even by AIDS” although “time is running out” [...] “Lets all join hands in the fight against HIV/AIDS. It is the only sensible and patriotic thing to do”201.

Deputy President Thabo Mbeki spoke of the struggle to build a better future in a speech at the reconciliation at the National Congress of Provinces (NCOP) and quoted Afrikaaner Youth saying: “Yesterday was a foreign country, tomorrow belongs to us” [...] “[w]e experienced the same thing when the country came together to commit itself to the common fight against HIV/AIDS to ensure that our people, especially the youth, do not get wiped out as a result of failure to act to stop what is developing into a pandemic threatening the health of the nation as a whole”202. That same month Mbeki also described HIV/AIDS as the “scourge that is threatening not only our society but our continent”203.

1999

1999 saw the second general election in South Africa and as Nelson Mandela declared that his political career was to end in June his deputy, Thabo Mbeki was elected President after the ANC held their position of power. As for HIV/AIDS there was continued talk of Partnerships. In a speech by President Mandela at the African Renaissance Festival in March and later at the Freedom Day Celebrations in April the idea of partnership was related to an idea of ‘one nation with one destiny’204. After the general elections, President Thabo Mbeki mentioned the Partnership-idea in various speeches. In his opening address to Parliament on June 25th he spoke of it but also said that “[t]he government will also review all the work done so far to confront the scourge of HIV/AIDS with a view to the intensification of all efforts relating to this epidemic”205. In January Mbeki in his speech at the gala dinner of the Union of Orthodox Synagogues had stated: “one of the challenges we will continue to face in the next century, will be the elimination of the HIV-AIDS. We dare not relax our efforts on this issue”206.

Through the Partnership the different departments of government integrated HIV/AIDS into their agendas. Two examples were the Departments of Labour and Education. The Minister of Labour, Mr MMS Mdladlana spoke of transformations in the labour market in February and mentioned discrimination against people with HIV or AIDS, and issues concerning HIV/AIDS and rights as part of the new system207. The importance of the new Commission for Employment Equity and Chapter two of the Employment Equity Act for the issue of HIV

201 Ibid
and AIDS was again mentioned in an address in August\textsuperscript{208}. The Minister of Education, Professor Kader Asmal, stated in October that HIV/AIDS was the priority that underlied all priorities as “[w]e, as a nation, as institutions and as individuals must deal with this menace with urgency and purpose, for if we fail we face a future full of suffering and loss, of untold consequences for our families, communities and our institutions”\textsuperscript{209}. The specific consequences on Higher Education Institutions mentioned in this speech included the fact that a prevalence rate in some parts of the country of 32\% would affect student enrolments which would, in turn, affect the budgetary plans for the different academic institutions. Further, Professor Asmal made a point of the fact that millions of South Africans were illiterate and therefore did not have the educational tools to be able to understand the written message of awareness concerning HIV/AIDS\textsuperscript{210}.

The mining sector also spoke of its relation to HIV/AIDS as the Deputy Minister of Minerals and Energy, Susan Shabangu, stated in a speech on November 26\textsuperscript{211} that “the migrant labour system [in the mines] is one of the contributing factors to the spread of the disease”\textsuperscript{211} seeing as 45\% of mine workers were HIV positive. Shabangu’s point was that South Africa was a developing country with opportunities and resources but that “no one realises the financial economic and human resource impact” of not being able to handle that situation\textsuperscript{212}. The effects might not be instant but would be a concern in the not so distant future as, e.g., the productive population would not have the strength to work. Therefore, HIV/AIDS was a challenge to South Africa’s development and to the mining industry.

A similar relationship was found between poverty and HIV/AIDS by the Department of Welfare and Population Development stating that “[t]he two-way relationship between HIV/AIDS and poverty is inarguable. For many reasons it is those with the least resources and power that are experiencing the most devastating impacts of these problems”\textsuperscript{213}. The Department of Transport also saw their role in the situation as the Minister of Transport, Mac Maharaj, mentioned that “[t]ransport is often labelled as the ‘vector’ of the epidemic, whether it is through people who move through transport, or transport workers, many of whose lifestyles, by the very nature of the industry, increases their risk of infection”\textsuperscript{214}. In May the Minister stated that “[t]he crisis of HIV/AIDS cannot be dismissed as a health issue because this epidemic is peculiar in that it tears into the social and economic fabric of our society indiscriminately”\textsuperscript{215}. His department thus launched the ‘Trucking Against AIDS’-program created in relation to the Partnership Against AIDS. The Minister stated: “we must all play our role as winning the war against HIV/AIDS requires the effort of all South Africans”\textsuperscript{216}. Maharaj also said that “AIDS is not a political issue, and it is certainly not a rallying call for

\textsuperscript{210} Ibid
\textsuperscript{212} Ibid
\textsuperscript{216} Ibid
other causes. It is a fundamental challenge to all South Africans because it is about human lives, and how we respond to these issues is how we build our nation. That is the crisis, but that is also the challenge that this epidemic presents our country” and that “you can choose where you draw the battleline: you can be on the same side against AIDS or AIDS can divide you”\(^{217}\).

The Intelligence Services acknowledged the issue of HIV and AIDS in a briefing on February 16\(^{th}\). The role of the service was “the challenge to provide early warning on threats and potential threats to peace and stability” and through its work the service could “address one of the greatest challenges facing humanity: HIV/AIDS”\(^{218}\).

One group in focus was again the youth of South Africa. In an address to the Tertiary Institutions Against AIDS conference on October 1\(^{st}\) Deputy President Jacob Zuma said that HIV/AIDS was “possibly the greatest threat that we have ever been faced with” and that action was needed “if we are to survive as a nation into the next century and beyond” as the youth were “amongst the most affected groups” which made it all the more “imperative that we rise up as communities and as a nation” to “take up arms to fight this scourge”\(^{219}\). The message of the address was as follows: “Ladies and gentlemen these are not normal times. There is a new war raging against the African continent and the world. War brings death and devastation – so too does HIV/AIDS. We all need to take up arms and fight against this epidemic. In times of war, societies employ extraordinary measures to ensure their survival”. Further, “The implications that this has for us as a nation are far reaching and require a whole new way of doing things. A new activism is required of our young people and society in general. In the same way that the people of South Africa, and particularly the youth, declared war against the abomination that was apartheid – that brought devastation to so many of our communities – we need to rise in unison against HIV/AIDS”\(^{220}\). In a speech 5 days later Zuma spoke of the ‘critical proportions’ the epidemic had reached and that “[we] hold the future of this country in our hands, and we have the power to shape that future. We cannot falter”\(^{221}\) In March, then President, Nelson Mandela said at the launch of an information campaign called “On the Right Track” that “HIV/AIDS is one of those critical issues which demand visible leadership and urgent attention, because they have such an effect on the future of our country”\(^{222}\). Further, he made a point of the fact that “[soon] the impact of the impact will be felt across our society”\(^{223}\).

It was not solely in relation, or isolated, to South Africa that HIV/AIDS was mentioned. At the special meeting of the SADC (Southern African Development Community) Health Ministers on HIV/AIDS, Deputy President Zuma said that “[h]ealth and development are two sides of the same coin. Nations that are ravaged by HIV/AIDS and other debilitating diseases produce at a fraction of their potential. It is this potential that the health sector can help unlock

\(^{217}\) Ibid
\(^{220}\) Ibid
\(^{223}\) Ibid
by coming up with concrete and implementable proposals to end the scourge" and that diseases did not acknowledge territorial borders. Instead HIV/AIDS affected all SADC-countries through its effect on their economic development. Zuma compared HIV/AIDS to the Black Death of the Dark Ages in that it decimated the population, especially the most economically active parts, i.e. those 15-45 years of age. President Mbeki also spoke of the need for a “collective global effort” in his speech on World AIDS Day.

The decision by government not to provide ARV-drugs was also an issue in 1999. President Mbeki spoke of it as well as Minister of Health Dr M E Tshabalala-Msimang. In an address to the NCOP Mbeki said that “we must leave no stone unturned to save ourselves from the catastrophe which [HIV/AIDS] poses” but that the possible toxicity and the harm to the health of the AZT drugs was behind the government’s decision not to provide it. The Minister of Health, following a debate in the media as to the government’s decision, used the argument of affordability and appropriateness of the drug. According to her the costs of provision and possible risk to the user’s health were too great in relation to its level of success.

The topic of pessimism towards the situation was acknowledged by Deputy President Mbeki at the 15th Interpol African Regional Conference in April. He said that he was happy that South Africa had gotten the chance to host the conference and that “[w]hen the sceptics and pessimists look around Africa, all they see is a Continent doomed to failure. If you […] listened to and believed what these sceptics and pessimists in our own country will be saying even during the few days you will be here, you would depart convinced that, since we attained our freedom in 1994, all we have done is to descend to hell itself” and that “what these prophets of doom would be focused on would be such serious matters as poverty on our Continent, conflict and war, the displacement of millions of people, the scourge of HIV-AIDS”. He therefore saw it as important to show the successes and reverses.

The President’s World AIDS Day speech this year targeted the People of South Africa in general and the youth in particular. It spoke of the “danger that HIV/AIDS poses to the socio-economic situation in our country” as it threatened to “undermine our efforts to grow our economy and build a better future for all our people”. Mbeki also said that “[t]here can be no talk of an African renaissance, if AIDS is at the door of our continent. […] When the history of our time is written, let it record the collective efforts of our societies responding to a threat that put the future of entire nations in the balance. Let future generations judge us on the adequacy of our response”.

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230 Ibid
the rebirth of Africa of which South Africa is a part and in this context HIV/AIDS were seen to affect economic development and the realisation of a country’s potential to develop.\(^{231}\)

**2000**

The UN came to play a role in the speeches of 2000 due to their UN Africa Month but also its initiative to renew the interest in Africa due to the HIV/AIDS-pandemic. As mentioned earlier, in early April 2000 President Thabo Mbeki wrote a letter to the US President Bill Clinton, British Prime Minister Tony Blair, German Chancellor Gerhard Schroeder, UN Secretary General Kofi Annan and other leaders. In this letter he included information on the current situation regarding HIV/AIDS in South Africa and recited some of the actions that the national government had taken since the launch of the Partnership Against AIDS in 1998. It was also here that Mbeki stated 1998 as the start of a new, broader approach, engaging more than just the Department of Health which by tradition had been in the centre of the response. The letter also stated the need for a South African response to the situation caused by HIV and AIDS. Mbeki made a point that the main ways through which HIV was transmitted differed between the West and South Africa, i.e. in the West the group with the highest prevalence rates were male homosexuals whilst that of South Africa was the heterosexual population. Another difference was that relatively few people had died from AIDS in the West whilst the death rate was very high in Africa. The numbers of deaths were also decreasing in the developed world whilst Africa saw increasing numbers at the time. Mbeki said: “It is obvious that whatever lessons we have to and may draw from the West about the grave issue of HIV/AIDS, a simple superimposition of Western experience on African reality would be absurd and illogical. Such proceeding would constitute a criminal betrayal of our responsibility to our own people. […] I am convinced that our urgent task is to respond to the specific threat that faces us as Africans. We will not eschew this obligation in favour of the comfort of the recitation of a catechism that may very well be a correct response to the specific manifestation of AIDS in the West. We will not, ourselves, condemn our own people to death by giving up the search for specific and targeted responses to the specifically African incidence of HIV-AIDS.”\(^{232}\)

Another point raised in this letter concerned a debate on HIV and AIDS which included both so-called ‘dissidents’\(^{233}\) and other scientists and activists and in which the President’s views on the relation on HIV and AIDS and the link between the two was questioned. As the MEC for Health in the North West, DR Molefi Sefularo, stated in a budget speech on April 18th, this debate concerned whether President Mbeki was doubting the link between HIV and AIDS or not, i.e. whether the President was refusing to accept the mainstream scientific views.


The term ‘African Renaissance’ was first used by Thabo Mbeki in 1997 and was said to entail: “the establishment of stable democracies, respect for human rights, an end to violent conflicts and a better life for all peoples” (Lodge, Tom (2002). Politics in South Africa – From Mandela to Mbeki. Cape Town: David Phillip (an imprint of New Africa Books (Pty) Ltd), p227).

\(^{232}\) Mbeki, Thabo (2000)

\(^{233}\) A dissident in terms of the HIV and AIDS debate is a person who is among those who question the link between HIV and AIDS, or even the existence of HIV. Among the frontrunners in this debate has been mentioned Professor Peter Duesberg, who from 1987 has claimed that AIDS is not a cause of HIV and it does not really exist. He has described AIDS as a sociological and political phenomenon and said that he believes AIDS to be cluster of conditions created by different things like for instance poverty (epoliticsSA).
concerning HIV and AIDS in favour of dissident views or not. Deputy President Jacob Zuma in a speech on April 19th compared the debate to that of Galileo Galilei who went against he mainstream scientific ideas of his time. Zuma’s point was that “[w]e should not, and we will not leave any stone unturned, even if this means including the views of the so-called ‘dissidents’”. Part of this debate was the creation of the ‘Presidential AIDS Advisory Panel’ which brought together scientists, academics etc from all over the world in an attempt to “gain a full knowledge of AIDS”. The government’s initiative to launch the panel was “constituted as part of the government’s decision to respond to the AIDS catastrophe in an urgent and comprehensive manner, using all means at its disposal”. The Panel’s report from 2001 covered the aetiology and transmission of AIDS as well as the question of whether HIV caused AIDS and what the alternative hypotheses and cofactors were. In his speech at the panel’s first meeting President Mbeki met some of the issues raised as to his position on HIV and AIDS by saying that “some have put out the notion that our asking certain questions in order to understand better and therefore be able to respond better, constituted an abandonment of the fight against AIDS”. He further stated that he had found himself and his Ministers in a situation where “[w]hat we knew was that there is a virus, HIV. The virus causes AIDS. AIDS causes death and there’s no vaccine against AIDS. […] What mattered was the virus”. The question raised in Mbeki’s letter to the world leaders of the differences in incidence between the developed and underdeveloped world, was raised again and he related it to how South Africa should respond to the epidemic. Mbeki said: “[w]e were looking for answers because all of the information that has been communicated points to the reality that we are faced with a catastrophe, and you can’t respond to a catastrophe merely by saying I will do what is routine. You have to respond to a catastrophe in a way that recognises that you are facing a catastrophe. And here we are talking about people – it is not death of animal stock or something like that, but people. Millions and millions of people” and further that “[i]n the end, what I’m saying is that as Africans we want to respond to HIV/AIDS in a manner that is effective, a manner that does indeed address the fact of these millions of lives that are threatened.”

In July South Africa came into international focus as it hosted the 13th International AIDS Conference. In his opening address President Mbeki again mentioned the debate as to his position on HIV/AIDS with a similar argument to that of May. He stated that Africans were “confronted by a health crisis of enormous proportions” and that all should not be blamed on a single virus, HIV. The President pointed towards a link between the incidence in Africa and poverty: “[t]he world’s biggest killer and the greatest cause of ill health and suffering across the globe, including South Africa, is extreme poverty”. At the same time he claimed

236 Ibid
238 Ibid p7
239 Ibid
241 Ibid
242 Ibid
244 Ibid
that the delegates at the conference were facing “a country and a Continent driven by hope, and not despair and resignation to a cruel fate”\textsuperscript{245}. Deputy President Zuma said 2 days later, at the same conference, that “[f]ighting a disease that cannot be overcome by medical interventions alone, but whose path is also decided by a range of social factors, makes it that much harder for human society to prevail” and that through the partnership “we can focus our collective energy on the big prize – Winning the war against AIDS”\textsuperscript{246}.

In 2000 the Department of Health launched the ‘HIV/AIDS and STD Strategic Plan for South Africa 2000-2005’. This document was “to guide the country’s response to the epidemic” as a “statement of intent for the whole country, both within and outside government”\textsuperscript{247}. The strategic plan was a joint effort by different actors in society, including faith-based organisations, PWAs (People Living with HIV infection or AIDS), academic institutions, human rights organisations, the Salvation Army etc as well as international donor organisation and departments of government. The document stated that the prevalence rates at the time provided sufficient evidence to “make HIV/AIDS both a regional and national priority”\textsuperscript{248} and the primary goals were to “[r]educe the number of new HIV infections (especially among youth)” and to “[r]educe the impact of HIV/AIDS on individuals, families and communities”\textsuperscript{249}. In her foreword to the plan, Minister of Health, Dr Tshabalala-Msimang stated that “[t]he HIV/AIDS epidemic is the most important challenge facing South Africa since the birth of our new democracy. This challenge therefore, comes at a time when the country is faced with many other competing needs”\textsuperscript{250} and that “[failure] to respond to this epidemic however, will reverse all the developmental gains, made in the last five years”. She finished by saying that “South Africans have fought and won many difficult wars before. We have the ability as a country to do the same with this epidemic”. In the plan the structure for how HIV/AIDS were to be dealt with administratively were also outlined according to the following:

\begin{itemize}
\item \textsuperscript{245} Ibid
\item \textsuperscript{248} Ibid p3
\item \textsuperscript{249} Ibid p12
\item \textsuperscript{250} Ibid foreword
\item \textsuperscript{251} Ibid
\end{itemize}
Another part of the UN’s role in the discourse on HIV/AIDS this year came with its decision to debate HIV/AIDS in the Security Council. In relation to this South Africa’s permanent representative to the UN stated in a speech in January the issues of HIV/AIDS as being a global problem which no country could face on its own, that of poverty and how it enforces an AIDS epidemic but he also spoke of “the need to define security in broader terms. In other words, the definition of security has to include economic security, food security, and health

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252 Department of Health (2000), p9
security”\textsuperscript{253}. He further called for the aid of the Security Council and General Assembly to address the issue. Deputy President Zuma also mentioned this in a speech at the launch of the National AIDS Council a couple of days later, but in the sense of stating that “[w]e must move away from the language of crisis and catastrophe that has permeated the discussions of HIV/AIDS. Instead we must return to being a caring society rather than a scared society”\textsuperscript{254}. Zuma also said that the countries themselves still needed to act on their own as well as together with others through i.e. the UN. In an address on February 1\textsuperscript{st}, Jacob Zuma said that “[t]his is the dawn of the African Century in which we wish to accomplish much” and further that “[i]t is a cruel reality, however, that as Africa is gathering its strength and energy to pursue its rebirth, the scourge of HIV/AIDS has been unleashed with terrifying consequences on the continent and the entire world”. This is a health, social, economic and political challenge that threatens to decimate Africa\textsuperscript{255}. In relation to this view of HIV/AIDS on the system-level it should be mentioned that Zuma also spoke of AIDS as a disease “just like others”\textsuperscript{256} in relation to how it affected how people related to each other and the stigma that might arise.

The Department of Education furthered their work against HIV/AIDS by making it their “number one priority”\textsuperscript{257} whilst the Minister of Public Service and Administration stated at the budget vote for 2000/2001 the different ways in which HIV/AIDS would affect public service and administration the coming year\textsuperscript{258}. Also the Department of Health furthered its cause\textsuperscript{259} whilst Minister of Public Service and Administration Fraser-Moleketi spoke of the impact in the workplace and the fact that “HIV/AIDS is far more than a health issue. We have to realise that HIV/AIDS is in fact a development issue for our country, for our employees, for our organisations”. Further Fraser-Moleketi said that there was a need “[t]o recognise that HIV/AIDS is indeed a social, emotional, financial, educational and political issue”\textsuperscript{260}. This year also saw a theme for World AIDS Day which was ‘Men can make a difference’ and at the celebration of the second anniversary of the launch of the Partnership Against AIDS it was stated that men should act since they made a bigger difference than women as the “deciding factor in the lopsided relationship between men and women”\textsuperscript{261}

In 2001 issues of AIDS and HIV were brought to court. Two cases in particular stood at the centre of attention: that of the Pharmaceutical Manufacturers Association of South Africa versus the President of South Africa, and that of the Treatment Action Campaign (TAC) versus The Government of South Africa.

In April pharmaceutical companies unexpectedly dropped their lawsuit, perhaps due to national and international pressure\(^\text{262}\). This opened the possibility to import or produce generic drugs but the government chose to honour its decision not to provide ARVs, a decision which caused TAC and other NGOs, to instate a lawsuit against the government in August. The same year the South African High Court ruled for the general provision of Nevirapine\(^\text{263}\) to pregnant women beyond 18 test sites selected earlier.

Speeches of 2001 outline a turmoil caused by the trials and the ‘dissidents’ involved in the Presidential AIDS Advisory group. One feature was the concern which government officials expressed regarding the image of South Africa abroad and how that affected the economy and foreign investment. It seems that not all government officials were willing to declare HIV and AIDS a threat to South Africa; some were not even willing to acknowledge that there was something happening in the country. One example of this attitude was demonstrated by Dr. Essop Pahad, the Ministry of the Presidency, who expressed his disappointment towards those “business figures [that] spend their time, in effect, chasing investment away by giving vent to overblown fears and phobias about South Africa and Africa”\(^\text{264}\), therefore scaring probable investment to other more stable economies around the world. He also emphasised what the role of the media in addressing HIV and AIDS should be. He agreed that the role should be a critical one, but not with hostility towards South African leaders\(^\text{265}\).

In his State of the Nation-address, President Mbeki committed himself to continue the campaign against AIDS (not mentioning HIV) and to have a more comprehensive approach to the health challenge in South Africa in order to be able to respond to all infectious diseases\(^\text{266}\).

Members of the cabinet are allowed to ask the president to clarify a statement or decision taken by his government and one of these questions to the National Assembly raised an issue of this year. The question posed by the leader of the Opposition Democratic Alliance (DA), Mr. Tony Leon asked Mbeki if he would “consider proclaiming HIV/AIDS a national emergency in terms of Section 1 of the State of Emergency Act, 1997 (Act No.64 of 1997), to allow South Africa to act in terms of article 31 of the World Trade Organization’s Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS) to gain access to generic drugs used in the treatment of HIV/AIDS, if not, why not, if so; when?”\(^\text{267}\).


\(^{263}\) Nevirapine is a cheaper drug than Zidovudine (AZT) and decreases the viral load and inhibits viral production in the infant, thus decreasing the risk of MTCT.


\(^{265}\) Ibid


The WTO’s TRIPS-agreement is based on the aim of the WTO to protect intellectual property through patents. Article 31 of the TRIPS-agreement enables a state to surpass the normal code of conduct under the agreement by declaring a national emergency, an act similar to that of ‘martial law’ in a state of emergency.

President Mbeki’s reply to Mr Leon’s question was plain: “is not necessary”. He explained further, that the reason he believed a State of Emergency should not be declared was that “the incidence of diseases including AIDS, which present such public health challenge are persuasive in themselves. Accordingly, we do not need to declare a national emergency to underscore the point”. His second reason was that “declaring a national emergency for the simple reason of accessing any drugs, send a signal that tends to narrow the responses to AIDS to the issue of one particular drug”. He continued to explained that “a State of Emergency can be called ‘only when the life of a nation is threatened by war, invasion, general insurrection, disorder, natural disaster, or other public emergency’; and, only when ‘the declaration is necessary to restore peace and order’. The way that the law reads, both conditions must be fulfilled before a state of emergency can be called.

The president said that the reason why a State of Emergency would not be right for South Africa was that “[I]t has consequences for the government which are undesirable, especially when there are ways to achieve the same objective, that is, obtaining affordable access to all medicines”. It seems that almost all officials, even some NGO’s agreed with President Mbeki’s decision not to declare a State of Emergency due to the epidemic. Still, many officials did believe that HIV and AIDS were a threat to the stability of South Africa and the region in general which has been shown in quotes from earlier years.

Other themes this year echoed concerns and ideas raised by different ministers in earlier years. Deputy President, Jacob Zuma, recognized that the campaign against HIV/AIDS was a national effort in which all spheres and departments of the South African government had joined forces with various sectors of civil society in what he called a “broad-based patriotic coalition”. The Minister for Social Development emphasized his department’s willingness to “make an integrated and comprehensive response to HIV and AIDS”. With the South African Population Report of 2001 the Ministry of Social Development wanted to investigate the interrelationships between population trends, poverty and vulnerability. This report examined “the implications of HIV/AIDS for the delivery of social services and will generate

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268 A patent is the main legal tool to protect intellectual property. A patent can be created when a new product or process which can be considered ‘a new invention’ has been developed. Thus the patent gives its owner exclusive rights to copy or use the invention. In the TRIPS-agreement a patent for a drug is granted for 20 years before the drug becomes ‘generic’, i.e. off-patent. *(HIV/AIDS and the Law – A resource manual, p105ff)*

269 Article 31 deals with use of a drug without the authorization of the holder of the right, i.e. the patent. The full text of the article can be found in *Part II – Standards concerning the availability, scope and use of intellectual property rights of the TRIPS-agreement*. Available: [http://www.wto.org/english/tratop_e/trips_e/t_agm3.htm](http://www.wto.org/english/tratop_e/trips_e/t_agm3.htm)


271 Ibid.

272 Ibid.

273 Ibid.

274 Ibid.


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indicators for monitoring this impact”\textsuperscript{277}. Besides the report on trends of migration, poverty and its impact, the Ministry of Social Development was also concerned about aspects such as orphaned children, service delivery and adequate burial practices.

Another active department was, again, the Ministry of Education. The response to HIV and AIDS by the Ministry encompassed different projects including “HIV/AIDS in the curriculum, working policies and programmes for all the staff of the ministry including educators, the development of a national plan that aligns [their] planning and management systems and finally the developing of a system of responding to the needs of the ever increasing number of orphans and learners in distress or with special needs due to HIV/AIDS”\textsuperscript{278}. With these projects, the Ministry of Education hoped that they could influence children’s ideas about sex and relationships.

Whilst prevention was a matter for the Ministry and Department of Education the Department of Health was responsible for issues of treatment. Keeping in mind that 2001 was the year the MTCT was emphasised clearly due to the trials, Nevirapine was among the top issues for the Minister of Health, Dr. Tshabalala-Msimang. As explained by the Minister, “HIV/AIDS has without any question become the most contested area of health care and it has a significance that is felt way beyond our sector”\textsuperscript{279}. The Minister was clear in stating that “this position is not ideological”\textsuperscript{280}, as many NGO’s at the time wanted the country to believe, and she continued to say “that the [D]epartment will continue to explore all options available to them”\textsuperscript{281}. The Minister of Health, as many other, were working hard to address the epidemic in a multisectorial way – all in accordance with both the Partnership of 1998 and the HIV/AIDS and STD Strategic Plan from 2000. HIV/AID was not seen as only a health issue; it had to be treated as more, in different governmental levels with different responses. Therefore, Dr. Tshabalala-Msimang observed as an irony the idea that the government was being accused of hiding figures and facts when it was putting a lot of effort to improve surveillance of HIV/AIDS\textsuperscript{282}. The Minister called for everyone in the country to “join hands to lynch the one real enemy, the Human Immune Deficiency Virus”\textsuperscript{283} because insults and campaigns of that (i.e. media reports portraying the government as cheap and unwilling to act) nature “do not take the country anywhere”\textsuperscript{284}.

As stated earlier, poverty was seen by the government as linked to HIV/AIDS, democracy and governance, or as the Minister of Health stated in 2001: “Little is said about how poverty erodes the goodwill between government and the governed as the state struggles to deliver the basics of a decent life to its people. But we know that to be true and we need to be aware how fragile democracy can be and how we need to protect it”\textsuperscript{285}.

\textsuperscript{277} Ibid.
\textsuperscript{278} Ibid.
\textsuperscript{280} Ibid
\textsuperscript{281} Ibid.
\textsuperscript{284} Ibid.
In many speeches of 2002 the topic of ARVs was central. One such speech was delivered by President Mbeki in his State of the Nation Address. HIV and/or AIDS were but one of many topics and Mbeki made no concessions to repeated calls for a swift national roll-out of the government's programme to prevent MTCT transmission of HIV, although he did open the door for more than the current 18 pilot sites that actually were working with ARVs to prevent MTCT. Another key document released in 2002 was the Cabinet Statement on HIV/AIDS of April 17th which indicated the intention to expand, intensify and broaden the Cabinet’s response to HIV-prevention and treatment.

In many of the speeches by the Presidency the idea of introducing universal access of ARV’s to the South African population was being denied completely, a position mirroring that of 2001. The government stated the urgency and the need for this drug, but in the statement on a Cabinet meeting on the 20th of February, it was stated: “universal access will be decided on when important questions have been answered by the research”. After the High Court ruling in the TAC case the government was obliged to expand the MTCT pilot sites to more than the original 18 but they did not allow universal access. The government said that before universal access to ARV’s was established “they have to address the deficiencies in the public health system that have shown up as a result of this HIV research programme”.

The image of South Africa among international actors was again raised by the Minister of Foreign Affairs, Mr.Dlamini Zuma. He stated in March that South Africa “should work towards changing the negative perception of our continent as a ‘risky continent’”. It was understood that a shift had to be made as to South Africa’s image to the world regarding the debate on lack of governmental attention to the epidemic. South Africa’s Ministry of Foreign Affairs was determined to change that imagine of the country abroad. The Minister of Home Affairs was also very concerned about the perception the international community had of South Africa. He noted with great despair, that the Global Competitiveness Report produced by the World Economic Forum and Harvard University placed South Africa among the last of seventy-five countries they considered for this study. He noted that “this might be wrong in fact, but it reflect the perception which exists.” The Deputy Minister of Trade and Industry, Mr. Lindiwe Hendricks told the audience at a (NEPAD) presentation in Los Angeles that health issues such as HIV/AIDS, TB and malaria would constrain investments for the benefit of “a more stable economy in Africa”. Another perception that the world had of South Africa regarding HIV/AIDS concerned the belief of some that intercourse with a virgin would cure them of AIDS. Deputy President Zuma stated in 2001 that less than 2% of South African

288 Ibid.
believed that AIDS could be cured by sex with a virgin, contrary to popular belief that this was widespread in the country.\textsuperscript{292}

Chapter 5: Analysis and Discussion
5.1 The Securitizing Move

The ways in which HIV and AIDS have been described and presented in government discourse in South Africa 1998-2002 are many as shown by the previous chapter. Often the two terms are put together as HIV/AIDS but they are also dealt with as two separate concepts as the quotes have shown. It is clear that HIV and AIDS have been politicised in the sense that they are on the agenda, e.g. that of health and development. Does the government-discourse go beyond that of mere politicization and into securitization though? We argue that it does. Security has been mentioned but to establish the presence of a securitization one has to study what is actually said and locate the logic behind that.

We have studied material where the National Government has been represented by different departments, Ministers, the President and Deputy President. These all represent an organizational logic as they are all bound by the same key-policies. They speak on behalf of the government’s point of view although the departments integrate the policies into their own work as shown in the previous chapter. The provincial government officials we have interviewed are bound by the same organizational logic. In the eyes of Buzan et al these departments or sectors are like lenses, “focusing on the same world”\(^{293}\).

In our study we have seen a trend to view HIV/AIDS as more than a health issue and broaden the approach beyond that of the health sector. This is illustrated e.g. in the multisectoral Partnership Against AIDS, which joins different sectors of society together, but also in the policy for HIV/AIDS-related institutions like the IDC or IMC. Apart from being a medical condition HIV and AIDS have been spoken of in terms of their impact on different parts on society, through what Mandela called ‘the impact of the impact’ or as a fundamental challenge to human lives and not just a political issue\(^{294}\).

How much further than a virus and a disease in medical terms does the discourse go? Does it include the notion of a threat? The answer is yes; it speaks of ‘general’ threats and existential threats to e.g. the individual facing death and the future of the nation. The quotes in the previous chapter show that there are many cases in which HIV and AIDS have been referred to as threats to different referent objects on different levels, including that of the individual and South Africa at large. The threats are also related to survival and security. The issue is not always spoken of in this way though. Some themes have been more general or the tone more neutral, without reference to a threat. In some cases the speaker has called for a less ‘threat-focused’ discourse\(^{295}\). This was evident in 2001 in relation to the question whether the government should call a state of emergency to disable the TRIPS-agreement or not. In our interviews with provincial government officials most of them saw a relation between HIV/AIDS and security. Some saw it as more evident than others but their ideas concurred with those of the national policy.

We established earlier that the simple presence or utterance of the word ‘security’ is not enough for there to be a securitizing move or full securitization. The speeches and documents

\(^{293}\) Buzan et al (1998), p167

\(^{294}\) ‘Opening of Engen Highway Junction by Minister of Transport, Mac Maharaj’, 990528 as quoted in the previous chapter; ‘President Mandela’s welcoming speech “On the Right Track” Train to Cape Town’, 990308, as quoted in the previous chapter.

\(^{295}\) As described in quotes in the previous chapter by Deputy President Zuma in 2000 and the Minister of the Presidency, Dr Pahad in 2001.
we have studied speak of HIV and AIDS as violence to the infant democracy\(^{296}\), the Achilles heel in the reconstruction of South Africa\(^{297}\), the most serious crisis ever although the situation is not all doom and gloom\(^{298}\), a “silent war, without gunfire and explosions”\(^{299}\) and so on. Here the issue is defined by using metaphors and references to describe a setting.

A similar situation is found in relation to the measures the speeches call for in order to deal with the situation. Expressions like ‘fight a war’ and ‘join hands in the struggle against’ are used frequently and in some cases historic references to e.g. the battle against apartheid are used. Considering the fact that HIV/AIDS are a virus and a disease these measures can be argued to go beyond the normal code of conduct, i.e. that of medical measures like vaccination, medication, prevention etc. There have been calls for measures like these, e.g. in the Partnership Against AIDS and in the South African AIDS Vaccine Initiative (SAAVI), but also calls not to use these measures, e.g. in the decision not to provide ARVs. Ministers of Health have spoken of partnership-approaches\(^{300}\) and questioned medication based on its affordability and appropriateness\(^{301}\). This discourse has related to the idea that a medical cure was not available and instead called for measures like those described above and the attention of everyone and every sector. The Minister of Transport in 1999 related the fight against AIDS to the way in which one builds a nation and that it is up to ‘us’ to draw the battleline\(^{302}\). Dullah Omar, Minister of Transport in 2000, said: “we are a potential army of millions of AIDS activists”\(^{303}\).

Still, this does not mean that the medical aspect of HIV/AIDS has been left out. Quite the opposite seeing as one impact of HIV/AIDS is people dying and the other is indirect, the impact of the impact, e.g. people will be affected negatively as their country sees diminishing foreign investment and economic development. In our opinion it might be that different impacts are stressed in relation to different levels of society. Whereas the individual will experience the virus and disease directly through being sick, by dying or through the social stigma, the macro-level faces the impact of this primary fallout. Deputy President Zuma said in 2000 that “Aids is a disease just like others”,\(^{304}\) but as the previous chapter showed, other officials have spoken of the broader and less medical aspect of this on the system- and middle-levels.

The speeches we have analysed have been performed in front of different audiences and the designated audiences have differed as well. Whilst some speeches have focused on a specific group (e.g. women or youth), others have targeted the general public or people of South Africa. The audience has not always been specified and there are cases where it has played more roles than just that of an audience. The launch of the Partnership Against AIDS saw the

\(^{296}\) Address of the President of the Republic of South Africa, Nelson Mandela, at the Inaugural Session of the Twelfth Conference of Heads of State or Government of the Movement of Non-aligned Countries, Durban, 2 September, 1998’, 980902 as quoted in the previous chapter.


\(^{298}\) Ibid


\(^{300}\) As in the speech by Minister of Health, Dr NC Zuma, 980213, quoted in the previous chapter.

\(^{301}\) As in the speech by Minister of Health, Dr Tshabalala-Msimang, 991116, quoted in the previous chapter.

\(^{302}\) As in the speech by Minister of Health, Dr Tshabalala-Msimang, 991116, quoted in the previous chapter.

\(^{303}\) As in the speech by Minister of Transport Dullah Omar MP World AIDS Day Event, 001201’, as quoted above.

\(^{304}\) ‘Address by Deputy President Zuma at the launch of the Powerbelt HIV/AIDS project’, 001201, as quoted in the previous chapter.
audience as an audience but also the referent object at risk, infected, affected and the ones that needed to act. It did not target a specific group because: “HIV/AIDS is not someone else’s problem. It is my problem. It is your problem”305.

The referent objects have also differed from one speech to another. Both the people of South Africa and more specific objects or groups have been said to be at risk. One example is the youth of South Africa where speeches have quoted e.g. the prevalence among young people. The HIV/AIDS and STD Strategic plan from 2000 dedicated a section to the youth, setting them apart from e.g. PWAs. The youth was described as “an important target group to protect against future HIV-infection as they represent both the present and future economic powerhouse of the country”306. The referent objects have not just been those at risk of being infected by HIV/AIDS but also those risking to be affected, e.g. children orphaned by their parents dying from AIDS. In our study we have found referent objects on the system-level (through the global pandemic), the middle-level (the youth) and the micro-level (children and individuals)307.

In relation to this it is relevant to study the functional actors in the discourse. In our study we have often found these in the outside world, e.g. states with different or similar experiences; drug companies who produce ARVs; actors in the international economic circuit including donors and investors who might take their business elsewhere because of the impact of HIV/AIDS on their financial prospects. These are all portrayed in the discourse as affecting the situation and the choice of measures for how to deal with it. They are often part of the non-medical side of HIV/AIDS and spoken of in short-term and long-term effects, i.e. the short-term effect of a weakened workforce and the long-term effects of economic decline.

Securitization is the politics of existential threats, the call for emergency action and stepping away from the ‘normal’ code of conduct. We have so far established that the discourse of the South African government has spoken of HIV and AIDS in these terms and called for an approach beyond that of a health issue. The issue has been made existentially significant. Still, in our opinion the period we have studied features two kinds of discourse - one like that we have described above between 1998-2000 and another, cautious and more broadened, between 2000-2002.

The speeches of 2000-2002 still define HIV/AIDS as an issue that has to be dealt with by all governmental sectors and inter-sectorally. What changed in those years is the sense of urgency that past speeches seemed to express. By this we need to make clear that it is not that HIV and AIDS was not perceived as a terrible disease affecting the lives of many South Africans and had to be beaten, but somehow the grammar of ‘urgency’ was lowered to the level that it was not necessary to view it as an emergency needing securitization. Dr. Essop Pahad mentioned in his address to the Independent Newspapers Meeting in 2001 that many South Africans were not doing a favour to their country when “[they] overblow fears and phobias about South Africa and Africa” 308. Further he also questioned political leaders and the use of their “eloquence and drive in effectively driving South Africans away from their

305 Ibid
306 Department of Health (2000), p22
307 By placing the child on the micro-level we mean the child in a child-headed household because in our opinion the discourse, although it speaks of households in plural, focuses on the individual child.
308 ‘Address by Minister in the Presidency, Dr.Essop Pahad’, 010205 as quoted in previous chapter.
own country by raising their fear level and over-emphasizing the problem that we face as a nation.”

The years between 1998-2000 were years of great activity on the HIV/AIDS-field and it seems as though there were some who, in the face of the growing epidemic, thought the government should declare the situation a national emergency. This is illustrated by the speech President Mbeki held in relation to the question in 2001 regarding whether South Africa should call a national emergency, thus disabling the patent-laws of the TRIPS-agreement, in which he said that this was not necessary. In our interview with Gauteng MEC for Development Planning and Local Government, Mr. Trevor Fowler, he stated: “it is not useful to declare it [the situation of HIV/AIDS] a national emergency [in] a country such as South Africa” because “if we declare it a national emergency we will pay the consequences.” He explained this by saying that: “if the President of South Africa has an ambulance outside his house our currency will go down. If Nelson Mandela gets sick, the currency will go down.” His point was the impact of choosing the label ‘national emergency’ on a developing economy like South Africa. It is our opinion that this debate can be seen as a step towards a process of desecuritization. Barry Buzan has raised a similar argument in relation to how securitizing actors relate to issues of security by saying that: “[t]here is a need to develop an awareness both on the costs of panic politics, as well as the allure of prioritisation that it offers, and of the benefits of desecuritization as the long-run political objective.” We do not rule out the possibility that the idea of desecuritization was present before this, as shown earlier there have been those who have called for a less fear-provoking discourse, but we see desecuritization as a clearer trend following 2000/2001.

Instead of calling a national emergency the approach has been to comprehensively combat AIDS. SAAVI has played a part here in relation to the development of vaccines. One point made by the government is that South Africa has a complex cluster of HIV-strains or variations. The road to possible success has been presented as long and not guaranteed, and therefore other forms of prevention and treatments have been encouraged, including better nutrition and the use of certain foods that will in the long run boost the immune system.

This is why we believe that the discourse has become less urgent. Could the reason be that the issue has become institutionalised and as such the discourse implies urgency even though it does not explicitly say so? It is difficult to say. The discourse of 2000-2002 in our opinion took on a less aggressive approach and called for unitary action and measures beyond those of medical drugs and we feel as though the urgency might still be there, implicitly, in relation to referent objects on the micro-level, i.e. the individual. This discourse spoke of the PWAs as infected and dying and motioned for prevention through the use of abstinence, using condoms and being wise when it came to choosing sexual partners. On the middle and system-levels the urgency is not the same as between 1998-2000. President Mbeki distanced South Africa (or Africa depending on how one sees it) from the Western World in his letter to the world leaders in 2000 by saying that Africa’s situation was different from that of the West and

309 Ibid
310 ‘Mbeki Responses to Parliamentary Questions in the National Assembly’, 010314 as quoted in previous chapter.
311 Interview with MEC Trevor G. Fowler, Johannesburg, 021115
312 Ibid.
313 Buzan (1997), p18f
314 Department of Health (2001)
needed other measures. The Presidential AIDS Advisory Panel started a debate about the link between HIV and AIDS and alternative theories on the epidemiology of AIDS. In this panel-report the virus and disease could be argued to have been separated although the government stated that it did not deny the link between the two, instead they thought the relationship should be possible to discuss and the government should be able to create a path for themselves for how to deal with HIV and AIDS\textsuperscript{316}.

Due to this conclusion we make the argument that we have come across two different discourses although the differences between the two have not been great. They use a similar language but the articulated relations between the different elements and moments within them are different from one to the other. In the first discourse they are characterized by urgency and drama and in the second the relations are more cautious. The discourse in both cases could be argued to be that of security – first as securitization and secondly as desecuritization – and the nodal point around which the other elements and moments are structured are HIV and AIDS. We would like to argue that while HIV/AIDS serve as one singular nodal point in the first discourse, they can be presented as two parts of a whole, HIV and AIDS, in the second discourse. We tend to see a trend where the link between the two has become discursively weakened in the second. We will not go as far as to say that HIV and AIDS have become two separate nodal points, rather that there is a case of HIV/AIDS turning into HIV and/or AIDS, as illustrated by figure 5.1 below. The elements and moments which the discourses structure include the referent objects as these have received an articulated identity, or subject-position, within the discourses. They also include the designated audience in a similar fashion. Some of these objects, e.g. ‘worker’, ‘youth’, ‘partnership’ etc, might exist in other discourses like economic or political discourse but here their meaning is constituted by discourses of securitization and desecuritization.

**Figure 5.1: The Structure of discourses on HIV and AIDS by the National Government of South Africa between 1998-2000 and 2000-2002.**

**Discourse 1:** Securitization (1998-2000)

**Discourse 2:** Desecuritization (2000-2002)

(In the figure the x represents signs, elements and moments whose meaning is constituted by the discourse and whose relations are influenced by the nodal point in the centre. It should be noted that this is a simplified figure of this structure and serves only as a guide to the reader as to what this might look like. The structure of the x’s is

\textsuperscript{316} Apart from the letter to President Clinton et al this was also mentioned in other speeches by Mbeki and others, like Deputy President Zuma, at the time. Other examples of this trend is the speech Deputy President Zuma delivered 2000 where he asked for a move away from a language of crisis and catastrophe in order to create a caring rather than a scared society. All these are quoted in Chapter 4.
Our conclusion is that the discourse of 1998-2000 was characterized by a securitizing move as it used the logic of securitization, the notion of existential threats needing emergency measures beyond those of the normal code of conduct in order to deal with the issue of HIV/AIDS. Between 2000-2002 there was still an attempted securitizing move, only the goal seems to have changed from that of a securitization to that of desecuritization. We have stated earlier that Barry Buzan et al believe that often in cases of securitization on the national, domestic, level, the discourse is not that of drama and urgency but rather that of a more cautious tone. We do not believe that the cautious tone is the result of an institutionalisation of the issue. This might be the case in relation to the individual but not on the whole. Instead we argue that there has been a change into a discourse of desecuritization.

5.2 Discussion on the Possibility of a Full Securitization

We have argued earlier in the thesis that the timescape in which the National Government of the new South Africa has had to act is quite small. The initiatives launched in 1998 have only had 5 years to develop and this is not enough time to say whether the second step of the full securitization/desecuritization has happened and if it has been successful or not. Has the audience adopted the discourse? Our question is will the audience accept it or not? With the data from our analysis and data from other sources we can at least discuss the possibility by looking into factors that may facilitate or make the full act more difficult.

In our presentation of securitization theory we showed that there are different factors that may or may not facilitate a full securitization – so-called facilitating conditions. These included conditions of security grammar, the relationship between the securitizing actor and the audience plus the features of the threat itself.

When it comes to security grammar the Copenhagen School and other scholars of Security Studies speak of threat assessments and the lack of universality between different definitions of security. Whether an audience will accept the securitization discourse or not depends on how well the security grammar of the securitizing actor fits with the audience’s own. It is also related to how this grammar of security affects how an audience relates to other things. Buzan has stated that there is no way to define a general objective measure of a threat and it is probably even more difficult to do so with a subjective measure of a threat.

There are those who argue that concepts like ‘national interest’ or ‘national security’ are not as central in Africa as it is in the West. The Copenhagen School acknowledges that with colonial rule and in some cases military rule, the interests of African peoples have been sub-

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Jef Huysmans speaks of so-called ‘thick signifiers’, a concept which fits well in here because a thick signifier is not just the case of a concept but also the dimensions around it – i.e. “one tries to understand how security language implies a specific metaphysics of life. The interpretation does not just explain how a security story requires the definition of threats, a referent object, etc. but also how it defines our relations to nature, to other human beings and to the self” (Ibid p231). Huysmans uses Ole Wæver from the Copenhagen School as an example of how security language “organizes our relation to other people via the logic of war” (Ibid p232).

318 Buzan (1997), p18
319 Ostergard, p334
national, related to the tribe etc, and therefore “the definition of security should be primarily political”\(^{320}\) because other realms are filtered through this. We spoke to a group of HIV-positive people in Johannesburg and tried to assess what a threat to their subjective security could be by asking them what was most important thing in their situation: housing, education, food or healthcare. Their answer was that they could not choose because HIV was more than a virus, it affected their entire lives although education was valued highly because people do not know what they should know\(^{321}\). Deputy President Zuma stated in 2000 in relation to HIV/AIDS as a consequence of poverty that: “[o]ne has to recognise that these are people faced with a greater reality of survival against all odds, for whom the threat of HIV/AIDS is merely one more difficulty to contend with in their lives”\(^{322}\). Robyn Pharoah, Senior Researcher at the AIDS and Security Project at the Institute for Security Studies, Pretoria, said in our interview that there are people in South Africa who have lived in terrible situations and continue to survive without becoming political about it. She said that people will keep on surviving, they always have. This might suggest that the idea of survival is very deeply rooted in the minds of South Africans\(^{323}\). She also told us of experiences of how people tend to define ‘security’ in different ways. In our interviews with provincial government officials they also said that in order to relate HIV/AIDS to security one has to define what security is.

Maybe it is easier for the government to find a common security grammar when speaking to a specific group, e.g. an economic forum, than it is to find a common ground with the general population. Suzanna Leclerc-Madlala, Associate Professor of Anthropology at the University of Natal, raised a point in our interview where she said that it is difficult to even get people to think about the issue, especially if you are young and at the peak of your sexuality\(^{324}\). Jennifer Joni, an attorney working for the AIDS Law Project, said that people do not want to know their HIV-status\(^{325}\). It seems as though the debates from 2000 onwards on the link between HIV and AIDS might have influenced the audience. Robyn Pharoah spoke of meeting young people who said that since the government was not sure about what was going on and President Mbeki had brought dissident views onto the agenda they did not feel the urge to act and feel threatened\(^{326}\). Alan Whiteside, Professor at HEARD, said in our interview that there is a real problem in how the issue is defined differently in the sense that there is a lack of a “sense of national emergency and crisis and top level involvement”\(^{327}\). Whiteside attended the Presidential AIDS Advisory Panel but did not believe that anyone really read the final document since it was 120 pages and “fairly tedious”\(^{328}\). The problem was, again, a departing of minds and that people came to and left the meeting with the same opinions. To him the discussion it forwarded was irrelevant.

\(^{320}\) Buzan et al (1998), p173

\(^{321}\) This was an informal interview that we were not allowed to tape. It involved a support group that met on a weekly basis to discuss problems and issues they faced in their everyday life.


\(^{323}\) Interview with Ms Robyn Pharoah, Senior Researcher, AIDS and Security Project, Institute for Security Studies, Pretoria on 021121

\(^{324}\) Interview with Suzanne Leclerc-Madlala, PhD. Associate Professor of Anthropology, School of Community Development and Adult Learning, University of Natal, 021104

\(^{325}\) Interview with Ms. Jennifer Joni, Attorney, AIDS Law Project – Centre for Applied Legal Studies, University of Witwatersrand, 021111

\(^{326}\) Interview with Robyn Pharoah

\(^{327}\) Interview with Professor Alan Whiteside, Professor at HEARD – the Health Economics and HIV/AIDS Research Division at the University of Natal, 021104

\(^{328}\) Ibid
One important factor here is whether the National Government is an accepted voice of security – i.e. do people listen when they speak ‘security’? Whichever way the government defines the issue it will be discussed in the media and throughout society. By this we mean that what the government says seems to stir debate, whether positive or negative. Their strength of voice of security is a case of a possible historic legacy. A question to which we have not been able to establish a clear answer is whether some voices within the organizational logic of the government are stronger than others, i.e. if for example Thabo Mbeki is stronger than the Minister of Transport or not and whether Nelson Mandela was a stronger voice than Thabo Mbeki is today. They are bound by the same logic and speak the same grammar but are quite different.

Up until the abolishment of apartheid the relationship between the South African people and the government and between different groups within the population were those of segregation, oppression and tension between the white and black groups. In post-apartheid South Africa the population is seen as a ‘Rainbow Nation’, uniting all, tolerating no discrimination. Jennifer Joni told us that traditionally, the black man have been disillusioned by the law – what it can do, when and how and they still find it difficult to trust. At the same time, the Rainbow Nation not only sees tensions between white and black people but also within the black group. In discursive terms this can be related to the logics of difference and equivalence described by Laclau and Mouffe.

During apartheid the heterogeneous Black Consciousness Movement (BMC) came together to fight for a common cause despite tribal or other differences. It could be argued that they worked under the logic of equivalence and had neutralized the possible antagonisms between them. At the same time apartheid united the white population under another logic of equivalence. When the ANC took office in 1994 these groups were dissolved and free to express their differences although the Rainbow Nation features a logic of equivalence, including everyone, both black and white, as human beings. The government could be argued to have used the logic of difference by attempting to put the differences between the different objects at the sidelines. Helen Schneider writes about this situation in relation to its impact on the discourse on AIDS as though “attempts to shape discourse have served more to undermine than enhance political leadership in AIDS.”

Tom Lodge says that the South African state is influenced by a social alliance made up of the ANC, trade unions and other groups that came about in the liberation movement against apartheid. Although the government aims towards being ‘a people’s government’ this role and influence is complex to assess. Paid-up membership to the ANC more than halved between 1994 and 1999 and some argue that there has been a lack of contact between government

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330 David Dorward argues that South Africa is often seen as structured along black and white lines, ignoring the historical tensions within the white group of the English and Afrikaner but also between capital and labour and other lines. (Dorward, David (2000). ‘South Africa: Democracy and citizenship in a plural society’. In Vandenberg, Andrew (ed)(2000). Citizenship and Democracy in a Global Era. London: Macmillan Press Ltd, pp218-230)
331 Smith, p174
officials and the people. The liberation movement was an important voice of security for the black population during apartheid – yet, the power of voice is not an absolute thing and it does not ensure that the white population will listen to the voice of the ANC-government and accept it. One problem that has risen is that MPs have been reluctant to, as Leclerc-Madlala put it, say: “look here, at this man at the peak of his career contributing to the transformation of the country and we lost him because of the disease, lets do something about it”, actions of active avoidance. Robyn Pharoah also called HIV and AIDS a hidden epidemic. The problem here has been that government officials are thought to hide their HIV-status and as such they have distanced themselves from the people and perhaps contributed to the stigma.

It should be noted that race is not the only aspect of the dynamic of the Rainbow Nation. Class, religion, gender, age etc also play a part, as does language. South Africa has 11 official languages and most government communication is in English which not everyone understands. The government discourse also has to face the prospect of other discourses on HIV/AIDS from e.g. civil society as shown in the court-cases between TAC and the government.

It is our opinion that the most important facilitating factor is the nature, or epidemiology, of HIV/AIDS as it affects the prospects of the other two conditions. The nature of the HIV/AIDS-epidemic might facilitate desecuritization rather than securitization compared to an epidemic like that of the Ebola virus. A fast-moving, urgent epidemic like that of Ebola might be easier to securitize due to its nature.

An epidemic develops in the shape of an S from the point of infection to the point of death or cure. At the first stage of infection the infection-rates grow higher until a critical point is met and the curve levels out at the top, creating a tilting S. Whereas the Ebola-epidemics have the infection at the bottom and death at the top of the ‘S’, HIV/AIDS creates two ‘S’-curves: one for HIV and one for AIDS. The top of the first ‘S’-curve is where HIV turns into AIDS. The time-difference between the two is about 5-8 years, the time it takes for a person who has contracted HIV to develop AIDS. In the case of Ebola the time-difference between infection and death is a matter of days. This means that while a person infected with Ebola only have a matter of days in which he or she can transmit the virus to other people, a person suffering from HIV or AIDS have years. A person can carry HIV for a long time without knowing it – it does not leave a clear physical mark like Ebola. AIDS is also a syndrome meaning that the immune-deficiency makes the body weak and vulnerable to other viruses and diseases like TB. It is therefore comparatively easy to hide that someone died from AIDS and instead say that they died from TB or something else.

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334 Tom Lodge speaks of the liberation movement as the broader social alliance which helped the ANC come to power in 1994. This was made up of the ANC, the Congress of South African Trade Unions (COSATU), the South African National Civic Organisation (SANCO), the United Democratic Front (UDF) and the South African Communist Party (SACP) among others (Ibid).
335 Interview with Ms. Susanne Leclerc-Madlala 021104
336 Interview with Ms Robyn Pharoah, 021121
337 Schneider (2002), p153
Another aspect of HIV/AIDS in South Africa is that it is spread mainly through sexual relations. Sexual relations are one of the most intimate aspects of our lives and in some cultures a taboo and it is sometimes a good indicator of the gender relations of a country. Robyn Pharoah raised the point that sexual relations are problematic for Africa through the colonial views of Africa as a promiscuous continent. She said that there is a reluctance to speak of a sexually transmitted virus and that instead of being accused of promiscuity the issue will be denied out loud. Megan Vaughan from Nuffield College, Oxford, says that some African nationalists have argued that “AIDS is a western health problem resulting from western ‘degeneracy’ and homosexuality, and that Africans have been unfairly scapegoated for this western problem.” Ideas such as the one that the HI-virus passed from monkeys to humans through sexual intercourse, gives the idea that Africans have “an animalistic sexuality.” Fiona Yong quoted a man in the UN Chronicle saying: “[a]lthough the Security Council has addressed AIDS, and the Secretary-General has called HIV/AIDS his personal priority, some Governments still resist decisively addressing AIDS. Some Governments […] still want to present themselves to the world as a clean nation […].] If you’re talking to a government official who has had many sexual partners and has his own fears, he may repress or deny his own fears before taking on AIDS, as a minister or social servant.” Thus, ‘active denial’ could be explained as though accepting HIV and AIDS would mean to feed colonial presumptions of e.g. promiscuity. We are not saying that this is so, the point it instead that there are factors which could make it difficult to talk about the issue. Within the country there has also been tendencies to call AIDS a ‘black disease’ in the same way that we in the Western World have heard expressions like ‘gay disease’. Robyn Pharoah suggested that this might be why a raise in HIV-prevalence among white people has been reported lately; people simply do not think they are at risk because of the colour of their skin.

It is our conclusion that the prospect of full securitization or desecuritization is problematic. Many factors serve to promote or make the process difficult. In our opinion the modern, democratic, South Africa faces issues related to its past which it has yet to overcome and we are not sure if the government’s strength of voice of security is strong enough to reach the general population. Maybe it is easier to reach specific groups. The government also faces strong competition from other discourses on HIV/AIDS but the most important factor is in our opinion the nature of HIV and AIDS. The lack of urgency and drama in this might serve to aid a long-term desecuritization at the same time as its way of transmission, through sexual relations, might serve to its disadvantage and it being ‘actively denied’.

In our introduction we said that the UN and US started to speak of HIV/AIDS as a threat to national and international security in 2000 by taking the issue to the level of the UNSC. We also asked how a country like South Africa, facing prevalence rates of 25%, defined the issue. We have concluded that HIV and AIDS have been politicised by the South African government and made politically significant to the level of securitization, existential significance, in the period 1998-2000 and to desecuritization in 2000-2002. The point is that making an issue politically significant is a choice, and a choice has effects. Ole Wæver has

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342 Ibid.
343 Young, p11
described politics as “inherently about closing off options, about forcing the stream of history in particular directions”.344

One such effect is the fact that the choice of one path excludes the use of others, e.g. it might be difficult to non-politicise an issue once it has been politicised. The choice of securitization entails a specific grammar of threat and security and one effect in the case at hand could have been a call for national emergency, thus disabling the TRIPS-agreement, making generic drugs available in 2001 but also a drop in the economy making it even more difficult for people to have a good life in the sense of food and housing. In our study we have come to the conclusion that the South African government changed paths in 2000 and aimed for desecuritization and caution and as an effect, the government did not call a national emergency in 2001. Where that will take the government in the long run is a question for the future. The theoretical link between choice and effect makes this process interesting. The Partnership Against AIDS, as well as the NACOSA-cooperation in 1994, aimed at creating policy through partnerships, cooperation between e.g. civil society and the government. In 2001 the government and civil society, through TAC, faced off in court. This could imply that the government by choosing desecuritization, especially in its reluctance to call a national emergency, ‘alienated’ part of its partnership and maybe failed to convince part of its audience. Since we have only been able to discuss the possibility of a full desecuritization, i.e. if the audience has accepted the message or not, we cannot say for sure. In our opinion this would make an interesting start for future studies into specific areas of this case, studies that could also look into the concept of ‘successful securitization/desecuritization’ and what the term ‘successful’ here really means.

We have not studied in detail whether the UN and/or US have formally securitized HIV/AIDS or not but we have in our study of South Africa’s grammar regarding HIV/AIDS come to a conclusion similar to that of Buzan et al, that security is not always the final goal of a securitizing actor on the national, domestic level. In his letter to the World Leaders in 2000, Thabo Mbeki said that Africa needed a different approach than that taken in the West because the situation was different. The choice of desecuritization might be argued to be a, at least theoretically, more nuanced approach to the issue in that the space for action it leaves in effect is broader than that of securitization. It seems as though the government and Mbeki based their choice of this idea on the possible effects that came with it.

The point is that security on the one hand is more than just the dynamic between threat and defence, here the grammar and logic of threat and security is in focus. In the aftermath of the debates of the 1980s onwards an issue like HIV/AIDS might be a possible security-issue for the future, and the theory of securitization a tool for studying it.

In our study we have come across one theoretical problem, that of placing an issue in a specific sector. The sectors serve as lenses but in our study we have seen that on the one hand the issue of HIV/AIDS is dealt with in the health sector but it is also an issue of both the societal, political and economic sector. This is a problem which other studies have come across as well and for that reason we tend to agree with Charlotte Wagnsson who has suggested the idea of sectors should be broadened. We believe that the issue we have studied tend to be cross-sectoral and maybe that is one aspect in which modern theories of security studies should differ from the traditional military-politically, sector- and state-focused studies.

344 Wæver (1995), p76
Chapter 6: Conclusions

“To be sure, we may be aware of some of the events and processes that are likely to be part of the new security universe, but these are not yet fully conceptualised, and we do not know in what form they are going to enter this new security ‘system’”

6.1 Conclusions

We have through our study shown that there is a set of key policy-documents that define the issue of HIV and AIDS in South Africa. Among these are the Partnership Against AIDS-declaration and the National Strategic Plan for STDs, HIV and AIDS but also the report from the Presidential AIDS Advisory Panel. The key policy-documents serve as a basis for an organized government discourse concerning HIV and AIDS in government speech acts.

In this policy it is clear that HIV and AIDS are presented as a medical condition but the policy-approach is also multi-sectoral, involving non-medical areas as well e.g. social relations, economic development etc. On the one hand HIV/AIDS is seen as an issue with a direct impact on the infected individual and his or her surroundings. On the other hand policy relates to secondary impacts – the impact of the impact, e.g. the lack of good education because teachers have died of AIDS, the death of the youth affecting the prospects of the future, the loss of foreign investment due to the unstable situation caused by lack of a healthy workforce.

The policy shows that HIV and AIDS are on the political agenda, they have been politicised, although it seems to us as though the government has gone further than that.

The government’s meaning of HIV and AIDS relates to different traditional and non-traditional discursive fields and could in this sense be described as a so-called floating sign, i.e. an object which exist in different discourses where it can get slightly different meanings, depending on the discourse. This discursive structure can be related to the security concept of the Copenhagen School. One aspect of the meaning of HIV and AIDS is related to security through the logic of securitization. This was strong between 1998 and 2000 in South Africa when the discourse used was one of urgency and drama calling for extraordinary means and measures outside of the traditional medical field. The idea was that if action was not taken now, it would be too late.

With the Presidential AIDS Advisory Panel and the debate in the National Assembly concerning whether the government should call a national emergency or not came a shift in discourse from that of securitization to that of desecuritization – from urgency and drama to a more cautious discourse. In relation to the individual the urgency still called for prevention of the spread but on the middle and system-levels the call was less urgent. It is our conclusion that the discourse from 2000 onwards was that of desecuritization and that within this discourse the two components, HIV and AIDS, were slightly separated. Together they still served as a nodal point in security-discourse but their bond was not as strong as before.

Whether this move to desecuritize HIV and AIDS will succeed or not depends on how strong the National Government’s voice of security is in post-apartheid South Africa and whether they manage to formulate a security grammar that the Rainbow Nation can understand and relate to in order to adopt it. The nature of HIV and AIDS serve to aid desecuritization due to its lack of a dramatic epidemiology like that of e.g. the Ebola-virus. At the same time the fact that it is spread through sexual relations serves to its disadvantage. It makes HIV and AIDS difficult to talk about and it might become ‘actively denied’.

In relation to our theoretical work and future research we conclude that securitization theory does enable a deeper, more focused study of politicization where an issue is given political
and existential significance through a grammar of security; especially in combination with discourse theory. The theory does need development in some areas, e.g. that of sectors. The study of securitization is not a study of security as a goal but rather of a process of choice and effect, an awareness of causal relations. The logic of grammar implies that the choice to securitize or desecuritize an issue is a conscious choice; at least we hope that it is. The issue of HIV and AIDS is on the security-agenda. Where it will go from there and what the effects of this will be will become visible in the next couple of years.
Appendix A: Basic Model for Interviews

This is a model for the formal and informal interviews we conducted in South Africa during the fall of 2002. It should be stated that the questions did not always appear in this particular order and specific form. We tended to change the questions depending on the position or role of the person being interviewed and also depending on how much time the person being interviewed had for us. In our interviews with government officials we focused on the dynamics between different levels of government and how a national policy is shaped. In our interviews with civil society we focused on the role of civil society in general and NGOs in particular and their role in and relation to governmental policy. We have also tried to assess the view that each of these has on the other.

Our interviewees all knew who we were and that we were doing a study into perceptions and designated meanings of HIV and AIDS in South African governmental discourse. Because our aim was to see whether our interviewees related HIV and AIDS to security or not we let our first question and the answer it got set the structure of the rest of the interview. We will show how this worked in practice below.

**Question 1. What is the view on HIV and AIDS in South Africa Today? How is it perceived?**

There were two alternative answers to this question: one that included security and one which did not. If security was not included question 1.2 was asked:

**Question 1.2: In our research we have come across different discussions around the issue of HIV and AIDS. A lot of it is done in medical terms but the UN Security Council and US have spoken of HIV/AIDS in relation to peace and security and designated them threats to national and international security. Do you think HIV/AIDS pose a threat to South Africa today? In what way?**

This second question also faced two alternative answers: one where the respondent had either forgot to make this connection or thought it relevant after we had mentioned it, or he or she might have excluded this line of thought deliberately or did not consider it relevant. In either case the content of the answer influenced the following questions in the interview.

**Question 2. Does this perception [which we had asked about in questions 1 and 1.2] different between different levels of society, government or between different actors in society?**

**Question 3. What is the role of other actors in defining the meaning of HIV and AIDS? Who or what might influence the perception of HIV and AIDS?**

**Question 3.2 Who has the power to define the meaning of HIV/AIDS in South Africa today?**

**Question 4. What is the biggest problem/virtue with the meaning and perception of HIV and AIDS today?**

In total each interview included around 10-15 questions, all related to this model and the answers the questions generated.
Appendix B: Formal Interviews Conducted in South Africa 4-25 November 2002

Government Officials

Mr. Trevor G. Fowler
MEC (Member of the Executive Council)
Development Planning & Local Government
Johannesburg, South Africa
November 15, 2002

Mahlapane Lekometsa
Aids Directorate
Gauteng Province
Johannesburg, South Africa
November 13, 2002

Mr. Dan Maschitisho
Chief Director for Local Government
Department of Development Planning & Local Government
Johannesburg, South Africa
November 15, 2002

Ms. Sakina Mohamed
Deputy Director HIV/AIDS
Department of Social Services & Population Development, Sub Directorate: Social Security
Johannesburg, South Africa
November 22, 2002

Mr. Tebogo Moremi
Deputy Director: Integrated Development, Planning and Facilitation
Provincial IDP Coordinator
Department of Planning & Local Government, Gauteng Province
Johannesburg
November 11, 2002

Ms. Lulama Ndzekeli
Deputy Director: Strategic Support Service
Department of Development Planning & Local Government
Johannesburg, South Africa
November 15, 2002

Dr. Laetitia Rispel
Head of Department
Gauteng Department of Health
Johannesburg, South Africa
November 25, 2002
Celicia M. Serenata
HIV/AIDS, STI and TB Programme
National Department of Health
Pretoria, South Africa
November 21, 2002

Other

Ms. Jennifer Joni
Attorney
AIDS Law Project
Centre for Applied Legal Studies
Wits University
Johannesburg, South Africa
November 11, 2002

Ms. Suzanne Leclerc-Madlala, PhD.
Associate Professor of Anthropology
School of Community Development and Adult Learning
University of Natal
November 4, 2002

Dr. N. Martinson, MbChB, MPH, MFGP, DCH
Director OI/TB
Perinatal HIV Research Unit
University of the Witwatersrand
Chris Hani Baragwanath Hospital
Soweto, South Africa
November 13, 2002

Ms. Robyn Pharoah
Senior Researcher
AIDS & Security Project
Institute for Security Studies
November 21, 2002
Pretoria, South Africa

Elizabeth Preston-White
Director of HIVAN
University of Natal
Durban, South Africa
November 5, 2002

Professor Alan Whiteside
Health Economics & HIV/AIDS Research Division HEARD
University of Natal
Durban, South Africa
November 4, 2002
Appendix C: Speeches 1998-2002

Here is a compilation of the speeches we have analysed for this study. These represent a compilation of speeches concerning HIV/AIDS in the government’s discourse in the defined period. Not all speeches we have read are included here and not all these speeches are cited in the thesis as we have chosen to include the ones that have influenced our study the most.

Some speeches seem to have two titles, one for document on the website and one of the speech. Where there are two titles we have chosen to put the title of the document first and the second title within brackets. The second title within brackets is the title found in the footnotes in the text.

Speeches 1998


980504 Department of Health: ‘20% of Workforce Infected with HIV by Year 2000 (‘20% of the workforce infected with HIV by the year 2000, 4 May 1998’). Available: http://www.gov.za/search/searchdb.htm [030422]


Speeches 1999


990809 Office of the President: ‘Address by President Thabo Mbeki to the Nation on National Women’s Day’.

990817 ‘Briefing to Parliamentarians by Minister of Welfare and Population Development’.

990826 ‘Presentation by Minister of Transport at a Media Briefing’.

991001 Office of the Deputy President: ‘Address by Deputy President Jacob Zuma at the Tertiary Institutions Against AIDS Conference’.

991001 ‘Address by Professor Kader Asmal, Minister of Education, at the Tertiary Institutions Against AIDS Conference’.


991028 Office of the President: ‘Address of President Mbeki, at the National Council of Provinces’.

991104 Government Communications: ‘Address to the Special Meeting of SADC Health Ministers on HIV/AIDS by Deputy President Zuma’.

991116 Ministry of Health: ‘Tshabalala-Msimang: Statement on HIV/AIDS and Related Issues to the National Assembly (“Statement to the National Assembly by Dr M E Tshabalala-Msimang MP, Minister of Health, on HIV/AIDS and Related Issues, Tuesday, 16 November 1999”)’.


991126 Ministry of Minerals and Energy: ‘Address by Ms Susan Shabangu, Deputy Minister of Minerals and Energy’.

991129 Ministry of Health: ‘Minister of Health: Tshabalala-Msimang: Launch of the New Medical Alert Service (“Speaking Notes for the Minister of Health, Dr Manto Tshabalala-Msimang, at the Launch of the New Medic Alert Service, Cape Town 29 November 1999”)’.


Speeches 2000


Office of the Deputy President: ‘Address by Deputy President Zuma at the XIII AIDS Conference Gala Dinner’.

Government Communication and Information System: ‘Closing Address by Former President Mandela at the 13th International AIDS Conference’.

‘Statement by the Minister of Welfare, Population and Development, Dr Zola Skweyiya on his visit to the Easter Cape’.

‘Second NIEP Oliver Tambo Lecture delivered by the President of the Republic of South Africa, Thabo Mbeki’.

‘Managing the Impact of HIV/AIDS in the Workplace Keynote Address by Minister Fraser-Moleketi’.


Office of the Deputy President: ‘Celebrations of the Second Anniversary of the Partnership Against AIDS’.

Department of Foreign Affairs: ‘Statement by Ambassador Kumalo to the General Assembly – Implementation of the UN New Agenda for the Development of Africa in the 1990s’.

Office of the Presidency: ‘Address by Deputy President Zuma to the National Council of Provinces’.

‘Deputy President Zuma at the AIDS Campaign Sponsors’ Breakfast’.

Office of the Presidency: ‘Address by Deputy President Zuma at the Launch of the Powerbelt HIV/AIDS Project’.

‘Speech by Minister of Transport Dullah Omar MP World AIDS Day Event’.
Speeches 2001

010205 Office of the Presidency: ‘Address by the Minister in the Presidency, Dr.Essop Pahad, at the Banquet to Mark the International Advisory Board Meeting of Independent Newspapers’.

010209 ‘State of the Nation Address by President Mbeki – National Assembly Chamber’.

010212 Gauteng Provincial Government: ‘Premier Shilowa’s Address at the Opening of the Gauteng Provincial Legislature’.

010214 ‘Media Briefing by the Minister of Sport and Recreation, Ngconde Balfourmedia’.


010314 The Presidency: ‘Mbeki Responses to Parliamentary Questions in the National Assembly (‘President Mbeki’s Responses to Parliamentary Questions in the National Assembly, 14 March 2001’).’

010403 ‘Budget Vote Speech by the Minister of Social Development to the National Assembly’.

010522 Department of Foreign Affairs: ‘A. Pahad: Africa Day Celebrations (‘Speech by Deputy Minister Aziz Pahad to the National Council of Provinces on Africa Day Celebrations, Cape Town, 22 May 2001’).’

010524 Ministry of Education: ‘Speech by the Minister of Education Introducing the Debate on the Education Budget Speech’.


010526 Office of the Presidency: ‘Address by Deputy President Zuma at the Medical University of South Africa’.

010605 Minister of Health: ‘Budget Speech 2001, National Assembly Minister of Health’.


011005 Office of the Presidency: ‘Speech by Dr. Essop Pahad, Minister of the Presidency, at the Aardklop Arts Festival’.

011009 ‘Deputy President Zuma to the 3rd Anniversary of the Partnership Against AIDS’.


011029 Department of Social Development: ‘Presentation by Minister Skweyiya at the Roundtable to Discuss Partnership to Fight Poverty and Assist Orphaned and Vulnerable Children’.

011118 Department of Health: ‘Minister of Health Opening Address at the Health Summit 2001’.

011118 ‘Address by Minister of Health, ME Tshabalala-Msimang at the Parliamentary Media Briefing’, 011118.

011128 Ministry of Education: ‘Address by Professor Asmal, Minister of Education at the Commemoration of World AIDS Day 2001’.


011204 Ministry of Social Development: ‘Skweyiya Condemns Sex with Children as HIV/AIDS Cure’.
Speeches 2002

020208 ‘State of the Nation Address by the President of South Africa, Thabo Mbeki, to the Join Sitting of the Houses of Parliament’, CapeTown.

020220 Government Communications (GCIS): ‘Statement on Cabinet Meeting- 20 February’.

020322 Department of Foreign Affairs: ‘Dlamini Zuma: Address at University of Alberta, Canada on NEPAD (‘Address by the Minister of Foreign Affairs of South Africa, Dr. Dlamini Zuma to the University of Alberta, on the New Partnerships for Africa’s Development, Canada, 22 March 2002’).

020212 Ministry of Home Affairs: ‘Buthelezi: Debate on President’s State of the Nation Address (‘Remarks by Mangosuthu Buthelezi, MO, Minister of Home Affairs during the National Assembly State of the Nation Debate, Cape Town, 12 February 2002’)

020213 Ministry of Water Affairs and Forestry: ‘Kasrils: Debate on President’s State of the Nations Address (‘Speech by Mr. Ronnie Kasrils MP, Minister of Water Affairs and Forestry ‘State of the Nation’ Debate, Parliament, 13 February 2002’).

020220 ‘Statement on Cabinet Meeting 20 February’.

020323 Department of Foreign Affairs: ‘Address by Minister of Foreign Affairs, Dr Dlamini Zuma to the University of Alberta, on the New Partnership For Africa’s Development’,
020323.


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Books


Documents
(Including published and unpublished reports, and post-graduate dissertations)


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**Official Publications**


Other

*Copenhagen Peace and Research Institute*
Available: http://www.copri.dk

*Lithops*
Available: http://www.lithops.info

*GOVZA: South African Government Online.*

*Policy and Law Online News.*
Available: http://www.polity.org.za