

Syracuse University

SURFACE

Political Science - Dissertations

Maxwell School of Citizenship and Public
Affairs

2011

Treatment as a Common Good: Adopting HIV/AIDS Policy in Russia and South Africa, 1999-2008

Vladislav Kravtsov
Syracuse University

Follow this and additional works at: https://surface.syr.edu/psc_etd



Part of the [Political Science Commons](#)

Recommended Citation

Kravtsov, Vladislav, "Treatment as a Common Good: Adopting HIV/AIDS Policy in Russia and South Africa, 1999-2008" (2011). *Political Science - Dissertations*. 97.

https://surface.syr.edu/psc_etd/97

This Dissertation is brought to you for free and open access by the Maxwell School of Citizenship and Public Affairs at SURFACE. It has been accepted for inclusion in Political Science - Dissertations by an authorized administrator of SURFACE. For more information, please contact surface@syr.edu.

ABSTRACT

The goal of this dissertation is to increase our understanding of domestic policy responses to initiatives and expertise as provided by international health organizations. Although following international recommendations often improves domestic public health, in certain circumstances resistance to adopting them persists. My core theoretical argument suggests that a strong societal agreement about what constitutes the “common good” served by state (e.g., “social purpose”) informs how domestic policy-makers evaluate the benefits of adopting international recommendations. This agreement also affects how governments frame the provision of treatment, decide which subpopulations should benefit from the consumption of public good, and choose their partners in policy implementation. To demonstrate the impact of social purpose I examine how, why and with what consequences Russia and South Africa adopted the external best case practices, guidelines, and recommendations in regard to the HIV/AIDS treatment. In doing so, I investigate how major international health, developmental, and financial organizations formulated the global HIV/AIDS policy, and devise a set of indicators operationalizing this policy. Then, I use these indicators to design a structured, focused comparison of the domestic HIV/AIDS policy responses and

empirically demonstrate that governments in both states created policy environments sanctioning a highly selective approach to international policy guidelines and recommendations. Rather than responding to the epidemic as a pressing public health issue Russia's "Sovereign Democracy" prompted the government to respond to HIV/AIDS as the issue of demographic survival and criminal drug abuse. This choice subsequently eroded the human rights component from the official policy, overcommitted the government financially, and frustrated the cooperation with private sector and civil society. The imperatives of "African Renaissance" reframed the HIV/AIDS epidemic as a local developmental problem. As a result, the Cabinet supported substandard biomedical treatments and indigenous healing practices, consistently resisted the universal and free rollout of treatment in order to avoid the undesirable governmental expenditures and redistributive strategies. In both countries, these policy choices resulted in the adverse consequences for public health and prompted a protracted contestation among various state and non-state actors around the principles of the desired public health policies.

TREATMENT AS A COMMON GOOD:
ADOPTING HIV/AIDS POLICY IN RUSSIA
AND SOUTH AFRICA, 1999-2008

By
Vlad Kravtsov

MA, Syracuse University, 2005
BA, Russian State University for the Humanities, 1999

DISSERTATION

Submitted in partial fulfillment of the requirements
for the Doctor of Philosophy degree in Political Science
in the Department of Political Science
Maxwell School of Citizenship and Public Affairs
Syracuse University, Syracuse, NY 13244

May 2011

Copyright 2011 Vlad Kravtsov

CONTENTS

Contents	vi
Acknowledgments.....	vi
List of Acronyms	vi
Chapter 1. Introduction	1
Argument in brief.....	6
Why HIV/AIDS?	12
Social purpose: a brief discussion	19
Social purpose as a concept.....	19
Social purpose as an explanation.....	23
Social purpose and constructivism	29
Social purpose and identity	34
A further look at cases and comparisons	36
Dissertation structure (The rest of the argument)	42
Chapter 2. International policy initiatives against HIV/AIDS: operationalizing the consensus.....	50
Treatment.....	52
Indicator 1a: The pandemic as a public health crisis	53
Indicator 1b: Standardized protocol in treatment	59
Indicator 1c: Check on prices and the availability of generics	68
Universality.....	73
Indicator 2a: Providing ARVs to key vulnerable groups	74
Indicator 2b: Scaling up as a proxy for universality	81
Indicator 2c: Treatment as an integral part of prevention	85
Partnerships.....	89
Indicator 3a: Public-private partnership	90
Indicator 3b: Partnerships with international health organizations	94
Indicator 3c: Partnership with civil society sector.....	99
Conclusion	104
Chapter 3. Social purpose: a framework of analysis	106

Muddling through the core debates	108
Discourse and oversocialization	109
Agency and intentionality	115
The framework of analysis	120
Social purpose and elite's commitments	123
Social purpose and its public legitimacy	130
Social purpose and public culture.....	138
The effects of social purpose on public policy	147
Conclusion	153
Chapter 4. Social purpose in Russia (Sovereign democracy)	155
Elite's commitment to Sovereign Democracy	157
Strong state as an ultimate political value	163
State-led development.....	168
Great power in the multipolar world	175
Sovereign Democracy and its public legitimacy	179
Strong state as an ultimate political value	184
State-led development.....	190
Great power in the multipolar world	195
Sovereign Democracy in collective articulations	201
Strong state as an ultimate political value	206
State-led development.....	210
Great power in the multipolar world	216
Conclusion: Ranking national purpose.....	218
Chapter 5. Social purpose in South Africa (African Renaissance)	219
Elite's commitment to African Renaissance.....	222
Indigenusness: return to the roots.....	227
Marketization as the economic empowerment	231
Ubuntu in the context of globalization	235
African renaissance and its public legitimacy	239
Indigenusness: return to the roots.....	245
Marketization as the economic empowerment	249

Ubuntu in the context of globalization	253
African Renaissance in collective articulations	257
Indigenusness: return to the roots	261
The vices of marketization in South African writing.....	266
Ubuntu in the context of globalization	269
Conclusion: Ranking national purpose.....	276
Chapter 6. HIV/AIDS policy in Russia	278
Treatment	280
Indicator 1a: Epidemic in the context of state weakness	280
Indicator 1b: Standardized protocol in treatment	286
Indicator 1c: Check on prices and the availability of generics	293
Universality.....	297
Indicator 2a: Providing the ARVs to key vulnerable groups	297
Indicator 2b: Scaling up as a proxy for universality	304
Indicator 2c: Treatment as an integral part of prevention	308
Partnerships.....	311
Indicator 3a: Public-private partnerships.....	311
Indicator 3b: Partnerships with international health organizations	316
Indicator 3c: Partnership with civil society sector.....	319
Conclusion	327
Chapter 7. HIV/AIDS policy in South Africa	331
Treatment.....	333
Indicator 1a: Common epidemiology in understanding the pandemic	333
Indicator 1b: Standardized protocol in treatment	339
Indicator 1c: Check on prices and availability of generics	346
Universality.....	352
Indicator 2a: Providing ARVs to key vulnerable groups.....	353
Indicator 2b: Scaling up as a proxy for universality	356
Indicator 2c: Treatment as an integral part of prevention	361
Partnerships.....	365
Indicator 3a: Public-private partnerships.....	365

Indicator 3b: Aid and expertise of international health organizations	371
Indicator 3c: Partnership with civil society sector	376
Conclusion	383
Chapter 8. Placing social purpose in the context of relevant literature	387
Explanation 1: Learning	390
A standard account of learning	390
Learning in South Africa	396
Learning in Russia	401
Explanation 2: Coalition-building	406
A standard account of coalition-building	406
Coalition-building in South Africa	410
Coalition-building in Russia	417
Explanation 3: External pressures	423
A standard account of external pressures	423
External pressures in South Africa	427
External pressures in Russia	431
Conclusion	434
Chapter 9. Conclusion	437
Bringing social purpose into effect	440
The effects of social purpose on public policy	444
The effects of social purpose on policy transfer	453
Empirical summary of HIV/AIDS policies	457
Feedback loops and implications	464
Conclusion	466
Bibliography	468
Appendix	487
Table 1.1 Variables and cases	487
Table 1.2 The HIV/AIDS policy baseline indicators	488
Table 1.3 Summary of comparisons and explanations	489
Table 1.3 Summary of comparisons and explanations, continued	491
Table 2.1: Global policy consensus on HIV/AIDS	493

Table 3.1 National purpose in Russia and South Africa	494
Figure 3.1: Major processes in social purpose.....	495
Table 3.2 Ranking social purpose	496
Table 4.1 Indicators of national purpose	498
Table 5.1 Indicators of national purpose	498
Table 6.1: Summary of the HIV/AIDS policy in Russia	499
Table 6.3: Summary of the impact of national purpose on HIV/AIDS policy	500
Table 7.1: Summary of the ARV policy in RSA, 2000—2008.....	501
Table 7.3: Summary of the impact of national purpose on HIV/AIDS policy	502
Table 8.1: Summary of the relationship between variables & explanations	503
VITA.....	504

ACKNOWLEDGMENTS

This dissertation is a result of a long journey, both academic and personal. It would not have been possible without the dependable support of my advisor Audie Klotz. She has remained intellectually stimulating and morally encouraging from the very inception of this project to its defense. She has been always willing to lend a hand when the existence of the project was in the danger of neglect. I am also very grateful for her role as an academic norm-giver. Over the years I benefited from Brian Taylor's sharp comments, insightful (but not deconstructive) criticism, and prolific marginalia. His guidance improved the worth of my manuscript and profoundly influenced the way I think about Russian politics. Hongying Wang, Mark Rupert, Michael Bosia worked hard with me to see the tangible results of my research and evaluated a final product. I thank Andrew London for chairing my defense and showing me that the findings of this project might be relevant for and benefit from other social sciences. Learning from every one of these scholars was indispensable in finding my own academic voice and adopting better research and presentational practices.

I am pleased to belong to the group of young scholars that includes Asli Ilgit, Deepa Prakash, Chan Woong Shin, Jooyoun Lee,

Eric Rittenger, and Braden Smith, to name a few. We all share a passion for politics and identity, and take pleasure in making sophisticated claims. During our meetings the half-baked iterations of this project were steadily coming to completion. I am well hoping our conversations will go on, as we still have to learn a lot about ourselves and the Other.

Throughout many years, I was lucky to meet many incredible people who shared my graduate life at Syracuse: Zurab Amiranashvili, Nadine Georgel, Angela Fitzpatrick, Hector Ortiz, Heather Pincock, John Ruman, Ebrahim Soltani, and Matt Walton. Sometimes purposefully and sometimes unknowingly, they mitigated many unexpected disappointments and the stress of writing. I am grateful for Julia, who introduced me to the Syracuse life outside the academic walls and has remained my cross-country guide since.

The earliest phase of this project goes well beyond the Maxwell School. I thank Matthew Hoffmann, Marian Palley and Mark Miller for reading and commenting on my first timid incursions in the politics of HIV/AIDS. My study with them at the University of Delaware was a remarkable moment to cement my interest in health politics and constructivism. The deeper genealogy of this dissertation and the decision to pursue the doctoral degree in American academia can be traced back to numerous conversations with Roger Coate, Jim

Rosenau, Tim Shaw, Mihály Simai, and Don Puchala during informal summer evenings in Budapest. Coate argued that exploring the politics of HIV/AIDS was worthwhile. Having completed this project, I am inclined to agree with him. Last but not least, I greatly acknowledge the support from Chris Jones, who let me teach the graduate seminar in global health at the Northern Illinois University. During this seminar I tried to infect my students with the importance of studying health politics. While many people contributed to my work, the inevitable mistakes are of my own. It is a truly remarkable moment for me to have this dissertation finished. It would have been even more impressive for my grandfather, to whom I dedicate it.

A note is on transliteration. I chose to use the United States Board on Geographic Names and the Permanent Committee on Geographical Names for British Official Use (BGN/PCGN). This system provides relatively simple way for transliterating Russian into the Latin alphabet. It eschews creating special letters to represent distinct Russian sounds and thus is intuitive to read and pronounce. In my footnotes I follow this system thoroughly, while in the main body of the dissertation I often resort to more simplified or conventionally accepted Romanization of Russian names and surnames. A final note is on the organization of my references. In my bibliography at the end of the work I collect only the most important documents, books, and

articles, written both by academics and practitioners. The footnotes reference mostly the newspaper entries and reports from Russia and South Africa--the data I use for discourse and AIDS policy analyses.

LIST OF ACRONYMS

3TC	lamivudine
AAI	Accelerate Access Initiative
ABC	Abstain, Be Faithful, use Condoms
ACT UP	American Coalition to Unleash Power
AFEW	AIDS Foundation East-West (Netherlands)
AFSC	American Friend Service Committee
AHCS	African Health Care Systems Research Network
AIDS	Acquired Immunodeficiency Syndrome
AMREF	African Medical and Research Foundation
ARVs	antiretrovirals
ASOs	AIDS-service organizations
ATMs	African traditional medicines
AZT	azidothymidine (antiretroviral drug)
BITM	Belgium Institute of Tropical Medicine
CAMH	Conference of African Ministers of Health 3rd Ordinary Session of the Conference of African
CAMH3	Ministers of Health
CDC	Center for Disease Control
CDER	Center for Drug Evaluation and Research
CEE	Central and Eastern European
CGD	Center for Global Development
CIS	Commonwealth of Independent States
CIU	Coordination and Implementation Unit (SA) Council for the Implementation of National Priority
CNPPDP	Projects and Demographic Politics
Contralesa	Congress of Traditional Leaders of South Africa

COSATU	Congress of South African Trade Unions
CPRF	Communist Party of the Russian Federation
CPT	Consumer Project on Technology
CSIS	Center of Strategic and International Studies (USA)
CSO	Civil Society Organization
CSSR	The Centre for Social Science (RSA)
DST	Department of Science and Technology (RSA)
	European Centre for Disease Prevention and
ECDC	Control
EECAAC	Eastern Europe and Central Asia AIDS Conferences
ER	United Russia (Yedinaya Rossiya)
FDCs	fixed-dose combinations
	Foundation for Effective Politics (Fond Effectivnoy
FEP	Politiki)
FMBA	Federal Medico-Biological Agency
	The Federal Drug Control Service of the Russian
FSKN	Federation
GAI	Global AIDS Initiative (US)
GAK	State Anti-Narcotic Committee
GAP	Global AIDS Programme (WHO)
	Global Business Coalition on HIV/AIDS,
GBC	Tuberculosis and Malaria
	Global Fund against AIDS, Tuberculosis and
GFATM	Malaria
GRID	gay-related immune deficiency
GSK	GlaxoWellcome (GlaxoSmithKline)
HAART	highly active anti-retroviral therapy
HIV	human immunodeficiency virus
HRW	Human Rights Watch

IAC	International AIDS Conferences International Council of AIDS Service Organizations
ICASO	International Federation of Pharmaceutical Manufacturers
IFPMA	intergovernmental organization
IGO	indigenous knowledge system
IKS	Institute to Social Planning (Institut Obshestvennogo Proektirovanija)
INOP	Institute of Contemporary Development
INSOR	International Treatment Preparedness Coalition
ITPC	Joint Civil Society Monitoring Forum
JCSMF	Kaiser Family Foundation
KFF	KwaZulu-Natal
KZN	Liberal-Democratic Party of Russia The League of Red Cross and Red Crescent Societies
LDPR	medically assisted therapy
LRCRCS	Medicines Control Council (RSA)
MAT	Millennium Development Goals
MCC	Member of Executive Council (South Africa) Ministry of Economic Development of the Russian Federation
MDGs	Ministry of Industry and Trade of the Russian Federation
MEC	Médecins sans Frontières
Mineconomrazvitija	Marie Stopes International
Minpromtorg	mother to child transmission prevention
MSF	Manto Tshabalala-Msimang
MSI	
MTCTP	
MTM	

NACOSA	National AIDS Coordinating Committee of South Africa
NAP	National AIDS Plan (South Africa)
NAPWA	National Director of National Association of People Living with AIDS
NASA	National AIDS Spending Assessment
NEDLAC	National Economic Development and Labour Council
NEPAD	New Economic Partnership for African Development
NGO	Nongovernmental Organization
NIH	National Institute of Health
NPPs	National Priority Projects
NRCATM	National Reference Centre for African Traditional Medicines
NRF	National Research Foundation
NSP	needle and syringe exchange programs
NVP	nevirapine
OHI	Open Health Institute (Russia)
OST	opioid substitution therapy
OVC	orphans and vulnerable children
PAIID	Pan-African Infrastructure Investment Fund
PCAS	Policy Coordination and Advisory Service (SA)
PEPFAR	President's Emergency Plan for AIDS Relief
PHATAM	Pan-African HIV/AIDS Treatment Access Movement
PhRMA	Pharmaceutical Researchers and Manufacturers of America
PSI	Population Services International

PSU	Presidential Support Unit (SA)
PWG	Global HIV Prevention Working Group
RF	Russian Federation
Rosminzdrav	The Ministry of Health and Social Development of the Russian Federation
Rospotrebnadzor	Federal Service on Customers' Rights Protection and Human Well-being Surveillance
Rostechnologii	Russian Technologies State Corporation
Roszdravnadzor	Federal Service on Surveillance in Health Care and Social Development
RSA	Republic of South Africa
RSPP	Russian Union of Industrialists and Entrepreneurs
RUSNANO (Rosnano)	Russian Corporation of Nanotechnologies
SADC	Southern African Development Community
SAHR	South African Health Review
SANAC	South African National AIDS Council
SANCO	South African National Civil Organization
SANGOCO	South African National NGO Coalition
SARPN	Southern African Regional Poverty Network
SCMS	Supply Chain Managements System
SEP	syringe exchange programs
SSA	Sub-Saharan Africa
TAC	Treatment Action Campaign
TAP	Treatment Acceleration Project
THO	Traditional Healers Organisation of South Africa
TPAA	Transatlantic Partners against AIDS
UNAIDS	Joint United Nations Programme on HIV and AIDS
UNGASS	United Nations General Assembly Special Session

USAID	The United States Agency for International Development
VCIOM	Russian Public Opinion Research Center
WHO	World Health Organisation
WIPO	World Intellectual Property Organization
WTO	World Trade Organization
ZDV	zidovudine

CHAPTER 1. INTRODUCTION

In the early 2000s international journalists and academics exposed South African HIV/AIDS policy to the international audiences. They put forth evidence that President Thabo Mbeki questioned the relation between the human immunodeficiency virus and the acquired syndrome of opportunistic diseases, as well as evaded rolling out almost universally adopted life-saving antiretroviral treatment therapy. These actions went against the key recommendations and guidelines of the core international health actors, including the World Health Organization and the professional health care community. While this critical exposure proved to be eye-grabbing, many outside observers remained puzzled why Mbeki chose to pursue these counter-intuitive and, as it turned out later, disastrous policies. Mass media and general public reasoned that it must have been Mbeki's complex personality and leadership style that could explain what at the time was going on in South Africa. This major theme took on many variations. Critically-minded scholars and political observers underscored Mbeki's personal contrarian streak with a taste of going against the prevailing notions and ideas, his injudicious use of internet resources of dubious expertise, and his beliefs in conspiracies surrounding contemporary

South Africa. Health policy scholars and domestic treatment activists kept raising the degree of an outrage, if not an undiluted hatred, to the president and his policies.

Mbeki's supporters continued perceiving him as a brilliant political leader, committed to the intellectual sophistication and always making a thoughtful analysis of complex issues a case in point while crafting domestic policies. In their eyes, President's health policymaking amply confirmed his reputation of an independent thinker in a search of sensitive, innovative, and unorthodox health policies, all breaking the western monopoly on scientific truth. In 2007 Ronald Suresh Roberts offered a book-length justification of this approach. In this book Roberts reinvented the President as a very insightful politician, whose complex sensibilities and intricate policymaking are bound to be misunderstood. Mbeki is indeed a person of many colors: his stress on the African return to the roots does not preclude him from including the profusely long quotes from the assorted Victorian poets in his political speeches and having his wardrobe stocked with the standard British business suites. Thus, there always will be some confusion, about who the "enigmatic" Mr. Mbeki truly was.

I agree that Mbeki contributed to the country's inconsistency with international best practices. At the same time, I assert that the unqualified stress on his personality as a key explanatory factor simplifies and obscures a more complex story of HIV/AIDS policy in South Africa. Indeed, Mbeki's specific policy blunders included his public denial of the causal links between the HIV and AIDS and an overt courting of AIDS dissidents. Yet other persistent deviations from the international consensus originated and evolved beyond the scope of his direct control. Local healers offered various alternative medications, indigenous concoctions, and dietary supplements. Provincial-level health administrators kept restricting the use of the antiretroviral therapy, in several cases refusing to prescribe it. Generally, "[a] persistent tolerance or even acceptance of heterodox view of HIV and AIDS among the party's leadership"¹ complicated bringing domestic practices in consistency with the global prescriptions.

Even the sharp turnaround in the top political leadership in 2008 did not imply that all the tribulations with South African health policy would be over for good. Two years after Mbeki's ousting, a prominent treatment activist Nathan Gaffen warned that South African

¹ Lieberman 2009: 140

policies were still sidetracked from the international best practices.²

The following presidents Kgalema Motlanthe and Jacob Zuma understandably distanced themselves from Mbeki's health policies and appeared to be more in a policy mainstream. On the other hand, Zuma's prior policymaking and influence on AIDS policy had been far from exemplary. For instance, while Zuma served as a head of the South African National AIDS Council (SANAC), this organization turned into a rubber-stamp institution and defied its own purpose. Zuma personally put together a colorful performance in front of the Union Building, during which the HIV-infected teenagers cheerfully claimed that despite their seropositive status, they had been healthy, happy, and productive. This performance intended to lure those members of the parliament, who, like Barbara Hogan and Pregs Govender, expressed distrust in the official health policy. While defending himself against the rape charges, Zuma offered highly controversial insights about his particular choices in preventing from getting infected with HIV. This blunder prompted a famous South African cartoonist Zapiro to draw Zuma's satirical character with a showerhead protruding from his cranium.

Mbeki, of course, is not the only leader who heavily influenced domestic health policies. George Bush, Kofi Annan, Yoweri

² See Gaffen 2010

Museveni, Fernando Henrique Cardoso, Lula da Silva, and Vladimir Putin put their stamp on the HIV/AIDS campaigns and initiatives in a variety of ways. Yet, as Evan Lieberman insightfully observed, we often tend to attribute the success and failure in HIV/AIDS policies to those individuals, whose “presidencies postdated aggressive action on HIV/AIDS.”³ Thus, attributing the development (or stagnation) of national HIV/AIDS policies to leadership as primary explanatory variable is not always warranted. Simply put, pointing fingers at some leaders’ policy triumphs, failures, mistakes, or breakthroughs is not a compelling explanation.

If not solely individual and personal, what factors drove these strange approaches to a seemingly straightforward and technical HIV/AIDS policy as promoted by various international agencies? A broad range of variables can feasibly appear on the list of potential explanations. The legacies of the apartheid, the rise of neoliberal governmentality, the lack of proper disease identification and statistical data, the overwhelming burden of other problems, and simply the lack of health care professionals could feasibly contribute to the state’s inability to respond to the epidemic in accordance with the international recommendations. Not surprisingly, many policy articles and edited volumes either blend all these variables into a single

³ Lieberman 2009: 140

explanation, or toil to sort out their distinct effects on the HIV/AIDS policy.⁴ In order not to get lost in the gamut of all these accounts, it is useful to take a step back and remind ourselves that HIV/AIDS goes well beyond any ordinary health crisis. The scope and nature of threat pushes domestic elites to realize that the physical survival of population as well as the future of the state as autonomous political organization are at stake. In this context, curbing HIV/AIDS becomes a question of “ontological security.” This demands that elites view what needs to be done to curb HIV/AIDS from the vantage point of their conception of common good. Moreover, from an outset of my research, I observed that that in South African the resistance to the core international HIV/AIDS guidelines happened during the time when the country’s political and cultural elite actively sought to find, or build, a new social purpose – a conception of common good served by the post-apartheid state. This project examines whether or not this plausible connection indeed should be considered as an explanation for cross-national variation of HIV/AIDS policies.

ARGUMENT IN BRIEF

⁴ For a recent example of an eclectic approach, see Ndinga-Muvumba and Pharaoh 2008.

My dissertation contributes to the study of deep-seated and socially legitimate conception of common good served by state (e.g. “social purpose”), examining its effects on the content of national responses to policy crises, such as rapid spread of emerging infectious diseases. Domestic policy-makers (the extant elite in-group) may interpret the crucial questions of public policy through the conceptual lenses of the common good they embody. Providing common good means to address such core policy issues as how to frame the provision of a particular public good, which populations should benefit or be excluded from the consumption of public good, and who gets to participate in shaping the policy. The strong societal agreement about conception of common good can potentially shape the overall domestic policy environment and even dominate it. In this case wider audiences are likely to perceive and support the official policies as inherently unproblematic. In terms of theoretical development, today we have an insightful literature to build on, especially the work of John Gerard Ruggie, Christian Reus-Smit, and Rawi Abdelal.⁵

Today intergovernmental organizations and professional health community play increasingly important role in formulating sophisticated policies, providing expertise and service. In this context,

⁵ Abdelal and Ruggie 2009: 151; Johnston 2005: 1032-1033; Abdelal 2001: 1; see also Reus-Smit 1999: 31; Ruggie 1982: 198.

international prescriptions become almost universally recognized as instrumental to improve domestic policies, including public health. Under certain circumstances this can lead to policy convergence.⁶ Under a different set of circumstances, a strong domestic commitment to the particular conceptions of common good might politicize international public policy, or even become hostile to it. In this research project I examine how, why and with what consequences social purpose affected domestic adoption of the external best case practices, guidelines, and recommendations. Answering this question is helpful to explain variation in cross-national responses to the emerging infectious diseases, otherwise attributed to a plurality of situational and individual-level factors. In this dissertation I use the metaphor of “filtering” which indicates the domestic selection of and change in the internationally prescribed substantive components of the health policy. Rather than testing a set of particular hypotheses this project endeavors to document and map out various ways how social purpose factors in the provision of public good to be delivered in the domestic arenas. Ascertaining the explanatory power of social purpose is relevant not only to explain the kinds of actions the existing elite (in-group) considers appropriate, but also to take stock of the

⁶ On the policy convergence thesis, see Drezner 2001. On the production of global public goods at transnational arena, see Ruggie 2004.

broader policy environment which this conception of social purpose underpins.

Why HIV/AIDS? Presumably there are several policy issue-areas which might be profoundly influenced by intervening social purpose. First, HIV/AIDS is a very special case. It is argued here that the spread of HIV/AIDS threatens the very existence of the state, the physical survival of their populations, and inhibits necessary prerequisites for general well-being. All this makes the antiretroviral treatment a fundamental common good, providing which is likely to be mediated by the broader country-contingent conceptions of common good as expressed in elite's political obligations and legitimized among wider public. Today very few political leaders would deny that curbing HIV/AIDS is connected to some broader political, economic, and cultural concerns.

Second, there are clear international policy guidelines and set of international best practices, which allow us to establish how HIV/AIDS policy should look like domestically. Breaking down the general HIV/AIDS policy in a set of core components and indicators allows to increase the number of observations and make more detailed claims about the impact of social purpose on the health policy as transferred into domestic political contexts. The international

consensus urges domestic political leaders to provide a particular biomedical solution (Highly Active Anti-Retroviral Therapy, HAART, most commonly referred to as antiretrovirals—ARVs), to commit to the principle of universality of access that everybody should benefit from the consumption of public good, and to ensure a meaningful inclusion of international actors, private sector, and civil society for a mutual productive improvement of the public policy. All these components either in combination, or individually, may turn the global consensus is a potentially contested policy, and may result in observable policy variations at cross-national level.

To evaluate these ideas, my dissertation empirically examines how, why and with what consequences the strong commitment to the newly emerging social purpose in Russia and South Africa politicized and sometimes challenged the external best case practices, guidelines, and recommendations in regard to the HIV/AIDS treatment (antiretroviral therapy). My argument proceeds in several steps. First, I trace how major international health, developmental, and financial organizations came to envision the HIV/AIDS treatment as a fundamental common good to be provided by states. I document the key components of this vision and devise a set of indicators operationalizing the global HIV/AIDS consensus (independent

variable). Second, my dissertation offers a generalizable model of social purpose (intervening variable), traces how domestic political elites constructed their conception of common good and made it attractive to wider audiences to influence domestic policy environment. Third, utilizing a previously devised set of indicators of global health policy, I design a structured, focused comparison of the domestic HIV/AIDS policy responses in Russia and South Africa (dependent variable). I demonstrate how governments in both states changed the content of the prescribed international policy in accordance with the socially legitimate conception of common good as embraced by political elites and accepted among wider audiences. Fourth, in my concluding chapters I sharpen my theoretical focus by locating social purpose into three causal mechanisms of policy transfer and summarize the effects of social purpose on public health policy. External influences, coalition-building and learning each have strong explanatory logic of how external prescription of change and innovation are adopted domestically to solve local problems. I assert that the strength and consistency in political elites' commitment to the formulated social purpose may alter or sharpen the theoretical predictions of policy transfer, otherwise being viable baseline explanations for transformation of the international policy in domestic politics.

My empirical findings strongly suggest that in responding to the domestic epidemic of HIV/AIDS the key decision-makers in both countries have significantly transformed the international standardized policy prescriptions to the pandemic in accordance with the social purpose's content. Rather than treating the epidemic as a pressing public health issue, Russia's Sovereign Democracy prompted the government to respond to the domestic epidemic as the issue of demographic survival. The imperatives of African Renaissance reframed the HIV/AIDS epidemic as an African developmental problem to be best addressed by African solutions. In both countries, these policy choices resulted in the adverse consequences for public health and prompted a protracted contestation among various state and non-state actors around the principles of the desired public health policies. While I am not claiming that social purpose to be treated as the single explanation of the variation in national responses to the emerging infectious diseases, on balance it tells us an important and previously overlooked story about the political determinants of domestic policy responses.

Table 1.1 Variables and cases

WHY HIV/AIDS?

The global spread of HIV/AIDS raised pivotal concerns about how to control the epidemic both at international and domestic levels. The baseline consensual policy measure revolves around the provision of anti-retroviral therapy, which international actors came to understand as a common good. More specifically, the global consensus indicated governmental responsibility to provide the antiretroviral treatment, ensure the universality of access, and bring all relevant stakeholders in the policy-making process. Antiretrovirals or ARVs is a blanket name for different combination of drugs and therapeutic cocktails. In this study the global consensus on the HIV/AIDS treatment policy is the independent variable, which is disaggregated into set of three general components and nine more specific policy indicators (listed in Table 1.2). From the empirical standpoint, my dissertation contributes to the current debates about the cross-national variation in responses to the emerging infectious diseases in the context of health crises, which transcend boundary, authority, and capacity of nation-states. In this section I briefly operationalize international consensus on the HIV/AIDS policy and spell out how it compares to domestic variation of HIV/AIDS policy in Russian and South African public policies. At this point I do not discuss how and why the domestic conceptions of common good factor in domestic health policy variations.

The stress on universal treatment and health as a fundamental human right followed the Alma-Ata spirit, yet was undermined by the lack of effective biomedical solutions.⁷ The invention of Highly Active Antiretroviral Treatment (HAART) in 1996 stimulated the international consensus on HIV/AIDS treatment as a common good. Although curbing AIDS obviously requires a variety of health interventions, the biomedical solution is a necessity in order to have a set of policy initiatives with tangible indicators of success. The lessening prices of life-saving medications reinforced the importance of ARVs as a consensual biomedical intervention. The dropping costs of treatment made it possible to provide treatment almost universally, without resorting to any severe restrictive measures. The simplicity of the fixed-dose combination regimen made it relatively simple for governments to procure and distribute these drugs.⁸ It also enabled international health bodies to provide the uniform technical expertise and advice. Simultaneously, the new generation of AIDS organizations began assisting countries with limited resources to provide treatment and motivating them. Thus, the biomedical innovation of 1996 flagged the emergence of ARVs as a key policy solution, conjoined with the

⁷ On the Alma-Ata Declaration, see WHO 1978; Hall and Taylor 2003; Joy, Rohde, Rik, Were, Paul, and Chopra 2008. For the broad overview of the evolution of the international health regulations, see Fidler 2005.

⁸ On the discovery of the retrovirus, see Nichols 1989: 59—73; on the history of the discovery of drug and clinical trials, see Epstein 1996: 181—208.

stress on the universality of access to treatment, and necessitated the involvement of all the relevant stakeholders in formulating and implementing the domestic policy. In other words, without the ARVs there is no clear policy baseline.

Breaking down the general HIV/AIDS policy realm in a set of components and indicators allows ascertaining how this policy looks like and what it is not supposed to be. The first core component of the international policy is to provide the antiretrovirals to mitigate a public health crisis. If policy-makers do not respond to HIV/AIDS crisis as a public health problem, they are likely to be at variance with the international vision of treatment as a particular public good.

Substituting or skewing basic policy response by giving a political priority to other issue-frames, such as demographic crisis, military security, human rights, poverty and inequality, property rights, is the first signal that the HIV/AIDS policy got invested with situational and local conceptions of common good. A strong adherence to any alternative issue-framing choices may potentially lead to further deviations from the international consensus, including a public denial of the epidemic, underscoring the uniqueness of the domestic characteristics of the epidemic (see Indicator 1a), attempts to enforce various substandard treatment protocols (see Indicator 1b), or simply

inaction in securing the price-saving generic pharmaceutical products (see Indicator 1c). Whether or not these alternate frames are “justified” to meet the specific conditions on the ground will be discussed later.

The second core component is the universality of access to treatment. It intends to stress both the moral imperative and economic cost-efficiency in providing access to ARVs to all the infected and vulnerable populations and thus reflects the notion that nobody should be intentionally excluded from the consumption of public good. Additionally, prioritizing the access to treatment even to the negatively constructed populations is cost-efficient as it lowers the virus transmission to the generalized population and thus will likely to diminish public health spending in the long run. At the face value, universality is very costly. Yet with the technological breakthroughs in biomedicines achieved in 1996 even a small increase of average yearly costs of treatment allowed to increase the number of treated patients significantly. Since the costs of treatment are becoming relatively low, scaling-up is attainable even in the countries with lower GDPs. The first potential challenge to the global policy consensus consists of policy-makers choosing to provide only a selective access to treatment, either excluding any vulnerable subpopulation or, in contrast, including any societal group at the expense of the others (see Indicator

2a). The second potential challenge is to resist “scaling up” (see Indicator 2b). Third, the notion of universality presumes that providing the access to treatment will go together with aggressive prevention campaigns. While the appropriate balance between these two health interventions has been long in the center of controversy, at this point suffice to say that prevention should not become a dominant substitute for the antiretroviral therapy, nor should it be completely ignored as irrelevant for curbing HIV/AIDS (see Indicator 2c).

The third core component of the internationally recommended policy is building partnerships between governments and all relevant stakeholders. The idea that the most effective health policy responses depend on inclusive participation in health policy formulation and implementation underpins this recommendation. This recommendation is especially relevant for the countries that either lack requisite financial and infrastructural capacities to curb the epidemic on their own, or require assistance to increase the capacity of public health care sector, institutionalize and routinize financial flows, or have to improve service quality and outreach. For the purposes of this dissertation, the group of relevant stakeholders is analytically divided to private sector, international organizations, and domestic civil society sector, including various issue-advocacy and health service

groups. When governments start selectively including or excluding certain stakeholder partners which get to participate in policy process, it signals that the international consensus on partnership becomes invested with situational and local characteristics.

From the health policy perspective, the described HIV/AIDS policy was desirable as it provided both international and domestic policy-makers with clear [technocratic] policy goals of how many people should receive treatment within certain time period, as well as straightforward guidelines what the standardized treatment protocol is and how to manage the logistical control of drugs.⁹ It was attainable because the post-1996 ARV treatment indeed proved to be very effective and increasingly cheaper a biomedical invention supported by some uniform biomedical expertise and in various forms sponsored by international health, financial, and developmental organizations and pharmaceutical sector, especially its generic-producing segment. Although international health community eventually elevated these three core policy components to a common intersubjectively held understanding, for a long time they were either actively contested, or simply ignored. In the second chapter I trace global convergence around HIV/AIDS as a specific public policy realm and discuss how the international actors set to agree on them. Despite some occasional

⁹ See, for instance, Rauner and Brandeau 2001; Schwartländer et al 2006.

relapses in observing the mainstream approach (for instance, protecting human rights and reintroduction of restrictive measures, such as travel bans for persons with HIV), governments commonly follow the global consensus. All this does not mean that the international consensus as I describe it here will remain intact forever, but it was clearly more or less attainable and desirable for the period I am interested in.

Table 1.2 The HIV/AIDS policy baseline indicators

SOCIAL PURPOSE: A BRIEF DISCUSSION

Social purpose as a concept

Social purpose is the core concept of this dissertation. I define social purpose as a socially legitimate and politically contingent conception of common good. Since the unit of analysis is nation-state, the adjectives “national” and “social” are used somewhat interchangeably. This definition builds on a conventional constructivist insight that no conception of common good can exist independently from political actors which develop and uphold it. Thus, the primary focus is on those social groups which are adequately positioned to develop politically meaningful conceptions of common good and can commit

significant amount of resources to act on it (domestic political elites). Committing to social purpose reaffirms elite's sense of self-efficacy and self-esteem; casting it as a necessary condition for the country's sustainability makes elites indispensable for the country's survival. On the other hand, not providing this common good might jeopardize their reputation and political survival. Of course, elites do not exist in a political and social vacuum: they are likely to face domestic actors which embrace alternative conceptions of common good. As the members of extant elite strongly attach the conception of common good to its own identity, reputation, sense of worthiness, and political fate, its opponents are most likely to be designated as the Other with a spate of negative characteristics attached. Since they challenge the advocated conception of common good, the Other is cast as undermining the country's political sustainability and survivability. Since social legitimacy of social purpose notably depends on its public acceptance, the further attention goes beyond the exclusive emphasis on elites (for details on three types of agency see Chapter 3). In sum, social purpose describes the broader interactive policy environment, through which the global flow of policy initiatives and recommendations is filtered.

Social purpose should not be confused with the notion of state ideology. Contrary to state ideology, social purpose does not exist independently from contesting political actors, their identities, and outside of the contending domestic discourses about common good. This also implies that its causal effects, while strong in the short-term, might be not lasting in the long haul. This explains why scholars and political observers who tried to “fit” Putin’s and Mbeki’s political regimes in the tenets of any universal ideology soon realized the futility of the task. These political leaders’ behavior and policy choices clearly fell outside the ideological divisions and were not informed by them without strong qualifications.

What elements count as substantive components comprising a social purpose in a given country, where do they come from, and how they become politically meaningful? The earlier (and perhaps still dominant) literature describes domestic elites’ political obligations as being attached to the value of the ethnic self. Thus, national purpose is equated with the goals of ethnic nationalism, i.e. “a principle which holds that the political and national unit should be congruent.”¹⁰ Another set of literature stipulated possibility that “the reasons that historical agents hold for organizing their political life into centralized,

¹⁰ Geller’s definition is cited by Hobsbawm 1990: 9. For an example of multiple studies of ethnonationalism, see the works of Smith (2004).

autonomous political units”¹¹ may go well beyond the value of maintaining an ethnic state. It indicates that specific goals for the nation can be attached to the self, which is a result of a more contingent political debate.¹² In South African context, for instance, the ruling elite (the African National Congress, ANC) maintained the inclusive South African identity, trying not to politicize it along the ethnic lines (although it was frequently viewed as the Xhosa-dominated). This dissertation follows the latter approach, as it allows registering wider variation in proposed national purposes, especially when politicization of ethnicity is not available for elites as a nation-building option due to complex ethnic composition.

The starting point of social purpose formation is the exogenous shock –the collapse of the previous political regime or the whole international system, sometimes aggravated by protracted transitional periods. During these transitional periods, political elites and smaller sub-national policy entrepreneurs (following Brudny, I define them as “articulated audiences”) embark on searching, formulating, and later disseminating a new conception of common good for the country. In Chapter 3 I discuss in greater details how to turn social purpose from a significantly underexplored factor to a

¹¹ Reus-Smit 1999: 31.

¹² Abdelal 2006: 698.

variable, which may potentially explain variation in the content of cross-national domestic responses to the international policy prescriptions. In the next section I give an overview of social purpose as an explanation.

Social purpose as an explanation

While finding core substantive components might be seen as relatively easy inductive work, other aspects of social purpose, including its explanatory power, are much less theorized and demonstrated.

Problems arise when scholars start making broad claims about social purpose's causal impact or its lack. The wide-spread research practice is the underspecified conjecturing about social purpose's impact on behavior.¹³ Often, studies cognizant of the problem of tautology remain somewhat indeterminate and evasive about making specific and falsifiable claims. This approach comes short of explicit discussion about causality, and merely chronicles the emergence of social purpose as an independent variable and its loose temporal connection to dependent variables (hence stress on conjecturing). Both in Russia and South Africa there are many specific public policies, which might have been profoundly influenced by the emerging social

¹³ See for instance, Hopf 2002, pp. 81–82; 209–210.

purpose. In Russia, for instance, its internal political commitment to reestablish the great power status stimulated its more assertive role in creating regional alliances to balance NATO, partnership with Iran in the nuclear sphere, and even a regional war with Georgia.¹⁴ In South African context, the elite's commitment to provide continental leadership was central in emergence of the New Economic Partnership for African Development (NEPAD). In the cases above social purpose remains compounded with the subsequent political choices, leaving almost no space for considering behavioral alternatives. Descriptively illustrative, this account can benefit from stronger research design.

First, examining the explanatory role of social has to keep social purpose and policy outcomes separate. To deal with these issues in this dissertation I start my work empirically examining how HIV/AIDS treatment policy looks without the impact of social purpose (at the international arena, see Chapter 2) and with such an impact (the structured focused comparison the domestic HIV/AIDS policies in two selected countries). In both countries social purpose was formulated separately from the international standardized recommendations about the HIV/AIDS treatment and for the most part prior to the policy entering domestic arenas. Therefore it is possible to separate social

¹⁴ See for instance, Leon Aron, *The Button and the Bear*, *American Enterprise Institute Outlook Series*, July 2009.

purpose as an intervening variable from its presence in the domestic policy of treatment as a dependent variable. Second, and more importantly, I demonstrate how distinct graspable substantive components of social purpose impact on the specific components and indicators of HIV/AIDS policy (my dependent variable in process of HIV/AIDS policy transfer). Thus, in general, doing so will enable us not only to claim, but to demonstrate and sort out the constitutive impact of social purpose on public policies. The summary of my empirical findings is given in the Table 1.3.

Second, examining the explanatory role of social has to capture variation in measuring (ranking) social purpose. In chapter 3 I delineate between absent, fractured, restrained, and consolidated rankings of social purpose. This ranking builds on Abdelal's insights that social purpose is has to be examined not only by revealing its content, but also by the degree of contestation around it. His National Purpose in the World Economy tentatively delineated between absence and presence of such political contestation.

Elites habitually legitimize a new social purpose by spreading the belief that country's political sustainability depends on providing it. In essence, this activity shapes domestic policy environment, making some policies to be held as "natural" and self-evident, while

alternative behavioral choices to be either delegitimized, not considered as viable alternative options, or even chastised as criminal among the wider audiences. As a result, for the political opponents of the extant elite it will be more difficult to effectively challenge and change the enacted public policies. At the same time, wider audiences might inherently disagree with the promoted conception of common good, but for a variety of reasons might conform to it and if chooses to dispute it publicly, does so in a very subdued manner. At the margins, other sub-elite groups and political parties keep advocating radically different set of political obligations, engrained in a different set of values.

Third, this study of social purpose directly responds to the current empirical debates (often very heated) whether or not the official formulation of social purposes is simply a public relations stunt, a strategic popular eye-grabbing device with a little real meaning beyond it. Even though the discourses of the African Renaissance and Sovereign democracy were deployed by key political leaders and their advisers, many observers remained very skeptical about whether these concepts had any profound policy implications. Peter Vale and Siphon Maseko, for instance, questioned African Renaissance impact on

public policy.¹⁵ Similarly, the liberal critics of Russia's current political regime flatly claimed that Sovereign Democracy was a thin veil over Putin's autocratic turn, institutional underdevelopment, clientelism, and corruption.¹⁶ In principle I agree that simply stating social purpose to be politically relevant is neither irrefutable, nor compelling a claim. In my empirical chapters I go into further details how and why social purpose is more than a mere propaganda.

Fourth, obviously many factors continue to inform and shape domestic HIV/AIDS politics. In Russian case, for instance, the issues of state capacity, state efficiency, and corruption might and do explain a lot. In Africa, these factors might include the incapacitating role of traditional patriarchy, the dependence on international financial resources, the lack of political and economic commitments, and the inability to design and implement long-term treatment and prevention programs.¹⁷ This list, of course, can be easily expanded to include many other regional and national factors. Since it is not easy to fold all these diverse factors into one explanation, the literature often questions whether a parsimonious explanation is warranted. A typical article from *Social Science and Medicine*, for example, evades generalizations and talks only about very specific variables even when

¹⁵ Vale and Maseko 2002.

¹⁶ See for instance, Mikhail Afanas'ev 2009: 12—14.

¹⁷ See, for instance, Patterson 2005

looking at the regional dimension of public health in general.¹⁸ The explanation offered in this dissertation seeks to overcome this limitation and cover previously overlooked domestic determinants of HIV/AIDS politics.

Finally, in terms of health policy, strong societal agreement about what constitutes the “common good” served by state (e.g., “social purpose”) under certain circumstances profoundly influences the overall domestic policy environment, which might politicize international public policy, or even become hostile to it. My core theoretical argument suggests that social purpose informs how domestic policy-makers evaluate the benefits of adopting international recommendations and underpins the kinds of actions domestic policy environments are likely to sanction. More specifically, it affects decisions how to frame the provision of a particular public good (treatment in the case of health policy), who should benefit or be excluded from the consumption of public good, and who gets to participate in shaping the policy. On balance, however, I do not claim that social purpose is superior to any other explanations of how, why and to what extent the global consensus on the HIV/AIDS policy was adopted in Russia and South Africa. In the relevant empirical chapters

¹⁸ See, for instance, Damme, Kober, and Kegels 2008; Yeboah 2007; Lidell et al 2005; Parkhurst and Lush 2004

I will briefly discuss which health policy indicators are not explained by social purpose and why.

Social purpose and constructivism

Since my research project sprung from the constructivist turn in International Relations, in this section I spell out how studying social purpose contributes to the [still] burgeoning literature on norm diffusion derived from constructivist international relations. In fact, social purpose is an interesting and underexplored dimension of identity. Probing it also contributes to our understanding of what constitutes domestic logic of appropriateness.

A significant portion of constructivist literature asserts that the process of norm diffusion in one way or another is driven by norm congruence. Different accounts explore building purposeful norm congruence by means of framing, evoking prior similar norms, as well as grafting, pruning, and transplantation.¹⁹ Intentional and purposeful match-making, captured in these gardening metaphors, may lead to either radical, or partial local norm displacement. In turn, normative clash, if not alleviated, can lead to domestic opposition to an international norm. Amitav Acharya called attention to the so-called

¹⁹ Here I do not discuss arguments about cultural proximity in general.

“localization,” a process of an active reconstruction of a foreign norm to meet domestic standards, which are part of legitimate domestic order: “... processes of reconstitution to make an outside norm congruent with a preexisting local normative order... in which some key characteristics of the preexisting normative order are retained rather than displaced wholesale.”²⁰ Yet as Ted Hopf correctly indicates, making claims about normative congruence or mismatch requires a solid theory about what constitutes the domestic appropriateness and why.²¹ Without this theorizing, it would be tempting to select on dependent variable and simply “assign” some domestic political, economic, or social circumstances as the factors determining this appropriateness. In addressing this analytical gap, the examination of social purpose helps establishing what constitutes the legitimate social order in a given polity and provides the framework of cross-national and cross-regional comparisons. More specifically, it gives us conceptual lenses to answer two interrelated questions. First, what specific set of specific obligations in providing common good elites uphold as the core political and social values, i.e., it specifies what normative features which reconstitute a foreign norm. Second, to what degree there is a societal consensus (measured via ranking social

²⁰ Acharya 2004: 244, 247.

²¹ Hopf 2002: pp.

purpose) and how deeply it is embedded in the collective articulations. Thus, the examination of social purpose helps ascertaining what constitutes general domestic appropriateness, which under different conditions may frustrate or facilitate norm diffusion.

Another broad strand of constructivist research on international norms broadly indicated that bringing domestic norms and policies in consistence with international prescriptions is linked to domestic actors' identity.²² Michael Zürn and Jeffrey Checkel, for instance, noted that identity can either facilitate norm diffusion, or hinder it.²³ Yet, in the same International Organization volume, Alastair Iain Johnston admitted that identity remained too blunt of an instrument and was often used to make sweeping claims without specifying the concrete ways how identity can make a difference.²⁴ In general, it is feasible that external norms, policies, and policy recommendations are strongly associated with the political imagery of the Other, are less likely to be adopted at the domestic level. In this context, we may conjecture that identity as an intervening or explanatory variable can filter international norms, providing a political rationale to challenge, resist, cherry-pick, or adopt some best case practices if compatible with it.

²² Checkel 2001: 557, 565.

²³ Zürn and Checkel 2005: 1045–1079

²⁴ Johnston 2005: 1033.

Acharya started exploring this relation in greater depth, noting that for successful norm diffusion “[t]here must be willing and credible local actors (insider proponents). These actors should not be seen as “stooges” of outside forces.”²⁵ This analysis definitely invites us to think about the impact of self-Other dichotomy on the process of norm diffusion. The question persists: How, why and to what extent some domestic proponents of change are viewed as foreign-inspired Others, while other actors that pursue policy change are received more favorably? Moreover, in his model local elites become active borrowers of foreign ideas and norms in order to fulfill the domestic demand of boosting legitimacy. But are domestic political elites always likely to be unconditionally supported when they pursue this kind of change? In other words, the question here is about the determinants of domestic actors getting treated and publicly perceived as either the credible upholders of local values and identity, or as “agents” of outside forces. As the notion of social purpose in large part is based on the political imagery of who the contending political actors are (see the previous section), I assert that domestic self-Other dichotomy generated by social purpose can be helpful in providing an analytical, rather than purely empirical, response to the question how,

²⁵ Acharya 2004: 251.

why and to what extent identity might factor in norm diffusion processes.

Another version of self-Other dichotomy is implicit in the socialization research program. Socialization is a compliance with outside norms in the context when entering international political communities, intergovernmental institutions, or a new regulative regime is highly desirable.²⁶ In essence, socialization is an ideal case-scenario, when domestic actors take legitimacy of international norms and practices as granted and start emulating them instantly.²⁷ This analysis was exceptionally successful in empirically explaining how and why Central and Eastern European (CEE) countries eventually adopted the European Union's policies in the process of democratic transition, as they envisioned themselves as a part of European self.

While it is conceivable that CEE would not see its principal norm-giver as the Other, it is less likely, first, that regional hegemon can find an external Self with the same ease. Here I argue that studying social purpose (as a promising dimension of identity) can potentially explain global or regional leaders' behavior in regard to taking external norms. Second, this explanation has a hard time capturing the

²⁶ For recent examples, see Schimmelfennig 2001; Suzuki 2005; Zürn and Checkel 2005: 1046.

²⁷ For the summary of different models of socialization processes, see Zürn and Checkel 2005: 1050.

potential dual role of domestic leaders as both norm-givers and norm-takers. This explanation generally tends to gloss over the relationship between multiple domestic agents of change and may overlook broader political processes behind multiple entrepreneurs struggle to spread their interpretation of norm.

Social purpose and identity

It can be argued that social purpose in fact is an interesting and underexplored dimension of identity, as well as the determinant of the domestic logic of appropriateness. My theoretical analysis of social purpose builds on a conventional constructivist insight that no conception of common good can exist independently from domestic political actors. Thus social purpose is likely to be based on the political imagery of who the contending political actors are. When actors strongly define themselves through their commitment to common good, they also compete with other groups promoting different conception of common good. This generates self-Other dichotomies, which can be found in the discursive formations.

My presentation here overcomes still existing tendency to essentialize and reify identity. For example, preexisting patriarchal gender norms, intolerance to religious adherence, or xenophobia to

migrants in host societies may be considered to imply inherent identity positions with fundamental and universally recurring political implications. My theoretical and empirical analysis, on the contrary, presents identity as politically contingent way for domestic elites to assert their self-efficacy and self-esteem through their commitment to common good, which later may or may not strongly inform domestic policy choices.

On the other hand, many previous accounts of identity generated sometimes intuitive, sometimes almost trivial findings. It is not (or should not be) surprising, for example, that negatively constructed target populations would fight against stigma, discrimination, and injustice. Consider, for instance, the Lesbian, Gay Bisexual and Transgender (LGBT) community opposing the ban on the same-sex marriage in the United States, or People Living with HIV/AIDS (PLWA) promoting HIV/AIDS awareness in the Russian Federation or South Africa. In other words, previous studies of social purpose remained somewhat limited to examining how actors define the purposes of the existing in-group relevant to the kinds of actions the group considered appropriate.²⁸

The final general consideration concerns studying identity politics as related to the HIV/AIDS issue-area. This dissertation also

²⁸ Johnston 2005: 1032—1033

calls for innovative ways to look at identity in the context of HIV/AIDS. So far, studying identity politics as related to HIV/AIDS issue-area was limited to investigating how policy makers constructed the individual characteristics of vulnerable sub-populations and how this construction affected public-health interventions. This research was closely connected to international health activism, aimed at overcoming stigma as related to the etiology of HIV/AIDS. The prescriptive outcome of this research agenda was to devise policies boosting the global agenda of human rights to health and access to the affordable medicines for anybody who needs them. So far, only a few scholars delved in exploring the links between national HIV/AIDS policies and variables loosely resembling what might be identity-like factors on a national level.²⁹ Ascertaining the role and place of social purpose in HIV/AIDS politics provides a framework for taking stock of the factors which shaped the commitment to fight HIV/AIDS, as insights for the future of sustainable and robust partnerships between governments and the proliferating domestic and transnational nonstate organizations.

A FURTHER LOOK AT CASES AND COMPARISONS

²⁹ See, for instance, Van Der Vliet 1996, Barnett and Whiteside 2002; Youde 2005: 203—205.

This study examines South Africa and Russia. Since this study is an exploratory account of social purpose, first and foremost I choose my cases on the expectation that social purpose indeed influences public policy and generates tangible implications for public health. This insight builds on those scholars, who tend to claim that identity-related variables in Russia and South Africa are of special political import. This study pushes this insight further: It tries to explain how and why identity informs and inhibits certain kind of policy choices, while not compounding identity with subsequent policy choices. Here I did not consciously select on the dependent variable, although my empirical results show that public policies in both countries got diverted from best international practices. In fact I claim that social purpose in principle might help implementing global policy initiatives domestically.

Second, during the 1990s both countries underwent major transition from post-communist and post-colonial regimes, which challenged elites to articulate new conceptions of common good. Among the universe of transitional cases, these two countries do not qualify for the unconditional “embrace of the West,” nor for a complete “aloofness” from or hatred to it. This makes them standing out of the majority of other post-communist and post-colonial states. Furthermore, I consciously select two countries from different regions,

continents with an expectation of the content of national purpose in Russia and South Africa to be very different. This will allow me to put social purpose in comparative perspective and theorize its causal importance not resorting to some contingent explanations.

Moreover, examining South Africa and Russia can tell us important things about social purpose as well. In the recent years both countries have undergone the processes of dramatic political transition with considerable political struggle and traceable political discussions about the nature of common good. These discussions were consciously triggered by extant political elites. Thus, these two cases give ample material to examine the formation of social purpose in greater details. This part of my dissertation work helps expanding traditional academic focus placed on subnational, smaller identity entrepreneurs and social movements as the agents of change to the exploration of elites' purposeful attempts to link the idea of the nation to specific political goals and prescriptions pinned on the vision of self and the Other.

Looking at Russia and South Africa through the conceptual lenses of social purpose can significantly contribute to the existing explanations of the HIV/AIDS politic. I have started this chapter discussing President Thabo Mbeki's allegedly imposing presence in

South African health policy. I made a case that we can benefit from reexamining of a broader spectrum of HIV/AIDS policies pursued under Mbeki's leadership. Let us glance at the Russian case.

Russian scholars tend to pinpoint the broad processes of securitization dominating the Russian health agenda.³⁰ The nub of this view is correct. The question persists, however, where this securitization is coming from. One explanation points out the Millennium Summit and the United Nations General Assembly Security Session (UNGASS) as major driving forces behind this reformulation.³¹ However, securitization is not necessarily linked to the global prescriptions and formulations. First, the links between HIV/AIDS and military (state) security have been the focal concerns of many leaders even before the human security perspective gained its global momentum. For instance, Yoweri Museveni's fear to lose Ugandan military force prompted him to learn from Cuban example of early detection of and response to the disease.³² Second, securitization of AIDS—whether or not states have genuine concerns for the military preparedness—may become a discursive tool governments with limited resources use to put the issue higher on international agenda in

³⁰ Sarah E. Mendelson, Julie Sawyer and Celeste A. Wallander, *The Security Implications of HIV/AIDS in Russia*, *PONARS Policy Memo No. 245*, February 2002

³¹ For the broader account of the links between HIV/AIDS and security, see, Garrett 2005; McInnes and Rushton 2010

³² See, for instance, Behrman 2004: 43, 113.

order to attract international attention, financial resources and logistical assistance.³³ This means that the security frame is used strategically with the realistic expectation to gain certain benefits, even though getting funding from major international donors is not contingent on framing HIV and security issue. Thus, reexamining HIV/AIDS policies in Russia is still of importance. In Chapter 6 I will demonstrate that the Russian case of AIDS securitization was an instance of deploying its historically contingent social purpose.³⁴

In this case selection, I will hold constant two important things. First, since 1996 policy-makers in both countries had an abundant exposure to the global consensus on HIV/AIDS and the set of international best practices. In other words, exposure to the international best practices does not vary. Both in Russia and South Africa the epidemic unraveled after its devastating epidemiological consequences became obvious elsewhere. In essence, they are “second-wave countries” which can learn about the successful choices with very tangible results of the “first-wave countries,” including Brazil, Uganda, and Thailand.³⁵

³³ See, for instance, Altman 2003: 422.

³⁴ The general warning here is again not to conflate a generic international process of issue-framing and a set of specific domestic responses. In this sense, I strongly disagree with Sjöstedt’s (2008) argument about securitization of AIDS in Russia.

³⁵ The caveat here is that I am not talking about the contained versus generalized pandemic, see for instance, Schneider and Moodie 2002. The consequences of these countries’ decision to promote free and universal access to the ARVs are succinctly

Second, both countries possess significant but not extraordinary material capacities. This is important since wealthier countries potentially can act as leaders, norm-givers at the international arena. Higher health spending, more developed infrastructure, and better pharmaceutical sector can lead to the diversity of policy options. Less affluent countries which lack the requisite amount of material resources, suffer from insufficient technical expertise, and do not benefit from an advanced pharmaceutical sector, are more likely to act as followers, norm-takers at the international arena. Where does it leave us in terms of Russia and South Africa? Both are middle income countries; both are less dependent on the international community as compared to any heavily indebted, failing, or failed state. At the same time, comparing to Thailand, Brazil, and India, neither of them possesses the requisite material characteristics so that they can convincingly launch a successful large-scale independent challenge and contribute to the international consensus. Russia is in especially precarious position. Despite its temporary petrowealth, the general health care infrastructure and medical-industrial capacities have been constantly deteriorating. The rapidly increasing governmental spending in most

described in the relevant academic literature and professional brochures. Without further qualifications, they have been touted as success stories and model cases.

cases lagged behind the need to renovate the infrastructure, purchase up-to-date medical equipment, and tangibly improve the health care services (majority of people remain highly dissatisfied with their quality). South Africa, while boasting some degree of wealth, especially compared to the rest of the continent, has feeble public health sector with dismal health care capacities. Although both countries are expected to be sensitive to the external recommendations and assistance, even in the context of the lack of direct pressures, both Russia and South Africa chose to act as international leaders in response to HIV/AIDS. As this leadership was not founded on material capabilities or technological advantages, it gives us at least initial reasons to believe that domestic choices were influenced by some domestic political determinants, other than material and financial power.

DISSERTATION STRUCTURE (THE REST OF THE ARGUMENT)

My dissertation investigates how, why and when did Russian and South African governments challenge the international norms of the HIV/AIDS treatment. In these two countries the generalized epidemic occurred simultaneously with the advent of a new conception of common good (national purpose), which domestic elites presented as

vital for the existence and survival of the state as an autonomous political organization. Exploring the effects of social purpose on the adoption of global policy prescriptions and norms is novel in political science. From the empirical standpoint, my dissertation offers a comprehensive analysis of the political processes leading to the advent of a consolidated and publicly accepted national purpose, as well as the HIV/AIDS policies in Russia and South Africa. From the policy analysis perspective, it helps understand which domestic factors can potentially facilitate or frustrate the global governance of health crises and why.

The dissertation structure reflects the evolving logic of the questions asked. This introductory chapter introduces the core themes and debates in the study of both social purpose and cross-national HIV/AIDS politics, and gives an overview of the core argument as substantiated in the empirical body of the dissertation. It justifies the selection of cases, international policy issue-area, and the time-frame. In essence, this chapter makes connections between variables, explains the links between projects' various parts and introduces general readers to the broader theoretical literatures.

International consensus on HIV/AIDS is as an independent variable in my dissertation. In Chapter 2 I discuss the international

view on HIV/AIDS treatment as a common good and spell out key indicators of HIV/AIDS treatment policy. I discuss how the independent variable looks like without social purpose factoring in it. To do so, I historicize international approaches to AIDS policy to establish the variance in the variable (absence/presence of the consensus), as well as demonstrate that it heavily hinges on the biomedical innovation of effective ARVs.

Chapter 3 defines and advances the usage of social purpose as an analytical tool. I build on the insights originally spelled out by Christian Reus-Smit, who conceived social (moral) purpose as a deep-seated and socially legitimate “conception of common good served by autonomous political organization.”³⁶ The subsequent empirical chapters demonstrate how Russian and South African elites formulated and promoted their conceptions of common good. Social purpose is an interesting but often overlooked dimension of identity, which captures both the kinds of actions elites consider appropriate and the kinds of actions domestic policy environments underpin. The latter explains what kind of policies will be publicly held as “natural” and self-evident and why. The overall intention of this chapter is to make social purpose specified, valid, and analytically useful. The chapter provides a necessary analytical framework for the following cross-national

³⁶ Reus-Smit 1999: 31.

comparisons of various historically and country-contingent contents of national purpose. The minor point of the chapter is to refute the typical claim that content of various identities/social purposes is incomparable in principle.

Chapters 4 and 5 explore the national purposes in the Russian Federation and South Africa separately from the HIV/AIDS policy, using the model advanced in Chapter 3. In the context of these empirical chapters, I do not make a claim that there is an innate, undisputable, and long-lasting public consensus on Russian or South African social purpose. Quite the opposite, it is likely that social purposes in these two countries will change once extant elites fall out of power.

Russia's elite (Chapter 4) strongly committed to the strong state as an ultimate political value, emphasized the primacy of state in economic delivery and regulation, and trumped up a vision of Russia as a great power in global politics. All these components of common good are sometimes subsumed under the heading of Sovereign Democracy and attest to the revival of the autocratic myth and the delusion of grandeur. Subsequently, Putin's entourage painstakingly strove to embed this conception of common good by holding the democratic politics of the 1990s responsible for the collapse of the

state, loss of national self-efficacy and self-esteem. As a result, the obsession with strong state created a policy environment, which delegitimized liberal approaches to the looming health crisis. In South Africa (Chapter 5) the notion of the African Renaissance gained some political currency. In all its fuzziness (which also might be viewed as its richness) the notion can be narrowed down to three core organizing prescriptions. They include indigenusness (sometimes labeled as Nativism, or Africanism) as the ideology of returning to the roots and revitalizing the genetic resources and traditional practices; marketization as the strategy of economic empowerment; and the quest for shared humanity and communal solidarity interpreted as the country's exceptionalism (ubuntu) in the context of globalization. I explore how a particular proposal for nation was pinned on elite's self-understanding, linked to the broader collective understandings of the nation, outreached to broader audiences, as well as whether elite's formulation of national purpose was congruent with meanings transmitted by the popular culture.

In both countries, social purpose significantly affected the content of the HIV/AIDS policies. In Chapters 6 and 7 I examine the HIV/AIDS policy and document these effects. I capture how national policy responses challenged and "filtered" the internationally

prescribed range of choices. In other words, I document and explain when, how and why the domestic policy choices became inconsistent with the mainstream international health consensus. On balance, I do not contend to explain all minute details of the domestic HIV/AIDS policies, yet I claim that provided analysis both contributes to the existing explanations and covers important elements of the domestic HIV/AIDS politics not covered before. The comprehensive summary of social purpose's impact on domestic HIV/AIDS policy is provided in Table 1.3 at the end of this section.

Chapter 6 argues that Russian HIV/AIDS policies were shaped by the deployment of the Sovereign Democracy--the historically contingent and country-specific content of social purpose. The most important outcomes of this impact include three broad clusters of effects. First, the commitment to the strong state affected the general political understanding and framing of the domestic epidemic and linked it to the highly desired demographic security as the major tool in having a strong state. It also impinged on the human rights principles in providing ARVs to the key vulnerable populations and limited the permissible role of civil society in combating against HIV/AIDS. Second, the emphasis on the state-led development contributed to the significant increase in public spending for healthcare

and infectious diseases and efforts at universal and free medical coverage, and shunning the private sector as a potential partner. Third, bearing down on the vision of great-power status stimulated the Kremlin to act like a donor/leader on the international arena, fend off the expertise and resources of well-established international health organizations, and attempting to revamp the country's position in the pharmaceutical markets.

Chapter 7 argues that South African HIV/AIDS policies were shaped by the deployment of the African Renaissance--the historically contingent and country-specific content of social purpose. The most important outcomes of this impact include three broad clusters of effects. First, indigenusness (Africanism) impinged on the standardized protocol in treatment, stimulated the production of traditional medicines, and subsequently institutionalized their national governance. It also contributed to the politicization and filtering the desirable pool of partners, as well as shaping their permissible role in curbing HIV/AIDS. Second, marketization (economic neo-liberalism) undermined the universal rollout of the antiretrovirals in public health sector and protected the private sector from sharing the burden of health response. Third, exceptionalism (ubuntu) led to the general politicization of the domestic epidemic, putting it in the context of

colonialism. It empowered and legitimized the counter-epistemic community of AIDS dissidents. Not only the government acted on these core components of social purpose, but it also empowered multiple domestic and international actors to express their radicalized political views, as well as promote and apply their substandard biomedical convictions.

While I see my argument about social purpose as helpful to advance the conventional constructivists' take on norm diffusion, this dissertation is more concerned with another cluster of explanations. In Chapter 8 I will continue this discussion in the context of policy transfer models derived from comparative examination of the Eastern European transformation.³⁷ To sharpen my theoretical focus this research locates social purpose in the context of relevant literatures. I also examine whether and to what degree my emphasis on social purpose as an intervening variable is robust to major alternative explanations derived from policy transfer models. In Conclusion I summarize my empirical and theoretical results, systematize and spell five major effects of social purpose on public policy.

Table 1.3 Summary of comparisons and explanations

³⁷ In Chapter 8 I employ Wade Jacoby's classification of mechanisms of policy transfer, including learning, coalition-building, and external pressures.

CHAPTER 2. INTERNATIONAL POLICY INITIATIVES AGAINST HIV/AIDS: OPERATIONALIZING THE CONSENSUS

From the empirical standpoint, my dissertation contributes to the current debates about the cross-national variation in responses to the emerging infectious diseases in the context of health crises, which transcend boundary, authority, and capacity of nation-states. Before thinking about this variation, we need to analyze and operationalize what constitutes an international mainstream for HIV/AIDS policy response. I define this mainstream consensus as governmental responsibility to provide the antiretroviral treatment, ensure the universality of access to it, and bring all relevant stakeholders in the policy-making process. In this study the global consensus on the HIV/AIDS treatment policy is the independent variable, which is disaggregated into set of three general components and nine more specific policy indicators (listed in Table 1.1).

The international policy consensus around HIV/AIDS would not have been achieved without effective antiretroviral drugs (ARVs). Multiple accounts of AIDS history lament about the “quiescence” in international responses to AIDS due to the lack of an effective and

relatively cheap biomedical product. In fact, most international players talked about the necessity to provide the HIV/AIDS treatment, yet performance were unable to promote it globally as the solution to the pandemic.¹ Starting from 1996, intergovernmental organizations and the professional health community gained momentum in formulating sophisticated policy initiatives in response to HIV/AIDS and spreading them across the globe. The creation of new generation of AIDS organizations in the early 2000s proved to be an additional step in cementing the global consensus. The new generation of AIDS organizations structured its financial assistance around AIDS first and foremost as a public health crisis with a strong emphasis placed on the universal access to the life-saving medicines. Thus, in the early 2000s international recommendations have become almost universally recognized as important tools in improving domestic policies, including public health.

This chapter operationalizes this policy consensus and briefly historicizes its evolution. The exact number, sequence, validity, and substance of these indicators might not be accepted without hesitation.² Yet this operationalization is rather reliable as it broadly

¹ See, for instance, Gordenker et al 1994; Behrman 2004: 59—116

² Amy Patterson, for instance, uses the regime terminology indicating that “principles for fighting the disease, institutions through which to facilitate cooperation, and expanded...resources to achieve its goals” and the wide acceptance

reflects major points in the HIV/AIDS policy literature. Breaking down the general HIV/AIDS policy in a set of components is important to ascertain how this policy looks like and what it is not supposed to be. It also helps to increase the number of observations and set up a template for the structured focus comparison of domestic HIV/AIDS policies. At this point I do not discuss how and why the domestic conceptions of common good factor in health policy.

Table 2.1: Global policy consensus on HIV/AIDS

TREATMENT

The first core component of the international policy is to provide the approved antiretroviral treatment as a biomedical response to an acute public health crisis. Most importantly, policy-makers should respond to HIV/AIDS crisis as a public health problem--a preventable communicable disease and a manageable chronic infection.

Substituting or skewing basic policy response by giving a political priority to other issue-frames, such as demographic crisis, military security, human rights, poverty and inequality, property rights, is the first signal that the HIV/AIDS policy got invested with situational and

of the norm of providing ARV treatment in poor countries came into being by 2006, see Patterson 2007 in Harris and Siplon 2007: 203, 212. This chapter does not use this terminology. Instead, I define it as an “international standardized AIDS policy prescription.”

local conceptions of common good. A strong adherence to any alternative issue-framing choices may potentially lead to further deviations from the international consensus, including a public denial of the epidemic, underscoring the uniqueness of the domestic characteristics of the epidemic (see Indicator 1a), attempts to enforce various substandard treatment protocols (see Indicator 1b), or simply inaction in securing the price-saving generic pharmaceutical products (see Indicator 1c). Whether or not these alternate frames are “justified” to meet the specific conditions on the ground will be discussed later.

Indicator 1a: The pandemic as a public health crisis

The first indicator of the substantive component of treatment is framing the issue as a public health crisis. The opposite of this recommendation includes being in denial of the epidemic, pointing up the uniqueness of the domestic epidemic, or linking the root causes of the epidemic to the negatively constructed populations.

Important international actors not always addressed the pandemic as a public health crisis. Conservative governments typically framed AIDS in terms other than public health. President Ronald Reagan’s administration, for instance, understood AIDS in the context of medical competition with France, ideological struggle with the

USSR, and the diminishing role of Africa in the global power politics. Reagan was generally reluctant to speak about the disease in public and to request any HIV-related funds from the Congress.³ At the same time, intergovernmental cooperation was riveted to collecting better evidence on AIDS from Africa and studying a variety of clinical manifestations of the disease among different subpopulations.⁴ Thus, National Institute of Health (NIH), Center for Disease Control (CDC) and the Belgium Institute of Tropical Medicine (BITM), and the Zairian Ministry of Health did not confront the disease as [global] public health crisis. At the same time, many intergovernmental programs helped overcome poor technical equipment and inadequate provision of medical health care abroad. Multiple international programs included the provision of mobile health care to the remote rural areas (African Medical and Research Foundation, AMREF), relief and development assistance (World Vision, Ford Foundation, Rockefeller Foundation), health personnel training (Project HOPE), assistance in blood transfusions and needle exchange (Prevention Point, the League of Red Cross and Red Crescent Societies—LRCRCS), and awarding small grants for innovative local initiatives

³ See, for instance, Behrman 2004: 17—21; Fox in Fee and Fox 1988: 327. On details of his successor George Bush's understanding public priorities in fighting AIDS, see Murphy 1994: 145—149.

⁴ On the epidemiological construction of AIDS, see Oppenheimer in Fee and Fox 1988: 267—292.

(People-to-People Health Foundation, Human Rights and Governance Program).

The history of cooperation in response to HIV/AIDS prior to 1996 demonstrates that the development of policy consensus for its own sake was hardly sustainable. Major involved actors had little or no incentives for the actors to reconcile their differences and agree on the specific framing of AIDS. The arrival of effective antiretroviral therapies in 1996 changed this. To use conventional constructivist terminology, it was a tipping point, which signaled a shift towards policy consolidation. The technological breakthrough of 1996 gave international actors a new common ground to overcome seemingly irreconcilable differences in their agendas and approaches. By the early 2000s the health benefits of providing the universal ARV treatment in public sector became clear due to internationally praised success stories (model cases, best practices) from Brazil, Thailand, Uganda, and so on. Applying the conventional constructivists' parlance, the norm cascade occurred at the XI International AIDS Conference in Lusaka (Zambia), when the majority of African nation-states publicly committed to address HIV/AIDS as a public health crisis and began deploying the life-saving ARVs. Furthermore, these states turned things around by seizing the initiative in arguing for a

broader international assistance from the global health organizations, thus to a certain degree acting as norm entrepreneurs themselves.

The most recent challenge to frame the pandemic as a public health crisis was embodied by the Agreement on the Trade Related Aspects of Intellectual Property (TRIPS). TRIPS was often seen as a vehicle to advance the profit-seeking behavior of the industrialized world including giant international pharmaceutical corporations.⁵ These corporate actors understood treatment in terms of intellectual property and trade to be regulated via the World Intellectual Property Organization (WIPO) and the World Trade Organization (WTO). Simultaneously, many developing states (including Brazil, India, Thailand and South Africa), as well as advocacy organizations (Oxfam, MSF) fought for subsuming the issues of treatment under a public health rubric, which in turn implied only secondary importance of intellectual property and trade. South African and Brazilian legal disputes with 39 pharmaceutical manufacturing giants and the WTO are well-documented.⁶ The Fourth Session of the Ministerial Conference of the WTO (Doha, Qatar, November 2001) adopted the foundational document, which reaffirmed the primacy of public health

⁵ International Federation of Pharmaceutical Manufacturers (IFPMA), Pharmaceutical Researchers and Manufacturers of America (PhRMA), Merck, Boehringer Ingelheim, La Roche, Bristol Meyers Squibb, GlaxoWellcome (GSK).

⁶ On Brazil's contestation against the companies providing brand name pharmaceuticals, see Bermudez et al 2002; Orsi et al 2003; Galvão 2005; for South African court case, see Barnard 2002

frame in dealing with HIV/AIDS treatment.⁷ In essence, the Declaration on TRIPS and Public Health allowed developing countries to adopt necessary measures to protect public health as long as it was pursued through the TRIPS safeguards. Tracing the details of international political contestation around TRIPS is outside the scope and purpose of this chapter. Suffice to say that global treatment activists were instrumental in making TRIPS more flexible and generally permissive to the expansion of the international access to the ARVs.⁸

Today international health and financial organizations signal their continuing commitment to the public health policy approach against HIV/AIDS. In 2007, the Institute of Medicine of the National Academies of Science published a comprehensive report “PEPFAR Implementation: Progress and Promise.” According to this report, PEPFAR—on of the most important international AIDS organizations—treats HIV/AIDS as a preventable communicable disease and a manageable chronic infection, rather than a terminal illness generated by some contingent socio-cultural characteristics.⁹ Similarly, in 2008 the WHO’s regional branches, including its South-

⁷ DESA/DSD/PC3/BP3, See Article 8

⁸ On relationship between TRIPS and “human rights to health,” or discussion of “patients rights vs. patents rights,” see, for instance, Correa 2002; Cullet, 2003: 139—160; Heywood 2002; Lanjouw 2002.

⁹ Sepúlveda et al 2007

East Asia Regional Office, reaffirmed their committed to HIV/AIDS as a public health crisis.¹⁰ In sum, public health approach to HIV/AIDS

...promoted by WHO underpins the successful experiences of several countries in scaling up HIV/AIDS services and is based on the principles of simplification, standardisation, decentralisation, equity, and patient and community participation, and has been pivotal in unlocking the treatment agenda, and starting to close the treatment gap between rich and poor countries.¹¹

Today there is a legitimate plurality of frames and approaches attuned to the nuances of the local epidemiological conditions. As the understanding of the pandemic and its impact improved, for both governments and international bodies it is acceptable to view HIV/AIDS as a problem of socioeconomic issue related to development, military or human security, human rights, intellectual property, and so on.¹² The availability of multiple frames suggests different emphases in health care responses, yet it does not imply that

¹⁰ SEA/RC61/12, available at <http://www.searo.who.int/LinkFiles/RC61_12-pa_Item-14.pdf>

¹¹ Gilks et al 2006: 509, available at <<http://www.who.int/hiv/events/artprevention/gilks.pdf>>

¹² Jönssen and Söderholm 1995: 461-466.

the epidemic ceases to remain an immense public health care crisis and should be understood in other than biomedical and scientific terms. In other words, there is nothing “wrong,” puzzling, or unusual when governments start talking about HIV/AIDS as a national demographic issue exacerbated by widespread narcotic abuse (Russia), or a deeply engrained socioeconomic problem with links to poverty and malnutrition (South Africa). However, in some circumstances governments jeopardize or thwart the provision of the standard biomedical treatment (ARVs) as approved by international bodies, they overexaggerate societal, rather than medical, conditions and start addressing them outside the biomedical and scientific framework. This selective approach is indicative not of governments’ sensitivity to the local epidemiological situation, but rather of their sensibility to other non-medical factors in the policy environment.

Indicator 1b: Standardized protocol in treatment

The second indicator is the acceptance of the internationally approved antiretrovirals (ARVs) as biomedically effective and cost-effective intervention measure to address the public health emergency.

According to the WHO, two fundamental objectives for the proper management of the ARV treatment include: “Standardization and

simplification of ARV regimens to support the efficient implementation of treatment programmes in resource-limited settings; [and] Ensuring that ARV treatment programmes are based on scientific evidence, in order to avoid the use of substandard treatment protocols which compromise the treatment outcome of individual clients and create the potential for emergence of drug resistant virus.”¹³ The opposite of this recommendation is either the rejection of the ARVs as toxic and ineffective, stressing complementary and alternative medicines as the primary substitution to ARVs, or selection of the second-line regimens over the first line. From a public health approach to HIV/AIDS, the use of subpar or substandard treatment protocols and distribution services is very dangerous, as it could compromise the treatment outcomes and even trigger the wide spread drug resistance.

The public announcement of the discovery of the Highly Active Anti-Retroviral Therapy (HAART) in 1996 at the 11th International AIDS Conference in Vancouver established treatment as the key in an effective and decisive response to the pandemic. The efficacy of the earlier drug azidothymidine (AZT), which at first was offered as a monotherapy, was confirmed in principle the late 1980s.

¹³ WHO 2004: 7 (“Scaling up antiretroviral therapy in resource-limited settings: Treatment guidelines for a public health approach,” 2003 revision)

Yet, while the drug's benefits outweighed its negative side effects, the results of treatment with the AZT were not always efficient and consistent. Moreover, the prices of medications remained very high. The major biomedical difference of HAART from earlier treatments was that a new drug was designed to contain the infected cell by targeting a different enzyme and was also offered in a combination of other medications, which diminished chances of developing drug-resistance. In 1997 GlaxoSmithKline produced Combivir, the first two-drug fixed-dose combination of AZT and lamivudine (3TC). ARVs are retroviral inhibitors, which do not cure AIDS, yet significantly delay the development of opportunistic diseases and save human lives. The results were stunning: Observers captured the excitement about the ARVs by noting that "rapid uptake of antiretroviral treatment gave rise to the so-called Lazarus syndrome, with treatment almost miraculously restoring the health of many people terminally ill with AIDS."¹⁴ The current regimen prescribes lower dosages of the AZT in combination with other drugs as a part of HAART.¹⁵ By December 2003, the WHO officially recommended

¹⁴ Schwartländer et al 2006: 541.

¹⁵ *Center for Drug Evaluation and Research (CDER) provides further guidelines for Industry - Fixed Dose Combination and Co-Packaged Drug Products for Treatment of HIV, available at <http://www.fda.gov/RegulatoryInformation/Guidances/ucm125278.htm>*

seven different three- and two-drug fixed dose combinations.¹⁶ The importance of fixed dose combination is that it helped to alleviate potential adherence problems and simplifies its distribution.

In general, all these breakthroughs contributed to a rapid decrease in the cost of treatment. Although the actual costs of treating patients with AIDS were difficult to estimate, in the early 1990s reliable cost studies gave a colossal average sum of \$147,000 per person per year. Yet only several years later, by 1996, the cost of therapy dropped down to \$15,000. In 2001 the prices for combination ARV therapy fell again from over \$10,000 to less than \$300 a year (per patient).¹⁷ Between 2001 and 2005 the prices fell again for the fixed two-dose medications.¹⁸ All this emboldened many international organizations to endorse the norm of HIV/AIDS treatment with triple antiretroviral therapy (ARVs) as feasible and cost-effective centrepiece of international policy consensus how to respond to the pandemic. This policy initiative, however, did not go unchallenged. Two principal challenges to ARVs as a standardized biomedical solution to HIV/AIDS sprung from AIDS reappraisal hypothesis and

¹⁶ WHO 2004: 60 (see Annex D).

¹⁷ Smith and Siplon 2006: 82.

¹⁸ The price of stavudine, lamivudine, and nevirapine decreased from \$350 (annually) in 2001 to \$132 in 2005. The price of combinations of zidovudine-lamivudine and efavirenz also decreased.

the political emphasis on traditional and complementary medicines enrooted in the indigenous knowledge systems.

First, as early as in 1987 Dr. Peter Duesberg and his supporters opened the controversial debate concerning the nature of the retroviruses and their relation to AIDS. This triggered the AIDS reappraisal movement, whose members described themselves as AIDS dissidents, realists, rethinkers, heretics.¹⁹ The central point of their self-proclaimed “dissidence” from the majority of the professional medical community was questioning the usefulness of ARVs in the context when the HI virus allegedly did not cause AIDS as medical condition. This position won them a pejorative tag of AIDS denialists. Dissidents advocated the multifactorial etiology of AIDS, indicating that the lifestyle issues and drug abuse could have been the primary cause of the retrovirus.²⁰ More specifically, the repertoire of dissidents’ arguments is as follows:

- a. the spread and implication of the epidemic has been overstated, while the accuracy of the statistical data should be reevaluated;

¹⁹ Besides Duesberg, the movement included such individuals David Rasnik, Harvey Bialy, Sam Mhlongo, and Mattias Rath . To a large degree it was shaped not by professional medical community, but rather by a number of controversial journalists, including John Lauritsen, Celia Farber, Russell Schoch, Jad Adams and others. For the full critical and historical exposition of the AIDS denialism, see Kalichman 2009.

²⁰ See Epstein 1996: 105—113.

- b. “invested interests” hypothesis stated that the contemporary biomedical research is not questioned because of the profits generated by the drug companies, while individual “virologists had ‘invested’ in the HIV hypothesis—not just financially, though this was true in some cases, but personally, professionally, and psychologically;”²¹
- c. “AIDS without HIV” argument referred to the idea that HIV is not a sufficient condition for AIDS and thus the real cause of AIDS has been misidentified. Furthermore, since AIDS included many opportunistic diseases, the correlation between AIDS and HIV was an artifact of the definition itself;²²
- d. “ drug-AIDS” hypothesis stated that “AIDS is a collection of chemical epidemics, caused by recreational drugs, anti-HIV drugs, and malnutrition;”²³
- e. “poison by prescription” argument pointed out that the AZT is toxic and dangerous, or at best useless; AZT also contributed to immune overload and result in immune suppression, which it

²¹ Epstein 1996: 113; see also Jad Adams, *Virus Hunters* 1989, available at <<http://www.virusmyth.com/aids/hiv/javirus.htm>>.

²² Epstein 1996: 132; Duesberg and Ellison 1990.

²³ Duesberg, Koehnlein, and Rasnic 2003: 383.

should have prevented. Dissidents, for instance, attributed the famous dancer Rudolph Nuriev's death to AZT.²⁴

The professional medical community does not endorse their views. Since the early 1990s the founder of retrovirus Dr. Robert Gallo, immunologist Dr. Anthony S. Fauci of National Institute of Health (NIH) and many others repudiated all their claims with absolute certainty.²⁵ The heyday of the dissident skepticism was rather brief: it peaked and waned before 1996, which in part was a result of their physical extinction due to the refusal to take the life-saving medications. The remnants of denialists still strive on Internet sites with questionable legitimacy and in such obscure groups as “Alive and Well”, “HEAL”, “Perth Group”, “Group for the Scientific Reappraisal of the HIV-AIDS Hypothesis.”²⁶ Despite their marginal status, the AIDS dissidents in certain circumstances might be able to empower various non-mainstream domestic perceptions of the pandemic and legitimize some obscure local beliefs.²⁷ In other words, they can potentially offer certain expertise and justifications for those actors, including governments, which chose to stall the ARVs and refuse to

²⁴ John Lauritsen, Did AZT Contribute to Nureyev's Untimely Death? *New York Native*, 1 Feb. 1993.

²⁵ Epstein 1996: 117—123.

²⁶ The dissident bookshelf is available at
<<http://www.virusmyth.com/aids/books.htm>>

²⁷ See, for instance, Sitze 2004; Youde 2007; Natrass 2008; Kalichman 2009.

accept the role international pharmaceutical sector plays in developing life-saving drugs.

The second potential challenge to the ARVs stems from the perceived necessity to preserve traditional medicines and promote genetic medical knowledge in the context of indigenous knowledge systems (IKS). The WHO defined traditional medicine as a comprehensive concept including various forms of indigenous medicines, both medication and non-medication therapies.²⁸ An Encyclopaedia of African Folklore states that:

Ethnomedicine is a component of a people's culture and refers to the beliefs and practices relating to diseases that result from indigenous cultural evolution... refer to medical resources that are indigenous to the Africans, holistic environments. This is the medicine that existed before the introduction of Western medicine and was suited to the needs of African cultures.²⁹

All these topics recently became very popular at different international and domestic venues. This revival of interests to

²⁸ See WHO/EDM/TRM/2002.1: 1; for the broader discussion of terminology and the concept of indigenous knowledge, see for instance Ellen, Parks and Bicker 2000: 1—33; 36—54.

²⁹ For the succinct description of the African traditional medicines and their links to African spirituality, see Mulemi 2003: 492—498, 500—506. For useful overviews, see Bye and Dutton 1991; Edwards 1986; Cocks and Dold 2000; Cocks and Møller 2002.

traditional medicines in part is based on the understanding that in the developing countries there is likely to be a persisting challenge of access to the modern health-care system and that only traditional healing practices are likely to remain accessible and affordable for the overwhelming majority of local populations. Hanspeter Reihling underscored that international development organizations viewed local knowledge as helpful in increasing bottom-up participation and reducing the costs for health care in resource poor settings.³⁰

A closer look on the definitions, guidelines, and objectives as formulated by several intergovernmental organizations (IGOs) demonstrates that nearly all international guidelines concerning genetic medicinal knowledge were by and large vague, cautious, and did not offer any definite answers how to integrate traditional knowledge into the modern-day healthcare system. It is often underscored that there can be different potential models of integrating traditional healers into the health care system without going anti-treatment.³¹ Yet even smooth logistical integration of the two health care systems is likely to generate grave problems related to regimen

³⁰ Reihling 2008

³¹ See, for instance, the WHO-sponsored “Resolution Promoting the Role of Traditional Medicine in Health Systems: A Strategy for the African Region” (AFR/RC50/R3); on the problems of safety, efficacy and quality, see, for instance, WBG IK Monthly Notes 26, 37, 65, 68; the broader discussion on the relations between African traditional medical practices and international institutions, see Langlois-Klassen, Kipp, and Rubaale 2008; Liddell, Barrett, and Bydowell 2005.

adherence. At the very least traditional knowledge should not be pitched against the Western medical profession, especially as a substitution for internationally approved pharmaceuticals.³²

It is true that documents streaming from such international bodies as the WHO, WBG, WIPO, and UNCTAD commonly welcome regulation and protection of indigenous knowledge.³³ Very often intergovernmental organizations place genetic medicinal resources under the broader rubric of preserving culture and heritage (“Traditional Knowledge, Genetic Resources and Traditional Cultural Expressions/Folklore”).³⁴ In this context, various ethno-medicines are viewed more as an indigenous anthropological resource as opposed to proper biomedicine. These recommendations do not imply substituting contemporary biomedical products with either alternative or traditional medicines.

Indicator 1c: Check on prices and the availability of generics

³² See for example, the 2003 PEPFAR/USAID the project “The Saving Lives: Biomedical and Traditional Healing Collaboration on HIV/AIDS” with an objective to integrate traditional healing into health care system.

³³ UNCTAD/DITC/TED/10, AFR/RC50/R3

³⁴ See the set of documents prepared for the WIPO Intergovernmental Committee on Intellectual Property and Genetic Resources, Traditional Knowledge and Folklore, 2003—2008., especially WIPO 2003, WIPO 2006, WIPO 2006a.

The third indicator is to keep the prices on the pharmaceuticals low and broadly use generics in the resource-poor settings. This can be achieved through the bilateral agreements, slashing prices for individual countries, or achieving the differential pricing on drugs for developing countries in general, and implementing the safeguards as formulated in the Agreement on Trade Related Aspects of Intellectual Property Rights (TRIPS). The opposite of this recommendation is to discard the relevance of the antiretroviral generics, while stressing only the brand-name medications. On the other hand, the global consensus does not imply developing a full “pharmaceutical sovereignty” (i.e., a full replacement of relevant medicines with original domestic pharmaceutical products) as an ultimate goal in resource-poor settings.

In July 2000—June 2001 generics became widely available. First, the products produced in India, Brazil, and Thailand became competitive with the brand-name pharmaceuticals. Second, the international community reached an agreement on the standards for approval of fixed dose antiretroviral combinations, as well as agreed on their safety.³⁵ Third, certain generic regimens proved to be highly

³⁵ I refer to an agreement, reached on March 30th 2004 in Gaborone, Botswana. Studies subsequently proved fixed-dose generic AIDS drugs effective, see <<http://www.nytimes.com/2004/07/15/health/15aids.html>>

successful in suppressing the viral load.³⁶ Fourth, the industrial competition set forth by companies like Cipla drove the prices of drugs down.

In the late 1990s—early 2000s TRIPS remained a major roadblock for the access to generic pharmaceutical products in the developing world.³⁷ Yet a group of developed countries in Draft Ministerial Declaration (October 2001) accepted the importance of TRIPS “to ensure that medicines for treatment of HIV/AIDS and other pandemics are available to their citizens who need them, particularly those who are unable to afford basic medical care.”³⁸ A group of developing countries, not surprisingly, pressed for the state control over intellectual property rights. HIV/AIDS turned out to be a special case in TRIPS negotiations. TRIPS “safeguards,” including Bolar provision, compulsory licensing and parallel import, allowed governments to enjoy larger flexibility in their national drug policies.³⁹

³⁶ See “Effectiveness and safety of a generic fixed-dose combination of nevirapine, stavudine, and lamivudine in HIV-1-infected adults in Cameroon: open-label multicentre trial,” *Lancet* 364: 3-4; 29-34 (2004). As the authors explained, this study was specifically designed to sway the major donor agencies, which refused to deploy generic fixed-dose combinations in resource-poor settings due to scarcity of clinical data on effectiveness, safety, and quality, despite the WHO recommendations.

³⁷ For the useful overviews of TRIPS impact on public health, see Lee, Buse and Fustukian 2002: 84—85; Thomas 2002; Danzon and Towse 2003; Orsi 2003; May 2007 in Ostergard 2007: 171—193. For a detailed record of the protracted struggle over the TRIPS agreements, see Sell and Prakash 2005; Sell 2007.

³⁸ IP/C/W/313.

³⁹ The use of safeguards had been previously backed up by the WHO’s World Health Assembly, see WHA 52.19

Initially there was a lot of disbelief in the practical implementation of these safeguards.⁴⁰ Yet the subsequent governmental actions proved otherwise. We have critical amount of evidence to suggest that developing countries successfully implemented these safeguards. This dynamic pushed the private sector to expand their political commitments to fight HIV/AIDS: Merck, GlaxoSmithKline, Bristol-Myers Squibb began reducing the prices on the essential ARVs. They slashed costs for the fixed dose combinations and offered the differential pricing for drugs for select developing countries. Finally, under the pressures of treatment activists, big for-profit corporations joined the campaign for the access for the life-saving medicines.⁴¹ The change in their strategies might have resulted from a perception that loosing the developing the developing world market was unacceptable, even taking into account the dwindling profits. For my line of argumentation it does not really matter if the pharmaceutical sector genuinely committed to mitigate HIV/AIDS. The point is that generics gradually became part of the global consensus.

In 2004 the US government allowed the generic manufacturers to apply for the Food and Drug Administration (FDA) approval. This

⁴⁰ Sell (1999: 174 in Cutler, Haufler and Porter 1999) reasoned that developing states and governments possess less expertise in these highly technical questions comparing to the private sector.

⁴¹ Smith and Siplon 2006: 125, 130—137. For the corporate human rights scrutiny, see Joseph 2003.

meant that the new generation of AIDS organizations was no longer dependent on the brand-name drugs for their health programs. The evolution of PEPFAR's approach to drug procurement illustrates this point. At first, the drugs for Africa were to be purchased from the U.S. pharmaceutical giants at the American price and cheap generics were not allowed. Former administrator Randall Tobias, for instance, argued that only safe and regulated drugs should be disbursed for the PEPFAR needs. In 2007 the new U.S. Global AIDS Coordinator Mark Dybul announced the reversal of the approach. He reported to the House Committee on Foreign Affairs that PEPFAR "increased its purchasing of generic versus branded ARVs from 72 percent from April to September 2006 to 88 percent (by volume) from January to March 2007."⁴² The establishment of Supply Chain Managements System (SCMS) as an integral part of PEPFAR provides continuous flow of essential high quality cost-effective medications and supplies generic ARVs.⁴³ Thus, generics became fully allowed in PEPFAR's operational plans. According to GFATM's purchase price report mechanism, as early as in 2004 brand-name products comprised only 40.7% of the ARVs.⁴⁴

⁴² PEPFAR press release # 83466

⁴³ For more information on SCMS, visit <http://scms.pfscm.org/scms>

⁴⁴ See GFATM 2005.

In the future the described achievements might be undermined by the increasing demands of the newer lines of medicines in the context of the diminishing incentives for the firms producing the generic supply for the nations lacking industrial capacities, overburdened by the incessant spread of HIV/AIDS and the increasing drug-resistance.⁴⁵

UNIVERSALITY

The second core component is the universality of access to treatment. It intends to stress both the moral imperative and economic cost-efficiency in providing access to ARVs to all the infected and vulnerable populations. It reflects the notion that nobody should be intentionally excluded from the consumption of public good. Because vulnerable subpopulations are tightly linked to general public, aiming at universal treatment at country level is the most reliable undertaking to curb the pandemic. Additionally, prioritizing the access to treatment even to the negatively constructed populations is cost-efficient as it lowers the virus transmission to the generalized population and thus will likely to diminish public health spending in the long run.

⁴⁵ On the future constraints to the sustainability of generic supply and the case study of India as the largest producer of generics, see Shadlen 2007: 569—576.

At the face value, universality is very costly. Yet with the technological breakthroughs in biomedicines achieved in 1996 even a small increase of average yearly costs of treatment allowed to increase the number of treated patients significantly. Since the costs of treatment are becoming relatively low, scaling-up is attainable even in the countries with lower GDPs. The first potential challenge to the global policy consensus consists of policy-makers choosing to provide only a selective access to treatment, either excluding any vulnerable subpopulation or, in contrast, including any societal group at the expense of the others (see Indicator 2a). The second potential challenge is the resistance to “scaling up” (see Indicator 2b). Third, the notion of universality presumes that providing the access to treatment will go together with aggressive prevention campaigns. While the appropriate balance between these two health interventions has been long in the center of international health policy debates, at this point suffice to say that prevention should not become a dominant substitute for the antiretroviral therapy, nor should it be completely ignored as irrelevant for curbing HIV/AIDS (see Indicator 2c).

Indicator 2a: Providing ARVs to key vulnerable groups

The first indicator of the substantive component of universality is the aggressive intervention to provide ARVs to the key vulnerable populations. Dependent on the country, this category of individuals may include intravenous drug users (IDUs), commercial sex workers, prisoners, men who have sex with men (MSM), HIV-positive mothers, women and girls, youth, people living in poverty, migrants and migrant laborers, people in conflict and post-conflict situations, refugees and displaced persons. Providing treatment to these and other key risk groups is desirable for the long-term impact on decreasing the infection prevalence in the general population and consequently saving significant amount of resources and human lives. From the public health perspective, these seemingly isolated and marginalized but often overlapping groups typically transmit the disease to the generalized population. Thus, treating these “bridge populations” is imperative. In the beginning of the outbreak, especially in the domestic context of resource scarcity, these interventions can be particularly successful. The opposite of this indicator is to deploy either severe restrictive measures, or criminalize vulnerable populations, while denying them treatment or access to it. Ordinarily stigmatizing particular target populations is the first sign that the principle of universality is being challenged.

The described approach to the pandemic heavily hinged on the biomedical understanding of the disease.⁴⁶ The international community travelled a long way before accepting this indicator as a part of global consensus.⁴⁷ At the outset of the epidemic the disease was associated with deviant and promiscuous minorities with almost 100 percent mortality rate. In the 1980s AIDS was understood as “gay cancer.” These attitudes were succinctly captured in the first semi-official, yet short lived, nomenclature of the disease as GRID—“Gay-Related Immune Deficiency,” and an additional pejorative nickname—“the four H disease” (homosexuals, hemophiliacs, heroin addicts and Haitians).⁴⁸ In this context, the US administration believed that the epidemic should be contained through severe regulative measures, including quarantine.⁴⁹ One of the most high-profile restrictive measures was barring the entry of affected foreign nationals into the

⁴⁶ On the history of epidemics and major controversies after the discovery of HIV virus in 1981, see Shiels 1987; Grmek 1990; Cochrane 2003. For the historical overview of the medical and debates about appropriate medical response to the disease, Fee and Fox 1988; Epstein 1996; Finkel 2007: 31—54.

⁴⁷ See Grmek 1990: 30. On the evolution of scientific understanding of the disease from the “gay disease” and lifestyle argument overturned by retrovirology, see Epstein 1996: 45—79.

⁴⁸ Nichols 1989: 11—55; Farmer 1992; Brown 2000: 1274.

⁴⁹ On the quarantine as a discussed solution to AIDS crisis, see Musto in Fee and Fox 1988: 67--85. For a brief discussion of ballot initiative to quarantine people with AIDS, while barring them from a range of jobs, see Shepherd 2007 in Harris and Siplon 2007: 175.

United States.⁵⁰ This regulation, adopted by Senate and passed by the House of Representatives, had a profound international effect as it was later followed by the similar legal provisions in more than 50 countries. As Murphy indicates, in 1987 “this ban was supported by some health professions organizations worried about the public health of the nation and the costs of publicly supported care for people with AIDS.”⁵¹

On the other hand, travel restrictions led to the famous San Francisco AIDS Conference boycott of 1989, during which AIDS activists were able to mobilize international public opinion against such restrictive measures and advocate medicalization of the disease.⁵² Jonathan Mann, the head of WHO’s Global AIDS Programme (GPA, 1987—1990) backed up these mobilization efforts and advocated human rights as a comprehensive framework to facilitate the transnational effort against HIV/AIDS.⁵³ In essence, the most important outcome of the boycott was the emerging understanding among domestic and international decision-makers that key vulnerable

⁵⁰ Rosen 1987: 64-73; Nelson 1987; on the role of senator Jesse Helms sponsoring a bill subsequently approved by Congress and on the details of travel restrictions, see Murphy 1994: 130—144.

⁵¹ Murphy 1994: 129.

⁵² On the best detailed account of the boycott and its impact on international approaches in response to AIDS, see Gordenker et al 1994: 113—133. For the broader overview of LGBT advocacy efforts, see Mertus 2007.

⁵³ Mann 1992; Mann 1999. For broader perspectives on AIDS and human rights, see Gordenker et al 1994: 62—65; Epstein 1996: 208—235; Siegel 1996: 246—250; Soderholm 1997: 79—82; London 2002.

groups cannot be excluded from treatment. It also demonstrated that severe restrictive measures cannot be a solution around which expectations how to fight the epidemic can converge. The greater involvement of the key vulnerable populations in the International AIDS Conferences (IAC) helped to promote this achievement even further.

Treating key vulnerable groups cannot be implemented without the governmental commitment to observe human rights, which also had to be recognized as a cornerstone principle of the global consensus. The majority of intentional financial and health organizations confirm the necessity of providing a non-exclusive treatment to vulnerable groups. In 1993 the World Bank indicated that “the cost-effectiveness of interventions drops sharply when infections cross firm high-risk groups to the general population.”⁵⁴ In 2005 the World Bank called for comprehensive programs to include “an increased number of interventions targeted to virtually all groups in society,” and “address gender and other dimensions of equity such as access for poor and marginalized groups and in rural areas.”⁵⁵ In 2004 the WHO’s Regional Office for Europe’s prepared the Dublin Declaration on Partnership to Fight HIV/AIDS in Europe and Central

⁵⁴ IBRD 1993: 99

⁵⁵ Ainsworth and Teokul 2005: 57; WB 2005: 21.

Asia, in large part stressing the fight against the local-level stigma, discrimination of and prejudice to the vulnerable populations. The declaration noted “that the respect, protection and promotion of human rights is fundamental to preventing transmission of HIV, reducing vulnerability to infection and dealing with the impact of HIV/AIDS.”⁵⁶ In essence, its signatories reaffirmed that observing human rights and treating vulnerable population is crucial for preventing HIV/AIDS to move into the general population. European Centre for Disease Prevention and Control (ECDC) monitors the Eurasian countries’ progress in the implementation of the principles and commitments as expressed in this Declaration.⁵⁷ GFATM uses the UNAIDS definition of key affected populations in order to evaluate country’s eligibility for its funding.⁵⁸

Providing the ARV treatment to the key vulnerable populations rests on the assumption that targeting (or at the very least not excluding) various marginalized high-risk populations can prevent the spillover of the epidemic to the generalized population. Such measures as providing the ARV treatment for the IDUs, stopping the institutionalized prosecution and harassment of the narcotic users, implementing harm reduction, medically assisted therapy (MAT),

⁵⁶ The text available at <http://www.unicef.org/ceecis/The_Dublin_Declaration.pdf>

⁵⁷ ECDC 2010

⁵⁸ See <<http://www.theglobalfund.org/en/eligibility/#3>>.

needle and syringe exchange programs (NSP), and opiate substitute treatment (OST) with methadone as the most effective withdrawal technique and hinge on observing human rights principles. For instance, according to the study published in AIDS, “[E]xclusively treating non-IDUs provided the least health benefit, and was the least economically efficient.”⁵⁹ Since recent, the Global Fund has been promoting harm reduction programs.⁶⁰

Today we witness the emergence of the new clusters of vulnerable target populations and new links between AIDS and other grave socio-economic problems, precluding or hindering development and good governance.⁶¹ Expanding knowledge about particular target populations helps upholding the universality of treatment as a key component of fighting AIDS. Many activists and practitioners still pessimistically talk about many complexities of overcoming stigma, which negatively impact on domestic governments’ efforts to launch a broad-based response to AIDS. In many cases the issues of discrimination, resentment, and hatred still endure.⁶² Nevertheless,

⁵⁹ See Long et al 2006

⁶⁰ Rifat and Kazatchkine 2010: 103-106 ; see also Ball 2007. On the links between harm reduction and human rights, see Elliott, Csete, Wood, and Kerr 2005.

⁶¹ For useful overviews, see Ostergard 2007; Poku and Whiteside 2004; Patterson 2005; Patterson 2006; Harris and Siplon 2007.

⁶² On stigma see Alonzo and Reynolds 1995; Brand in Fee and Fox 1988: 153—157; Oppenheimer in Fee and Fox 1992: 49—76; Stoddard and Rieman 1991 in Nelkin et al 1991: 241—272; Zhou 2007.

excluding certain groups is a significant breach of the standardized policy and put the general population at risk.

Indicator 2b: Scaling up as a proxy for universality

The second indicator of the substantive component of universality is the aggressive intervention to rollout the ARVs to anybody who needs it, or cover as much infected population as possible, depending on local constraints. As achieving the 100% treatment coverage is hardly attainable in the developing countries with limited resources, the relevant international guidelines use the notion of the scaling up as a proxy indicator of the commitment to achieve the universality of treatment. According to the WHO 2003 revised guidelines, the term “scaling up” refers to the process of increasing numbers of a target audience with the ultimate objective to provide access to ARVs for all those who need.⁶³ The opposite of this indicator is either discontinuing ARVs rollout for any other reasons than patients’ death, or officially rejecting the cost-efficiency of scaling up.

Over time, the number of key international health players used different approaches to trigger domestic awareness about the urgency of scaling-up. The UN provides general targets and guidelines how to

⁶³ WHO 2004: 7, 11.

evaluate the commitment to and achievement of the universality of treatment.⁶⁴ The agreement on scaling up is reflected in the following documents and initiatives: UNGASS Declaration of Commitment on HIV/AIDS; Guidelines on construction of Core Indicators; Millennium Development Goal #6; WHO 3 by 5 initiative; Abuja Declaration on HIV/AIDS, TB and other infectious diseases; UNAIDS intensifying prevention guidelines.⁶⁵ The United Nations Millennium Declaration adopted at the Millennium Summit in September 2000 is typically mentioned as the key among those. It clearly expressed its support for the notion of universality of treatment.⁶⁶ The Summit also set forth a number of specific goals, including combating HIV/AIDS, malaria and other diseases (Goal 6, Target for 2015: Halt and begin to reverse the spread of HIV/AIDS and the incidence of malaria and other major diseases). One of highest profile initiatives of scaling up belonged to the WHO. In 2003, commissioned by UNAIDS an international panel of the leading AIDS advocates, put together a report Access to HIV Prevention: Closing the Gap. The GAP called for filling the estimated \$3.8 billion HIV-funding gap by 2005. The so-called “3 by 5” program is designed to accelerate delivery of ARV treatment to three million

⁶⁴ A/60/262; A/60/737; HR/PUB/06/9.

⁶⁵ UNAIDS/07.07E / JC1274E

⁶⁶ A/RES/55/2, 18 September 2000; A/RES/S-26/2

people by the end of 2005 within 34 priority countries.⁶⁷ Although the initiative fell short of these targets, it nevertheless set scaling-up as a feasible approach. Other optimistic advocates of scaling-up include Accelerate Access Initiative (AAI), the Global HIV Prevention Working Group (PWG), and Treatment Acceleration Project (TAP).

Scaling up, of course, was hardly possible without keeping the prices on the life-saving medicines low. Thus, scaling-up is based on maintaining the cost-efficiency of the ARVs. According to Marion Rauner and Margaret Brandeau, the fundamental problem in relying on pharmaceuticals in resource-limited settings was stipulated by a sheer fact that as late as in 2001 “large-scale antiretroviral drug treatment was still not affordable in most developing countries.”⁶⁸ According to Greg Behrman, the absence of the cheap pharmaceuticals precluded the universality of access to treatment to be an integral part of international action in response to the pandemic: “The US global effort, therefore, consisted entirely of prevention efforts...As an option for fighting global AIDS, treatment was dismissed as not being cost effective.”⁶⁹ Dwindling costs of therapy disable the arguments of those who questioned the economic feasibility of rolling out treatment

⁶⁷ More information is available at: <<http://www.who.int/3by5/en/>>

⁶⁸ Rauner and Brandeau 2001: 170. For the helpful summary of different types of economic evaluation of the public health interventions, see Lee, Buse and Fustukian 2004: 140—158.

⁶⁹ Behrman 2004: 131. For the detailed account of how discovery of new drug enabled a new wave of treatment activism, see Smith and Siplon 2006: 40—44.

anywhere, save for the wealthiest countries. The harshest skeptics typically indicate that the rollout of the ARVs should reflect the particular capabilities of a given country, including the health care infrastructure, percentage of the infected population, GDP and general state of economy.⁷⁰ Pushing this argumentation to the extreme, some commentators insist that ARVs burden state budgets and in the long haul hinder states' performance in health care. The nub of the reasoning is that governments have to provide newer and newer lines of pharmaceuticals to adapt to the domestic epidemiological conditions and the increases in drug resistance.⁷¹ All these considerations notwithstanding, the invention of HAART unburdens state budgets and makes treatment economically efficient. Strong treatment intervention is most efficient at the outset of epidemic (no drug resistance and thus it requires only the cheapest first line regimen).

In 2002 the Policy Project and Merk, Inc. sponsored a special conference on AIDS and economics, which summarizes the major point of this subsection: the adverse economic impact of HIV/AIDS outweighs the costs of treatment.⁷² The nature and scope of present-day massive international sponsorship also very tangibly shows that

⁷⁰ For more general argument about cost-effectiveness analysis and HIV/AIDS, see UNAIDS 1998; Kenneth Freedberg and Yazdanpanah 2002

⁷¹ "High Drug Costs Could Jeopardize Brazil's No-Cost Antiretroviral Program", [Jan 03, 2007], available at <
http://www.kaisernet.org/daily_reports/rep_index.cfm?hint=1&DR_ID=41898>

⁷² See their report "State of the Art: AIDS and Economics" (July 2002)

intensive scale-up efforts are likely to bear fruits. All these activities add up to the governmental resolve for the universal coverage and alleviate their financial and logistical inabilities to live up to the promise of scaling-up.

Indicator 2c: Treatment as an integral part of prevention

The third indicator of universality of access to treatment is based on the understanding that providing the antiretrovirals alone is not enough to curb HIV/AIDS. In some circumstances treatment is prevention: consider the vertical prevention, i.e., mother to child transmission prevention programs (MTCTP). In most cases, access to treatment should be combined and complemented with various locally-sensitive preventive strategies. The opposite of this recommendation is either the rejection of the importance of ARVs as an integral part of prevention, or the hypothetical strategy to completely replace treatment with education, abstinence, and so on.

Very recently the global medical community has reached a new more decisive formulation which asserts the primacy of treatment in comparison to prevention strategies. Prompted by continuous failures in finding the AIDS vaccine, the co-discoverers of the HI virus Robert C. Gallo and Luc A. Montagnier called for the universal testing and

universal treatment as the most reliable method of prevention.⁷³ This suggests that treatment in the observable future will remain the integral part of prevention strategies. It is true that only treatment can substantially prolong the lives of the 40 million people who already carry the human immunodeficiency virus and allow them to return to productive work. However, under certain circumstances treatment alone, although crucial, is not a “silver bullet.” In the highest prevalence countries, only urgent expansion of treatment will forestall continued catastrophic rates of illness and death and the attendant social and economic devastation.⁷⁴ Even strong proponents of universal and free treatment agree that only a combination of prevention, care, treatment, as well as efforts to embed HIV/AIDS responses in the broader and longer-term work of strengthening public health, promoting development, and respecting and protecting human rights can mitigate the pandemic’s effects.⁷⁵ Global HIV Prevention Working Group (PWG) suggested that approximately half of the

⁷³ William Haseltine, An Early End to the HIV/AIDS Pandemic? The Atlantic February 25, 2009; available at <<http://www.theatlantic.com/magazine/archive/2009/02/an-early-end-to-the-hiv-aids-pandemic/7336/>>

⁷⁴ Wilson et al 2004: 42.

⁷⁵ For policy modeling on the optimal allocation of limited resources on HIV prevention and treatment see, for example, Rauner and Brandeau 2001: 171, Brandeau et al 2003; Zaric et al 2008.

newly infected people could be saved with adequate health services, integrating preventive and treatment strategies.⁷⁶

More generally, balance in allocating funds between treatment and prevention still remains a hottest topic of the current political debates. PEPFAR, for instance, had been in the center of treatment vs. prevention debate for a while. As activists point out, the former head of PEPFAR Ambassador Tobias on many occasions noted that AIDS is a fully preventable disease, which should be curbed by the so-called ABC principle (abstinence, being faithful and condoms). Many critics of PEPFAR claimed that the organization prioritized abstinence at the expense of treatment due to President George W. Bush's stress on the so-called evangelical approach.⁷⁷ This argument has only a limited credibility, as the provision of treatment was indeed an indispensable part of PEPFAR's strategy. According to the Kaiser Family Foundation (KFF) data, the Presidential emergency Fund (PEPFAR) allocations for antiretroviral therapy in FY 2004/2005 reached \$34 surpassing the funding for prevention and abstinence (funding up to \$20 million). In FY 2006, approximately \$819 million were spent to support ARVs, which consisted about 46% of total focus country resources for AIDS. Number of people receiving treatment increased

⁷⁶ The group was preparing annual reports from 2000—2007; see for instance PWG 2006

⁷⁷ Burkhalter 2004

from less than initial 50,000 to more than one million people as of May 2007. Additional PEPFAR funding also confirms its commitment to ARVs' provision: PEPFAR funded training of 52,000 people to provide ARV services and supported 1,912 ARVs sites.⁷⁸ All these figures indicate that PEPFAR takes funding for treatment seriously and exercises a balanced funding between ABC (abstinence, be faithful, correct and consistent use of condoms) and ARVs.

Bearing down on prevention and pro-life beliefs sometimes result into serious funding restrictions. For instance, one of the most effective programs in Africa—Marie Stopes International (MSI)—was defunded because of its abortion advice. Subsequently, the White House also overturned a Congressional award to the UN Population Fund because of its joint work with MSI. Yet prioritizing ABC at the expense of treatment remains relatively rare. For instance, Ugandan officials attempted to draft and enforce the abstinence-only policy with adverse consequences for curbing AIDS.⁷⁹ There is no solid agreement on the outcomes of the ABC policy: Sometimes the possible reversal of success in curbing HIV/AIDS is suggested, sometimes, on the contrary, its practicality and success.⁸⁰ Independently of what exact concerns observers, practitioners or treatment advocates might claim

⁷⁸ PEPFAR 2007

⁷⁹ HRW 2005

⁸⁰ See, for instance, Carter 2004

about the ABC policies, it is highly unlikely that it can undermine the broader international consensus on the role of ARVs.

PARTNERSHIPS

The third core component of the internationally recommended policy is building partnerships between governments on the one side and all relevant stakeholders, on the other. The idea that the most effective health policy responses depend on mutual efforts underpins this recommendation. For the purposes of this dissertation, the group of relevant stakeholders is analytically divided into private sector, international health organizations, and domestic civil society sector, including various issue-advocacy and health service groups. When governments selectively exclude certain stakeholders from the policy process, it signals that the international consensus on partnership becomes invested with situational and local characteristics. This recommendation is especially relevant for the governments that either lack requisite financial and infrastructural capacities to curb the epidemic on their own, or require assistance to increase the capacity of public health care sector, institutionalize and routinize financial flows, or have to improve service quality and outreach.

Indicator 3a: Public-private partnership

The first indicator of partnership is the increasing the capacity of the health care sector and the quality of response to HIV/AIDS via fostering a Public-Private Partnership (PPP, P3s). The National Council for Public-Private Partnerships (NCPPP) defines PPPs as

... a contractual agreement between a public agency (federal, state or local) and a private sector entity.

Through this agreement, the skills and assets of each sector (public and private) are shared in delivering a service or facility for the use of the general public. In addition to the sharing of resources, each party shares in the risks and rewards potential in the delivery of the service and/or facility.⁸¹

Since HIV/AIDS presents an enormous challenge for everyone, governments are expected to invite private sector to fight the epidemic jointly. The opposite of this recommendation is either intentionally trying to safeguard the private sector by excluding it from solving problems of common good, or purposefully over-committing to fight the pandemic exclusively with the framework of the domestic public

⁸¹The definition available at < <http://www.ncppp.org/howpart/index.shtml#define>>

health sector. Both choices can turn out truly detrimental especially in the countries operating in resource-poor settings.

Similar to the evolution of the other recommendations and guidelines, PPPs were not part of the global consensus for the most part of the 1990s. Prior to 1997, the focus of the professional medical and developmental community was to make governments recognize the gravity of the problem and provide necessary political leadership. Without reliable treatment and vaccines, the World Bank focused on providing information about the epidemiology, advocated prevention, and projected the cost-effectiveness of treatment with AZT.⁸²

Immediately following the technological breakthrough, a number of international actors stressed the importance of ARV treatment, as well as distribution and logistical control of drugs at country level. The staggering evolution of the World Bank's approach is the best illustration of the shifting emphasis to understanding the priority of the public health sector.⁸³ It framed the provision of treatment as a precondition to sustainable development, realizing that health programs require a significant financing.⁸⁴ Subsequently, the World Bank became not only one of the largest international funders in the

⁸²IBRD 1993: 99—105. For analysis of PPP in the context of global health issues and right to health, see Buse and Walt 2000; Buse and Walt 2000s, Reich 2002

⁸³ See, for instance, Lee, Buse, and Fustukian 2002: 65.

⁸⁴See Gaffeo 2003: 30.

fight against the pandemic, but also a promoter of treatment and advocate of governmental responsibility to provide drugs in public health sector.⁸⁵

With a 1997 seminal report, *Confronting AIDS: Public Priorities in a Global Epidemic* framed AIDS as a public health problem and stressed national governments' responsibility to provide antiretroviral therapy, palliative care, and the treatment of opportunistic infections. Governmental responsibilities also include 1) setting national-level programs with clear priorities in resource-scarce settings; 2) distribution and logistical control of drugs to alleviate problems with non-adherence to treatment regimen and erratic supplies of drugs; and 3) ensuring to the expanded, multisectoral response. The last recommendation implies cooperation between governments and non-governmental organizations, as well as strengthening cooperation between states and major industrial pharmaceutical corporations. In general, these guidelines intend to raise the level of political commitment of the national governments and motivate them to intervene more aggressively. In the most straightforward formulation, "governments should ensure that HIV-infected patients benefit from

⁸⁵ For the sharpest critique of the WB, see O'Manique 2004: chapters 2, 3; Poku and Sankjaer 2007: 136, 138.

the same access to health care as other patients with comparable illnesses and a similar ability to pay.”⁸⁶

Circa 2000 the priority on governmental delivery shifted to stress PPPs. The late Ambassador Richard Holbrooke galvanized the Global Business Coalition on HIV/AIDS, Tuberculosis and Malaria (GBC).⁸⁷ This consortium of organizations mobilizes business to sponsor public health emergencies and advocates a broader involvement of business in HIV/AIDS as a matter of national and human security. Merck & Co, for instance, joins and sponsors many global and regional PPPs as well.⁸⁸ Christer Jönsson captured the increasingly important role of the private sector by noticing that there is no one lead agency in coordination of all health-related actors, rather the fight against HIV/AIDS is governed by diffused PPPs.⁸⁹

In sum, the emphasis on the public sector in the implementation of the treatment policy is placed high on international agenda. Most developing countries cannot fully exercise the responsibility to provide access to treatment without entering PPPs.

⁸⁶ For the more detailed outline of governmental priorities and key responsibilities, see Ainsworth 1998; Ainsworth and Teokul 2000.

⁸⁷ <http://www.gbcimpact.org>

⁸⁸ *The list of Merck's HIV and AIDS Partnerships and Programs is available at < <http://www.merck.com/corporate-responsibility/access/access-hiv-aids/access-hiv-aids-partnerships/global.html>>*

⁸⁹ Jönsson 2010 in Bexell and Mörth 2010

Indicator 3b: Partnerships with international health organizations

Governments are expected to follow guidelines and recommendations provided by the international health organizations, and use the financial and logistical aid of the international donors. For resource-limited countries the success in curbing the disease is often directly dependent on the quality of partnership with these international AIDS organizations.⁹⁰ This type of partnership is indispensable for having an access to the modern epidemiological expertise, an uninterrupted supply of effective medications, and simply various grants and funding. The opposite of this indicator is either to challenge the expertise and recommendations of these organizations, attempt to proffer alternative health organizations, or to refuse any external logistical support and financial aid. All this might result in truly devastating consequences especially in the resource-limited countries.

Today, multiple international institutions provide international recommendations and guidelines on the principles of resource allocation, evaluation and monitoring of national health budgets, adherence protocols, and so on. The biomedical breakthrough was complemented with the inception of the United Nations Joint Programme on AIDS (UNAIDS, 1996). UNAIDS was created to

⁹⁰ Gordenker et al 1994.

bring together a number of HIV/AIDS programs, run separately by different UN agencies. The first important contribution of the UNAIDS' secretariat was a yearly publication of unambiguous and reliable epidemiological statistics, adequately capturing the state of emergency and projecting the future epidemiological trends. Later on, UNAIDS became also instrumental in developing relevant guidelines for resource allocation, funding, budget control mechanisms in the developing countries. In 2005, for instance, UNAIDS/UNGASS presented new guidelines how to construct the core indicators for the countries with generalized epidemic.⁹¹ The United Nations Millennium Project also provides guidelines (a set of goals and targets) to track the cross-national progress in curbing HIV/AIDS. The UNGASS uses National AIDS Spending Assessment (NASA) as a resource-tracking mechanism to measure commitment to the comprehensive framework to achieve the MDG goals. Of course, there is some debate about the UNGASS indicators, including the unrealistic expectation of success in stopping the spread of the pandemic and sometimes unreliable measurement of the achieved progress. Yet these concerns do not imply that governments across the globe should ignore these recommendations.

⁹¹ UNAIDS/05.17E

The new generation of AIDS organizations provides direct sponsorship for the ARV treatment and therefore gives strong incentives for governments to follow the global consensus. Recently, the Global Fund against AIDS, Tuberculosis and Malaria (GFATM, the Global Fund) and President's Emergency Plan for AIDS Relief (PEPFAR) became two most important global instruments of providing treatment for the nations operating in resource-limited settings. These organizations help overcome the problem of the erratic supplies of drugs, which undermines the outcomes of treatment and spreads drug-resistance. For the developing nations, on the other hand, gaining these resources is contingent on their well-articulated national HIV/AIDS policies being put on paper and on the existence of special domestic bodies as a precondition for receiving the transfers from GFATM. Thus, the multilateral HIV/AIDS organizations become truly indispensable as they provide mechanisms to translate some generic political pledges of the developed nations to fight HIV/AIDS into institutionalized and routinized behavior, which is not easily reversible.⁹²

⁹² Many practitioners and activists have been habitually lamenting the insufficient level of funding from the major international donors. But this concern does not imply that broad financial commitments on behalf of the international health organizations and donor community are inexistent. Rather, activists are pushing for higher, and often unrealistic, numbers of resources to be allocated by donors to domestic recipients. See, for instance, Harris and Siplon 2007.

For the remainder of this subsection I briefly discuss PEPFAR, which is to date the biggest global program dealing with HIV/AIDS pandemic. In his 2003 State of Union Address, President Bush announced the commitment of \$15 billion over five years to fight AIDS globally. Targeted countries included 12 African (Botswana, Cote d'Ivoire, Ethiopia, Kenya, Mozambique, Namibia, Nigeria, Rwanda, South Africa, Tanzania, Uganda and Zambia), 2 Latin American and Caribbean (Haiti and Guyana) and 1 Asian state (Vietnam).⁹³ Note that although Russian Federation is not technically PEPAFR's focus country, in 2006 it became the second tier of the five additional "countries of interest," receiving additional bilateral funding. The selected countries are estimated to account for approximately 50% of the world's HIV/AIDS infections. Among these countries, Uganda, Kenya, and South Africa are receiving the lion share of contributions. In June 2007 President Bush pledged \$30 billion more to support the Plan in the future. The emergency plan was re-authorized by the Congress and signed into law in 2008. President Barack Obama equally supported the Plan.

More specifically, PEPFAR purports to develop local infrastructure to promote self-sustainable local health programs. The

⁹³ PEPFAR 2004. For the annual reports see PEPFAR 2005; PEPFAR 2006; PEPFAR 2007, PEPFAR 2008.

program helps create health infrastructure of central medical centers—primary satellites—secondary satellites—rural satellites and remote mobile units continuum, covering geographically the whole country. There is a clear hierarchy and division of labor in conducted activities: general HIV/AIDS expertise—treatment—test on infectious diseases—distribution of treatment and medication pack refills, respectfully. Primary satellites are envisioned as focal venues where many private and public clinics run by faith-based groups and non-governmental organizations will be in this category. Judged by its general design, this infrastructure-building plan looks relevant for the long-term combat against AIDS and helpful in scaling up states' capacities and the quality of their response.

From a more utilitarian viewpoint, governments in resource-limited settings should be pleased to accept aid from the developed industrialized nations. Yet accepting aid and expertise of international actors should not be confused with donor-dependency, which describes the processes of fully delegating logistical support and responsibility to distribute drugs to international institutions, as well as privileging foreign-sponsored programs over domestic ones.⁹⁴ Rather, it means maintaining good working relationship with organizations providing and advocating ARVs, as well as coordination and

⁹⁴ On the notion of donor-dependency see Patterson 2005: 12-13; 171—172.

integration of domestic and international programs. In contrast, under certain conditions states might challenge the expertise and recommendations of these organizations, institutionalize alternative health organizations, and officially refuse to accept logistical support and financial aid. This behavior, especially if these states do not possess the requisite capacities and are constrained by the resource-limited settings, provides a first signal of some societal challenge to the global consensus.

Indicator 3c: Partnership with civil society sector

States are expected to support the work of transnational and domestic NGOs in order to increase the number and diversify the types of health organizations responsible for providing effective health care interventions. The integral part of this indicator is to pursue closer links with international and domestic civil society sector, which should serve both as the linking-pin organizations for broader partnerships with transnational health sector, and facilitate a more flexible rollout of the ARVs. The opposite of this indicator is to restrict civil society sector legally, exclude its members from the policy formulation and implementation process, and undermine their role as AIDS service organizations by either seizing the international grants earmarked for

them, or any other available ways. Restricting partnership, while privileging governmental programs is a significant deviation from international consensus on AIDS policy. Ultimately, this can impinge of the success of domestic responses to HIV/AIDS.

First efforts to build sustainable partnership models belonged to WHO's Global AIDS Programme (GAP, 1986—1995). GAP's primary focus was on surveillance, the national AIDS plans, human rights advocacy, and fund-raising. The literature praising GAP's contribution to international effort against AIDS sees its primary achievement in becoming an indispensable linking-pin to other active organization in the health policy network, thus teaching governments to be connected with other sub-national actors and civil society sector. GAP was able to link international donor organizations (including USAID) to domestic recipients.⁹⁵ Another big contribution was GAP's (and its head Jonathan Mann's personally) stress on the importance of involving civil society to protect human rights as a pivotal element in providing an adequate response to the widening health crisis. Despite all these achievements, the absence of an effective medication

⁹⁵ See Gordenker et al 1994: 74--77, 128—129; Söderholm 1997: 125—130, 136; Behrman 2004: 40—57; Harris and Siplon 2007: 205, 206, 247—249. As a funding agency GAP commanded only \$80 million in 1990.

triggered donor fatigue and lessened an interest in developing strong partnership with civil society organizations.⁹⁶

The invention of HAART resulted in irrevocable commitment to the partnership with civil society sector: the abstract principles of cooperation got infused with into some tangible reasons to do so. On the other hand, the discussed technological breakthrough empowered activist advocacy organizations and the civil society in general. The list of the most known and renowned organization includes ACT UP, the Treatment Acton Campaign of South Africa, the Grupo Pela VIDDA of Brazil, the Agua Buena Human Rights Association of Costa Rica, the Kenya Coalition for Access to Essential Medicines, Thai AIDS Treatment Action Group, Thai Drug Users Network.⁹⁷

Today, domestic civil society and AIDS service organizations across the globe enjoy the generous financial support from GFATM. In essence, GFATM's funding makes CSOs important partners for governments (especially if these CSOs do not command any resources of their own). This funding is based on merits of their proposals for treatment and service, as well as their subsequent implementation.

“The Framework Document of the GFATM” indicates that this

⁹⁶ See Chin 2007: 204—205. The argument that GAP failed primarily because of Mann's exit from WHO is after uncritically accepted by academic literature, see, for instance, Soderholm1997: 160—165. For detailed description of GAP under the leadership of Michael Merson in 1990—1995, see Behrman 2004: 79—86.

⁹⁷ On treatment activist network, see, for instance, Siplon 2002; Smith and Siplon 2006: 84—96.

organization supports simplified, rapid, and bottom-up disbursement mechanisms, which are intended to “reflect national ownership and respect country-led formulation and implementation processes.”⁹⁸

GFATM was launched in 2001 by the UN Secretary-General, the US and Nigerian Presidents, based on UN General Assembly resolution 1308.⁹⁹ It became operational in January 2002. GFATM is a financial instrument ensuring a sustainable funding for the local projects and leveraging additional financial resources from a variety of governmental and private sources. The received funds are subsequently disbursed to sponsor various domestic programs. The core principle of the Global Fund is performance-based funding, driven by the local needs.¹⁰⁰ In this capacity, GFATM works primarily to fund all the NGOs and ASOs that can do some decent ground work that focuses on the creation, development and expansion of partnerships, and thus strengthen the participation of communities and people affected by HIV/AIDS, malaria and tuberculosis.¹⁰¹

The external evaluation showed that the Fund’s spending on ARVs is consistent with other UN and WHO initiatives. The

⁹⁸ The document is available at: <
http://www.theglobalfund.org/documents/TGF_Framework.pdf>

⁹⁹ A/RES/S-26/2

¹⁰⁰ On the information of Global Fund Disbursements by Region, Country and Grant Agreement available at
<<http://www.theglobalfund.org/en/files/disbursementdetails.pdf>>

¹⁰¹ GF/B9/3

expenditure targets to provide drugs and related commodities have been consistently 48% of all granting commitments, which is by far the largest spending priority over Rounds 2 to 6.¹⁰² In 2007 alone the grand total of disbursed resources amassed to almost \$4 billion. According to treatment activists, the Global Fund is better positioned than other funding mechanisms to scale up the AIDS response, harmonize national efforts, and support a comprehensive approach to AIDS that integrates development concerns and addresses the needs of marginalized communities.¹⁰³ Ironically, the local organizations and activists will be never truly satisfied with GFATM, because the financial volume of the multiple of local service organizations is higher than GFATM can possible fill. Nevertheless, GFATM remains pivotal in empowering civil society sector and thus creates incentives for government to cooperate with it.

Besides funding, the GFATM operates through the Country Coordinating Mechanisms (CCMs), which institutionalized governmental partnership with the civil society sector. According to a report prepared by the International Council of AIDS Service Organizations (ICASO),

¹⁰² TERG 2006.

¹⁰³ Poku 2000: 294

...through the establishment of Country Coordinating Mechanisms (CCMs), the Global Fund has affirmed and legitimized the critical importance of the involvement of a full range of stakeholders in proposal development, implementation, monitoring and evaluation. Where the CCMs are working well, they provide unparalleled opportunities - often not available elsewhere - for the full range of stakeholders to work together in partnership. These stakeholders include governments, bilateral and multilateral donors, the private sector and civil society (including NGOs, affected communities and faith-based organizations).¹⁰⁴

CONCLUSION

From the health policy perspective, the described HIV/AIDS policy consensus was desirable as it provided both international and domestic policy-makers with clear [technocratic] policy goals of how many people should receive treatment within certain time period, as well as straightforward guidelines what the standardized treatment protocol is and how to manage the distribution and logistical control of drugs. It

¹⁰⁴ “NGO Perspectives on the Global Fund,” ICASO 2004: 1; the official information on CCMs is available at <<http://www.theglobalfund.org/en/ccm/>>

was attainable because the post-1996 ARV treatment indeed proved to be very effective and increasingly cheaper a biomedical invention supported by some uniform biomedical expertise and in various forms sponsored by international health, financial, and developmental organizations and pharmaceutical sector, especially its generic-producing segment. Although international health community eventually elevated these three core policy components to a common intersubjectively held understanding, for a long time they were either actively contested, or simply ignored. All this does not mean that the international consensus as I describe it here will remain intact forever, yet it definitely means that the policy consensus governs international approaches to AIDS and strongly suggests the content of domestic policy responses.

In the following chapter I devise an analytical framework to examine societal agreements about what constitutes the “common good” served by state (e.g., “social purpose”), which under certain circumstances might profoundly challenge the international consensus on treatment as public good, including its major indicators as described above.

CHAPTER 3. SOCIAL PURPOSE: A FRAMEWORK OF ANALYSIS

Social purpose is the core concept of this dissertation. I define social purpose as a socially legitimate and politically contingent conception of common good. Social purpose underpins the kinds of actions the dominating elite considers appropriate and the kinds of actions the domestic policy environment stimulates and sustains. Its impact can be isolated, when examining how a policy environment in a particular country “filters” the international flow of policy recommendations and initiatives.

This chapter theorizes the social purpose as the core concept of this dissertation. To illustrate its core features, it supplies some examples taken from the relevant literatures. Often, but not always, these examples are directly relevant for the further discussion of my cases. The first section briefly addresses the methodological debates on identity. In the context of my work, these debates are analytically relevant considering that social purpose is identity’s dimension. My discussion, however, contributes to and clarifies the elite-society connections, commonly underdeveloped by this literature. In the

second section I develop a general theoretical framework of social purpose (visually represented in the Figure 3.1). It can be applied cross-nationally and is subsequently used to structure two empirical chapters on social purposes in Russia and South Africa. This framework sorts out various discursive activities to facilitate understanding how certain elite-driven conceptions of common good become socially legitimate. I distinguish three types of agency, including domestic political elite, articulated audiences, and general public. I also delineate between several types of activities, which help understand relationship between elite and a society mutually generating social purpose. Subsequently linking these dimensions together will provide a coherent framework of political construction of national purpose (see Figure 3.1).

In the final section I briefly spell out theoretical conjectures about the effects of social purpose on policy actions (see Table 3.2). I contend that policy-makers evaluate the benefits of international policy initiatives from the vantage point of their commitment to a certain conception of common good. This evaluation (or “sorting through”) impacts on the flow of external policy recommendations through domestic policy environment. At minimum, elites have an ability to bring the content of the external recommendations in consistence with

their vision of social purpose, thus investing them with the clearly discernible local characteristics. Furthermore, the degree of public contestation about the policy substance might be determined by the degree of societal agreement or disagreement on the conception of common good. Depending upon wider audiences' perception of this social purpose as natural and self-evident, domestic policy environment might "immobilize" the proponents of alternative conceptions of common good, which renders their policy proposals inconsequential.

MUDDLING THROUGH THE CORE DEBATES

The overall intention of this section is to figure out whether my emphasis on elites and intentional construction of social purpose is warranted or should a methodological priority be given to the inductive recovering of discursive formations. Going into the details of these debates will help define the strength and limits of two approaches to identity formation. At the same time, I am not likely to fill in all the lacunae of theorizing about identity here. The central point of this section is that an emphasis on intentional elites does not rule out the study of collective articulations.

Theorizing elite-society connection is the first step in understanding how elite-driven conception of common good becomes socially legitimate and politically consequential. The literature is divided into two camps. One group of scholars tends to concentrate on the intentional and purposeful domestic elites, promulgating a particular conception of common good, while paying only a superficial attention to the study of deeply enrooted cognitive structures in which all the members of society are socialized. Another group of scholars pursues the opposite track. Both approaches seem to produce a somewhat skewed picture of how national identity is generated. Both approaches are empirically feasible, but they both have hard time in unambiguously explaining whether the national identity is fully enrooted, or remain a superficial edifice of public debates, or turn into something consequential for the national policies. Currently available middle-ground models leave too much of a space to speculate on the relations between agency and structures in the process of developing social purpose. The discussion below will clarify these limitations of the both approaches, while the subsequent section will offer a decisive framework to overcome their deficiencies.

Discourse and oversocialization

The first approach scrutinizes how discourses form a cognitive structure, which constrains and/or enables elites to enact certain political choices as legitimate and desirable.¹ Scholars argue that a detailed examination of the popular culture is helpful to start conceptual and empirical work, because recovering domestic discursive formations it safeguards scholars from imposing the outside categories on the complex webs of meaning, which inform certain kinds of actions and inhibit the others. As Weldes argues, “official representations depend on the cultural resources of society.”²

This approach builds on hasty assumption elites and audiences are invariably oversocialized.³ Agency is treated as a passive reader, not an intentional producer of these discourses. First, this approach rejects the possibility that identities and purposes are “intentionally or deliberately chosen, used, and/or strategically manipulated,”⁴ or “planned by intentional behavior.”⁵ From my perspective it is unwarranted to treat both elites and general public as incapable of conscious and intentional interaction with available discourses. After all, it is national elites and/or wider audiences which make some

¹ For an example of this approach see Hopf 2002, Carnaghan 2007.

² Weldes 2004:7.

³ See Klotz 2001: 230, Barnett 1999:7 for defending the analytical value of agency against the oversocialized view of actors.

⁴ Hopf 2002: 3.

⁵ Campbell 1992: 8.

discourses politically consequential: common discursive streams can be purely negative and thus not conducive to any socialization.⁶ Some empirical examples also suggest this possibility. In South Africa, for instance, the broad discourse of ubuntu over the course of time was deployed by elites to support the notions of reconciliatory justice, market-friendly neoliberal orthodoxy, and even the South African benevolent hegemony on the continent.

Second, with the exception of the pure totalitarian regimes, a collective level of articulation is likely to comprise of more than one discursive stream about identity and polity. Consider the following examples directly relevant for the discussion in the subsequent chapters. In South African context several overlapping and competing principal discursive streams included South Africanism, Africanism, pan-Africanism, black consciousness, and ethnic tribalism.⁷ In Russian case, as Kathleen Smith has convincingly demonstrated, after the demise of the USSR the formulation of the national identity (and thus the universally accepted conception of common good) was trapped at least in two mutually exclusive political mythologies.⁸ Ted Hopf

⁶ On the discursive genre of litany/lament, see Reis 1997: 84—91, 91—105. In exploring overwhelmingly negative collective articulations in Russia during and after perestroika, Reis noticed that all the discourses--the anti-Soviet, pro-Soviet, populist and Russophile—were not conducive to “positive” socialization.

⁷ See, respectively, Neuberger 1989; Sizwe 1979; Vail 1989, Ayitney 2005

⁸ See Smith 2002 on the contestation of pro-liberal and pro-communist political mythologies.

documents the presence of New Western Russian, New Soviet Russian, Liberal Essentialist and Liberal Relativist identities, each entailing alternative social purposes. Astrid Tuminez gives a detailed description of five major contending variants of Russian nationalism in the 1990s.⁹ From all these descriptions, it becomes clear that in the 1990s' Russia building a common social purpose was debilitated by the multiple discourses, none of which had an exclusive hold on agency.

The plurality of parallel discursive formations is not as rare as it might seem. It most likely indicates that the nation/society embraces a variety of alternative conceptions of common good, while its national identity is fragmented or fractured. In a case of a highly fragmented collective consciousness, political elites are expected to try to transcend this fragmentation, offering a broader and more encompassing imagery of the national purpose. Furthermore, with the exception of states strictly exercising social control and censorship, many alternative discourses are likely to remain available for wider audiences. For instance, while anti-communist sentiment today is broadly articulated in the popular culture, including movies and literature, so is the pro-communist stance (as the older soviet films and

⁹ See Tuminez 1998: 187—201. See also Parland 2005 on the variants of radical nationalisms.

books still available and to a certain degree popular in Russia). Even if submerged, or “frozen,” alternative discursive formations might permeate society and might hinder the official conception of common good among wider audiences.

The availability of various parallel discourses and public cultures, of course, is not a problem, unless we start making claims about their political salience for constituting the logic of appropriateness. If we claim that all these discourses simultaneously shape the kinds of actions considered legitimate, then we are likely to lose an analytical leverage in developing credible conjectures about discourses’ specific and falsifiable effects on behavior. If we claim that only one out of many competing discourses becomes salient politically, then we have to ascertain how and why this discursive stream became dominant. Thus, instead of bracketing all non-dominant discourses, we have to explore the reasons why particular discourses about the nation become more attractive than others.

Third, Hopf indicates that reducing the study of national purpose to the explicit (public) and internal debates about the goals of the nation and power struggle inside domestic elite can be misleading as it offers only a truncated version of the national purpose at best. In other words, he argues against a very thin notion of societal collective

self-understanding, in which discursive formations, historical narratives, commemorative practices and collective memories are reduced to a very specific proposal for the content of the national identity/social purpose as offered by national (governmental, parliamentary, bureaucratic) elite.¹⁰ In his view, the problem in all this is losing the analytical protection from imposing the outside categories on what appears to inform certain kinds of actions and inhibit the others.

Yet taking stock of all potential discursive formations on the basis of unsizeable number of texts, often containing complex, contradictory, or even arcane meanings, seems to be unmanageable. It will be always tempting to sneak in the questionable baggage of the literary theory, offer highly idiosyncratic renditions of these texts, and ascribe whatever meaning an analysts renders relevant. In the absence of agency, using JM Coetzee's words, "there is no dominating, central authorial consciousness, and therefore no claim to truth or authority, only competing voices and discourses."¹¹ This means that excluding agency from our analysis is prone of losing a grip on diverse and multifaceted popular culture. A feared reduction, on the other hand, might be a solution to avoid the massive work on collecting and

¹⁰ Abdelal 2000: 42—44.

¹¹ Coetzee 2001: 123.

interpreting popular culture texts and thus proves to be methodologically more efficient.

Agency and intentionality

The second approach treats identity as intentional, which is helpful to explain the selection among alternative discursive formations and an increasing dominance of one of them.¹² This perspective instructs us to examine the direct political proposals for national/common good, assessing how the public debates and political contestation shape the resultant social purpose.¹³ This approach makes clear that individuals and groups in authoritative positions in the political system are more privileged at least in the initial spelling out and spreading their versions of social purpose. Domestic political elites as such are able to commit significant amount of resources, push their preferred policy decisions, and override others. To refer to elites' primacy in building politically suggestive discourses, Eric Hobsbawm, for instance, brought out the notions of inculcation, semi-fiction, forgery, and grafting.¹⁴ In her meticulously researched book *Recovered Roots*:

¹² For the further discussion on intentionality and identity, see Neumann 1999: 209, 225; English 2000: 6; Abdelal 2006: 698; Rangmar 2008.

¹³ This approach is exemplified in Hobsbawm and Ranger 1983; Hobsbawm 1990; Neumann 1996, English 2000; Abdelal 2000.

¹⁴ See Hobsbawm and Ranger 1992: 307.

Collective Memory and the Making of Israeli National Tradition, Yael Zerubavel demonstrated that the articulations at a collective level were straightforwardly authorized and legitimized by the Israeli state and religious elite.¹⁵ Thus, Zerubavel empirically found that “the concept of invented tradition suggests a more conscious attempt to produce new cultural forms that seem as if they are of older origin.”¹⁶

The major caveat here stems from the apparent tendency to overestimate the power of elites in imposing the invented “traditions” on their nations and manipulating their constituents. Scholars seem to be conscious about this problem, yet often admit having no analytical tools to qualify the limits of this alleged imposition of elite-generated set of beliefs, symbols and traditions on society.¹⁷ Many a scholar working in the “invented tradition” paradigm examined cases, in which domestic contestation of alternative discourses was simply lacking. Thus, they were empirically restrained from ascertaining contending and equally suggestive “traditions.” This limitation still lingers. Achille Mbembe’s argument is a case in point. He reasons that political elites possess enormous power in creating and unleashing politically meaningful discourses. Yet he remains quite elusive as to how they make these discourses and concepts effective: “...the

¹⁵ Zerubavel 1995: 79—137.

¹⁶ Zerubavel 1995: 232.

¹⁷ See Hobsbawn and Ranger 1992: 7, 265, 303

champions of state power invent entire constellation of ideas; they adopt a distinct set of cultural repertoires and powerfully evocative concepts; but they also resort, if necessary, to the systematic application of pain.”¹⁸

Let us put these considerations in the context of my units of analysis. In Russia circa 2000 President Vladimir Putin and his entourage spend significant efforts to build the new social purpose, styling it as the “Sovereign Democracy.” In the similar way, South African President Thabo Mbeki called to “bring into being a unified and common South African identity” under the label of African Renaissance.¹⁹ While these two articulations are clearly intentional and innovative, they nevertheless are grounded in some previous political symbols and articulations. Russian political elite tapped into the old “textbook” themes (strong state, state-led economy, and great power complex), which had been abundantly represented in public culture. Similarly the African Renaissance flatly drew on very broad and variegated anti-colonial discourses of Pixley ka Isaka Seme, Frantz Fanon, Sheik Anta Diop, Léopold Sédar Senghor, Kwame Nkrumah, Steve Biko, and Mahmood Mamdani. One thing remains clear so far: the efficacy of offering unfamiliar (or highly innovative) political

¹⁸ Mbembe 2001: 103.

¹⁹ Opening address and political report of ANC President Thabo Mbeki, 52nd National Conference, University of Limpopo, 16 December 2007

proposals and discursive resources to wider audiences is likely to be costly and time-consuming.²⁰ In this sense, popular culture is so much a pliable building-block, as a factor which increases or decreases the appeal of elite's message to wider audiences.

The second principal limitation of this approach is its inability to capture the role of wider audiences. Overstressing the role of elites turns wider audience into mere recipients and carriers of some elite-generated proposals for the nation. Audiences, however, possess a capacity to collectively generate and maintain different proposals, as well as select or reject the elite-driven conception of social purpose. In doing so, audiences put significant constraints on elites: As persistent as elites can be in promoting their narrow conception of common good, in certain circumstances they have to ground their discourse into what is available and popular at the level of collectivity. From these shortcomings it becomes clear that without examining collective articulations at a broader level of collectivity, we will be unable to ascertain why a particular social purpose gains a wide-spread social legitimacy.

Finally, to use this approach more effectively we have to define what types of agency do we have and how various agencies are

²⁰ See, for instance, Bongmba 2004

connected in their mutual shaping of social purpose (see Figure 3.1). I distinguish domestic political elite, articulated audience, and general public, each with its own particular type of discursive activity. Elite is defined here as a small group of people with a very high position in the political system (ruling class), which generally formulates the conception of common good and triggers the process of its legitimation. Elite is supported by those who make politics their profession (e.g., “articulated audiences,” “political class”). I use this term to point up its meaning as “a body of adherents,” acolytes and devotees of domestic political elites, rather than a passive group of spectators, listeners, and consumers. This category is an assemblage of those scholars, journalists, belletrists, opinion leaders, TV hosts, documentary producers, who are not free (or chose to not be) to articulate any discourses, who accept the limits of officially sanctioned formulations. The attention to articulated audiences helps properly theorizing the connection between decision-making elites and domestic society. Building on Yitzhak Brudny, I prefer this neutral definition instead of rather pejorative tags such as court intellectuals and “spin-doctors.”²¹

²¹ For a brief definition of articulated audiences as “obedient, regime-supporting “actors vs. general public, see Brudny 2000: 17.

Wider audiences “participate actively in the formation of both identity and interests,”²² inasmuch as public culture (in its various popular genres) supports or rejects the elite-generated conception of common good (or any of its particular substantive components). In the second section of this chapter I offer the framework overcoming the limitations of both approaches, while building on their stronger sides.

Figure 3.1: Major processes in social purpose

THE FRAMEWORK OF ANALYSIS

This section develops a general theoretical framework of social purpose, which can be applied cross-nationally and is subsequently used to structure two empirical chapters. I distinguish three types of agency, including domestic political elite, articulated audiences, and general public, each connected to each other in mutually generating social purpose. To facilitate understanding how certain elite-driven conceptions of common good become socially legitimate I also delineate between several types of activities. Subsequently linking these dimensions together will provide a coherent framework to analyze political construction of national purpose (visually represented

²² Neumann 1999: 223.

in Figure 3.1). The proposed framework is not only a template I use to progress through next two empirical chapters of this dissertation, but also a broader tool to make sense of a set of interrelated discursive activities in a society (which previously have not been put together into one comprehensive framework). This framework is helpful to compare social purposes, overcoming many profound differences in their country- and time-contingent contents. At the end of each subsection I would provide four indicators, designed to rank each discursive activity separately. In the last section of this chapter I will bring all these rankings together in order to define possible variations in social purpose as a variable. As social purpose varies in its domestic acceptance, its various rankings imply different ramifications how external policy prescriptions and initiative are likely to be filtered through the domestic policy environment.

Because national purposes are constructed via discursive activities, discourse analysis is the methodology employed in the relevant empirical chapters. The so-called “canonical texts” are very important since political actors anchor their understanding and discussion of national identity to them. Canonical texts include original texts elaborating on the desired conception of common good for the purposes of generating the subsequent discussion. Most

notably, they include presidents' addresses to domestic elite and key statements of its chief ideologists.²³ More specifically, they comprise available public statements, white papers, political party platforms, parliamentary debates, newspaper articles. The sampling of supportive texts is stipulated by the standard consideration of their position inside political discourse as secondary to canonical texts and their time-extensive impact on wider audiences as the primary target. The sampling allows the variation of sources, i.e., statements, interviews, articles from different leading newspapers and journals, as well as variation in authors. Other important sources may include various debates among top political leaders, key intellectuals, highly acclaimed public persons, and prominent political observers. For the following two empirical chapters, I have drawn on 200 textual sources for each case. Two other basic options used by the discourse analysts—either to use the most controversial texts as the primary object of analysis, or use ethnographic/anthropological approach in inductively reconstructing the social identification—are not employed here. The first option limits the scope of articulation and debates inasmuch as it describes only the borderlines of public discourse. i.e., provides a list

²³ For an example of recovering of elite identity from a particular set of documents, see Campbell 1992: 23—34.

of necessary, but not sufficient texts for research.²⁴ The second gives somewhat arbitrary aggregation of the individual discourses to the collective level (it is also hardly falsifiable).²⁵ The canonical texts and supportive materials embrace a wider spectrum of articulations than either borderline or individual articulations.²⁶ My research is especially interested in foundational proposals, which are centerpieces of elite's thinking about national purpose.

Social purpose and elite's commitments

The notion of commitment to providing common goods is used here to describe an extant elite's explicit articulation of a certain conception of common good as a necessary condition for the country's sustainability and even its survival as an autonomous political organization.

Commitments are expressed in publicly available discourses, political programs, interviews, and so on.²⁷ Strong commitments and [successfully] acting on them powerfully reaffirms elite's sense of self-efficacy and self-esteem. At the same time, elites might become ultimately vulnerable: Not providing this common good might

²⁴ For an application of such an approach, see Bruner 2002.

²⁵ For this approach, see Ries 1997.

²⁶ See Neumann 2008: 61—77; Hansen 2006: 18—25, 55—72; Hopf 2002: 21—28.

²⁷ In the ideal case, we may find evidence that elites are cognizant about developing proposals in conjunction with their identity.

jeopardize their reputation, sense of worthiness, and political fate. Elite's commitment is a tip of the iceberg in terms of whether or not this conception of common good truly becomes a socially accepted and legitimate. Yet it is a good starting point to evaluate the emergence of social purpose. As social purpose is intentionally projected by elites onto domestic constituency as the primary target audience, it might be erroneously viewed as a kind of governmental propaganda.

As I empirically demonstrate in Chapter 4, Russian political elite was spearheaded by siloviki, i.e. the members of the so-called power ministries with law enforcement, military, and secret police backgrounds.²⁸ Siloviki unequivocally styled themselves as the champions of the strong state as the core political value with a strong state apparatus (*vlast'*, *gosudarstvennost'*), emphasizing the role of state in economic delivery, and ensuring Russia's great power status in global politics. Siloviki claimed these prescriptions were vital for the existence and survival of the country. In South Africa (Chapter 5) I discuss the concept of the African Renaissance. In this country, the leading role in articulating social purpose belonged to the so-called "Mbekiites," or loyalists (who sometimes called themselves nativists,

²⁸ For the further discussion on the conceptual strength and weaknesses of this definition, see for instance Taylor 2007: 15-24.

for the lack of the better term). This subset of domestic political elite committed itself for indigenouness as a core political value, explicitly promoted marketization with the increasing undesirability of spending and redistribution, and unleashed the rhetoric of the country's leadership role on the continent (ubuntu). Notwithstanding the richness, complexity and diversity of the multiple societal interpretations attached to the term, these three core organizing prescriptions clearly stood out as the principal themes.

Where do these specific substantive components of social purpose come from? In the framework of this research I will be able to give only tentative answers (the summary of core substantive components of social purpose in two countries is given in the Table 1.3 below). The starting point of social purpose formation is the exogenous shock—the collapse of the previous political regime or the whole international system, sometimes aggravated by protracted transitional periods. During these transitional periods, political elites embark on searching a new conception of common good for the country. Certainly, political elites both draw on and respond to their immediate global environments and to the backdrop of a dismantled political regime. At the same time, their proposals in essence spring from a range of contingent beliefs about common good as related to the extant elite's identity.

First, various forms of cultural and political homogenization—which we often subsume under the rubric of globalization—trigger the formulation of the primary political component of social purpose. More accurately, the perceived threat of homogenization (or, in some cases Westernization) stimulates domestic elites to reformulate and reassert what makes their extant in-groups and polities distinct in the world where the spheres of authority and borders are increasingly blurred. In the context of South Africa, the national elite reclaimed the meaning of being “African” and imbued it with a new sense of pride. This process was fundamentally similar to how many decolonizing nations in the second half of the 20th century asserted their national self-efficacy and self-esteem via innovative socio-political concepts.²⁹ In Russian circumstances, political elites made “stateness” the core marker of their difference from the West with the value of the strong state power (*vlast’*, *gosudarstvennost’*) at the core of the conception of common good.

Second, social purpose has an economic dimension, which in the developing world is formulated often in response to organizational and normative models originating in the North. While the current antiglobalization movement is spearheaded against economic neoliberalism, the principles of marketization, deregulation, and

²⁹ Consider, for instance the notion of *ujamaa*, *pan-Africanism*, etc.

privatization seem to have gained momentum after the global collapse of administrative-planned economies.³⁰ The strong emphasis placed on social redistribution of wealth, among other principles touted by the communist states, lost its legitimacy and was replaced by the so-called Washington Consensus in the 1990s. In various domestic contexts, however, the neoliberal policies had different fates. In South Africa the impetus of global economic neoliberalism as promoted by international financial institutions was intensified by negative memories of state-led economic disempowerment during the apartheid regime. Thus, not surprisingly, despite sharp domestic debate and much criticism, a new South African identity embraced neoliberal ideals, rather than social welfare principles.³¹ In Russian political context, the reliance on marketization and deregulation was overturned in favor of state-led economic development, after unpopular and not always fully implemented economic reforms of the 1990s. The problems in economic development were attributed to the negligence and unwillingness to use the state to exercise its power as an economic regulator.

Third, building social purpose necessitates an international/global dimension as well. Elites are likely to formulate

³⁰ Yergin and Stanislaw 2002

³¹ Bond 2003

their conception of common good in the context of the world system, which pressures states to define their own structural position in it. Elites pitch themselves as the ultimate champions of the state's desirable systemic position and imbue this position with a strong feeling of self-esteem. Advocates for any other position in the system are likely to get chastised as the promoters of the country's subordinate role, entailing the inevitable loss of sovereignty. After the exogenous shock of the late 1980—early 1990s, Russia's political elite downplayed the discourse of Russia as a great power at the international arena and instead talked about reentering the "common European house." When siloviki came to power in the early 2000s, they pledged to rectify the perceived loss of the nation's self-efficacy and revamped Russia as a great power (*derzhava*). This strongly implied that in any other international status Russia is likely to cease to exist as an autonomous political organization. In South Africa, Mbeki and his entourage also sought to boost the country's self-esteem as the primary and the sole expresser of a continental solidarity, and to a certain degree developed its image as a benevolent hegemon. In both cases, elites rejected Western values and asserted their own importance for the international system operating smoothly and for guaranteeing regional and global stability.

Table 3.1 National purpose in Russia and South Africa

In sum, I assert that exploring elite's commitments is a good starting point to ascertain the presence or absence of elite-generated self-reflective and intentional effort to develop national purpose. To assert this emergence, in the following subsections I discuss how domestic articulated audiences exercise their influence on policy environment and to what extent the elite-driven articulations find the support in the public culture. I would rank an extant elite's commitment to the conception of common good as follows:

- Elites do not commit to any definite country-specific conception of common good (absent);
- Contending elites strongly commit to alternative conceptions of common good (fractured);
- Elite strongly commits to a certain conception of common good, while its potential contenders chose not to (or simply cannot) challenge it overtly (restrained);
- Elite is strongly consolidated around a certain conception of common good (consolidated).

Yet from mere empirical description of domestic claims at the top political level about the search or emergence of national identity at

it is not always possible to arrive at a solid conclusion whether or not elite-driven articulations indicate the emergence of national purpose.

Social purpose and its public legitimacy

Social legitimacy of an elite-generated conception of common good depends on its public acceptance, as prompted by the so-called articulated audiences. Articulated audience labors to turn elite-generated conception of common good into broadly resonating and recognizable, sometimes simplified, themes. In essence, articulated audiences connect elites to general public.

Elites are likely to stimulate the emergence of articulated audiences, which justify why certain kinds of action are appropriate and why the others should be considered inappropriate. First, articulated audiences enable or constrain the production of certain resources shift the balance between previous discursive formations. Second, as elites relate providing common good to the desired image of the self as a primary or even sole carrier of its exact conception, articulated audiences ground a promoted conception of common good in particular self-Other dichotomies. If their efforts prove to be successful, articulated audiences turn a specific conception of common

good into simplified, broadly resonating and recognizable, perhaps even undisputable, themes.

In the absence of intentional efforts to credibly inject social purpose to the public intersubjective understanding, it is not likely to take roots. Smith, for instance, convincingly demonstrated that Yeltsin's failure in embedding pro-liberal social purpose stemmed from his entourage's negligence towards the would-be highly important symbolic national events, such as the resistance to the August 1991 putsch.³² In the 1990s' South Africa Archbishop Desmond Tutu promoted the notion of ubuntu (the universal bond of sharing that connects all humanity) and the idea of the Rainbow Nation as the country's social purpose. These concepts were seen as potentially accommodating all contending social values and thus ushering a broad social consensus as an ultimate political goal.³³ In both cases it was the absence of decisive and consistent efforts to stimulate the wider awareness and public acceptance of these conceptions, rather than the unattractiveness of the proposals themselves.

First, this thinking about the importance of providing discursive resources to the society draws on and refines the earlier

³² Smith 1996

³³ Wilson 2001: 9—13

literatures on the “invention of a tradition” as described in the previous sections. Most commonly elite-friendly resources are carried out via national educational systems, specific commemoration practices, and museums. Other tools may include creating forests and parks, codifying literary language, implementing architectural styles, touting cultural heritage, establishing research institutes dedicated to a particular topic, as well as preserving archeological sites, tombs, monuments, and even mountains.³⁴ Although not exhaustive, this list aspires to show the most important discursive resources, which can become politically consequential in the context of contemporary politics. In different regional, national, and subnational contexts, the value of different discursive resources varies. One type of resource—the past—deserves a special attention.

Since the advent of modern nationalism, the role of historical narratives and the past was deemed to be especially effective in legitimizing elites’ political goals and political proposals.³⁵ Ernest Gellner, Terrence Ranger, and Eric Hobsbawm suggested the importance of developing binding historical narratives, supported by a single official language and spreading literacy as vehicles of providing

³⁴ For examples, see, respectively, Schwartz 2005; Laitin 2002; Dubin 2004; Austin 2003, Nelson 2003; Riera 2006; Evans 2006; Smith et al 1998; Smith 2002; Zerubavel 1995; Callahan 2004; Shnirelman 2000; Groys 2003; Coombes 2003; Rosenberg 2005. On the role of media in sustaining national identities, see Price 1996.

³⁵ See Benson 1986, Reus-Smit 2004: 71; Wood 2008.

elite-oriented discursive resources. Later on, scholars specified this assertion by indicating that history was important inasmuch it allowed securing the political meaning of some “big,” or “liminal” events.³⁶ Historical education has been broadly suggested as one of the most common means get the political message “outreached” to the society to build a national identity and legitimize elites’ mission.³⁷

In Russia, for instance, national purpose has been embedded in the politics of the past, which aimed at reshaping the political memory of the XXth century and creating the discursive continuity among imperial past, communist regime, and Putin’s increasingly autocratic rule. More specifically, Putin’s entourage conducted intentional, systematic and almost decade-long activities to stigmatize the democratic politics of the 1990s, and glorify the Soviet role in the so-called Great Patriotic War. In South Africa, past was used to generate an invented tradition too. Articulated audiences presented the past of the continent as an incredibly rich resource to be reappropriated for an intellectual and spiritual revival. They claimed that the continental past meant as much for South African Renaissance as the Greek antiquity meant for the Renaissance Europe.³⁸ Building relevant discursive

³⁶ Campbel 1992: 21-23; on the notional of liminal events see Zerubavel 1995: pp

³⁷ See, for instance, May 2008 issue of *The Annals of the American Academy of Political and Social Science* “The Politics of History in Comparative Perspective”.

³⁸ See, for instance, Gueye 1999: 245 and Mzamane 1999: 173—183, both in Makgoba 1999

resources included the active role of the Human Sciences Research Council (HSRC) and a Council for the Development of Social Science Research in Africa (CODESRIA), which streamlined and valorized the African intellectual traditions. In fact, their publications were targeted to invent a tradition and generate a set of new canonic cultural landmarks for the contemporary South Africa.

Yet stimulating discursive resources is not as trifling a task as it seems: deploying potentially very powerful symbols and collective images may be in vain. In Russia the new national holiday Day of National Unity, for instance plugged into the pre-revolutionary holiday of the Day of the Icon of the Kazan Mother of God and commemoration of the overturning the Polish occupation of the country in 1612.³⁹ On the other hand, it was designed to move away from communist commemorations and replace by and large meaningless the Day of Accord and Reconciliation — Yeltsin’s substitute to the October Revolution day. As many political observers explained, the true meaning of the day is was not really about history: it was supposed to seal symbolically the official rendition of the “wild 1990” by commemorating the ending of the protracted period of state weakness and the undermined national sovereignty. Yet this resource turned out not to be immediately successful, as during the first years of

³⁹ See Nazarov 2004; Gromov 2005a; Ivanov 2005; Nikonov 2006; Borodina 2008.

its celebrations the radical ethnic movements successfully highjacked it for their own purposes. Thus, simply tapping in what is readily available in the pre-existing collective discourses might not be enough for legitimizing social purpose: the discovery of and interest to some resources, as it happened with Russia discovering its pre-communist past, does not automatically convert these resources into politically salient and consequential topics.

Second, elites do not exist in a political and social vacuum; they are likely to face domestic actors which embrace alternative conceptions of common good. Because the members of extant elite group strongly attach the conception of common good to its own identity and reputation, its opponents are most likely to be designated as the Other. Since they challenge the advocated conception of common good, the Other is cast as undermining the country's political sustainability and survivability. Articulated audiences create a strong national "we" against sordid anti-national "they." The Other receives a spate of negative characteristics and is suspected to play the subversive role. In various circumstances, political Others may be pejoratively labeled as turncoats, fellow travelers, public enemies, pessimists, anti-patriots, and so on.

If the self-Other dichotomy is successfully deployed, a more embedded (intersubjectively shared) national purpose is more likely to

emerge. In different historical, cultural and temporal circumstances building this Self/Other imagery may start with already available and constraining perceptions of who the contending political actors are at the level of broader audiences. Alternatively, this imagery may be the result of a pure invention. Putin's entourage conducted intentional, systematic and almost decade-long activities to embed his conception of common good by holding the democratic politics of the 1990s responsible for the collapse of the state, loss of national self-efficacy and self-esteem. The newly found Other was a domestic liberal, allegedly striving to "dismember" the state, offer its "juicy morsels" to Russia's foreign rivals, and certainly make Russia get down on her knees before the West. Similar dynamic can be traced in South Africa. In developing African Renaissance, its chief proponents successfully pitched it against Afro-pessimists, settlers and neo-colonialists, who schemed to keep South Africa subjugated to the West, denying her subjectivity, and treating the Native like a child.

I would rank the extent to which a certain conception of common good is legitimized in domestic society as follows:

- Conceptions of common good lack any definite legitimating discourses, self-Other dichotomies blurred (absent);
- All contending conceptions of common good enjoy are supported by plurality of discourses (fractured);

- Only one conception of common good is explicitly supported and intentionally promulgated (restrained);
- Only one conception of common good is strongly legitimized with a single dominant self-Other dichotomy (consolidated).

The caveat here is that the outcome of these legitimizing is not predetermined. In the contexts of deeply split societies, alleviating gulfs among diverse audiences is likely to be needed. Yet it is possible that building resources intended to traverse the divide between various separate identity formulations and discourses could make the appeal of the elite's conception of social purpose rather weak and eclectic. In the 1990s' Russia, Yeltsin's task force in charge of formulating the concept of "national idea for Russia" on the basis of taking stock of all discourses and ideas flowing in the society failed dramatically.⁴⁰ At the same time, in some extraordinary cases, elites will try to constrain dangerous or undesirable discourses.⁴¹ This may lead to the outright criminalization of some political interpretations, or a variety of legal penalties for public usage of certain not desirable articulations.⁴² All this suggests that the successful production of new national rituals and

⁴⁰ Satarov 1997

⁴¹ An example is banned Russian TV show Kukly (The Puppets) for making fun of Putin.

⁴² Consider, for instance, the law against the display of the communist symbol of sickle and hammer in the Lithuania.

narratives should be attributed not to the forceful imposition from above, but rather to the collaborative efforts of wider audiences.⁴³ The role of wider audiences is discussed in the subsection below.

Social purpose and public culture

Studying popular articulations is important inasmuch it is generally acknowledged that if the formulation of national identity/purpose (no matter how compelling inside an elite group) is not linked to the principal popular discourses, it remains either limited to a particular political group, or constricted to the elite. In other words, the emphasis on the popular culture captures the idea that it is a “vessel” expressing and sustaining wider audiences’ perceptions of a certain conception of common good and makes it self-explanatory and not contestable. In this subsection I address the ways to conceive popular culture as a [re]source shaping social purpose. As there is much debate and even confusion in the literature on how to employ popular culture without making unfalsifiable subjective interpretations, addressing this question is important.⁴⁴ Detailed accounts showing how, why and what type of resources can be best used to characterize national purpose in two selected countries are provided in subsequent chapters.

⁴³ See also Zerubavel 1995: 232.

⁴⁴ Nexon and Neumann (2006, Chapter 1) tentatively summarize the ways in which pop culture can be used in the study of politics.

Popular culture is a “vessel” expressing and sustaining wider audiences’ perceptions of what the nation is. It contains certain discursive streams—distinct, coherent and fairly elaborate narratives about national identity found at the level of collectivity, independent from what elites want to inculcate. Popular culture is studied here to tease out discernible overarching themes supporting or elite-driven articulations related to national identity and social purpose. When recovering identities from a collective level, scholars underscore that national identity is a cultural product, expressed in variegated textual sources and embedded at the level of collectivity. If national identity at the collective level can be retrieved from popular culture, looking at fictional works in principle can become useful. As Hopf—perhaps one of the preeminent expressers of this approach—put it, “popular fictional works are an especially important source of identity and its discursive practices”.⁴⁵

In certain cases, a discursive formation could contain a single convincing elaboration of national imageries. On the other hand, there can be multiple discursive streams at the level of collectivity, embracing different understandings of the self. To make the study manageable, I am specifically interested to see whether popular

⁴⁵ Hopf 2002: 35. Besides Hopf, Olcott (2001) provides a very insightful analysis of the contemporary pulp-fiction.

articulations contain the self/Other dichotomies similar to what elites promote, whether popular articulations in general match the content of elite-generated conception of common good, which would strongly suggest the connection between elite and society and thus attest to the strength of the national purpose. The proposed way to address these questions culminates in my model of discursive activities shaping national purpose (Figure 3.1). It suggests that wider audiences generate these streams, while elites can tap into them to [re]generate the desired self/Other dichotomies and enhance their political proposals for the national existence. Thus, my approach requires evaluating whether there are prominent narratives in which elites can successfully tap into, rather than aspiring to cover all potential collective articulations in the sample of popular culture.

In studying popular articulations, the first methodological obstacle comes from the very nature of popular fiction, which may either evade any straightforward interpretation, or offer even conflicting messages —the quality that makes fictional works so creative and interesting to consume and interpret.⁴⁶ Thus, the clarity of the message could be considerably blurred. For the purposes of this study, it is necessary to explain how the multifaceted body of domestic

⁴⁶ For the particular examples of how malleable popular culture works can be, see Chait 2000, Hozic 2003, Diala 2003.

popular culture can be used as a reliable indicator of a particular national identity and national purpose. Evoking popular culture for the analysis of the national identity can be suggestive if a scholar finds widely accepted interpretation of the textual or visual sources instead of deconstructing/interpreting them from scratch. One way to address the issue is to examine secondary commentaries, which, of course, may miss some minor point of any given item, but nevertheless may signal certain societal sensibilities.

Furthermore, another challenge in examining popular culture stems from its very nature, which is first and foremost about entertainment, rather than intentional conveying politically meaningful messages.⁴⁷ In any case, an interpreter might be tempted to overestimate the significance of some random, single textual or visual quotes imbued with political points. Rather, I would try to retrieve some broader core themes, which stand out among the multiple artifacts of the popular culture, which may shape collective consciousness, and which could become politically suggestive. Public culture, thus, is studied here not only to tease out broad discernible

⁴⁷ In such cases, popular culture should be understood as dependent on articulated audiences and thus an integral part of intentional attempts to build public legitimacy. Popular culture should express and carry collective notions, while somehow reflecting on the broad socio-political events and themes used by elites and articulated audiences to substantiate their proposal for the nation. In this case, these resources are more likely to receive public commentaries, so that my interpretation can be supplementary reliable.

themes, but to stipulate what themes and presentations are missing at the level of collectivity (and thus presenting a challenge to providing discursive resources). In sum, the tasks pursued in studying articulation are quite modest. I am not trying to recover all the available formations, or explain them in intricate details (a-la Hopf), or precisely relate them to each other.

The second methodological issue concerns sampling. An accurate sampling of domestic popular articulations is inevitably more difficult than finding the elite-formulated proposals to the nations. As the truly comprehensive survey of popular culture is hardly possible, theoretically-informed selection of particular type of information and kind of resources for national purpose is imperative. As the usage of popular culture in political science remains debated and somewhat confused, the methodological comments are imperative. Scholars often make use of only the extremely popular and highly acclaimed cultural items. The more recent groundbreaking studies employ a variety of textual and visual sources, choosing them mostly on the basis of their overall popularity. Among key examples are Harry Potter series, Star Trek TV show, Big Brother, Hollywood war movies, and comic books.⁴⁸ While I agree with the use of popular movies as a

⁴⁸ For the analysis of these sources see, respectively, Nexon and Neumann 2006; Weldes 2003; Dolby 2006, Gallagher 2008, Hajdu 2008.

representation of what is conventional and broadly shared in a given collectivity, the implicit notion that popularity matters has to be explained further. Moreover, in order to understand the limits of public articulation of certain topics within the framework of discourse analysis (acceptance of variation or degree within a certain narrative), the sample of popular culture has to include both popularity and marginal items. While the generic notion of being popular stands for wider audience's cumulatively positive response to certain types of articulations, it is also helpful to know at what point they start responding negatively inside the same articulation/stream. The sample, therefore, has to make use of both canonic, highly praised as well as mainstream and even marginal or rejected resources.

Below I propose several additional considerations guiding my sampling and interpreting collective articulations. First and foremost, these popular sources should be diverse (in their themes, numbers, producers, and targeted audiences) in order to contain, at least in principle, more than one self-Other dichotomy. If we look at fiction, the books we examine should not come out from the same publishing house; if we examine films, they should not be produced by the same studio, or directed by the same set of directors, screenwriters etc. The selected genre should not target only one segment of society. Besides, popular sources should not be dominated (censored) by domestic

political elite. This means, that the selected genre should be relatively free from intentional manipulation and thus should be analytically separate from elite-driven development of discursive resources.

Finally, what type of popular culture is most relevant and insightful for the study of national identity? It is clear that the vast field of popular culture should not be trimmed down, say, only to books and films, even if assuming we can take stock of all relevant sources. Eric Helleiner pioneered studies of currency iconography to examine as a technique of “nation-branding” and symbol of nationalism use.⁴⁹ Comparing to fiction and even feature films, these artifacts may prove to be more important for expressing national identities, as they are used on the daily basis almost by everyone, and perhaps slowly but inadvertently percolating into the national consciousness. However, it is methodologically advisable to use the same genre of popular culture to have a stronger control, especially if we want to recover identities over a longer time span. Also, using the mixture of different genres and textual sources of popular culture can be very confusing to the reader.⁵⁰

⁴⁹ Helleiner 1998; Helleiner 2002. For more specific examples see, for instance, Cusack 2005 for the study of the postage stamps of Portugal to transmit its nationalist and colonial ideology; Fuller 2008 on Kwame Nkrumah’s image minted on Ghana’s coins to serve the nationalist argument from sign; Hymans 2010 on the study of Central and Eastern European banknotes to emulate the Western currency.

⁵⁰ Hopf (2002: 34-35) includes academic journals, newspaper personal memoirs, pulp fiction, and textbooks in his sample.

The remainder of this subsection briefly discusses why have been selected feature films for the Russian Federation and fictional prose for South Africa. [South] African fiction historically remained very outward-oriented and speaks more directly to the Western readership, as JM Coetzee asserts in his description of a fictional Elizabeth Costello's pessimism about the quality and sensibilities of African writing.⁵¹ Most importantly, South African popular fiction has long operated in what can be described as a "politically demanding milieu" and thus initially qualifies to become the resource to forge the nation. It is well-suited to deal with the questions of morality, is conducive to the purposes of political mobilization and restructuring African identities, as Michael Chapman claims in his very important and multidimensional treatise of the contemporary state of popular culture in South Africa.⁵² Sam Durrant attributes to the postcolonial literatures both the healing, therapeutic, transformative role and thus capable of bringing the nation to the "roots." In general, because the contemporary South African literature is highly politicized and has stimulated a significant body of political commentaries it fits the purposes of my discussion.

⁵¹ Coetzee 2003: 35—58, "Lesson 2: The Novel in Africa."

⁵² Chapman 2006: 43—46, 75, 87, see also Coetzee 2001:209.

In Russian case there is no shortage of pop culture resources to be used to study the country's identity. Since the early 1990s domestic interest to national identity was abundantly supplied by quasi-accurate novels of questionable literary merits, facsimile reprints of pre-revolution historical narratives and grotesque historical pamphlets, which flooded the bookstores and street kiosks. Circa the early 1990s the sublime role of respected and influential historians, producing narratives about the past and reopening the forgotten and heavily censored histories was superseded by various segments of popular culture, which should be considered much better expresser of Russian identity. This dissertation makes use of domestic present-day feature films. The importance of the political role films and TV plays in contemporary Russia is widely acknowledged in literature.⁵³ Indeed, in the 2000s the role of domestic movies became evermore important as evident by the increase of the number of filmed movies and their relative box-office success versus foreign ones. Studying film industry is warranted in the context of current semi-politicized claims of the significance of film industry for the national consciousness.⁵⁴

⁵³ See, for instance, Swaffar 2000; Mickiewicz 1999; Mickiewicz 2008

⁵⁴ For the detailed discussion, see Vsevolod Brodskij and Anna Starobinec. 2005. *Vyjti iz sumraka. Expert* №3 (450).; Borusjak, Ljubov'. 2008. *Opravdanie serialov: Televizionnye zametki. Polit.ru*, 19 ijunja 2008.

I would rank the extent to which public culture supports a certain conception of common good as follows:

- Absence of discernible and elaborate discursive streams as related to conceptions of common good (absent);
- Public culture supports a plurality of contending articulations of common good (fractured);
- Public culture partially supports a dominant articulation of common good, including some of its substantive components (restrained);
- Public culture strongly supports a dominant articulation of common good, including its all substantive components (consolidated).

THE EFFECTS OF SOCIAL PURPOSE ON PUBLIC POLICY

This dissertation asserts that social purpose informs the kinds of actions the ruling elite considers appropriate, and helps ascertaining how domestic policy environment interacts with international recommendations flowing through it (including HIV/AIDS policy initiatives). In essence, when sorting through international policy recommendations, elites answer the fundamental questions how to define the guidelines of the provision of a particular public good

(treatment), which populations should benefit or be excluded from the consumption of public good (universality of access), and who gets to participate in shaping public health policy (partnership). On the other hand, as social purpose varies in its domestic acceptance, its various rankings might shape the intensity and nature of the domestic contestation around external policy prescriptions. Thus, this variance is likely to affect how exactly the external initiative are likely to be filtered through the domestic policy environment. While I am not claiming that social purpose should be treated as the single explanation of the variation in how governments and societies adopt external international policy recommendations, on balance it tells us an important and previously overlooked story about the political determinants of domestic policy responses.

The biggest challenge is perhaps to provide a valid way to rank national purpose. Giving ranking is important and might help formulate and sharpen previously underspecified conjectures about the effects of identity policy formulation and implementation. Scholars using elite-oriented approach use several indicators to classify the degree of elite consensus on national identity. These indicators include how many political parties commit to the similar conception of

common good.⁵⁵ Another indicator is the endurance of a certain social purpose even after particular individuals or the elite group, which generated it, are no longer in power. In this case, the strongest empirical evidence would be if multiple consecutive governments share the same identity.⁵⁶ The downside is that these indicators are case-driven and have only limited validity. In this context, my framework of analysis provides more straightforward guidelines to rank social purpose and think about its effects of policy process (see Table 3.2):

Table 3.2 Ranking social purpose

Generally, this ranking is based on evaluating the extent to which elite-generated conception of common good get to shape the domestic policy environment. These distinctions are important. Consider, for instance, situation when powerful elites carry out certain kinds of policy actions they consider legitimate, while society strongly embraces alternative conceptions of common good. This can trigger a profound societal contestation with different implications for policy

⁵⁵ Abdelal 2000: 94, 96. My ranking builds on Abdelal's insights that social purpose is has to be examined not only by revealing its content, but also by the degree of contestation around it. His *National Purpose in the World Economy* tentatively delineated between absence and presence of such political contestation.

⁵⁶ Schwartz 2005

process. I delineate between absent, fractured, restrained, and consolidated rankings of social purpose.

In case if elites demonstrate no strong commitment to a conception of common good, all alternative kinds of actions are legitimate; the policy environment is likely to be dominated by different bureaucratic agencies, which are expected to pursue their narrowly defined tasks. In the opposite case (social purpose consolidated), it prompts a relatively coherent and elaborate policy response, which brings together previous uncommitted domestic public policy initiatives approaches.

At minimum, in case of fractured, restrained and consolidated social purposes elites possess an ability to influence the content of the external recommendations and policy initiatives, investing them with the clearly discernible local characteristics. Reus-Smit, for instance, offers an example from the contemporary American politics, where the neoconservative conception of common good did not become a national purpose, while nevertheless shaping American foreign policy agenda.⁵⁷ Furthermore, elites can achieve a success in getting their particular iteration of common good to be supported by articulated audiences and embedded in collective articulations, expressed in the

⁵⁷ Reus-Smit 2004.

means of popular culture. This strongly implies a public acceptance of a distinct social purpose and generally delegitimizes any alternative conceptions of common good, which might be considered only with serious reservations.

At maximum, domestic policy environment—if significantly shaped by elite-friendly discourses—can simultaneously empower various groups in favor of governmental policies, and disempower various nongovernmental organizations, civil society groups, and social movements with the set of demands conflicting and inconsistent with the official policy responses. In this context, alternative behavioral choices might be advocated either moderately, or might not be consequential for the formulation and implementation of the public policy at all. Overall, the strength and limits of political mobilization in given societies is likely to be shaped by the extent to which alternative behavioral choices become either delegitimized, or simply not considered as viable in a given domestic policy environment. Thus, the degree of public contestation about the policy substance might be determined by the degree of societal agreement or disagreement on the conception of common good.

As will be demonstrated in my empirical chapters, social purposes in two countries remained restrained (leaning consolidated in

Russia and leaning fractured in South Africa), yet combined with elite's strong commitment to their conception of common good it triggered certain policy responses (the kinds of actions) they considered legitimate. This type of consensus emerges when one sub-elite group strongly espouses a conception of common good and is able to act on and enforce it. At the same time, wider audiences might inherently disagree with the promoted conception of common good, but for a variety of reasons might conform to it and if chooses to dispute it publicly, does so in a very subdued manner. At the margins, other sub-elite groups and political parties keep advocating radically different set of political obligations, engrained in a different set of values. I roughly describe this as a power-based (restrained) consensus on social purpose. The power-based consensus might be expected to shape the policy environment, but in the long term remain inherently weak and unstable. In this context, my most general empirical argument is that the obsession with strong state and security in Russia created a policy environment, which delegitimized liberal approaches (with the strong focus on human rights and partnership with nonstate sector) to the looming health crisis. In South Africa, the obsession with local solutions and return to the roots delegitimized mainstream western biomedical approaches to curbing HIV/AIDS.

CONCLUSION

Chapters 4 and 5 explore the national purpose in the Russian Federation and South Africa separately from the HIV/AIDS policy, using the model advanced in Chapter 3. I am interested in ascertaining whether or not social purpose provides a permissive environment for the emergence of specific policy responses as informed by country-specific and contingent conception of common good. These chapter also examine the content of national identity in two selected countries with their historically contingent labels are “Sovereign Democracy” in Russia and “African Renaissance” in South Africa. The dissertation strongly suggest that that in responding to the domestic epidemic of HIV/AIDS the key decision-makers in both countries have significantly transformed the internationally prescribed policy in accordance with the substantive components of the domestically accepted social purpose. In Chapters 6 and 7 I look at the HIV/AIDS policy with the presence of social purpose affecting it. I capture how national policy responses challenged and “filtered” the internationally prescribed range of choices. In other words, I document and explain when, how and why the domestic policy choices became inconsistent with the mainstream international health consensus. Rather than treating the epidemic as a pressing public health issue, Russia’s

“Sovereign Democracy” prompted the government to respond to the domestic epidemic as the issue of demographic survival and criminal drug abuse. This choice subsequently eroded the human rights component from the official policy, overstretched the public financial commitments, and frustrated the cooperation with private sector and civil society. The imperatives of “African Renaissance” reframed the HIV/AIDS epidemic as a local developmental problem. As a result, the Cabinet supported substandard biomedical treatments and indigenous healing practices, consistently resisted the universal and free rollout of treatment in order to avoid the undesirable governmental expenditures and redistributive strategies. In both countries, these policy choices resulted in the adverse consequences for public health and prompted a protracted contestation among various state and non-state actors around the principles of the desired public health policies.

After I discuss social purpose in details, I will evaluate how, why and to what extent Russia and South Africa responded to the global policy consensus as described in this chapter.

CHAPTER 4. SOCIAL PURPOSE IN RUSSIA (SOVEREIGN DEMOCRACY)

Kathleen Smith has convincingly demonstrated that after the demise of the USSR the formulation of the national identity (and national purpose) in Russia was trapped in the mutually exclusive pro-liberal and pro-communist political mythologies.¹ At the same time, neither proponents of the Western-style liberalism and democracy, nor the champions of the revamped communism infused with ethnonationalism, were able to outreach their respective vision of the national purpose for the broader audiences. Although anti-communist sentiment was broadly articulated in the popular culture, including movies and literature, a profound ideological confusion precluded the formation of a consolidated national purpose. At best, it remained fragmented.² Not surprisingly, after Boris Yeltsin stepped down from the presidency, political elites in Russia began formulating a political proposal for the nation once again.

The concept of Sovereign Democracy encapsulates three important themes: the ultimate political value of a strong state power

¹ See, for instance, Smith 2002

² For general discussion of national identity in Russia, see Dunlop 1993; Tuminez 1998; Brudny 2000.

(vlast) with a special stress on economic delivery in the context of state-led economy, and its leading role in reasserting and actively exercising Russia's great power status in global politics. Not only these particular themes (strong state, state-led economy, and great power complex) clearly stand out as three most important components in the Russian political discourse, but they were turned into prescriptions how to protect the country as an autonomous political organization. An integral part of the Sovereign democracy--the discourse of the "wild 1990s"--pulled together various collective articulations together, while sustaining the differentiated understanding of the Soviet past, transcending the boundaries of the blame so customary in the previous decade.³

In this chapter I ascertain whether or not social purpose truly emerges in Russia. In doing so, I follow the framework of analysis as laid out in Chapter 3. Throughout the whole chapter, I trace how elite formulated social purpose as pinned on their identity and clearly identified itself as the primary champion and embodiment of these new obligations. Self-Other dichotomy permeates discourses at all levels. This divide also shows the self/Other dynamic – Russian state-centric and sovereign self is pitched against the subversive liberals, allegedly

³For the most important collections of essays and debates on Sovereign Democracy, see Remchukov 2007; Poljakov 2007; see also Migranjan, Andranik. 2007. O suverennoj demokratii. *Rossijskaja gazeta*, 03.10.2007.

striving to “dismember” the state, offer its “juicy morsels” to Russia’s foreign rivals, and certainly put Russia on her knees.⁴ In Chapter 6 I demonstrate how all these efforts quickly politicized the responses to the epidemic of HIV/AIDS and subsequently had adverse effects on the adoption of global standards of the antiretroviral treatment.

ELITE’S COMMITMENT TO SOVEREIGN DEMOCRACY

Elite’s commitment to a certain conception of common good is the first step ascertaining whether or not social purpose truly emerges in a given country. In this section I spell out the core components of Russian national purpose and ascertain the degree to which extant elites are consolidated around it. In Russian context, the core substantive components of the national purpose were tentatively articulated as early as in 2000—2001 and got elaborated on throughout the whole period of Vladimir Putin’s presidency.

At first, Putin made disparaging remarks about the national idea (read: national purpose) as the Russian pastime and thus was branded as a pragmatist.⁵ Later on, a seeming eclecticism of his

⁴ See, for instance, Sergei Medvedev. 2004. “Juicy Morsels: Putin’s Beslan Address and the Construction of the New Russian Identity,” *PONARS Policy Memo 334*, November 2004.

⁵ R. Medvedev 2004: 93.

political statements made domestic political observers and journalists believe that Putin's political program was overcoming the previous ideological divisions.⁶ At the same time, many domestic political observers expected a new proposal for the nation to emerge.⁷ In this dissertation I use the term Sovereign Democracy to describe his conception of social purpose, even though sometimes Putin himself and several high-powered politicians (including future President Dmitry Medvedev) superficially disagreed with this descriptive tag.⁸ Scholars have abundantly noted that since Putin came to power, many notable persons with military, security, and law enforcement background (siloviki) started dominating Russian political elite. According to some estimates, siloviki comprised up to 42% of the federal elite as compared to 13% in the 1990s. This data is tentative, since most of resumes of Russian bureaucrats are not readily available. Scholars still dispute whether siloviki is a meaningful way to aggregate individuals, given the abundance of internal conflicts, variance in organizational culture, and outlooks among those who had served in different agencies and ministries. These differences notwithstanding, scholars agree that an emphasis on siloviki is

⁶See respectively Parland 2005: 191—197; Allensworth 1998: p. 288; Hopf 2002: 157—158, 220, 223.

⁷ See, for instance, the roundtable in *Literaturnaya Gazeta* July 11, 2001

⁸ On Putin's and Medvedev's reactions to the concept, see Evans 2008: 900; Morozov 2008: 154, 157.

instructive. Brian Taylor argues that siloviki “have been at the center of politics under Vladimir Putin. They have played a key role in Putin’s central project of strengthening the state, which has in reality been more about establishing the dominance of the Kremlin than creating the administrative capacity to run a well-functioning 21st century government.”⁹

The well-informed Russian political observer Olga Kryshstanovskaia listed Sergei Ivanov, Viktor Ivanov, Igor Sechin, Nikolai Patrushev, and Viktor Cherkesov as members of Putin’s inner circle and the true ideologues of the coming political changes.¹⁰ All these individuals shared the similar background and occupied various key positions in the state hierarchy under Putin. Siloviki spearheaded the formulation of the new conception of public good and linked it to their identity. They excessively stressed the necessity to revive the strong state, eliminate any alternative spheres of authority, enforce law, and restore Russia’s great power status. They also triggered the obsession with the threats to the territorial integrity of the country and its sovereignty. They attacked the liberal outlook and human rights as inconsistent with their core beliefs. Siloviki explicitly styled

⁹ Taylor 2007: 41; For the detailed discussion of the concept, see Taylor 2007: 15--24

¹⁰ Ol'ga Kryshstanovskaja, Possijskaja jelita na perehode, *Publichnye lekcii Polit.ru*, 21 Avgusta 2008

themselves as the national saviours and the sole champions for the political existence of the country. The most noteworthy statement belongs to Victor Cherkesov's newspaper article "Warriors Should Not Become Merchants," where he argues that siloviki (chekisty) saved the country after a prolonged economic crisis and political chaos of the 1990s as inflicted on Russia by the liberal anti-statist forces.¹¹ Domestic observers tended to downplay the importance of this article as Cherkesov's attempt to get an upper hand in some nontransparent internal conflicts. Nevertheless the principal metaphor used in this public utterance was very clear. Cherkesov's portrayed the self as the state-building Warriors and contrasted it to the subversive Merchants (oligarchs), which had to be reined in. In a metaphorical form, this statement confirmed of role the law enforcement agencies as Russia's backbone, the primacy of state power over the free markets and laissez-faire.

Throughout the 2000s this imagery percolated into the broader political elites and slowly became dominant. At first, the dominant party United Russia (Edinaya Rossiya, ER) pleaded not to inculcate any "official state ideology" at the expense of solving "real"

¹¹ Cherkesov, Viktor. 2007. Nel'zja dopustit', chtoby voiny prevratilis' v trgovcevy. *Kommersant-Daily*, 09.10.2007.

problems.¹² United Russia openly proclaimed itself the only champion of Russian national purpose, although its exact conception was yet to be formulated. Party's leaders denounced both the radical leftist ideology and the rightist liberal utopias as counterproductive and divisive. The Chairman of the High Council of United Russia Boris Gryzlov claimed that reiterating political mythologies was useless for the political and economic development and hence should be dismissed. He directly accused both "so-called liberals" and "so-called derzhavniki" pursuing their narrow parochial interests instead of working for the betterment of the country.¹³ Simultaneously, Gryzlov described the Russian self as nationalist, evolutionary and conservative, and the Other as foreign-inspired, revolutionary and liberal.¹⁴

Around 2003, United Russia explicitly committed to the goals of creating the strong state, state-led development and modernizations, as well as the necessity to restore the great power status. The commitment to the strong state laid down the basis for self—Other dichotomy. A number of political journalists built on this theme: they claimed that the subversive Other threatened the very existence of the

¹² Gryzlov, Boris. 2003. Politicheskij doklad Predsedatelja Vysshego Soveta Politicheskoy partii "Edinaja Rossija" B. V. Gryzlova pered delegatami III S"ezda partii "Edinaja Rossija," 22.09.2003.

¹³ Put' nacional'nogo uspeha. Manifest Vserossijskoj politicheskoy partii Edinstvo i Otechestvo-- Edinaja Rossija.23.04.2003

¹⁴ Boris Gryzlov. 2005. Partija — ot latinskogo slova Chast', *Tribuna*, 20.09.2005.

strong state and thus should be excluded from the set of legitimate political actors.¹⁵ The liberal ideology and the promotion of human rights were presented as tools, purposefully used to undermine Russia's very existence as an autonomous political organization. In practice, defending this conception of social purpose implied the need to eliminate any alternative center of authority, i.e., to limit domestic political competition, impose political unity, and keep liberals out of power.

The consolidation of political elite around this version of social purpose became evident in 2003, when strictly Putin-oriented party Unity (Edinstvo) merged with its former rival Fartherland/All-Russia (Otechestvo-Vsya Rossia) into a mammoth "United Russia" (ER).¹⁶ The internal political discussion in 2005—2008 remained confined to State-Patriotic, Liberal-Conservative, and Social-Conservative (CSCP) clubs. There are very few meaningful ideological distinctions among these groups as demonstrated in their blurred titles. They all embrace the similar conception of common good.¹⁷ Furthermore, during his first terms as a president, Putin initiated a set of reforms, harshening

¹⁵ See, for instance, Pavlovskij, Gleb. 2005. *Vlast' i oppozicija: kriterii jeffektivnosti. Publichnye lekcii Polit.ru*, 10.02.2005; Leont'ev, Mihail. 2004. "Sojuz mecha i orala:" Novaja ob"edinennaja oppozicija za "Rossiju bez Putina". *Izvestija*, 25.02.04

¹⁶ For the detail account, see Remington 2005: 35—44 in Herspring 2005; Remington 2008; For the overview of the formation of a new party system in the 2000s, see Gel'man 2008

¹⁷ Detailed information about these clubs is available on their websites: <http://cscp.ru/>; <http://gpclub.ru/>; <http://www.inop.ru>

electoral laws. This pushed the parties embracing the alternative conception of common good, such as the Union of Right Forces, outside the federal politics. All this suggests the consolidation of elites around siloviki-generated conception of common good. In 2009, however, one opinion poll revealed some growing disagreements inside Russian political elite about what specific obligations they viewed as central for social purpose.¹⁸

Strong state as an ultimate political value

Scholars and political observers agree that the focal point of Putin's nation-building agenda was the value of the strong state power (*vlast*, *gosudarstvennost*).¹⁹ Putin expressed his personal commitment to the strong state in his early newspaper piece "Russia at the Turn of the Millennium."²⁰ In principle, the notion of a "strong state" might imply preserving its territorial borders, increasing state capacity and

¹⁸ See Mikhail Afanas'ev 2009. These findings may signal the coming end of the consensus about Sovereign Democracy. For the purposes of clarity I would bracket these minor intra-elite distinctions and preferences. For the broader overview of changes in Russian elites, see Gaman-Golutvina 2008. Hale and Colton 2010 underscored that in 2008 the popular expectation for Medvedev to challenge status-quo.

¹⁹ See for instance, Nikonov, Vjacheslav. 2004. *Strategija Putina: Stremlenie predotvratit' raspad gosudarstva lezhit v osnove federativnoj politiki*. *Rossijskaja gazeta*, №3660, 22.12.2004; Surkov, Vladislav. 2004. *Zamestitel' glavy administracii Prezidenta RF : Putin ukrepljaet gosudarstvo, a ne sebja*. *Komsomol'skaja pravda*, 28.09.2004; Chadaev 2005: 15; Klyamkin and Kutkovets 2006:32.

²⁰ Godzimirski (2008) underscored Putin's personal role in developing Russian post-soviet identity; see also Gevorkjan, Timakova, and Kolesnikov (2000) a book-length interview with Putin; Klyamkin and Kutkovets 2006: 11-12.

efficiency, and protecting the government against being hijacked by the special interests. For Putin personally and Russian political elite this notion had different connotation. The strong state implied the stress on the chain of command (*edinonachalie*) and the undesirability of the plurality of spheres of authority. The absence of the strong state threatened Russia's stability and survival as an autonomous political organization. In this context, the restoration of the strong state became a priority.

In 1999 Putin described state in Russia as “the source and the guarantor of the order, the initiator and the principal force behind any change.”²¹ Commitment to the strong state also signalled the continuity between different domestic political regimes since the Principality of Moscow. Similarly, Surkov asserted that

For 500 years Russians, since Ivan III time, have been the state-building people. We are the nation which has got used to statehood. And unlike our many friends across Soviet Union and many other countries we always have been the carriers of the statist idea.²²

²¹ Putin, Vladimir. 1999. *Rossija na rubezhe tysjacheletij*. *Nezavisimaja gazeta*, 30.12.1999.

²² Surkov 2006. Surkov used both ethnic term *Russkie*, and more encompassing state term *Rossijane*.

The year of 2004 was a visible turning point in the contemporary Russian political discourse, when the value of the strong state became the dominant master-narrative. The terrorist highjacking of a school in Beslan and the wave of the “Color Revolutions” across the soviet successor states were framed as immediate existential threats to Russia as an autonomous political organization.²³ Political commentators abundantly exploited the scare of Russia falling apart to justify the incredible political strengthening of law enforcement agencies as the pinnacle of the strong state. Many public intellectuals and TV personalities echoed these themes and fleshed out the political necessity of the strong state for the decisive survival of the Russian nations by referring to various periods of Russian history. As the corollary, members of ER sometimes indicated that stressing the values of the state was a good way to prevent the politicization of the Russian ethnicity and the ethnic-based nation-building projects.²⁴ ER launched Russian Project, aimed not at

²³ See, for example, S. Medvedev on the link between Beslan and domestic identity, Malfliet and Laenen 2007 on the link between the institutional reforms and evolving Russian identity; on the specific cultural context of the Beslan event, see Ó Tuathail 2009.

²⁴ Pavlovskij, Gleb. 2006. *Russkij vopros v rossijskoj politike. Lekcija prezidenta Fonda jeffektivnoj politiki*. Moskva: Gosudarstvennyj klub. 22.11.2006; Gromov, Andrej, and Ivan Davydov. 2007. *Fantom nacionalizma. Expert*, 15.01.2007; Osnovnye napravlenija dejatel'nosti Vserossijskoj politicheskoj partii "Edinaja Rossija" v sfere nacional'noj politiki i mezhhkonnessional'nyh otnoshenij. 03.2007; Pligin, Vladimir. 2007. *Russkij proekt. Strategija Rossii (№4)*; Sulygov, Abdul-Hakim. 2007. *Mnogonacional'nost' kachestvennaja harakteristika edinoj Rossii*, 10.07.2007. More generally, on the evolution of the Russian political debates about

politicization of the Russian ethnic identity, but rather as a tool against ethno-nationalists.²⁵

In domestic political discourse, the theme of restoring the strong state was embedded in the political imagery of the 1990s, as “wild,” tumultuous, erratic, crime-ridden period of Russian history. This imagery tapped into the popular disillusionment that the partial political and economic reforms did not quickly fix all the problems. However, instead of providing a careful balance sheet of the period, state-sponsored the Institute of Social Engineering (INOP) essentially branded it as lacking any conception of common good. Similarly, a famous political commentator Andranik Migranyan noted that democracy in the 1990s was just an illusion, a smokescreen protecting those political forces, whose interests were at odds with country’s well-being.²⁶ In his speeches Vladislav Surkov directly pointed at these forces. In his so-called “secret report” to the General Council of ER on June 17, 2005 he asserted that liberals always failed to pull Russia out of the political turmoil and only exacerbated the social chaos (including the period directly preceding the Civil War and after

the role of ethnicity in domestic nation-building see Tishkov 1997: 138—175. On the problems of politicization of ethnicity in RF, see Warhola 1996; Tishkov 1997a; Ponarin 2005; Morozov 2008: 166—167.

²⁵ See the minutes of the discussion in the Center of Social Conservative Politics, 03 February 2007 (Formirovanie rossijskoj nacii Centr social'no-konservativnoj politiki: Stenogramma zasedanija Social'no-konservativnogo kluba, 03.02.2007)

²⁶ Migranjan, Andranik. 2004. Chto takoe "putinizm"? *Strategija Rossii v XXI veke* (№3).

the collapse of the Soviet Union). Since the liberals were dubbed proponents of the weak state and historically incapable of governance, acknowledging them as legitimate political force was rendered dangerous and inappropriate.²⁷

The new president Dmitry Medvedev in his speeches stressed the necessity of modernization and innovations. This, not surprisingly, prompted a wide public discussion about the possibility of political liberalization in Russia. From the liberal side Aleksandr Auzan (a prominent member of the President's Council for Support of Development of the Civil Society Institutions and Human Rights), Evgeny Gontmakher and Igor Yurgens of Institute of Contemporary Development (INSOR) argued for the liberalization of the state.²⁸ At the same time, from the conservative side Alexey Chesnakov, Vitaly Ivanov, and the members of INOP argued that the liberalization and democratization were not only premature, but simply did not reflect the real need of state-building in the present-day circumstance.²⁹ In the midst of this discussion, Medvedev reaffirmed the value of the strong state and did not dismantle Putin's political legacy. Thus, strong state retained its status as a component of national purpose.

²⁷ Surkov, Vladislav. 2005. My real'no schitaem, chto davat' vlast' liberal'nym "druz'jam" opasno i vredno dlja strany, Gensovet "Delovoj Rossii," 17.05.2005.

²⁸ INSOR 2008; INSOR 2009; <http://www.riocenter.ru/en>

²⁹ INOP 2008

State-led development

Russian state officials staked the claim to promote the developmental state for the betterment of Russia as a whole.³⁰ Leon Aron summarized this vision as follows: “ the reemergence of the state as the most powerful actor on the economic stage, serving as both the initiator and implementer of economic policy; <which causes> the slowing down or freezing of structural liberal reforms; <and> rapid expansion of the state sector of the economy.”³¹

This vision was articulated prior to siloviki’s ascension to political power, and thus should not be viewed only as a vote-seeking propaganda. Consider, for instance, Vladimir Putin’s dissertation thesis, which contained some key ideas regarding the use of minerals for the economic and social transformation.³² By the end of Putin’s second presidential term, a bold political ambition to have a “hard” developmental state came to its existence. Since the state sector

³⁰ While there is no a single definition of the term “developmental state,” in this dissertation I refer to the preponderance of state bureaucracy, intervening in and guiding the direction and pace of economic development, reallocating resources across industries, and protecting national economic interests in the context of capitalist political economy. See, for instance, Loriaux 1999: 235; Pérez Caldentey 2008: 28. Similar, but not identical, terms are “hard state,” “state capitalism,” and so on.

³¹ Leon Aron , available at <<http://www.aei.org/outlook/25022>>

³² Putin’s thesis was condensed for a stand-alone journal publication, see Putin 1999

swelled to about a half of the national economy, it fully reemerged as the most powerful economic actor.³³

In 2007 Surkov succinctly summarized this theme:

Strong central authority for centuries collected, bonded, and developed a huge country, which was widely spread in space and time. < Strong central authority > implemented all the important reforms ... Today, as power shifted to the center, it stabilized the society, created the conditions for victory over terrorism, and sustained the economic growth.³⁴

In general, Russian political elite claimed that economic development and growth during the 1990s delayed because of rather oversimplified grafting of the foreign policies and standards onto the Russian soil. In this discourse uncontrolled free markets and the laissez-faire ideology have invariably negative effects on economic development and prosperity. The previous problems in economic development were attributed to the negligence and unwillingness to use the state to exercise its power as an economic regulator. Putin stressed the role of government as “the leader in creation and

³³ According to then Vice-Prime Minister Sergei Sobyanin, about a half of Russian labor workforce was employed by the state, which he deemed dangerous, cited in <<http://www.polit.ru/news/2010/09/09/sobyanin.htm>>

³⁴ Surkov, Vladislav. 2007. Russkaja političeskaja kul'tura. *Strategija Rossii* (№7).

application of high technologies, in providing a high standard of people's well-being, in ability to protect the safety and defend national interests on international scene."³⁵ The core emphasis was strongly placed on the responsibility of the federal government to deliver while restricting the independence of the private sector in general.³⁶ Private sector was considered a minor partner: multiple the references to the social responsibility of business became mainstream. The stress on the crucial role of the state as the motor of economic growth and state's obligation to deliver permeated the domestic political discourse. In his political report to the United Russia's III Convention Boris Gryzlov stated that "the major factor of keeping the nation united is social justice. The United Russia supports the creation not just a market economy, but a socially-oriented type of economy."³⁷ Since 2005 this obligation becomes more salient in speeches of then first vice-Prime Minister Dmitry Medvedev,³⁸ Moscow Mayor Yury Luzhkov, and Sergey Mironov (Speaker of the Federation Council and the leader of *Spravedlivaya Rossiya*). By the end of Putin's presidency, this obligation was labeled "Putin's plan," or Plan 2020. In the fall of

³⁵ Putin 1999.

³⁶ Chadaev 2005: 95—137.

³⁷ Gryzlov, Boris. *Politicheskij doklad...* 22.09.2003.

³⁸ Medvedev, Dmitry. 2005. *Sohranit' jeffektivnoe gosudarstvo v sushestvujushih granicah. Expert №13 (460).*

2007 United Russia ran its parliamentary campaign on the promise to deliver, under the motto “Putin’s plan—Russia’s victory.”³⁹

Practical measures accompanied this evolving discourse. In 2005 the Kremlin announced its decision to create a new governmental institution under the direct patronage of the President -- the Council for the Implementation of National Priority Projects and Demographic Politics (CNPPDP). In essence, National Priority Projects were created as a mechanism of an intense and “smart” investment to prompt economic development in certain areas and improve certain social services. Putin formulated the core purpose of NPPs as follows:

Concentration of budgetary and administrative resources on the improvement of quality of life of citizens of Russia is a necessary and logical development of our economic policy, which we have been implementing over the last five years and we shall be implementing in future. It is a guarantee from inert spending means without any palpable feedbacks. It is a policy of the investment into an individual, which means an investment in the future of Russia.⁴⁰

³⁹ ER 2007a.

⁴⁰ Putin, Vladimir. 2005b. Vystuplenie Prezidenta Rossijskoj Federacii V. Putina po povodu prioritetnyh nacional'nyh proektov, 05.09.2005.

In 2007, Dmitry Medvedev asserted that the decision to create NPP had been the most effective way to solve the most pressing economic and social problems.⁴¹ In 2008 President Putin, while summarizing the successes of the NPPDP, affirmed that all the national projects were designed and implemented to fulfill the social obligations of the state (or “modern social politics” in his parlance).⁴² Both politicians, as if anticipating liberal critique and incredulity to this initiative, determinedly noted that NPPDP was not a public relations exploit, but a genuine tool to uphold social justice and a vehicle of economic growth. They also juxtaposed NPPs to the 1990s, when the government allegedly shied away from any social obligations.

Imagining the state as both the initiator and implementer of economic policy legitimized the creation at the end of 2007 several “state corporations.” Envisioned as another vehicle of economic modernization, they accumulate enormous amount of financial resources and various industrial enterprises. State corporations hold military-industrial sector, atomic and nuclear plants, shipbuilding and aircraft industries, and transportation. These corporations combine

⁴¹ See, especially Medvedev’s article *Nacional'nye proekty: ot stabilizacii - k razvitiyu*, *Kommersant-Daily* № 9 (3585), 25.01.2007 and the selection from his speeches on the official cite of NPPDP -- on March 7, 2007 and 26 December 2007, available at the official web-site for the national projects is <<http://www.rost.ru>>

⁴² See Putin’s speech at the NPPDP Council meeting on 28 February 2008

private ownership with direct governmental and presidential control. It is instructive that the idea of state corporations to implement state economic policy belonged to Sergey Chemezov, yet another representative of siloviki. Chemezov was a KGB officer in the 1980s, Putin's subordinate in St-Petersburg, and currently is a Director-General of Russian Technologies State Corporation (Rostekhnologii). The development of medicines and biotechnologies fell under another corporation--the Russian Corporation of Nanotechnologies (RUSNANO) with Anatoly Chubais as its chief.⁴³ On July 6 2010 Russian news agency RIAN reported that Rosnano would invest about \$40 million in biomedical projects, including developing treatment for AIDS, hepatitis and cancer of the pancreas.⁴⁴ Vadim Volkov argues that in establishing state corporations

Russian authorities have invented a new formula for the independent management of large state assets without fully privatizing them. Powerful industrial lobbies and Putin's cronies have now received formal rights to control several sectors of the economy, but in exchange they are expected to deliver tangible results and global

⁴³ Some projects for "nanomedicines" are available at <<http://www.rusnano.com/Section.aspx/Show/25831>>

⁴⁴ Russia to invest \$40 million in developing AIDS, cancer treatment, *RIAN*, 06/07/2010

competitiveness. The whole project, nonetheless, faces the risk of inefficient use of funds and depends upon personified mechanisms of control.⁴⁵

The majority of Putin's liberal opponents simply did not recognize the NPP as a meaningful vehicle of economic transformation. Many commentators thought that the sole purpose of NPPs was either to redistribute the revenues generated from the oil sector, to ensure the political survival of Putin's entourage after his second presidential term would expire in 2008, as well as the political springboard for Medvedev to secure his presidency, to which he allegedly had been previously shortlisted. Similarly, the creation of state corporations was not universally approved. However, the notion that state should act as initiator and implementer of economic policy remains resilient as a core component of national purpose. Despite palpable differences in presentation style from his predecessor, President Medvedev reaffirmed his commitment to economic modernization led by the state and threw his political weight behind new innovative projects.

⁴⁵ Vadim Volkov, Russia's New "State Corporations:" Locomotives of Modernization or Covert Privatization Schemes? *PONARS Eurasia Policy Memo No. 25*, August 2008, see also Volkov 2008

Great power in the multipolar world

In the 1990s political elite preferred to downplay the discourse of Russia as great power at the international arena and shied away from touting its military exploits. This distancing was prompted by the rapidly spreading popular awareness of the incompetence of the top political leadership, unjustified military interventions in Afghanistan, which tarnished the Soviet Union's image at the international arena and delegitimized its global ambitions. Yet in 1998 Astrid Tuminez insightfully expected a coming aggressive formulation of Russian foreign policy as a reaction to the national humiliation of the 1990s.⁴⁶ Consistent with this expectation, domestic elites claimed restoring sovereignty and great power status (*derzhavnost'*) at the international arena as the third key element of common good. In 2000 the governor of Kemerovo Aman Tuleev redeemed a more assertive exercise of power instead of the repentance for the past sins.⁴⁷

Alexey Chadaev, the author of *Putin: His Ideology*, former member of the Public Chamber, and a chief ideologue at the United Russia's propaganda unit, defined great power as a state's ability to uphold and exercise its sovereignty. He explained that having "absolute sovereignty" implied possessing an arsenal of nuclear

⁴⁶ On the impact of national humiliation on Russian identity, see Tuminez 1998. For the historical overview of Russian identity as great power, see Neumann 2008.

⁴⁷ Tuleev, Aman. 2000. *Nel'zja zhit' na kolenjah. Nezavisimaja gazeta*, 10.06.2000.

weapons, blocking any foreign influences on domestic political affairs, and behaving as a norm-giver on the international arena. The lack of great power status implied that other great powers can easily intervene to change domestic political regime and impose external governance (vneshnee upravlenie).⁴⁸ Deliberately adopting any foreign practices meant to turn your sovereignty down.⁴⁹ In terms of policy transfer, claiming great power status necessitated the resistance to any external influences, as well as devising and exporting domestic norms and standards.⁵⁰

Chadaev's book presented a relatively neutral way to think about sovereignty and great power as elements of common good. The domestic discourse was less impartial and at times considerably livid. On the aggressive side of the discourse, elite argued that in promoting democracy and human rights, Western countries often use double standards and undermine international law.⁵¹ The wave of the "color revolutions," sweeping across the Soviet successor states, promptly became one of the most discussed topics in the Russian media.

Domestic political elites and spin-doctors interpreted it as having

⁴⁸ Chadaev 2006: 45-47, 49-55, 59, 141-142 (esp. Chapter "Restoring Sovereignty")

⁴⁹ Chadaev 2005: 43, 59, 141-142.

⁵⁰ This dimension is captured by Wilson (2010), who underscored that the Color Revolutions represented an external pro-liberal challenge for the official ideologies.

⁵¹ This formulation underscored Russian exclusion and was pitched against Mikhail Gorbachev's master narrative of the universal human values.

serious ramifications for the national statehood. A prominent domestic political observer Vyacheslav Nikonov argued that the color revolutions were “technologies, aimed towards weakening of the country and building the mechanisms of influence on Russia, not at democracy promotion.”⁵² Similarly, the leader of the Liberal-Democratic Party of Russia (LDPR) Vladimir Zhirinovskiy claimed that democracy promotion is a tool of dismembering the polity and prompting inter-ethnic conflicts.⁵³ Such a misplaced emphasis allowed political elite to claim that democracy promotion was only a smokescreen to veil the US real geopolitical ambitions. As a corollary, reclaiming sovereignty rules out accepting a subordinate position in any international coalition, and on the contrary, embraces restoring its authority “on the canonic territories of her historical presence and influence,” as Vitaly Tret’yakov asserted.⁵⁴ On this side of domestic discourse, Russian political life turned to be replete with subversive Others—enemies of the sovereignty. At the political rally to support United Russia at the Luzhniki stadium in Moscow in 2007, Putin lashed out as follows:

They need the weak, sick state. To fix their affairs
behind its back, to get gingerbreads at our expense they

⁵² Nikonov, Vyacheslav. Chernaja magija. *Izvestija*, 30.05.2007.

⁵³ Zhirinovskiy 2007: 56 in Remchukov 2007.

⁵⁴ Cited by Filippov et al 2007: 467.

need the disorganized, disoriented, and divided society.

And, unfortunately, inside the country there still those who are “jackaling” at foreign embassies, foreign diplomatic consulates, those who count on support of foreign funds and governments, instead of seeking support of their own people.⁵⁵

At the other discursive boundary, reasserting Russia’s great power status is consistent with a longer, historical trend of Russian in-build ambivalence towards Europe.⁵⁶ In the moderate, mainstream discourse Russia is typically viewed as a European state, which shares the common cultural and historical background, as well as the similar set of values and legal doctrines.⁵⁷ Several prominent ER members even lamented that the West does not fully understand Russia’s position, does not appreciate Russia’s affinity with the West.⁵⁸ Then, the great power status implies neither political, nor economic isolation, nor the anti-European sentiment. Rather, it means participating in

⁵⁵ “Nichego u nih ne vyjdet.” Vserossijskij forum storonnikov prezidenta Rossii Vladimira Putina vo dvorce sporta v “Luzhnikah.” *Rossijskaja gazeta*, 21.11.2007; similar points were made in the so-called “Munich speech,” Putin’s speech at the 43rd Munich Conference on Security Policy, 02/10/2007 in Munich, Germany.

⁵⁶ For more detailed arguments about Russian ambivalence to the West, see see Kassianova 2001; Morozov 2002; Duncan 2005; Tsygankov 2005; Prozorov 2007; Kratochvil 2008; Neumann 2008.

⁵⁷ See for instance, Putin 1999; Surkov 2006; Tsipko 2007; D. Medvedev 2008.

⁵⁸ See, for instance, Luzhkov, Yury. 2006. *My i zapad. Strategija Rossii* №6; Kosachev, Konstantin. 2006. *Diktat nekompetentnosti. Rossija v global'noj politike* № 1; Kosachev, Konstantin. 2007. *Rossija i Zapad: nashi raznoglasija. Rossija v global'noj politike* № 4. For a scholarly summary of this argument, see Kratochvil 2008: 410—411, 415—416.

international affairs on Russian terms and remain decisive in the context of inevitably confrontational (both politically and economically) power politics. Surkov, for instance, delineated Russian great power status as an assertive participation in the global economic and political competition. The economic comparative advantages should be used to advance Russia's international political goals and support her in geopolitical games (hence the additional concepts of the "energy superpower," the "liberal empire" which briefly surfaced in domestic political discourse).⁵⁹

SOVEREIGN DEMOCRACY AND ITS PUBLIC LEGITIMACY

Public legitimacy of an elite-driven conception of common good is the second step ascertaining whether or not social purpose emerges in a given country. In this section I spell out how articulated audiences legitimized the elite-generated conception of common good and ascertain the degree it got imbued into society. In the mid-2000s various explanatory journalists and public intellectuals converged around the conception of common good dubbed "Sovereign Democracy." Its originator, Vladislav Surkov, was a Deputy Chief of President's Administration in charge with internal politics and

⁵⁹ Chadaev 2006: 45—47; Leont'ev, Mihail. 2006. Koncept Rossija kak jenergeticheskaja sverhderzhava. *Russkij Zhurnal*, 27.10.2006.

relations with the State Duma. He concisely captured all three components of common good and gave the notion this eye-grabbing label. In 2004—2008 Surkov delivered a set of speeches on Russian national identity and national political culture, subsequently widely published in newspapers, journals and in the collection of essays.⁶⁰ Public discussion in Russia revolves around Surkov’s writings: both the liberal critics and loyalists anchor their discussion to this canon of discourse.

In general I delineate among three broad groups of articulated audiences. The first one, following domestic liberal observers, can be dubbed “the Kremlin school of political science.”⁶¹ It includes representatives of the expert community, who catered to the ideological needs of the new political elite. Former dissident turned political analyst, Gleb Pavlovsky hosted the TV show *Real Politics*, edited highly salient internet-based *Russian Journal*, and headed the *Foundation for Effective Politics (FEP)*. In 2000 Pavlovsky was instrumental in building Putin’s positive public image. In 2004—2008 his internet project served as the gathering place for many promising young illiberal commentators. Valery Fadeev was a chief editor of

⁶⁰ All his major “texts” are collected in Surkov 2010, in the loyalist publishing house *Evropa*.

⁶¹ See, for instance, Klyamkin and Kutkovets 2006, Afanas'ev, Jurij. 2008. *Sireny sovremennoj Rossii: Izoblichaju i obvinjaju. Novaja gazeta*, 25.01.2008

analytical magazine *Expert* and the head of the Institute of Social Construction (INOP), affiliated with United Russia. Vitaly Tret'yakov was a host of *What is to be Done*, an owner and editor of monthly journal *Political Class*, an owner of Independent Publishing Group. He frequently contributed to the governmental newspapers and authored several monographs. Vyacheslav Nikonov is the editor-in-chief of journal *Strategy for Russia*, head of foundation *Politics*, and a member of the Public Chamber.

The second group of articulated audiences achieved high visibility in various political shows dominating the federal TV in the second half of the 2000s.⁶² Not by coincidence, many prominent members of the United Russia (and Putin's loyalists) turned into TV politicians, thus establishing a continuous flow of discursive resources to the general audiences. Here I will list only a few further emblematic examples. Political journalist Mikhail Leont'ev hosted shows *However* and *Freedom of Speech* and produced mini-series *The Big Game*, describing Russia's geopolitical greatness. He's the editor in chief of the analytical magazine *Profile*. Alexey Pushkov hosted *Post Scriptum* show at TVC channel. Konstantin Zatulin hosted *Political Kitchen* at TVC channel and simultaneously served as the first deputy of the

⁶² Oates (2007) argues that the contemporary Russian media operate in the neo-soviet style.

Committee on the Commonwealth of Independent States (CIS) and relations with compatriots in the State Duma. These persons were also frequent guests on Dmitry Kiselev's show National Interest and participated in Vladimir Soloviev's To the Barrier and later Poedinok.

The third motley group of aggressive young journalists is typically referred to as "okhraniteli" ("guardians"), including Pavel Danilin, Alexey Chadaev, Vitaly Ivanov. The acolytes of Sovereign Democracy typically assert that any alternative conceptions of common good would inevitably cause adverse outcomes for Russia as an autonomous political organization. Okhraniteli commonly praise Putin's for saving Russia from collapse, portray the transformative politics of the 1990s as the intentional abrogation of sovereignty, and attack liberals ad hominem. Their contributions is typically scattered over various newspapers, internet resources, and blogosphere.

All these groups were instrumental in projecting the official vision of common good. Their activity overshadowed both liberals and communists as generators of discursive resources.⁶³ Their public utterances were permeated with a strong national "we" against sordid anti-national "they"-- the subversive liberal Other, responsible for Russia's loss of national self-efficacy and self-esteem in the 1990s. By

⁶³ kremlin.org, www.russ.ru, www.liberty.ru, politonline.ru, www.actualcomments.ru, www.vz.ru, www.russia.ru. For the additional details see Okara 2007.

the mid-2000s these political journalists invented a captivating image of “the wild 1990s” to juxtapose it to the “well-fed” and “stable 2000s.” The overarching idea of this discourse was that freedom, democracy—at least in the Russian context—had clearly visible negative effects on economic development and prosperity. As liberal-minded Gontmakher summarized it:

... in the early 2000s I suddenly realized that somebody on behalf of the state tried to brainwash me ideologically in an easy going, but very systematic, manner. TV masterfully created the image of the “wild 1990s” with such attributes as the lack of patriotism, kowtowing to the West, self-humiliation. It turns out that to love your Motherhood is impossible without hating her neighbors, the various antagonists from the overseas, who dream Russia being dismembered... It turns out that we were standing on our knees, while only the strong state could help us up; thus the strong state had to be served with an unflinching loyalty and without any criticism...⁶⁴

⁶⁴ Evgeny Gontmakher, *Perehod na lichnosti: Ideologija vs. politika*, *Vedomosti*, №42 (2312), 11.03.2009. 2008

These propaganda seeds fell on a fertile soil. By the late 1990s wider audiences expressed generally favorable popular attitudes to democratic ideals and simultaneous distrust in nearly all decision-makers and political institutions.⁶⁵ By the late 2000s public distrust in domestic political institutions and law enforcement agencies only increased. Recent polling data conducted by Russian Public Opinion Research Center (VCIOM) in 1992—2007, for instance, showed the persistently negative popular attitudes both to the notions of capitalism and communism. At the same time, market economy, private property and national sovereignty were perceived as positive values.⁶⁶

Strong state as an ultimate political value

I have previously argued that elites relate providing common good to the positive imagery of the self, while articulated audiences ground this imagery in the full-bloodied self-Other dichotomy. In Russian context, the Other was created as early as in 2001. This sordid generic Other lumped together quite dissimilar political actors, whose political agenda was not truly compatible. The camp of Others included the prominent mainstream politicians (Boris Nemtsov, Vladimir Ryzhkov, Grigory Yavlinsky), Yeltsin's political advisers and human rights

⁶⁵ See, for instance, Carnaghan 2007: 73.

⁶⁶ VCIOM Press Release No 626, 2007.

watchers (Georgy Satarov, Sergey Kovalev), the former members of government (Mikhail Kasyanov, Evgeny Yasin, Andrey Illarionov), political activists of various persuasions (the world's chess champion Garri Kasparov, a mediocre narcissistic littérateur Eduard Limonov, among others). Not surprisingly, this diverse group of people promoted a different set of ideas, which engendered multiple internal conflicts.

Since liberals were believed to subvert the Russian state, they had to be excluded from the pool of legitimate political actors.⁶⁷ In the similar vein, Surkov and Chadaev argued that the liberals distorted the idea of democracy and undermined the genuine polity-building.⁶⁸ Others claimed that “limousine liberals” inspired the West to quarrel with Russia and slavishly followed the external agenda.⁶⁹ A conservative commentator Aleksandr Tsipko pounded contemporary liberals as impostors, not being ensconced in the true Russian identity. In his view, liberals posed an ontological threat to the state as they

... cannot consent for Russia to remain Russia, because their overall objective is directly opposite. It consists of creation of Russia in which there will be nothing

⁶⁷ Pavlovskij, Gleb. 2001. Ostanovit' liberal'nuju revoljuciju: Beseda Aleksandra Prohanova i Gleba Pavlovskogo. *Zavtra*, 08.05.2001.

⁶⁸ Surkov, My real'no schitaem.... 17.05.2005; Chadaev 2006: 35, 65.

⁶⁹ See Sokolov, Maksim. 2004. Nacionalizm i liberalizm. *Expert* 1 (402); Garadzha, N.V., ed. 2006. *Liberaly o narode*. Moskva: Evropa.

traditional, nothing Russian, except for the language.

The whole meaning of the Russian liberals' ideological and political activity is to bury the remnants of the national self-identification from consciousness of the Russian Federation citizens, so that that Russia would never were Russia.⁷⁰

In Russia main political debates have been commonly riveted to the contending perceptions of the past. Not surprisingly, in the early 2000s the Kremlin realized that teaching the elite-friendly version of the past can strongly endorse the foundational value of a strong developmental state and socialize youth into this perception.⁷¹ Another major focal point of writing the “proper kind of history” was to buttress the thesis that liberal conception of common good had always been at odds with the appropriate kind of common good. The process of tailoring the past to certain political goals inevitably bowdlerized its nuances and intricacies.

The Federal Minister of Education longed for a new mandatory textbook to countervail the former Soviet republics, which kept

⁷⁰ Tsipko, Aleksandr. 2006. Pochvenniki i liberaly. Vozmozhno li primirenje mezhdu nimi? *Strategija Rossii* (№8).

⁷¹ See, for instance, Shnirelman 2009; Berelovich, Vladimir. 2002. Sovremennye rossijskie uchebniki istorii: mnogolikaja istina ili ocherednaja nacional'naja ideja? *Neprikosnovennyj zapas* 4 (24).

blaming Russia for their historical misfortunes and generating Russophobic historical narratives.⁷² Aleksandr Filippov's *A Contemporary History of Russia 1945-2006: A Book for the Teacher* was an obvious candidate for this position. Its authors directly acknowledged that the textbook's

...purpose is to generate a precise civic position of each graduate. As the citizen of the country he should represent values and ethical imperatives of culture of the state as the active participant of the open world processes it should possess values of a modern civil society and a sufficient set of representations for active intercultural interaction.⁷³

This book presented a very clear and comprehensible digest of the history since 1945, offered from an undiluted state-centric perspective.⁷⁴ The book's beauty was in its simplicity: political stability and economic prosperity depend on the strong state, while state's weakness generates social hardships. This logic is easily extendable to all periods of Russian existence: strong state meant the end of *Smuta* in 1612 and the victory in the WWII; its weakness

⁷² Istoricheskij pripadok, *Kommersant-daily* № 240(3816), 27.12.2007

⁷³ Filippov et al 2007: 5. ("*Noveyshaya istoriya Rossii 1945-2006. Kniga dlya uchitelya*")

⁷⁴ For the useful review see Wedgwood 2010

entailed the power vacuum of 1917 and the collapse of the state in 1991. Finally, the chapter entitled “Sovereign Democracy” appeared in this manual to describe the period of Putin’s presidency, thus sealing the doctrine’s almost official status.⁷⁵ The first draft of this textbook was complete in 2007 and was a subject of an enormous public attention and scrutiny. After some minimal editing, this manual was turned into a typical history textbook.⁷⁶ Despite the liberal outcry, the State Duma made it illegal from September 2007 to teach history in schools using unapproved textbooks, making the described version of past almost mandatory.⁷⁷

Broader public debates also abused domestic history in order to legitimize the notion that only a full-bloodied strong state can be at the center of legitimate common good. For instance, at the seminar held at the Russian State University for the Humanities on the occasion of the 90th anniversary of the liberal-bourgeois February revolution, the chief ideologue Surkov claimed that it prompted social, economic, and political chaos. Ultimately, despite the false pretext of freedom this triggered the October coup d’état. The former head of the pro-liberal party Yabloko Grigory Yavlinsky rejoined that liberals injected the ideals of freedom and democracy into Russian political life, yet failed

⁷⁵ See Filippov et al 2007: 445—446.

⁷⁶ Kommersant-daily № 27(731) 16.07.2007

⁷⁷ Zhurnal «Vlast'» № 27 (731), 16.07.2007

to institutionalize them because of the Bolsheviks. This interpretation did not find a positive response among political commentators.⁷⁸ In further publications articulated audience laboured to convince their readers those self-styled liberals always failed in dealing with the major historical challenges.⁷⁹ This aggressive historical politics was at variance with the practices of the 1990s. Pluralism of historical interpretations and the availability of multiple textbooks used to be a norm.

To countervail all this, some liberal politicians have tried to promote their conception of common good by setting off the pro-democratic politics of the 1990s as a highly commendable political experience. Yet they failed to do so very effectively. Moscow-based foundation the Liberal Mission sponsors a range of conferences and publishes books written from the liberal perspective, many of which are available for free on-line. Another striking example is Andrey Zubov's edited book, which brought out histories of persons and collectivities in their pursuit of personal dignity, political and economic freedoms. This is definitely a very notable attempt to write

⁷⁸The summary of the debates was provided by Efim Pivovarov (2007).

⁷⁹ Sokolov, Maksim. 2006. V poiskah 1913 goda *Expert*, №23 (517); Sokolov, Maksim. 2007. Obval russkoj istorii. *Expert*, № 1 (590); Nikonov, Vjacheslav. 2007. Krushenie Rossii. k 90-letiju Fevral'skoj revoljucii. *Rossijskaja gazeta*, 16.03.2007; Nazarov, Mihail. 2004. Rossija nakanune revoljucii i Fevral' 1917 goda. *Nash sovremennik* (2); Ivanov, Vitalij. 2007. K jubileju nacional'nogo pozora. *Vzgljad*, 27.02.2007

a liberal history textbook, yet it has to be advertized and marketed more insistently.

Recently Nikita Belykh, Russia's only liberal governor in the era of Sovereign Democracy, lamented that there was almost no cultural remembrance and recognition of the rich tradition of Russian XIX c liberalism at the level of wider audiences, which was an obvious obstacle to promote liberal outlook.⁸⁰ Yet he had no one to blame but himself: Almost every Russian liberal thinker had been previously published, yet liberals failed to actively promote and interpret their writings for the general audience.

State-led development

In fleshing out the notion of state-led development, Putin and his entourage hounded oligarchs and liberal economists as the regime's Other. In the 1990s there was a lot of hostility towards all economic reformers (most notably Yegor Gaidar and Anatoly Chubais) and their foreign advisers (neoliberal economists such as Anders Åslund and Jeffrey Sachs). Aggressive claims were abound. Communists, for instance, asserted that the reformers were intentionally pushing the

⁸⁰ Belykh in Remchukov 2007.

contemptible and ruinous economic reforms forwards to subjugate Russia to the Western economic powerhouses.

In the 2000s political elites switched their attention to domestic oligarchs as economically irresponsible and socially dangerous actors.⁸¹ In 2003 a think-tank the National Strategy Council (SNS) published a report usually referred to as “The Oligarchic Revolution is being Brewed in Russia.” Its authors, more than 20 well-known political experts, claimed that liberals and oligarchs conspired to grab political power in their own parochial interests. According to the SNS, Mikhail Khodorkovsky inspired the alleged attempt of coup.⁸² In the new public discourse, the main tycoons of the 1990s, including Boris Berezovsky, Vladimir Gusinsky, and Mikhail Khodorkovsky, were chastised as socially irresponsible. Most importantly, this report directly Othered liberals and oligarchs as an elite group, which allegiance is not with Russia:

Families of the majority of oligarchs permanently live outside Russia; their heirs are educated abroad. Much evidence indicates that the majority of oligarchs do not connect their individual and family strategic interests

⁸¹ For the similar argument, see also R. Medvedev 2004: 350, 608.

⁸² Soon to be arrested, at that moment the iconic oligarch owned the oil company YUKOS head and was the richest man in the country.

with Russia as a geopolitical and ethno-cultural essence.⁸³

Surkov's short pamphlet ostentatiously titled *The Main Tendencies and Perspectives of the Development of Contemporary Russia* is another important document of the period. In this text, he described an oligarch as a parasite exploiting the backbone of the economy—the oil-based export. Instead of making the state stronger and people wealthier, oligarchs refused much needed wealth redistribution. Nor did the liberal-oligarch economic policies rectify the problems inherited from the Soviet economy.

In 2004 Khodorkovsky was able to sneak a piece of his thinking entitled *The Crisis of Liberalism in Russia* out of the prison and publish it in a prestigious newspaper. In this open letter he tried to redeem liberalism and offer a public repentance. He lamented that liberals ignored, “first, some important national-historical features of development of Russia, and secondly, the vital interests of the overwhelming majority of Russian people.”⁸⁴ Khodorkovsky also lamented that in the 1990s the values of self-gratification and quick enrichment replaced any sense of social responsibility. In his manner of speaking, liberals focused on “sturgeon under horseradish” instead

⁸³ SNS 2003

⁸⁴ Mikhail Khodorkovsky. 2004. *Krizis liberalizma v Rossii*. *Vedomosti*, 29.03.2004.

of Constitution. One can only speculate about the reasons behind this open letter, yet Khodorkovsky definitely played into Putin's hands. In essence, he confirmed Putin's evaluation of liberals as subversive and irresponsible Others.⁸⁵

The discourse of state as the indispensable economic regulator builds on the widespread disappointment with the painful economic reforms of the 1990s. To a certain degree, articulated audiences intentionally misrepresented the course and outcomes of the economic reforms. First, clearly overextended the relatively short period of complete lawlessness and bandit capitalism of 1992—1994 to the whole decade, and low-balled the economic costs of keeping the state enterprises in business. Second, they blamed the young reformers' incompetence for the near economic collapse of the early 1990s, conveniently forgetting that soviet administrative economy had failed prior to the shock therapy.⁸⁶ Third, they offered a rather superficial explanation of the underlying reason of the soviet economic malfunctioning. Instead of focusing on the inherent problems of the Soviet commanding heights, they blamed incompetent party leaders

⁸⁵ Berezovsky, Boris. 2004. Liberalizm: Bezydejnost' i bezvolie liberalov. *Vedomosti*, 27.04.2004.

⁸⁶ For the most recent reiteration of this argument see, for instance, Yuri Luzhkov and Gavriil Popov, *Eshe odno slovo o Gajdare. Moskovskij Komsomolec*, 21.01.2010.

dominating smart technocrats. Finally, more complex weighing out the state as an economic actor got silenced.

Legitimizing the reemergence of the state as the only appropriate initiator and implementer of economic policy had to be exercised with extra caution to avoid traps of rolling back to glorifying the communist regime. Anchoring the new social purpose only in the Soviet past means to be praise socialism with the mainstream communists (Communist Party of the Russian Federation, CPRF). Yet the wholesale Othering of the Soviet past would bring the collective articulations of national purpose too close to its liberal rendition. This challenge made Putin and political elite move towards a differentiated rendition of the soviet past. The communist past was rendered negative inasmuch as it created an economically ineffective society and was not able to deliver. The Filippov's history textbook, which I introduced in the previous subsection, also used economic performance as a secondary indicator to keep the Soviet past distinct from Russia's historical self. (The authors note the lack of economic freedom and private property, stagnation and lagging behind the technological breakthroughs). Many other documents similarly attributed the collapse of the Soviet regime to its poor economic performance, failure to make people prosperous, and inability develop decent standards of living. As Surkov explained, the Soviet system

collapsed due to inability of the state to perform and deliver as an economic actor:

It also obviously lagged behind in satisfying the needs of people in new quality of a life the Western countries [enjoyed]. Well, who would want [to live in] such an empire which could provide the citizens neither bread, nor shows? Refusal to live in such society was inevitable. It is not necessary to explain the wreck of the Soviet Union as a result of CIA intrigues or the party leadership conspiracy. This is an escape from reality.⁸⁷

Great power in the multipolar world

Articulated audience sought to embed the imagery of Russia as a great power via two discursive streams. First, they mobilized the popular support by warning that external meddling in country's affairs unacceptable. Second, articulated audiences skilfully played public emotions by applying the pain of severe human losses in World War II

⁸⁷ Surkov, Vladislav. 2006. Suverenitet – jeto političeskij sinonim konkurentosposobnosti: Centr partijnoj učeby i podgotovki kadrov "Edinaja Rossija," 07.02.2006

and appropriated the victory in it as the indisputable evidence of Russian great power status.

Several famous politicians and experts warned that “orangists” aspired simply to grab power and abrogate national sovereignty. The so-called color revolutions (Orange in the Ukraine, Rose in Georgia, and Tulip in Kyrgyzstan) triggered the scare of being under a purposeful attack. According to this logic, the main consequence of the color revolutions in all these countries was not the success of popular resistance to the rigged elections, but simply a lasting political turmoil. For instance, domestic political observers projected the belief that the Ukrainian society was at the brink of collapse, government was not governing but squabbling, and the country’ Russian-speaking regions in the East were on the verge of secession. The flurry of these commentaries simply ignored the staggering fact that the rate of economic development in the Ukraine remained higher than in Russia.

Conservative commentators imagined that “orangist ideologies” were percolating into Russia.⁸⁸ They surmised the strong likelihood that the color revolutions would destabilize Russian

⁸⁸ Aleksey Mitrofanov, *Rossija pered raspadom*, available at <http://www.alexeymitrofanov.ru/books_russia01.html>; Chadaev 2005: 20—21, 41, 53—55.

statehood and undermine the country's territorial integrity.⁸⁹ Arkady Mamontov's film *Velvet*, aired on the state-controlled TV channel, is a case in point. Mamontov's narrative "exposed" the liberals' secret plot to subvert Russian political system and disintegrate it in 2012, as well as attacked young Russian liberals as foreign spies.⁹⁰ This response to the color revolutions was not just discursive. It had immediate political ramifications as well. Western-sponsored NGOs are the ideal promoters of the foreign interests.⁹¹ It also led to the new legislation, significantly restricting the NGOs in Russia.⁹² Extending this logic, loyalists accused orangists of acting at the whim of the US.⁹³ In this picture, the cynical West was more interested in subduing developing countries, rather than establishing a genuine democracy there. Staunch communist Sergey Kara-Murza and his co-authors put the "color revolutions" into the broader historical context of uprisings in former socialist camp (1956, 1968 and 1980), the velvet revolutions

⁸⁹ Ivanov 2006, Leont'ev 2005; Narochnitskaya 2008.

⁹⁰ "Barkhat.ru" (*Velvet.ru*); for the detailed description of the show "*Special Correspondent*" see <http://www.rutv.ru/typ.html?id=132627&cid=2&d=0>. See Sushko and Prystayko 2006: 125—144; for academic analysis of the Ukraine's orange revolution see Aslund and McFaul 2006; Way 2008.

⁹¹ For common examples of the Russia discourse on the Western liberal think-tanks as the tool of spreading Westerns influence, see Narochnickaja, Natalija. 2004. "Analiticheskie instituty" — glaza, ushi i mozg Ameriki. *Nash sovremennik* (3); Kurginjan, Sergej. 2007. Smysl mysli: O fenomene preslovutyh "think tanks". *Smysl* 7, 30.05.2007.

⁹² N 18-Ф3, January10, 2006 .

⁹³ Chadaev 2006: 41, 26.

in the Eastern Europe (1989) as direct challenge to USSR's geopolitical ambitions.

At the same time, those Western countries, which remain uninvolved, are likely to remain partners and "friends" (such as Germany and Italy). Although "Russia will not become soon, if at all, the second edition of, say, either the USA or England, where liberal values have deep historical traditions," not all Western countries automatically become Russia's others. As there is wide variation in approaches to individual countries, I am skeptical of the viewpoint that Russian political elite defines "the West as unified democratizing actor."

Another blanket theme of great power discourse was glorifying Russia's role in the World War II, locally referred to as the Great Patriotic War. Articulated audiences labored to restore Russia's worth and honor as related to the victory over Nazism. More specifically, this was intended to build the benign image of Russia as a great power in historical dimension. Putin's administration widely used the imageries of the WWII to connect to the broader public sentiment. For instance, the Kremlin reclaimed the Soviet tradition of pompous and costly military parades on the Red Square. Teddy Uldricks correctly asserts that the myth of this war "continues to be a

key element in the national identity of the Russian people.”⁹⁴ In a similar vein, a famous political pugilist Mikhail Leont’ev claimed that the Victory upheld the continuity of statehood and national unity.⁹⁵ Thus, since the remembrance of WWII remained deeply enrooted in the domestic popular culture, reviving the great power imagery proved to be relatively undemanding.

By producing and constraining discursive resources, such as historical documentaries, articulated audiences tried to narrow the socially acceptable public presentations of WWII. Some movies and documentaries tarnishing the benign image of the great power were banned from being aired on TV, or had only limited distribution in theaters and DVD shops.⁹⁶ Since 2005, various politicians and journalists warned that in-depth critical scrutiny of the WWII will challenge Russia’s worth and honor as a sovereign power.⁹⁷ The prominent members of ER in the State Duma (including Sergey Shoygu) went as far as considering criminalization of questioning Russia’s benevolent role in the WWII. This restrictive approach

⁹⁴Uldricks 2009: 60.

⁹⁵ See, for instance, Leont’ev, Mihail. 2007. Vse poslevoennoe vremja Pobeda byla fundamentom nacional'nogo samosoznaniya. *Russkij Zhurnal*, 08.05.2007.

⁹⁶ Consider for instance, public response to *The Soviet Story* (Edvins Snore, 2008).

⁹⁷ Putin, Vladimir. 2005. Uroki pobedy nad nacizmom: Cherez osmyslenie proshlogo – k sovместnomu stroitel'stvu bezopasnogo gumannogo budushego. *Le Figaro*, 7.05.2005; Kurginjan, Sergej. 2005. Pokushenie na Pobedu. *Tribuna*, 04.05.2005.

justified the Soviet occupation of the Baltic States in the 1940,⁹⁸ deliberately obscured the discussion about political repressions, glossed over the phenomenon of the Soviet collaborationism, and scrapped any critical outlooks on the Soviet military preparedness and effectiveness. Predictably, several Russian youth movements picked the sentiment up and fuelled international scandals around the politics of commemoration and war monuments in the former Soviet bloc.

Celebrating Victory Day is divested of any decisive communist connotations, and yet communicates the nostalgic image of Russia as a great power at the international arena.⁹⁹ Generally, since Putin publicly contended that the demise of the USSR was a great geopolitical catastrophe, a flurry of commentaries incorrectly inferred that communism to be re-envisioned as the historical self. The common rendition (both from domestic liberals and scholars) is that Putin embedded the proposal for the nation on the idealized presentation of the Soviet period. Indeed, elites definitely toyed with the public display of various stalinesque symbols, and even returned the old soviet tune for the anthem. Yet accusations of the communist bend

⁹⁸ Consider “Nazism Baltic-style” (directed by Boris Chertkov, 2006), which featured Konstantin Kosachev, the Chair of State Duma’s Committee on Foreign Relations and member of the ruling party United Russia.

⁹⁹ On the potential dangers of the Victory Day as a discursive resource, see Morozov 2008. To evaluate the degree to which the Victory Day was deep seated in the society prior to 1994, see Tumarkin 1994; for the politics of remembrance in the 1990s, see Smith 2002.

seem to be too far-stretched.¹⁰⁰ Rather, it evoked the Soviet Union as an undiluted ideal of the great power and reappropriated the image of its external strength.¹⁰¹ It is true, however, that the official unqualified glorification of the former military glory played into the hands of those who were twisting the official discourse to support the communist-like conceptions of social purpose. Among those, an amateurish stage director turned political thespian Sergey Kurginyan claims attention. In his frenzied political debates and unhinged political commentaries he justified Stalinist atrocities, delved into multiple global conspiracies against modernity and common sense, assailed postmodernism, and claimed that rejecting the communist past altogether undermined Russian proper place in the world.¹⁰²

SOVEREIGN DEMOCRACY IN COLLECTIVE ARTICULATIONS

Examining collective articulation is the third step in ascertaining whether or not a certain conception of common good becomes truly legitimate and embedded in among the wider audiences. In this

¹⁰⁰ See, for instance, see Adler (2005) on the resurrection of as a core characteristic of commemorative politics; Morozov's argument (2008: 159--164) on Putin's nation-building being firmly rooted in the Soviet past.

¹⁰¹ Nikonov, Vjacheslav. 2002. Nazad, k koncertu. *Rossija v global'noj politike* № 1; Nikonov, Vjacheslav. 2003. Soblazn osobogo puti. *Rossija v global'noj politike* № 3

¹⁰² On Kurginyan's background see Dunlop 1993:165—169.

section I spell out how public culture discursively supported the core components of Russian national purpose.

In order to sample identity at the level of collectivity I will use domestic movies. Several methodological considerations are in order. First, some scholars have already suggested the importance of movies and film industry for studying national identity and nationalism.¹⁰³ What is beamed into big screens in movie theaters and into TV may not only complement current belletristic textual sources (in a way that the commemoration system, or architecture can), but in certain cases can be viewed the better expresser of the intersubjective articulations. Recently film industry became the symbol of national pride, perhaps even more so than literature [had been]. The number of the films soared, especially compared to the 1990s. Movies definitely generated comparable amount of core themes and protagonists than any textual sources did, which gives me a better and more diverse sample. Generally, all the titles, plot descriptions, casting and box-office sales are widely available on the industry-related websites and in the special sections on culture in journals.¹⁰⁴

¹⁰³ See for instance Rosenstone 2006; Kellner 2009.

¹⁰⁴ Including www.kinoros.ru, www.ruskino.ru, www.kino-teatr.ru, www.afisha.ru, <http://www.newsru.com/cinema>, <http://www.expert.ru/topics/cinema/>, http://rusrep.ru/topics/film_industry/

Second, my sampling of 150 movies was stipulated by the consideration that picking only few emblematic exemplars can be misleading. In order to aggregate movies into discursive formations with clear and elaborate meanings, the sample should be large, but manageable.¹⁰⁵ To show the dynamic of collective articulations, it includes movies produced both in 2000—2008, as well as refers to some prominent examples to illustrate the popular articulations throughout the 1990s. Unfortunately, unless the sample to be trimmed down to a mere dozen, it is impossible to cover different periods proportionately, primarily because the mass production of domestic films and TV series in the 1990s decreased dramatically.

Third, I collected movies of all genres, excluding documentaries. I treated documentaries as conscious political statements. Empirically, in Russia the documentary-producing TV is dominated by articulated audiences and thus excluded documentaries from an unbiased sample of collective articulations. These considerations made me using documentaries as a significant part of the official discourse, explaining elite's obligations and proposal for the nation (linkage). If the film industry in the USSR was totally controlled during the communist regime, it became by and large free in the 1990s.

¹⁰⁵ Neumann 2008: 63; Hopf 2002: 27.

Fourth, talking about collective articulations we are talking about popularity of certain singular cultural units. The commercial success positively attests to the wider audience's acceptance of the themes, characters and, perhaps, even messages conveyed in films. In Russian case, however, financial hit it is not a valid indicator, as the box office sales for the top movies of the year range dramatically, while only very few movies enjoyed an undisputable financial success.¹⁰⁶ Movies almost immediately are aired on the federal TV channels, sold on DVDs and get downloaded through multiple illegal file-sharing websites and peer-to-peer networks (such as www.scteam.ru). Thus my sample is based on a mixture of commercial success, official ratings, responses from various sources, as well as my own following film production trends since mid-1990s.

Although I deliberately concentrate on the new collective articulations, produced in the 2000s, domestic discursive streams are not fully confined to what was written, directed, and acted specifically in the analyzed period. In Russian context, thus, a careful observer should also comment on the unequivocal building on soviet resources (in terms of remakes of and sequels to the iconic movies), as well as continuous beaming of the older soviet movies on the TV screens. At

¹⁰⁶ On the commercial indicators of Russian film industry, see Sel'janov, Sergej. 2004. Skazki, sjuzhety i scenarii sovremennoj Rossii. *Publichnye lekcii na Polit.ru*, 22.04.2004..

the first glance, this indicates an increasing nostalgia about the Soviet past. The seeming abundance of the soviet resources would entail the continuing popularity and intersubjective sharing of the soviet discursive resources, but for several considerations. Most importantly, any direct glorifications of the soviet achievements are almost absent, exemplars of do not contain politically meaningful pro-soviet articulations, and thus do not attest to the strength pro-soviet discursive stream. In fact many soviet films of the late 1970s—early 1980s still praised today were tongue-in-cheek critique of the deficiencies of the regime.

Symptomatically, in the era of Sovereign Democracy, many observers, movie critics, and general public dismissed the fact that popular articulations were shaped by the plurality of permissible approaches how to envision and represent the Russian self. Importantly, they lamented the low quality of the cinematographic products, tagging the films of the 1990s under the rubric of *chernukha*.¹⁰⁷ In the Russian cultural context, this term could be quite broad and imply not only the sense of being doomed, general gloominess, negativity and depression permeating the movies, but also trashiness and inferiority as the major characteristic of the Russian film industry in the 1990s. New collective articulations seem to be

¹⁰⁷ Larsen 2003

intentionally avoiding chernukha, while the detectable discursive streams were fleshed out and cemented in terms of consistency of the themes and messages contained in these movies. In the 2000s three overarching themes at the level of collectivity undoubtedly predominated.

By the end of Putin's presidency, however, many prominent cinematographers warned about the looming crisis in the industry. Among them, several iconic and near-iconic directors, including internationally acclaimed Nikita Mikhalkov and Fedor Bondarchuk, made a public plea for more governmental money to produce more patriotic films. They seemed to be willing to film what the government would deem important for its own purposes (goszakaz, state order). This demonstrates not only the filmmaking industry's recognition of importance of movies for shaping political representations at the collective level, but even directors' and producers' acceptance to be engaged in intentional outreach as articulated audiences. Would this trend fully gain its momentum, the films will no longer be true collective articulations, but rather elements in intentional strategy of deploying politically meaningful discursive resources.

Strong state as an ultimate political value

The first broad discursive stream affirmed the commitment to the strong state as a core component of common good. Film directors used a broad range of historical material spanning the whole Russian history, as if to reaffirm Putin's statement that stateness provides the continuity of the national history.

At the more extreme side of popular articulations, the produced films convey a clear message that any revolution, or abrupt political change, or weakness of power could not only trigger an avalanche of criminal activity, but also could endanger the very existence of Russia as a coherent political unit. The bluntest exemplars of the themes negatively portray characters, who intentionally promote "liberal" ideology at the expense of Russia's strength. The historical truth and justice is always embodied by the state servants, while liberal impulses lead to the conspiratorial activity to destroy the very existence of Russian polity. Notable examples include *Tsar's Servant* (in which only freedom-seeking Polish peasants are represented as the bandits, preventing Russia's rise), *Alexander: The Neva Battle* (in which the faction of old Russian nobility seeks not freedom, as declared, but rather to prevent consolidation and strengthening of the state), *1612* (in which state-defending militia of the early XVIIth c., as well as ordinary Muscovites, voluntarily chose to protect the state as their solemn duty).

Protagonists are always striving to make the state stronger (and stronger here equals better), while its opponents pursue the opposite goals under different disguises. The mini-series *Demise of Empire* and *The Empire under Strike* offer a rich gallery of soulless monsters, conspiring against the very existence of the state for no apparent reason. Personal feelings and dislike of separate state officials have to be sacrificed for the greater good of Russia. In *State Councilor*, for instance, the principal character Erast Fandorin decides to accept the position of the Moscow police head, despite his deep distaste for the repressive practices of the state and intense personal dislike of his immediate superior—Moscow general-governor. The last example is actually very telling as the protagonists' choice (also the logical dénouement of the film) was the opposite in the novel on which the film was based on. The director's choice clearly meant to accommodate the tastes of the film spectators. Boris Akunin, the author of the novel, was not thrilled with such an ending, yet he essentially agreed to have it. This positive imagery of serving the state stands in the stark contrast of the overwhelming popular ridiculing of domestic authorities (*Soldier Ivan Chonkin*), Russian international affairs (*Afghan Fissure*) and mockery over the Russian way of life, comparing to the West (*White King—Red Queen*). In the 1990s, being

Russian was denounced as being indisputably inferior to foreigners, especially Europeans.¹⁰⁸

In developing the theme of the strong state, majority of the films present state service which equals loyalty to the current political regime as a high moral obligation to be carried out by every Russian. In this context, even working for the communist regime is an honorable choice, unless marred by the personal involvement in political repressions. Thus, outright portrayal of communist and socialist revolutionaries is blurred by these distinctions. Isaev, for instance, demonstrates that the considerations of protection of the state from its internal and external enemies are (and should be) superior to the personal attitudes to the political regime. This by and large exonerates the protagonists' doubtful choice of working for the communists, whose overall image (both on personal and political level) is far from idealized. The opposite choice, although allowing a protagonist to retain high moral grounds and the sense of personal dignity, inevitably incurs broader tragedies (*Admiral*, *Demise of Empire*). This message that commitment to the strong state should transcend ideological divisions could be easily applied to Putin's Russia.

¹⁰⁸ See for instance, *Luna-Park*, *Russian Ragtime*, *See Paris and Die*, *Heavens Promised*, *Prediction*.

Another striking example is the highly acclaimed film *Pushkin: The Last Duel* (2006), featuring the first-rate Russian movie stars. The film topples the traditional vision of Aleksandr Pushkin as an anti-state and proto-liberal “freedom-loving” poet, which was deeply inculcated during the communist period. This XIXth c. famous man of letters is portrayed as a victim of an international intrigue, aspiring to rob Nicholas I off the intellectual resources of the emerging Russian nationalism. The general message of the movie implies that the subsequent economic and political stagnation in the mid-XIXth should be blamed on the subversive outsiders, rather than any internal problems. The film also shows that harmful forces often evade the proper punishment by the skewed international norms. Pushkin’s killer, being a foreign subject, is exempt from hanging by the international regulations.

State-led development

The second discursive stream exposed the ubiquitous violence and lawlessness, the helplessness of the state, entangled with organized crime and shady businesses practices in the 1990s. The stream in general supports the notion of the “wild 1990s” as the centerpiece of Sovereign Democracy.

In recreating the human experience of the period, many movies pictured the protagonists' deep personal crisis and inability to realize their potential in embarking on the service to the state as highly rewarding career. In the films about the 1990s, main characters are inevitably sucked into the organized crime and violence. (Consider ubiquitous bloodshed and sadism in *Dead Man's Bluff*, which in Russia was released under the title *Squints*, implying the shut eyes of the dead). In a canonic movie *Beemer*, for instance, four small-time crooks, strive to own a Beemer, which is presented as an ultimate object of their desire, an affliction, which brings them only misery.

The mere task of surviving in the "wild 1990s" presented characters with harsh choices. In many cases personal survival in the state of nature (as well as protecting their families and their significant others) meant turning to violence. Multiple films explore an array of possible repercussions of this harsh choice (*Sisters*, *Angel on the Sidewalk*). Often even seeking seclusion and atonement would not bring peace of the protagonist. Such is the story of an ex-killer, who pursued an escape in a secluded and frosty Russian town only to get hunted by an aspiring hit-woman (*Garbage Man*). This theme was also explored in the film *Sisters*, where the 13 year old girl dreams about become a sniper in the Russian military and fight in Chechnya to escape from the brutality and crime surrounding her family.

The connections between the politicians of the 1990s and the organized crime are best explored in a canonic mini-series *Brigada*. It traces the epic history of four friends, who started their own business at the end of perestroika. In this very popular mini-series the main protagonist Sasha Belyi is able to succeed in business because he helps the corrupt federal agents to transport narcotics to the West. Yet, once asked to smuggle arms into Chechnya, Belyi declines the offer. Not surprisingly the corrupt siloviki fight back killing his friends, family and taking away his hard-earned prosperity. Quite a similar story is told in *Oligarch*. Smart and innovative businessman, who knows how to play the inefficient and corrupt system, is hunted by the corrupt politicians, envying his financial success.¹⁰⁹ In these movies, corrupted state officials internalize the criminal rules to pursue personal wealth.

The mini-series *Time of the Cruel* shows even more saliently how the dissolution of the state in the early 1990s pitched former military officers against each other. First they fight against each other in various local conflicts in the Soviet successor states. Later, some of them become involved into the weaponry smuggling scheme, under president's advisors and a vice prime minister. Others become consigliere to the well-connected gangsters, while still serving in the

¹⁰⁹ In *Oligarch* the protagonist is allegedly modeled on Boris Berezovsky, a former Russian media tycoon living in exile in London.

power ministries. Similarly, in *Hunting the Elk* (2005) most of presented banks owner, entertainers, and journalists have strong connections with organized crime. Their goal is to acquire a highly successful and profitable metallurgical plant for a fraction of a price, using illegal means. Their long-term plans, obviously, have nothing to do with the plants' and workers prosperity. At the same time pervasive corruption, permeating all strata of Russian state and commercialization of law-enforcing agencies is filmed very infrequently (*Flint*, *Oligarkh*, *Time of the Cruel*).

According to Swaffar, in the major Russian films of the 1990s characters unsuccessfully struggle to find a coherent identity.¹¹⁰ In sharp contrast, in the late 1990s a weak, erratic, and confused protagonist turns into a decisive hero. In 1997 Russian TV aired the first season of the phenomenally popular show *The Streets of the Broken Lanterns*, portraying police officers, whose deep character flaws and less than glamorous personal lifestyles, and sometimes not irreproachable professional conduct were absolved by their service for the greater societal good. Airing *The Streets* signaled the appearance of the whole spate of TV shows dedicated to good “cops” (*menty*), and later to the heroic intelligence and especially counterintelligence community. In the context of *siloviki* rise to power, such an emphasis

¹¹⁰ See Swaffar 2000: 101.

on law enforcement seemed to imply that only service to the state helps overcome deep personal and professional crisis.

Since the late 1990s, protagonists' behavior is shaped by their Russianness and deep commitment to the Russian moral imperatives. Even direct violence gets justified as an instrument of defending the truth, national values, and reasserting Russia's greatness. This message is best captured in tremendously popular *Brother* and *Brother 2*. In the first movie Danila Bogrov, a youth with a shady past, is fully committed to help and then protect his brother, even at great personal expenses. In the second one, he is portrayed like a true national protagonist, a hero of the Chechen war, bringing justice to his wronged friends and punishing the immoral Westerners.¹¹¹ According to Larsen, the first decisive filmographic attempts to reassert Russian unique and commendable values could be attributed to Nikita Mikhalkov's *Burnt by the Sun*, *Barber of Siberia* and Alexei Balabanov's *Brat*, *Brat 2*.

In Mikhalkov's attempt to reestablish a historical connection to unjustly condemned military fathers and Balabanov's reassertion of brother's obligations to one another, both filmmakers invoke the metaphor of a

¹¹¹ Vadim Volkov offered an exciting interpretation of *Brat 2* as romanticizing the violence through patriotism and serving the greater good, available at <<http://www.polit.ru/research/2005/01/17/volkov.html>>

“great family” united by shared moral certainties, cultural values, and unconditional loyalties... Yet the craving for the community remains, as does the yearning for a heroic national image capable of defying foreign threats and alien cultural influences (italics added—V.K.).¹¹²

These newer themes break up with the previous cinematographic trend of the 1990s, which put on screen “useless” characters living in permanent personal crisis with no chance of achieving anything positive in life (*Genius*, *Sagittarius Lost*, *The Time of Sorrow Hasn’t Come Yet*). Characters clearly did not have purpose in life and had no firm and positive sense of belonging, many of them wanted to escape the contemporary Russia, which itself suffered from a deep identity crisis. The most acclaimed movies of the period directed by Vladimir Khotinenko presented ordinary men crushed by identity crisis and alienated from their communities. The main character of *Musulmanin* converted to Islam and thus renounced his Russianness, and later was rejected by his community. A not so successful poet Makarov tries to build his identity around a newly found affinity with a handgun, while being at odds with surrounding society. Russian everyman were openly ridiculed as an alcoholic with

¹¹² Larsen 2003: 511

no other positive interests in life: Fishing, hunting, travelling, and politicking experiences were shaped by and subjugated to the drinking purpose (Peculiarities of National Fishing). This gloomy uselessness, attributed to being Russian stands in contrast with later articulations.

Great power in the multipolar world

The third broad discursive stream affirmed the commitment to Russia's great power status in both military and moral dimensions. After a long break, film directors returned to the war imageries of the Great Patriotic War—the name clearly underscoring Russia's special role in the World War II, as well as distancing from the pre-1941 military occupation of the Baltic States, and the Winter War with Finland. The cinematographic theme dominated the industry, yet by 2010 is seemingly losing its emotional appeal and financial success.

Throughout the 1990s the filmmakers by and large ignored this theme (the rare examples include *Victory Day*, *General*), in the 2000s the war imageries swoosh the spectators. In general, WWII is an excellent and abundant resource for pure entertainment and action-packed films. The stress on the entertainment and avoiding any really tough and potentially traumatic questions about the past often pushes overt political arguments out of these films. Most importantly,

however, the typical movie puts in the center of its narrative a story of a heroic everyman's adventures, underscoring protagonists' superior moral and physical characteristics.¹¹³

Even for the victims of regime, defending the state (Fatherland) and working for its glory is presented as a moral obligation. The conflict between protagonists and his oppressors is never glossed over, but often used as an obstacle to prevail over in order to show the strength of the will and character (Apostle, the Saboteur). Movies and mini-series which explore the themes of repressions and inhumane treatment of its own people are smaller in numbers and often become a subject of public debate, rather than unquestionably accepted as a shared articulation of the past (Penal Battalion, The Last Battle of Major Pugachev, Bastards). Highly debated Penal Battalion, for instance, meticulously exposed soldiers' lives under the repressive military mechanisms. Equally, an ultra-realistic presentation of the everyday hardships of the wartime is often ignored and rarely becomes popular.¹¹⁴ Mikhalkov attributed the victory in WWII to the Russianness and the Russian exclusive and highly rewarding connection to the orthodox celestial spheres (Burnt by the Sun-2, see

¹¹³ *August 44; Star, Stand, Transfer, Leningrad; June 1941, Stronger than Fire, The Last Armored Train, Time to Collect Stones,*

¹¹⁴ See, for instance, *Constellation of Taurus, Red Sky, Black Snow, Half-Mist, Battle of Local Importance*

also earlier I am Russian Soldier), rather than specific and limiting Sovietness. The focus on Russian uniqueness and great power status seems to be devoid from communist undertones.

CONCLUSION: RANKING NATIONAL PURPOSE

Russian political elite expressed strongly commitment to Sovereign Democracy as the conception of common good, while domestic articulated audiences were very active in outreaching its components to wider audiences. On balance, throughout Putin's presidency, this conception of common good got strongly embedded/legitimized in domestic policy environment. At the same time, public culture strongly supports a dominant articulation of common good, including all of its three substantive components. At the margins, other sub-elite groups and political parties keep advocating radically different set of political obligations, engrained in a different set of values. The summary characteristics of Russian national purpose are provided below:

Table 4.1 Indicators of national purpose

CHAPTER 5. SOCIAL PURPOSE IN SOUTH AFRICA (AFRICAN RENAISSANCE)

In the post-apartheid South Africa political elites discussed several alternative programs for the South African national identity. During the time of political transition to the majority rule in 1990-1994, there were a lot of credible nation- and identity-building proposals, each with its own specific focus. Solving the so-called national question was intended to rebuild, reunite and heal the nation in the context of profound ethnic, racial, gender, and class gulfs.¹

The prominent members of the African Nation Congress and the participants of the liberation movement simultaneously engaged the ideas of Pan-Africanism, Africanism, nonracialism, as well as class- and ethnic-based conceptions of common good. The Pan-African national identity coalesced into the core imagery of Africa for the Africans from Cape to Cairo and was articulated by the Pan-African Congress, based on the political writings of Steve Bantu Biko and Black Consciousness Movement. Africanism envisioned the common supra-ethnic nationhood of all black South Africans, and was

¹ For the collection of earlier discourse on South African identity-building see, for instance, van Diepen 1989.

espoused by certain members inside both the African National Congress (ANC) and Pan-African Congress (PAC). South African non-racialism (South Africanism, “the Rainbow Nation”) was promoted in Nelson Mandela’s and Desmond Tutu’s proposals for a multi-racial, multi-cultural South African nation. Other proposals included less politically feasible ethnic-tribal nationalism (Inkatha’s Mangosuthu Buthelezi). Last, but not least, the members of South African Communist Party (SACP), including Jabulani Nxumalo (Comrade Mzala), Joe Slovo, and charismatic Chris Hani promoted the radical class-based nationalism.² Among all those, the popular imagery of the Rainbow Nation briefly peaked in popularity during the Truth and Reconciliation Commission (TRC), soon to be perceived as a less attractive option.³

African Renaissance is a veritable salmagundi of themes, meanings, and sensibilities. The three themes clearly jump out as the most important.⁴ First, indigenusness is an outgrowth of Africanism as the ideology of returning to the roots in the ANC. Second, marketization is the strategy of economic empowerment, Third, ubuntu is the notion of South African exceptionalism in the context of globalization. Vale and Maseko drew attention the African

² See, for instance, Neuberger 1990, pp. 54—77

³ See Natrass and Seekings 2001

⁴ Vale and Maseko 2002; Ajulu 2001, Maloka 2002.

Renaissance aiming at constructing a new African history, identity and culture (culturalist interpretation which I will define as indigenusness, or “nativism”) and the second one aiming at South Africa’s special role in the continental revival in the context of globalization (globalist interpretation, which I define as ubuntu). To these two I add the third component, marketization, which according to WM Gumede was a single defining event in the battle for the “soul” of the ANC in the late 1990—early 2000s.⁵ There is a seeming inconsistency among all these components: indigenusness and marketization seem to underpin different kinds of action. However, in South African political context, both components are deployed to countervail the global power structure. Indigenusness promotes local solutions for local problems, while marketization economically empowers certain subset of domestic political elite.

I have previously suggested that building public legitimacy entails bonding with wider audiences and creating a strong national “we” against sordid anti-national “they”—the Other--which is presented as undermining the nation and therefore should be struggled with. In sum, South African political elites created particular three Others: the settler other, a disempowering deliverer, and the neo-colonial Other, embedded in the European Renaissance. Over time,

⁵ Gumede 2007: 132

however, these set of others remained somewhat compounded in the theme of two contending identities, Afro-optimist vs. Afro-pessimist, embracing incompatible and contending political projects was the most important trait of the loyalist discourse throughout Mbeki's presidential terms. an innovative set of identities across racial, ethnic, and cultural divides.

In this chapter I explore how the formation of a new conception of common good and ascertain to what degree it got embedded among wider audiences. In doing so, I follow the framework of analysis as laid out in Chapter 3. In Chapter 7 I will demonstrate how the pursued conception of common good politicized the responses to the epidemic of HIV/AIDS and subsequently had adverse effects on the adoption of global standards of the antiretroviral treatment.

ELITE'S COMMITMENT TO AFRICAN RENAISSANCE

Elite's strong commitment to a certain conception of common good is the first signal that social purpose truly emerges in a given country. It demonstrates what kind of action elite perceives as appropriate to solve policy problems. In this section I spell out the core components

of South African national purpose and ascertain the degree to which extant elites are consolidated around it.

Mbeki's speech "I am an African" signaled the desire to generate a common social purpose.⁶ This speech is often quoted to show what is meant by the notion African Renaissance in South African political discourse. This is not entirely accurate: the content and message of this highly poetic and emotional speech was closer to the Rainbow Nation rhetoric than to what Pretoria would promote under the heading of the African Renaissance. Nevertheless, throughout his upcoming presidency in a series of speeches, addresses and letters, President Mbeki elaborated his vision further, thus creating a corpus of canonical texts, to which domestic elites and articulated audiences anchored their discussion of social purpose. In general, for Mbeki African Renaissance was the core marker of [South] African identity: "This is because to speak of an African Renaissance is to speak of the coming into being of a new African identity, a new resolve to take our future into our own hands and determine our own destiny."⁷

⁶ "I am an African" speech delivered on behalf of the African National Congress, on the occasion of the adoption by the constitutional assembly of "The Republic of South Africa Constitution Bill 1996," in *Africa: The Time Has Come: Selected Speeches*, pp. 31—36

⁷Thabo Mbeki, Address to the National house of Traditional Leaders, Ulundi, 3 August 2001

When elected to the presidency of the republic, Mbeki started consolidating political elites around him by expanding and strengthening the role of the presidency in particular and the executive power in general. If under Nelson Mandela the presidential office was rather small, Mbeki created additional internal bodies such as the Coordination and Implementation Unit (CIU), the Policy Coordination and Advisory Service (PCAS), the Presidential Support Unit (PSU).⁸ Beyond their instrumental role in helping formulating and coordinating domestic policies, these units also promoted presidential vision of a new conception of common good among the domestic elite.⁹ Essop Pahad, for instance, openly asserted that the office of the presidency was the ministry of African Renaissance. According to Frank Chikane, a team of senior advisors turned then Deputy President's vision of the African Renaissance into an operational plan how to achieve this objective.¹⁰

Informally, the strengthening of the presidency relied on the growing role and power of President Mbeki's inner circle of advisors. South African political columnist Richard Calland's list of the core important individuals features Joel Netshitenzhe (the member of the

⁸ On the political role and functions of these policy units, see Calland 2006: 35—41; on the expansion of the presidency see Calland 2006: 22—28.

⁹ Some of them after Mbeki's ousting from power created a new party Congress of People (COPE) with surprising electoral success.

¹⁰ Chikane, Frank. 2006. A new type of partnership. The African Renaissance and the development of NEPAD. *Umrabulo* 27 (3).

ANC National Executive Committee, NEC, and allegedly the chief political strategist), Trevor Manuel (Minister of Finance, 1996—2009), Mojanku Gumbi (legal advisor to the President’s Office), Phumzile Mlambo-Ngucka (Deputy President in 2005—2008), Essop Pahad (the Minister in the Presidency, 1999-2008), Aziz Pahad, (Deputy Minister of Foreign Affairs in 1999—2008, and allegedly Mbeki’s best personal friend), Smuts Ngonyama (a head of communications for the ANC), Titus Mafolo (Mbeki’s political adviser in the presidency), Cunningham Ngcukana (Deputy Executive Director, NEPAD), and Bheki Khumalo (presidential spokesman), among others.¹¹ These individuals constituted “president’s inner circle” and sometimes were described as the powerful cohort of loyalists.

Until 2008, Mbeki was quite successful in having a broad power-based consensus on the major political goals inside the ANC. Mbeki’s loyalists attained this internal power-based consensus most of the times through intricate apparat games and through firing the “dissidents” from the executive positions, often through bitter personal attacks in the media, and sometimes through direct persecution and allegations of political conspiracy to overthrow the presidency. With

¹¹ On the background of these individuals, their political views and positions, see Calland 2006: 27—35, 49—53, 61.

less internal democracy inside the ANC, the core Mbeki supporters were able to make African Renaissance a dominant proposal in the party.¹² “African Renaissance” features prominently in the outlook of the African National Congress (ANC). The 50th National Conference in Mafikeng, the ANC adopted the “African Renaissance” as a key component of its ideological outlook, especially as related to economy and international relations.¹³ The language of the following statements was also heavily imbued with references to the African Renaissance as one of the core strategic tasks of the ANC.¹⁴ The concept of African Renaissance also was fundamental for the documents discussing the continent’s future at the 51st National Conference in Stellenbosch (December 2002).¹⁵

The ANC remains the unchallenged political party of power, crowding and even marginalizing the rest of the smaller political parties. In this context, the ANC’s vision of national identity would constitute at least a power-based (restrained) consensus. Indeed, the role of potential challengers, such as South African Communist Party,

¹² See, for instance, Lotshwao 2009; on the ANC as the dominant party system, see Lanegran 2001, for the growing role of NEC, see Calland 2006: 122—124.

¹³ Lodge 2003: 227—228; Also see the policy document Strategy and Tactics—Mafikeng. As amended at the 50th National Conference, December 1997.

¹⁴ See, for instance, Statement of the National Executive Committee on the occasion of the 88th Anniversary of the ANC, January 8, 2000, available at <<http://www.anc.org.za/show.php?include=docs/jan8/2000/jan8-2000.html>>

¹⁵ See, for instance, The ANC and Challenges facing the African continent, *Unrambulu* 16 (3): Special 51st National Conference Edition (2002). This discussion document initially appeared on 30 August 2002 in preparation for the December conference.

the Congress of South African Trade Unions (COSATU) remained relatively minor. One indicator that the notion of African Renaissance became accepted in domestic political elite beyond Mbeki's circle of supporters is that the leftist-oriented Vusi Maviembela (a current leader of Congress of South African Trade Unions, COSATU) fully endorsed and promoted this version of social purpose, especially pertains to the country's role in continental leadership, continental solidarity and common African heritage.

Indigenesness: return to the roots

Indigenesness pinpoints using local solutions and genetic resources as a kind of action appropriate for addressing pressing policy problems. "A return to the roots" is a formula capturing major interrelated themes, including the rediscovery of Africa's creative past, taking the indigenous peoples' wisdom seriously, preserving and promoting various indigenous customs transcending the present-day political borders.¹⁶ Returning to the roots also aimed at the moral regeneration to curb the present-day violence and stop the decline of the moral standards.

¹⁶ See, for instance, The African cultural milieu and our common humanity, *ANC Today*, Volume 7, No. 40 (12—18 October 2007)

Among all those themes, South African political elite placed a special emphasis on the necessity to establish an African interpretation of things, that is, producing and advancing indigenous science, technology, and education. In his speech *The African Renaissance, South Africa and the World*, Mbeki envisioned that indigenesness would generate “modern products of human economic activity, significant contributions to the world of knowledge, in the arts, science and technology, new images of an Africa of peace and prosperity.”¹⁷ During African Renaissance conference in 1999, Githae Mugo called for African education as a “system of knowledge, theory and practice, informed and shaped by a content and form that are definitive of African space as well as the indigenous experiences of Africa’s people and diversity.”¹⁸ Importantly, in 2002 one discussion document defined indigenous knowledge as central for a new African identity: “Citizens are not made by Acts of Parliament, but by a growing common awareness emerging through politics, education, working together, sport, entertainment, and religion. A new Indigenous

¹⁷ In 1998 Mbeki purposefully reappropriated the Latin proverb “Ex Africa semper aliquid novi! (Something new always comes out of Africa!) with can have a negative meaning as well. See Thabo Mbeki, *The African Renaissance, South Africa and the World*, in *Africa: The Time Has Come: Selected Speeches*, pp 239--251

¹⁸ Githae Mugo, *African Culture in Education for Sustainable Development*, in Makgoba 1999: 225

Knowledge System (IKS) is arising which is not western, American, European, but African.”¹⁹

All this rhetoric signified something more profound than a mere propaganda, or public relations exploit. Pretoria encouraged a variety of institutions embodying the indigenous values and promoting the contextualized systems of knowledge. The Cabinet supported traditional leaders financially and logistically and recognized the role of traditional governance in rural reconstruction and development, as well as in sustaining cultural, linguistic and religious communities.²⁰ Early in his presidency, Mbeki and the President’s Office helped create National House of Traditional Leaders, Programme of Support for the Institution of Traditional Leadership, the Traditional Leaders Conference, and the African Renaissance Festival. Another, more specific manifestation of indigenusness was the creation of the National Research Foundation (NRF) to manage the governmental funds directed to the study of indigenous knowledge and traditional

¹⁹ The 52nd National Conference Discussion Documents, The RDP of the Soul, 30 March 2007, available at <http://www.anc.org.za/show.php?include=docs/discus/2007/rdp.html>

²⁰ See the White Paper on Traditional Leadership and Governance and the Traditional Leadership and Governance, *Staatskoerant*, 10 September 2003, No. 25438 3 General Notice 2336 of 2003; Speaking notes for Deputy President Phumzile Mlambo-Ngcuka at the House of Traditional Leaders during Social Development Day, 19 October 2007; for the broader academic analysis of the traditional leadership institutions in the context of democratic South Africa, see Williams 2010.

healing practices.²¹ Throughout his tenure, Mbeki publicly extolled traditional institutions and their leaders for their determining role in the African Renaissance by developing communities and stimulating the new common ground.²²

In South African context the commitment to indigenous knowledge systems and traditional institutions went beyond standard declarative purposes. One practical implication directly relevant for the subsequent chapters is related to African Traditional Medicines (ATMs). The South African Health Ministry defined IKS as “scientific methodologies that stretch back thousands of years,” being “essential and irreplaceable component of the comprehensive care.”²³ From the international vantage point, promoting TMs implies standardization and commercialization of knowledge about plants, as well as institutionalizing relationship between traditional healers, plant gatherers, governments, biomedical researchers, and the private sector.²⁴ The global consensus on genetic resources is to make ethnomedicines applicable for public health and to promote the sustainable management of resources. This consensus does not imply any of the far-reaching aspirations, as pursued by South African

²¹Important role for traditional leaders in development and nation-building, *ANC Today*, Volume 3, No. 28 (18—24 July 2003).

²² Thabo Mbeki, Address to the National house of Traditional Leaders, Ulundi, 3 August 2001

²³ MBewu and Simelela 2003: 86

²⁴Reihling 2008

political leaders. While the World Health Organization (WHO) had a particular interest in traditional medicine, it was very careful in its evaluation of safety and efficacy of local knowledge about genetic resources.

Generally indigenusness entails that the local innovations and local solutions as policy action should be preferred to the Western models, as employing the former only creates the negative image of South Africa's backwardness and helplessness. At the more radical side of the discourse, the participants of the African Renaissance conference, the Foundation for the Global Dialogue, claimed that the majority of Western institutions and structures on the African soil were "promiscuously copied from the West," proved themselves culturally ineffective and irrelevant and thus should be boldly discouraged and abolished.²⁵

Marketization as the economic empowerment

Marketization prescribes the economic empowerment of South Africans based on boosting the private sector and relying on market economy strategies as a kind of action appropriate for addressing

²⁵ See the Foundation for the Global Dialogue Occasional Papers.

pressing policy problems, as opposed to the governmental delivery and redistribution.²⁶

In the late 1980s the ANC briefly planned to rebuild the country's economy using soviet-style economic prescriptions. Some powerful figures in the organization studied the Soviet, Chinese, Cuban experiences and purportedly decided on nationalization as the main economic strategy. In the early 1990s, however, Madela publicly distanced himself from the ideas of nationalization so that the ANC's economic policies could remain rather flexible.²⁷ The sharp turnaround in the party's economic outlook got cemented in 1992—1993, when socialist-inspired redistribution was categorically excluded from the ANC policy documents. The agreement on the new economic outlook superceded the strong contestation inside the future South African elite. It had been fractured along the leftist and pro-distribution (SACP, COSATU) and more centrist and pro-marketization proponents (the ANC, Trevor Manuel, Tito Mboweni, and later Alec Erwin). WM Gumede implied that the strong consensus about marketization at the level of political elite was borne out of the successful transfer of assets and economic power to newly generated

²⁶ Gumede 2007: 189. I would use this term as a synonym to economic liberalization, economic neo-liberalism.

²⁷ Marais 2001: 125—126, 134—135.

class of wealthy black entrepreneurs.²⁸ Most importantly, for both camps the choice of the path to growth was intricately connected to their political identities and ideological outlooks.

Scholars still dispute the specific reasons why marketization was embraced. Hein Marais, the author of perhaps most authoritative account of the south African politics of economic reform, drew attention to both structural and institutional factors, including global communist collapse, learning from the overspending in Chile and Peru, and the ANC's historical unpreparedness to debate economic policy professionally. Zimbabwe's economic problems were attributed to the lack of to the marketization principles the dedication to the land redistribution and overspending.²⁹ According to Gumede, the ANC was simply seduced by the International Financial Institutions, most notably the World Bank, whose representatives courted the ANC members and in a course of a few years fully socialized them in the neo-liberal orthodoxy. It could be also argued that these pro-market policies were chosen simply out of overpowering fiscal constraints.

In any case, Mbeki's speech at the University of Transkei's fundraising dinner on April 30, 1998 made abundantly clear that the

²⁸ Tokyo Sexwale was one of the success stories of the Black Economic Empowerment.

²⁹ As in 2002 the ANC's Secretary-General Kgalema Motlanthe and Mbeki himself argued.

stress on delivery was undesirable, since it overpowered the government and disempowered the people:

What remains is for us all to invest the government with the heavenly powers... Is it correct that we preach such a message of disempowerment of the people, predicated on the notion of a deliverer and a recipient? When we who, for now anyway, occupy positions of political leadership speak only of a record of achievement illustrated by statistics of delivery, and do not address with the same vigour and consistency the issues of what each of our citizens is doing themselves to deliver to themselves and to society - are we not thereby also contributing to the demobilisation and disempowerment of the people and the inculcation among them of a frame of mind of dependence on.³⁰

The elevation of marketization as strong political obligation was accompanied with the slow erosion of the socialist inspired Reconstruction and Development Programme (RDP). Simultaneously, the ANC started underscoring economic growth through deficit reduction, tight monetary policy, and trade liberalization, according

³⁰ Address of Deputy President Thabo Mbeki at the Unitra fund-raising Dinner, 30 April 1998

the Washington Consensus.³¹ The final break away from the redistribution to the neo-liberalism was sealed with the Growth, Employment, and Redistribution (GEAR), the Accelerated and Shared Growth Initiative for South Africa (ASGISA).³²

Ubuntu in the context of globalization

Ubuntu emphasizes the continental solidarity, self-reliance, and resistance the Western neo-colonial imperialism as the kind of action appropriate to solve pressing policy problems. The more politicized rendition of this concept strongly implied South Africa's role as the primary and perhaps the sole expresser of a continental solidarity, which also entails South African status as a benevolent hegemon.³³

Ubuntu is roughly defined as a universal bond of sharing that connects all humanity, an intrinsic African outlook that places a strong value on communal interests, underscores that human existence, gives meaning to one's life through interactions with others, fosters spiritual collectiveness, and promotes the ethos of reciprocity and mutual aid.

The Zulu saying “umuntu ngumuntu ngabantu” is commonly

³¹ Weeks 1999

³² For the detailed analysis see Hirsch 2005

³³ Thabo Mbeki, Nations of the world must unite for human solidarity, *ANC Today*, Volume 4, No. 19 (14— 20 May 2004); Thabo Mbeki, Towards a people-centred new world order, *ANC Today*, Volume 3, No. 43 (31 October —6 November 2003)

translated as the person becoming self through interaction with the Other. In this context, the political meaning of ubuntu implies that South Africa can realize itself as a successful political project only if shaping the future of the continent and playing an important global role. The Minister of Foreign Affairs Nkosazana Dlamini-Zuma fleshed out the notion of continental solidarity as follows:

Our foreign policy is not only anchored in our domestic policy, but on the responsibility that South Africa offers hope for all humanity. We have to contribute to the ongoing struggle for a better world. Internationally, we continue struggle for a world with the following values: democracy, good governance, people-centered development, peace, stability and security, promotion of cooperation, partnership and good neighbourliness.³⁴

Some observers claimed that South African elites strategically deployed the notion of continental solidarity in order to maximize South Africa's foreign policy options in Africa—including the country's quest to occupy Africa's permanent seat in the United Nations Security Council.³⁵ Yet political commitment to the social

³⁴ See for instance, Budget Vote 3: Speech Delivered by Minister Dlamini Zuma, 8 May 2001; Foreign Affairs Budget Vote 11-- Address by Minister Dlamini Zuma to the National Assembly, 14 March 2000

³⁵ Vale and Maseko 2002: 125

purpose captured in ubuntu goes beyond strategic considerations. In a 1997 discussion document prepared for the 50th national Conference in Mafikeng “African Renaissance” was mentioned 17 times in relation to the South African foreign policy strategy.³⁶ In 2007 political elites continued extolling a strong and decisive leadership of South Africa in ushering moral-political regeneration, economic revival, self-reliance, and continental solidarity. In this context, ubuntu should be seen as a politically meaningful program of action: many practical steps ensued from this discourse.

The resolution of the 50th National Conference in Mafikeng called for “developing a theoretical framework and strategy to give content to our vision of the African renaissance.”³⁷ The documents flowing from the discussion indicated that the New Economic Partnership for African Development (NEPAD) will be such an instrument.³⁸ Heavy-weight members of the South African political

³⁶ See, Developing a strategic perspective on South African foreign policy, 1 July 1997, available at <<http://www.anc.org.za/show.php?include=docs/discus/1997/foreign.html&ID=2348>>.

³⁷ See, the ANC 50th National Conference: Resolutions - International Relations, available at <<http://www.anc.org.za/show.php?include=docs/res/1997/resolutions4.html&ID=2432>>; or the links between the political program of the African Renaissance and NEPAD, see also Chicane, Frank. 2006. A new type of partnership. The African Renaissance and the development of NEPAD. *Umrabulo* 27 (3).

³⁸ Such as “The ANC and the challenges facing the African continent,” prepared to the 51st National Conference, 30 August 2002. For the detailed discussion see of NEPAD as a vehicle of economic transformations, see Matthews 2004; Ezeoha &

elite Jacob Zuma, Essop Pahad, and Frank Chikane claimed the crucial role of NEPAD in implementing the conception of common good.³⁹

Minister of Provincial and Local Government Sydney Mafumadi asserted that NEPAD presented “a framework for a break with the unequal and exploitative economic and political relations that manifest itself in the causal connection between development in the North and underdevelopment in the South, of which our continent is an intimate part.”⁴⁰ Frank Chikane, a member of the ANC National Executive Committee and Director-General in the Presidency, claimed that the deployment of NEPAD would put Africa on equal terms with the West:

...is about restoring the dignity, respect, pride and ubuntu of the African people... From a South African perspective, NEPAD is seen within the context of the development of the vision of the African Renaissance... NEPAD has changed the nature of the relationship between the donor

Uche 2005. On the other hand, Bond (2004) critiqued NEPAD as South African neo-imperialist project of sub-continental proportions.

³⁹ Address by Deputy President Zuma to the NEPAD Financing For Development Conference, Dakar Senegal, 2002/04/15; Jacob Zuma, Address to the debate on the New Partnership for Africa's Development National Council of Provinces, Cape Town, 18 March 2003; Address by Deputy Minister Aziz Pahad on the New Partnership for Africa's Development (NEPAD) - SAIIA, 21 November 2001; Speech on African Renaissance by the Deputy Minister of Trade and Industry, Lindiwe Hendricks, At the Islamic Propagation centre, ICC Durban, 26 February 2002

⁴⁰Mafumadi, Sydney. 2002. Challenges facing intellectuals in the African Renaissance. *Umrabulo* 15 (2).

and the recipient, the developed and the developing countries. It has contributed to a partnership of mutual trust, respect and responsibility.⁴¹

Very similar, but more recent, initiative demonstrating the commitment to self-reliance was the South African financial contribution to the newly created the Pan-African Infrastructure Investment Fund (PAIID). This fund combined exclusively African-generated \$625 million in order to address the continental developmental challenges.⁴² More generally, being a benevolent hegemon implied that South Africa is likely to act as a norm-giver, than a norm-taker. Next logical step was an attack on the global pharmaceutical sector as undermining continental self-reliance and solidarity.⁴³

AFRICAN RENAISSANCE AND ITS PUBLIC LEGITIMACY

Public legitimacy of an elite-driven conception of common good is the second step ascertaining whether or not social purpose takes root in a

⁴¹ Chicane, Frank. 2006. A new type of partnership. The African Renaissance and the development of NEPAD. *Umrabulo* 27 (3).

⁴² See, for instance, Thabo Mbeki, Africa Must Unite! *ANC Today*, Volume 7, No. 26 (6 —12 July 2007)

⁴³ See, for instance, speech by Zwelinzima Vavi, COSATU General Secretary, at the International Day of Action Against Pharmaceutical Company Profiteering, available at <<http://www.cosatu.org.za/show.php?include=docs/sp/2001/sp0305.html&ID=1876&cat=Central%20Exec>>

given country. Domestic articulated audiences select, enable, and constrain the production of various discursive resources and thus shape policy environment and constitute what kind of policy action is likely to be perceived as legitimate. This means that the notions of indigeneness, marketization, and ubuntu should be intentionally disseminated and turned into the broader societal resources. In this section I spell out how articulated audiences legitimized the elite-generated conception of common good and ascertain the degree it got imbued into society.

Given Thabo Mbeki's penchant for political writing, both his critics and supporters anchor their discussion to this canon of discourse. A large portion of the legitimation efforts revolve around his letters, speeches, and addresses. In 2003—2007 Mbeki actively contributed to the on-line ANC resource ANC Today with his almost weekly section "Letters from the President." In these lengthy and sometimes not very coherent contributions, he touched upon various issues pertinent to history of slavery and liberation movement, national identity, African solidarity, as well as aggressively engaged his political opponents. Concurrently, a set of highly visible domestic intellectuals and political leaders fleshed out Mbeki's vision of social

purpose both in *ANC Today* and *Umrabulo*.⁴⁴ The head of the Government Communication and Information Service (GCIS) Joel Netshitenzhe and the Minister of Arts and Culture Z. Pallo Jordan—Mbeki’s key supporters—headed *Umrabulo*’s editorial board. The journal also frequently gave the tribune to the Health Minister Manto Tshabalala-Msimang to defend her controversial health policies. Eddy Maloka, the Executive Director of Africa Institute of South Africa and the President of the African Association of Political Science (AAPS) also published frequently in *Umrabulo*. The journal’s notable rubric “Celebrating our heritage” recurrently explained what political actions reflect the notion of indigenusness best and thus have to be nurtured.

The ANC’s first attempt to publicly promoting the rhetoric of African Renaissance was the discussion at the Foundation for Global Dialogue (FGD). Although many notable and influential public figures (including Moeletsi Mbeki) presented very engaging occasional papers, this discussion was a false start. The ensuing large-scale “African Renaissance” conference in Johannesburg turned out to be way more decisive initiative in influencing the national political environment. This conference was promoted by the President’s Office and gave a forum for more than 400 participants to formulate what it

⁴⁴ Archives of the *ANC Today* and *Umrabulo* are available at <http://www.anc.org.za> .

meant to apply the principles of African Renaissance to culture, education, science, technology, media and telecommunications, territorial divisions inside the continent. A year later, in 1999, the thirty best contributions made it to a book entitled African Renaissance: The New Struggle.⁴⁵ Beyond the scholastic discussion, the conference allegedly provided an intellectual foundation for the broad social movement to “reawaken” the continent. Simultaneously, the President’s Office launched the African Renaissance Institute (ARI) to coordinate the South African Chapter of the African Renaissance (SACAR), one of many across the continent.

The launch of the Native Club in May 2006 was another attempt to promote African Renaissance and bring together its major acolytes. Although initially the Club tried to be elitist and operate without much press coverage, South African newspapers came to view the Native Club as an ANC project.⁴⁶ This view seems to be warranted: the Club was in part sponsored by the Department of Arts and Culture (DAC) and lead by Mbeki’s senior political advisor Titus Mafolo as its Founding Chairperson and RS Roberts as its media spin-

⁴⁵ Makgoba (editor) 1999

⁴⁶ For the political context of the Native Club and the scholarly examination of its ideas, see Ndlovu-Gatsheni 2008; Ndlovu-Gatsheni 2009; On the funding controversy, see "Did Minister Pahad mislead parliament? *Independent Online*. Jan 18 2007; Top ANC politicians raise concern about Native Club, *Pretoria News*, July 17, 2006; John Matshikiza, Unliked, unlikeable and unavailable, *Mail & Guardian Online*, Jan 15 2007

⁴⁶ Zeleza 2009: 158.

doctor. The tasks of the Club were rather extensive: it was supposed to develop a progressive force to sustain the African Renaissance, countervail the multiplying domestic critics, shape and define South African nation and African identity, revive indigenous African cultural values and spirituality. Mafolo directly asserted that the Club's goal was to stimulate those discursive resources, which would reflect the notion of indigenesness and embed it among wider audiences:

[The Club] ...aims to mobilise South Africans to ensure that the ideas, philosophies, values and knowledge that propel society in a particular direction reflect the indigenous (*italics added.*—VK) identity of our people. We seek to strengthen our democratic order by interrogating the philosophical framework within which we produce knowledge and within which certain ideas have become entrenched and dominant in our society. This is particularly critical because today, blacks in South Africa are responsible for around only 15% of knowledge production.⁴⁷

Predictably, the ANC-sponsored journal *Umrabulo* favorably covered the Club's mission and agenda for action. Yet the mainstream post-colonial intellectuals and mass media brutally clobbered it as

⁴⁷ Mafolo, Titus. 2006. The Third Pillar of Transformation. *Umrabulo* 26 (2).

divisive and shallow.⁴⁸ Overall, by the late 1990s and early 2000s talking and writing about the African Renaissance became an industry in itself, as it included numerous conferences, publications, and special journals [most notably African Renaissance, Rootz].⁴⁹ The Cabinet also used the services of some domestic spin-doctors: most notoriously Ronald Suresh Roberts with his *Fit to Govern: The Native Intelligence of Thabo Mbeki*. Similarly, the Office of the President helped create the Moral Regeneration Movement (MRM) to mobilize a broad mass movement on order, propagate the spirit of ubuntu, restore the moral fiber of the society, and preserve South African national heritage.⁵⁰ In as much as they tapped into very broad and malleable principles, these initiatives signal that the process of embedding was successfully triggered. On balance, however, Mbeki and his supporters failed to dominate domestic media and turn them into the effective propagators of their vision of common good. The elite's bitterness toward the non-supportive media is best captured in the 2007 ANC discussion document entitled "The RDP of the Soul:" "The transformation of our

⁴⁸ Maloka, Eddy. 2006. The Native Club and the national democratic project, *Umrabulo* 26 (2). For the critical perspectives, see Jonathan Jansen, 'Native Club: A Dangerous Move to Deflect Attention from State Failings,' *Sunday Times*, 28 May 2006; Achille Mbembe, 'Stirring a Dark Brew that Echoes Nongwawuse's Fatal Prophecy,' in *Sunday Times*, 24 June 2006; Rory Carroll, 'South Africa's 'Native Club' stirs unease,' *Guardian.co.uk*, Thursday 15 June 2006;

⁴⁹ Zeleza 2009: 158.

⁵⁰ For MRM see for instance, Sampson 2007; McDonald 2010: 142; Jacob Zuma, Address on the Occasion Of Budget Vote 1, 18 June 2003

country can be inhibited by the negative attitudes, news items, editing, illustrations and advertisements in the media. The media can be subjugated to portraying western oppressive values, instead of the liberating values of ubuntu thinking.”⁵¹ As a result, despite the fact that articulated audience turned the African Renaissance into a noticeable and well-received notion in general, they failed to explain the ensuing political benefits.

Indigenusness: return to the roots

The 2002 National Conference in Stellenbosch specified various aspects of indigenusness and promoted it for the further political development. It resolved to develop indigenous sports as part of nation building and the African Renaissance, protect cultural heritage as part of a major contribution to the South African national identity, develop heritage sites to enroot historical memory at local level, promote the Indigenous Knowledge Systems as a part of the national transformation process and as an integral part of continental solidarity.⁵² September 2007 was named the Heritage Month.⁵³

⁵¹ Available at

<<http://www.anc.org.za/show.php?include=docs/discus/2007/rdp.html>>

⁵² See the 51st National Conference: Resolutions 52--59, 20 December 2002 Stellenbosch, available at

<<http://www.anc.org.za/show.php?include=docs/res/2002/resolutions.html&ID=2495>>

Another way to stress indigenusness as a core component of social purpose was in the creation of national parks as natural wonders, cradles of the humankind, representing a deep connection to nature that Europeans have lost long time ago.⁵⁴ Newly created collective spaces of memory stood for South African indigenusness and visibly represented its inherent values for every inhabitant of the country. Promoting education and business tourism was envisioned as yet another way to reach out to wider audiences and popularize African traditional culture. Among all these activities, Moral Regeneration Movement (MRM), first led by Deputy President Zuma and then by his successor Phumzile Mlambo-Ngcuka, overtly aimed to create “a national consciousness” and national identity compatible with the value of indigenusness.⁵⁵

While there is a strong identity connotation inbuilt in all three components of national purpose, indigenusness is of special importance. This component of common good is pinned on the worthiness of creative and unique self, and stands in opposition to the

⁵³Coombes 2003: 159--163;

⁵⁴ On the importance of heritage, see Thabo Mbeki, We are children of a rich heritage, *ANC Today*, Volume 7, No. 38 (28 September—4 October 2007); Z. Pallo Jordan Celebrate our dance. Celebrate our heritage, *ANC Today*, Volume 8, No. 36 (12—18 September 2008)

⁵⁵ Address delivered by the Deputy President, Ms Phumzile Mlambo-Ngcuka, at the national Imbizo on Ubuntu and Nation building in South Africa, Botshabelo, Steve Tshwete Municipality, Mpumalanga Province 17 November 2006; Address by Honourable Ms Phumzile Mlambo-Ngcuka, Deputy President of the Republic of South Africa, at the adoption of the Charter of Positive Values, Johannesburg, 29 July 2008

Settler Other, who does not believe that [South] Africa can offer anything of significance and value to the world. The common theme revolves around the thesis of two irreconcilable nations, each embodying the opposite values. In this context, indigenosity got treated as the core marker of South African ingenuity, a major defining characteristic of [South] Africans, and a corner stone of their identity.⁵⁶ The general sense of the Other as an Afro-pessimist is captured in Mbeki's diatribe against distant, aloof and cynical observers, "laughing" at the prospects of an African Renewal.⁵⁷ Presidential spokesperson Mukoni Ratshitanga in 2007 argued that despite the efforts of successive colonial and apartheid regimes to obliterate the African cultural milieu, the values of traditional culture "served both as a shield and weapon of struggle."⁵⁸ Yet the Other is constantly on the offensive. According to Pitika Ntuli, the Director of the African Renaissance Institute at the University of Durban-Westville, the Eurocentric knowledge not only continues to dominate in the African sciences, culture and education, but also keeps suggesting that African is incapable of formulating its own knowledge

⁵⁶ Achille Mbembe, Cultural Politics of South Africa's Foreign Policy: Between Black (Inter)Nationalism and Afropolitanism, unpublished paper available at <<http://www.hsrc.ac.za/Document-550.phtml>>

⁵⁷ Thabo Mbeki, Stop the Laughter, in *Africa: The Time Has Come: Selected Speeches*, pp. 289--295

⁵⁸ Mukoni Ratshitanga, The African cultural milieu and our common humanity, *ANC Today*, Volume 7, No. 40 (12—18 October 2007)

systems.⁵⁹ Importantly, indigenusness is cast not in ethnic or racial terms, but rather as a conscious cultural choice based on learning and commitment:

...Africanness in neither a pure matter of pigmentation, nor a question of geographical or ethnic belonging. ...it is a cultural choice and commitment, something which is acquired, gained, a matter of deep feeling and concrete behaviour ...everybody who feels our continent in the depth of her or his soul and in each beat of her or his heart, can legitimately be considered an African.⁶⁰

Yet, at least until 2003 the official rendition of self/other dynamic remained rather ambivalent in terms of who can be included/excluded. Obviously, not everybody was convinced with this, yet the major themes were articulated and promoted in a very clear manner.⁶¹

⁵⁹ Pitika Ntuli, *The Missing Link Between the Culture and Education: Are We Still Chasing Gods that Are not Our Own?* in Makgoba 1999: 187; see also Address by The Deputy Minister of Education Mr. Mosibudi Mangena, at the centre for African renaissance and Development Studies, University of the North, Qwa-Qwa Campus, 23 August 2002

⁶⁰ Semou Pathe Gueye, *African Renaissance as an Historical Challenge*, in Makgoba 1999: 247; see also the text with a very instructive title: Musa Xulu, *Ubuntu is learned, not natural or automatic, behavior*, *ANC Today*, Volume 7, No. 43 (2—8 November 2007)

⁶¹ Chipkin 2003: 29

Marketization as the economic empowerment

There were a lot of intentional activities to make marketization publicly legitimate and popular. According to Maloka, various talks and discussions revolving around the notion occurred very regularly on the radio stations, television, newspapers and magazines. The high-ranked Professional Managing Review (PMR) bestows an “African Renaissance Award” to businesses supposedly successful in contributing to the black economic empowerment.⁶² More generally, the corporate sector widely uses the notions of African Renaissance and ubuntu in order to make products more attractive and to embed marketization strategies as the way of doing business. Two astute observers of South African economy Hein Marais and David McDonald provide crucial evidence that academics and business leaders in South Africa have been aggressively promoting ubuntu as a home-grown management philosophy since the early 1990s, arguing that it leads to better corporate governance and social responsibility while at the same time safeguarding market economy. Marais noted “[m]otivational speakers and consultants, corporate human resource planners and advertising agencies eagerly assimilate[d]” the

⁶² Information on the Ubuntu Campaign for Nation Building and Ubuntu awards, is available at <http://www.nhc.org.za/modules.php?name=News&file=article&sid=86>

authentically African concept of ubuntu and African Renaissance to talk about South African capitalism.⁶³

There is a strong identity connotation inbuilt in marketization as well. As a core component of national purpose, marketization is pinned on self, who can provide for himself/herself, and rejects both exploitation and redistribution as practices, which deny a South African the well-deserved subjectivity and autonomy.⁶⁴ The Other claims that a South African is hostile to market principles and is unable to sustain himself/herself economically.⁶⁵ The Afro-pessimists want the government to deliver, thus implying that African people themselves are incapable of dealing with the pressing local problems. Mbeki mocked the proponents of these ideas as follows:

...they join the chorus which reinforces that notion that government has legitimacy only to the extent that it delivers. We have a place in society only because we have the miraculous power to deliver. ... I am the Deliverer and none exists but I. Cursed are those who worship at the feet of idols, because it is I and only I, the democratic state, that will deliver you from your misery! And so you and I can

⁶³ Marais 2001: 250

⁶⁴ Johnson 2004, pp. 111–112; Gumede 2007, p. 189

⁶⁵ Jacob Zuma, Address on the African Renaissance at the University of Bosphorus, Istanbul, 15 October 2003; For the origins of this argument during the apartheid era, see Greenberg 1987

see these masses at the feet of the Deliverer, hands held out
in supplication, incarnating in unison - Deliverer, deliver!
...magnanimous Deliverer who has an exclusive obligation
to see to the improvement of the conditions of life of the
passive recipient whose only task is to say - give me more!
Give me more!⁶⁶

Recently Pretoria continued its efforts to embed marketization among wider audiences and pitched itself as an inventor of the unusual and morally superior business practices. Most notably, many high-powered politicians such as Mlambo-Ngcuka and Jordan explicitly claimed that South Africa became fully committed to stable and market-friendly values.⁶⁷ This type of embedding marketization was also used by the lower-level bureaucrats as well. The Minister of Environmental Affairs and Tourism Marthinus van Schalkwyk pushed this line of argumentation further, asserting that South Africa “fused African wisdom with Western business, to offer Business Unusual to

⁶⁶ Thabo Mbeki, Address of Deputy President Thabo Mbeki at the Unitra fund-raising Dinner, 30 April 1998

⁶⁷ Address delivered by the Deputy President, Ms Phumzile Mlambo-Ngcuka, at the national Imbizo on Ubuntu and Nation building in South Africa, Botshabelo, Steve Tshwete Municipality, Mpumalanga Province, 17 November 2006; See also the Speech by the Mpumalanga Premier, TSP Makwetla, at the National Imbizo on ubuntu and nation-building, held at Boshabelo, Mpumalanga, 18 November 2006; Address by Minister of Arts and Culture Dr Pallo Jordan at Ubuntu Seminar, Boschendal, 19 November 2007

the world.”⁶⁸ The link between ubuntu and marketization allegedly had an impact on the ways South African corporations and private sector in general conducted business in the country.⁶⁹

In sum, with Mbeki’s ascension to the presidency, promoting marketization in the context of traditional African values became a clear political trend and overall contributed to the growth of neoliberal thinking in South Africa.⁷⁰ After some of these aggressive and visible leftist forces were sidelined and some of them actually converted to marketization, the resistance to marketization significantly weakened.⁷¹ However, there are a lot of the leftist academics and journalists, who continue a heated attack on the public commitment to marketization. They keep predicting economic collapse and broad social distress, caused by the commitment to economic orthodoxy and economic globalization for South Africa.⁷² Although the government chose to play serious attention to this critique, in the long-term period this may undermine the degree to which marketization is imbued in South African policy environment.

⁶⁸ Speech at the launch of the Global Business Unusual Tourism Campaign, Amsterdam, Netherlands, 1 November 2005.

⁶⁹ Karsten and Illa 2001: 91—112

⁷⁰ McDonald 2010: 140

⁷¹ For the detailed discussion of the ANC economic policy, see Marais 2001, especially Chapters 5, 6 and 7

⁷² See, for instance, numerous publications of Patrick Bond, including Bond 2001: 415. For a more balanced analysis, see Shaw and Nyang’oro 2000: 14—15

Ubuntu in the context of globalization

Publications streamlining and valorizing the African intellectual traditions contributed to the popularity of ubuntu as a legitimate notion. Notably, these publications treated any authentic tradition, produced in other African countries and historical periods as an equally important, of not integral, part of South African heritage. This way of embedding included newly produced discourses about the canonic cultural landmarks for African Renaissance, including *The Subtle Power of Intangible Heritage* (2004), *The Meaning of Timbuktu* by Jeppie and Diagne (2008), *The African Intellectuals in the 19 and 20th centuries*, as presented by Mcebisi Ndletyana (2008), and *The Deaths of Hintsa* by Premesh Lalu (2009), among others. The Human Sciences Research Council (HSRC) and the Council for the Development of Social Science Research in Africa (CODESRIA) were the most important centers propagating continental solidarity and common intellectual tradition as part of African Renaissance. Their publications can be seen as inventing the tradition and reappropriating history--creating the image of incredibly rich and resourceful yet untapped past, similarly to what the Renaissance Europe did to the its Greek antiquity.

In all this, one common theme contrasted European and African programs of Renaissance. In Europe the development of the Renaissance knowledge and technology was employed as means of subjugation and allowed Europeans to conquer Africa. Moreover, today's continuing Western superiority in technology and economic development perpetuates the new Global apartheid. In contrast, African Renaissance is based ubuntu and embraced human solidarity. In his September 2007 lecture delivered on the occasion of the 30th anniversary of the death of Steve Bantu Biko, Mbeki actively built on Biko's anti-western Pan-Africanism and extensively quoted him. Mbeki borrowed Biko's core point about the irreconcilable differences with the West:

We reject the power-based society of the Westerner that seems to be ever concerned with perfecting their technological know-how while losing out on their spiritual dimension. We believe that in the long run the special contribution to the world by Africa will be in this field of human relationships. The great powers of the world may have done wonders in giving the world an industrial and

military look, but the great gift still has to come from Africa – giving the world a more human face.⁷³

This theme essentially revealed the self-other dynamic. In this context, ubuntu was pinned on mentally and spiritually liberated self, whose Other crusaded for the “mental colonization” and acted on the inherent racism. The external Other have perpetuated the negative construction of a South African and denies him/her a human dignity and subjectivity. According to Mbeki, “frightening images of savagery that attend the continent of Africa” span over millennia and had to be confronted head on.⁷⁴ Pretoria presented political turmoil in the continent, its violent conflicts, and even the scourge of HIV/AIDS and various natural disasters as obstacles to be overcome, much like European Renaissance rose above political fragmentation, armies of mercenaries, Black Death and climatic instabilities.⁷⁵

The more assertive formulation of acting on ubuntu in the context of globalization implies South Africa’s role in fighting western neocolonialism (liberal imperialism) as its principal Other. The new South Africa has to be protected by exposing the legacies of racialism,

⁷³ Mbeki, Thabo. 2007. Lecture Delivered on the Occasion of the 30th Anniversary of the Death of Stephen Bantu Biko. Cape Town. 12 Sept 2007

⁷⁴ Thabo Mbeki, The African Renaissance, South Africa and the World, *in Africa: The Time Has Come: Selected Speeches*, pp 239—251; Another famous statement is We will resist the upside-down view of Africa, *ANC Today*, Volume 3, No. 49 (12—18 December 2003)

⁷⁵ Zeleza 2009: 158--159

oppression and domination, continuing to thrive in the global arena. One particular policy implication, which damaged Mbeki's international reputation, was Pretoria's support and regional solidarity with Robert Mugabe's Zimbabwe. His disastrous land reforms were interpreted as a bold opposition to the new global apartheid unwelcomed by the former colonial powers. The most warranted argument indicates that the South Africa support of Mugabe was prompted by falling for Harare's duplicitous discursive resistance against the legacy of colonialism, in which context the Western critique was no more than a typical imperialist double-faced opprobrium for daring to confront the enduring inequalities of the colonial era and the continuing Western presence in Africa.⁷⁶

The sense of historical proportions and the value attached to the continental solidarity is best demonstrated in Mbeki's then political adviser Vusi Maviembela's article, which described the "African Renaissance" as a defining "third moment" in Africa's post-colonial history comparable with decolonization and the democratic transitions as the first and the second moments, respectively.⁷⁷ As Maviembela explained:

⁷⁶See, for instance, Phimister and Raftopoulos 2004

⁷⁷ *Sunday Independent*, June 1997; see also Maloka 2000: 1

The *raison d'être* for a renaissance in the African continent is the need to empower African peoples to deliver themselves from the legacy of colonialism and neo-colonialism and to situate themselves on the global stage as equal and respected contributors to as well as beneficiaries of all the achievements of human civilization. Just as the continent was once a cradle of humanity and an important contributor to civilization, this renaissance should empower it to help the world rediscover the oneness of the human race.⁷⁸

AFRICAN RENAISSANCE IN COLLECTIVE ARTICULATIONS

Examining collective articulations is the third step in ascertaining whether or not a certain conception of common good becomes truly legitimate and embedded among the wider domestic audiences. For the strong and consolidated social purpose it is essential that the elite-driven notions of indigenoussness, marketization, and ubuntu are congruent (or compatible) with the imageries spread in popular

⁷⁸ Mavimbela, 1998: 29-31

culture. In this section I spell out how public culture discursively supported the core components of South African social purpose.

I have selected fiction as the source of recovering the collective level of articulation. First and foremost, South African popular fiction has long operated in what can be described as a “politically demanding milieu” and thus is well-suited to deal with restructuring of African identities, as Michael Chapman claims in his very important and multidimensional treatise of the contemporary state of popular culture in South Africa.⁷⁹ Historically, the importance of South African literature for politics is based on a strong and acclaimed tradition of JM Coetzee, Nadine Gordimer, André Brink, Breyten Breytenbach and others, who purposefully concentrated on exposing the inhumanities of apartheid. With the end of apartheid, the literature of South Africa became more diverse and is not organized around a single overarching narrative and one explicit set of political goals. The lack of a single political focus in the post-apartheid fiction justifies treating the South African writing as a good expresser of independent public culture, rather than a set of conscious attempts of influencing the policy environment. The new wave of politically concerned prose billowed with an abundance of the post-apartheid communal, autobiographical,

⁷⁹ Chapman 2006: 43—46, 75, 87, see also Coetzee 2001:209.

and confessional writing.⁸⁰ The authors came from all walks of life, ranging from the former victims Nelson Mandela (*Long Walk to Freedom*) and Mamphela Ramphele (*A Life*, 1995) to the former “oppressors”, including a prison warden James Gregory (*Goodbye Bafana: Nelson Mandela, My Prisoner, My Friend*) and a security police spy Mark Behr (*The Smell of Apples*, 1995).⁸¹ Memoir as a genre is often said to have both the healing, therapeutic, transformative role and the one capable of bringing the nation to the roots, grappling with legacies of oppression and imagining new political and cultural identities.⁸² Memoires, however, are outside the scope of my inquiry here.

The biggest objection for using South African literature as a truly collective articulation of social purpose and identity can be leveled by those literary critics, who argue that only the original writing styles and indigenous languages—yet not codified and developed for the desired scientific and cultural revival—can be true expressers of the indigeneness and Africanness.⁸³ The most rigorous proponents of African Renaissance infallibly claim that “by default

⁸⁰ For the elaboration of this definition, see Irlam 2004: 712.

⁸¹ Nuttall 1998: 75—88 (in Nuttall and Coetzee 1998)

⁸² Durrant 2005: 441.

⁸³ Chapman 2006: 84; for the broader discussion of the role of language in the context of the African Renaissance, see for instance, Musa Xulu, *IsiZulu should not become the next Latin*, *ANC Today*, Volume 7, No. 42 (26 October—1 November 2007); Musa Xulu, *South Africans need to be able to read in their own languages*, *ANC Today*, Volume 7, No. 44 (9—15 November 2007).

privileged English” should be abolished as Africa’s lingua franca as it sneaks in the colonial consciousness, heritage of imperialism and domination, and thus fosters ‘parrot culture,’ not genuine creativity.⁸⁴ Yet iconic Ngugi wa Thiongo, Chinua Achebe, Zakes Mda and others write in English. Ironically, literatures written not in the indigenous languages can transcend the artificially imposed divisions among ethnic groups and languages, thus truly contributing to the African renewal.⁸⁵

Others might extol the rich oral tradition, the indigenous African theatre, and celebration and festivities customs to suggest the pathways for the African post-colonial reconstruction and indigenous revival.⁸⁶ Githae Mugo approvingly recalls Kenyan experiment in removing the English (British colonial) literature from the curriculum and replacing it with studying African orature.⁸⁷ These two genres, however, are typically best operating inside smaller local communities, rather than imagined ones.

In general, because the contemporary South African literature is highly politicized and has stimulated a significant body of political

⁸⁴ See for instance, Hoppers, Moja and Mda 1999: 234 and Gueye 1999: 244-245, all in Makgoba 1999.

⁸⁵ On the other hand, in his description of a fictional Elizabeth Costello’s pessimism about the quality and sensibilities of African writing JM Coetzee asserts that [South] African fiction remained very outward-oriented and speaks directly to the Western readership. Coetzee 2003: 35—58, “Lesson 2: The Novel in Africa.”

⁸⁶ Sirayi 2001: 14—31 in Losambe and Sarinjeive 2001

⁸⁷ Githae Mugo in Makgoba 1999: 228.

commentaries it fits the purposes of my discussion. The way literary masters portray politically sensitive themes attracts a lot of attention in the South African literary commentary. Thus, South African fiction has stimulated a significant body of public interpretations, often spilling over to the academic journals (Cultural Critique, Modern Fiction Studies, Research in African Literatures, Journal of Southern African Studies, Journal of Modern Literature, African Studies, and Third World Quarterly, to name the main ones). This dissertation judiciously uses secondary commentaries as evidence of how wider audiences reflect major political themes, as opposed to relying solely on my own rendition.

Indigenusness: return to the roots

The stress on indigenusness is perhaps best captured in the revival of the previously subjugated literary forms, including praise poetry, and incorporating some forms and themes from African oral traditions of fairy tale-telling —purportedly standing in a stark contrast to what the Western fiction writers consider appropriate. The second stress is to give voice to the previously silenced people.

First, the academic literary criticism often claims that the resurgent genre of fairy tale-telling (under the more common title

“magical realism”) and its growing popularity are crucial characteristics of contemporary South African writing. The rise of magical realism in the present-day literature ostensibly returns the country’s westernized (and hence colonialist) fiction to the authentic oral tradition of African story-telling practices and also compensates for the lack of fiction in the native languages. (This perhaps alleviates concerns of the wide-spread use of colonial English as lamented by the African Renaissance purists).⁸⁸ The South African fantastic tales are decidedly unique and by no means simply emulate of the western-style fantasy a-la JRR Tolkien, Poul Anderson, Robert Howard, or George Martin—with their highly stylized European pre-Renaissance setting. On the contrary, the genre is imbued with very distinct African values and sensibilities, including the resistance to colonialist assertions of possessing the ultimate truth and knowledge. Among many authors writing in this genre, the work of Brink is viewed especially favorably.⁸⁹ While Brink used the elements of the genre in the 1980s (consider for instance his *The Chain of Voices* and *On the Contrary*), he fully committed to the magic realism in his post-apartheid writings.

Second, Andre Brink defined the purpose of post-apartheid fiction as to imagine and represent those private historical experiences

⁸⁸ See, for instance, Ndlovu-Gatsheni (2007: 58) advocated abandoning colonial languages as a disingenuous way of communicating and articulating African issues.

⁸⁹ Zinn 2000: 250

and public “regions of the past,” which had been silenced before and yet remain pivotal to the future of the nation.⁹⁰ Establishing the continuity with the pre-apartheid past and giving the voice to the previously silenced people (natives) helps restoring the worthiness of creative and unique indigenous self. The metaphor of being silenced previously was best expressed in Coetzee’s *Foe*—the postmodern remake of *Robinson Crusoe*—in which the white settler cuts out Friday’s tongue to keep his subjugated native mute. On a side note, mutilation is a common trope of subjugation in Brink’s *The Other Side of Silence*.

In the post-apartheid writing, characters tend to act on the notion of going back to the roots in order to heal themselves, as well as immerse into the recollection of history -- along very personal lines. Often the focus is placed not the nation on the whole, but rather on a particular community or individuals (KhoiKhoi in Brink’s case, Xhosa and Zulu in Mda’s writings). Most whites, males or females, young or elderly, are doomed without this return. The list of “doomed” characters includes Reuben Olivier in *The Rights of Desire*, Ouma Kristina in *Imaginings of Sand*, semi-fictional Coetzee in *Boyhood*, delusional David Lurie of *Disgrace*, and depressed Adam Napier of *The Impostor*. Even if the characters are not “doomed,” they retreat in

⁹⁰ Brink 1996: 240; Brink 1996: 30—31 in Nuttall and Coetzee 1996

self-absorption, soul-searching, and gloomy reflexivity. Disgrace's protagonist David Lurie escapes realities of everyday by writing about Lord Byron's life on an Italian villa, Ouma Kristina is tracing their Afrikaner family's genealogical lineage through the centuries and totally immersed in remembering, Galgut's Dr. Frank Eloff retreats to the rural South Africa, while disillusioned about the purpose of life.

It underscores those personal experiences which transcend the divisions of defined by any rigid political, cultural and social boundaries.⁹¹ Brink's *Imaginings of Sand and The Other Side of Silence* (2002) offer a rich and multidimensional view of settlers' story plentiful of hardships and injustices. In his novels, settlers do not travel the mythologized Boers' Great Trek to glory, prosperity and political power. Instead, subjugated women in South-West Africa tread a miserable passage to more hard labor, aggravated by cruelties inflicted on them by other settlers. Once truly transplanted into the local ways of life, the settlers obtain psychological strength to counter the injustices inflicted on them. Africa gives prospects of liberation and finding a new home to all oppressed. In this word, indigenous medicine generates miracles and heals the impossible terminal wounds, brings back to life a mutilated protagonist and gives her powers to fight back.

⁹¹ See, for instance, Zinn 2000: 251; 2005: 307

This rendition support the idea that it is not the race, or place of birth that defines who is native and who is settler. The principal theme asserts a clear articulation of deep human solidarity and the profound sense of belonging that transcends the rigid political boundaries. Many popular novels register the uneasiness of relationship between different races and ethnicities, both in historical and contemporary perspective. According to Rastogi, this pessimism stands in a stark contrast with the writer's apartheid-era anticipation for racial harmony and cultural reconciliation to be achieved after the successful liberation struggle.⁹² At the same time, many commentators contended that the central question of the white writing concerned the role that whites must play in the new nation, suggesting the mutual responsibility for the national destiny and the mutual responsibility for its past.⁹³ Thus, on balance, the literature eschews direct politicization of race, class or ethnicity and instead enables more creative and subtle "refashioning of identities."⁹⁴ South African fiction seems not to base true nativism simply on the pigmentation of the skin, but rather link it to the distinct sensibilities and the ability to reflect on the meaning of the past. No person can be automatically considered a native as perhaps the idea of the Rainbow Nation for the inclusive national identity did.

⁹² Rastogi 2008: 107.

⁹³ Diala 2001: 60; Chait 2001; 23-25

⁹⁴ Attwell and Harlow 2000; Gagiano 2004: 815

The vices of marketization in South African writing

In *The Heart of Redness* Zakes Mda uses the image of Casino as a symbol of marketization, global capitalism and a threat to the traditional way of life. This is one of the commanding illustrations that popular culture reflected the notion of marketization in a very unfavorable manner.⁹⁵

In the previous subsection I mentioned that Mda represented historical breakdown of the Xhosa community in relation to their attitudes to Nongqawuse's prophesy. In today's context, the challenges to the Xhosa survival, unity and distinctiveness are embodied by the spread of global capitalism and its adoption in the form of an international casino and resorts in South Africa. Schatteman explains that "the opposing camps are resurrected in the conflict between those who see the casino as a threat to traditional life and culture and those who welcome the move towards progress and western capitalism."⁹⁶ This, this disagreement and conflict about marketization is essentially a marker of new identity conflicts, which potentially can undermine a building of a new South Africa. Contrary to the official rendition of ubuntu-inspired marketization in the post-apartheid setting, their

⁹⁵ This echoes Susan Strange's notion of "casino capitalism."

⁹⁶ Schatteman 2008: 275, 284

dismissal of native customs disempowers the local community and may revive neo-colonialism.⁹⁷

In *Slaves, Rings and Rubbish* (1995), Martin Hall bluntly thickens the negative representation of capitalism. His plot contrasts two characters, whose clash demonstrates the profound gulf between the value of nativism and marketization, and even the overt danger marketization presents to indigenusness. One main character (John Berg) is interested in historical artifacts and historical sites both for their own artistic sake and as the way they reconnect him to his family' past in particular and the country's heritage in general. To him, valuable artifacts become a source of pride, emotion and stimulate a strong sense of belonging. Another character (Sterling Wolff) simply treats historical artifacts as commodities to acquire a personal wealth and status—all this “decontextualizes these artifacts and strips them of their connections to individual family histories.”⁹⁸ His unscrupulous decorum and obsessive profit-seeking end him up in jail.

The author, no doubt, implies a very negative attitude to the principle of marketization. Of course, it would be warranted to like Berg and dislike Wolff as particular individuals with particular set of personal characteristics, just as the author intended. Yet the broader

⁹⁷[In analyzing Mda's earlier novel *The Ways of Dying*, Farred charged the author with unwillingness to explore the vices of marketization.]

⁹⁸ Petzold 2005: 147—148

message gives no clues how to delineate between successful, hard-working entrepreneurs and dishonest businesspeople, while blending these two distinctive images together. Perhaps, the author shows that the profit-seeking behavior always results in the predatory, neo-colonial disrespect for the native customs and heritage.

More generally, probing the place of the wealthy in South African writing is often imbued with the suspicion and revile towards those who had achieved personal financial success of major proportion. The work of Ahmed Essop, for instance, reveals the popular suspicion against the wealthy entrepreneurs, especially of Indian origin. Commentaries of Essop's stories contend that Indian success and wealth is portrayed as being built on the exploitation of black people.⁹⁹ The financial success of the fictional Mr. Khamsin is perpetuating both the class-based structure of society and the apartheid-era stereotypes of what it means to be an African (indolent) and an Indian (hard-working).

The goals of personal enrichment have strong negative repercussions to the democratic of the new South Africa. Essop's protagonist courts democratic leaders only to rip greater profits from this connection, just as he had done under the apartheid rule. The imperative of economic success at any cost implies that the wealthy

⁹⁹ Rastogi 208: 112.

elude any strong circles of allegiances, even loyalties to their own (Indian Muslim friends in Mr. Khamsin's case). More alarmingly, in *The Third Prophecy* Mr. Khamsin is anticipated to become the next President as opposed to his more likeable friend, Mr. Khan, who was demoted from being in charge of the Ministry of Education to be in charge of prisons.

On balance, contemporary South African literature writing develops the notion that the political stress on marketization empowers wrong people and is not conducive to the empowerment of all South Africans as officially intended. In the popular literature marketization is used as marker not of economic empowerment, but rather as one of the most profound factors, stimulating the further rifts among South Africa's multiple ethnic groups, between privileged few and alienated many. Thus, the commitment to marketization may endanger the national future.

Ubuntu in the context of globalization

As I have argued in the first section, the South African political elite considered ubuntu—the third component of the African Renaissance—in two particular segments. First, the contemporary South African writing directly exposes the incompatibility of the

Western and Native ways of life and strongly implies the necessity of rejecting the western values for the personal liberation. Second, the South African commitment and openness to the human solidarity is also expressed in the detailed and highly emotional accounts of the moral regeneration achieved against the backdrop of the untamed wave of crime. Authors demonstrate the strong human potential to emphasize and combat the profound moral decay.

The general theme demonstrating the incompatibility of South Africa and the west has abundant coverage in the contemporary South African literature. In Brink's novels the encounters between the native (Khoi) self and the Other (alien Portuguese, English, German travelers and settlers) generate linguistic, religious, and physical conflicts. In his *Cape of Storm: The First Life of Adamastor* (1993), it is not only the different languages that drive the native and the settlers apart, but the physical differences as well. The whole story revolves around the African chief T'Kama's lust towards a Portuguese shipwoman, which he is not able to consummate. None of the traditional healing practices and medicines proved even remotely helpful; they inflicted more physical pain. Thus, this incommensurable relationship remained more of a notion than actuality, as the physical contact was facilitated by an

artificial organ.¹⁰⁰ From the plot it is not even clear whether the Portuguese woman was remotely interested in connecting with the African protagonist, while the native chief definitely tried to make an effort throughout the whole narrative. This suggests indigenous openness to universal human solidarity, as well as its undesirability and impossibility for West.

The difference in destinies of the western invaders/settlers and the natives is demonstrated by their involvement in religion. Religiosity is the focal point of the life of Cupido Cockroach, the main protagonist of *Praying Mantis* (2004), a fictional KhoiKhoi of the XIXth century with some real historical prototype.¹⁰¹ Once his luck in hunting the elephants wanes, he abandons the local god Heitsi-Eibib and becomes an ardent follower and aggressive proselyte of the Christian faith. He sees the Western God as compatible with and even superior to the gods of his own. For a considerable portion of Cupido's life, his religious conversion reconciles him with settlers and makes him a respected member of Christian community. Yet, despite his extended self-sacrificing service in the harshest desert, he got relieved of his ministerial duties immediately after the traveling inspector had

¹⁰⁰ Compare to Mbembe's symbolic rendition of post-colonialism also in highly sexual terms, Mbembe 2000]

¹⁰¹ At the end of the book Brink gives an academic-like, non-fiction bibliography of the sources that informed his narrative.

realized Cupido's useless in his narrow instrumental function in converting other natives. As he belongs to a different race, white preachers suspect that Cupido has not fully abandoned the gods of his past and reject him. In the end he switches back to Tsui-Goab, Gaunab, and Heitsi-Eibib and spiritually reconnects to the native way of life. Just like Adamastor, this story suggests the possibility of the utilitarian and transient coexistence between natives and settlers, rather than productive Western impact on the South Africa.

It appears that the penetration of the West not only imposes the injustices, but also brings the worst out of the local individuals, and profoundly splits South African communities along various lines. Karen Press's *Hidden Histories* and Zakes Mda's *The Heart of Redness* both center on the major traumatic event in Xhosa history. In the XIXth century, Nongqawuse gave a prophesy that the massive cattle-killing as an offer for the Xhosa ancestral spirits would be an appropriate way to defeat the British colonial order. *Hidden Histories* implied that while prophesies were normal and authentic, British were able to abuse it as a war trick, causing major famine among the Xhosa. As many Xhosa today share this explanation, this account of the events is more congruent to the official stress on the role of the Western

influence.¹⁰² In *The Heart of Redness*, the prophecy generates a deep gulf between the Xhosa who believed in the traditional practices (the Believers) and those who rejected them outright (the Unbelievers). As the story goes, the split between the two factions would remain unabated through the present day, reinforcing the conflicts and misunderstanding in the community.¹⁰³ The Unbelievers become ultimately a brooding and negative faction:

Unbelievers are reputed to be such somber people that they do not believe in those things that can bring happiness to their lives. They spend most of their time moaning about past injustices and bleeding for the world would have been...¹⁰⁴

Another broad discursive formation of the South Africa's fiction explores the untamed wave of crime and post-apartheid violence, overwhelming the country. Damon Galgut's *The Quarry* (1995), Zakes Mda's *Ways of Dying* (1995), Mike Nicol's *Horseman* (1996), Sindiwe Magona's *Mother to Mother* (1998), and Mandla Langa's *The Memory of Stones* (2000), are the prime examples of this discursive stream. *The Memory of Stones* described the emergence of

¹⁰² Petzold 2005: 144

¹⁰³ This in part makes Schatteeman claim that the novel critiques the concept of an African Renaissance as inauthentic, see Schatteeman 2008: 275, 284-285, 288. I strongly disagree with this interpretation.

¹⁰⁴ Mda 2000: 3

new solidarity in response to violence among black South Africans in KwaZulu-Natal, gangster crime, and political terrorism (from all sides) during and immediately after the apartheid.¹⁰⁵ Similarly, *Mother to Mother* explores how to survive the violence and abuse during the transition years.¹⁰⁶ Some literary critics still accuse the white writing of racial stereotyping and depicting violence in such a way that relieves whites of responsibility for their apartheid crimes. *Disgrace* and *Horseman* are often cited as prime examples of this stream. Chait asserts that Nicol suggests the universality of evil and thus “the very banality of South Africa’s particular white brand of horror.”¹⁰⁷ The apartheid “apocalypse” is predetermined and reflects the will of God and is not so different from other historically recorded genocides.

Acknowledging these specific claims about the pessimist politics of white writing, and the fact that this topic warrants a very pessimistic rendition of the role of ubuntu in contemporary circumstances, writers’ strong emphasis is on the mourning, which is depicted as a unique method of demonstrating the humanness, compassion and therefore a fundamental commonality of all people. *Ways of Dying* is a case in point. The book received a sharp politicized critique for making intra-ethnic violence and the crime

¹⁰⁵ For an in-depth analysis of the novel see Gagliano 2004: 821

¹⁰⁶ Schatteman 2008: 276

¹⁰⁷ Chait 2000: 24

wave a focal point of critical scrutiny, as opposed to showing how local white and multinational capital created the black bourgeoisie and perpetuated the subaltern black underclass.¹⁰⁸ Yet Mda's central point is about the healing function of mourning as a form of showing empathy, a form of practicing ubuntu. According to Durrant,

...the kind of communion produced by death might bind us together not by the operation of ideology, not by an exclusionary appeal to sameness of race, nationality or class, but by an appeal to our own otherness, to our own difference from ourselves. One might say that we are bound together by our recognition of our own death in the death of others: their death performs, enacts or even mimes our own death. At a basic level, funerals perform a mimetic function: the body to be buried or burnt or left to rot mimes what will eventually happen to our own bodies.¹⁰⁹

There are also some stand alone examples of ubuntu in South African fiction. Coetzee occupies a special place in this context, as his writings often defy an easy interpretation and provide a difficult read. Elizabeth Costello—a character appearing in his several novels—is a chief protagonist in *The Life of Animals*. She takes the notion of

¹⁰⁸ Farred 2000: 201

¹⁰⁹ Durrant 2005: 446

ubuntu one step further as she asserts very primal sense of belonging and extends the notion of humanness to animals. In her fictional lectures she critiques our innate feeling of human superiority over animals and even the notion of ecology as the science of domination over the non-human life.¹¹⁰ Coetzee depicts Costello as always travelling, always trying to disseminate her sensibilities across the globe, which shows the universal appeal and moral fiber of ubuntu.

CONCLUSION: RANKING NATIONAL PURPOSE

South African political elite strongly expressed its commitment to African Renaissance as the conception of common good, while domestic articulated audience was very active in outreaching its components to wider audiences. At the same time, public culture strongly supported a dominant articulation of common good, including two out of three substantive components (excluding marketization). On balance, throughout Mbeki's presidency, at the very least, one-party dominance suggests a power-based consensus, which may be more temporary in nature, but nevertheless very informative for the study how the domestic policy environment underpins certain kinds of policy choices. This type of consensus emerges when one sub-elite

¹¹⁰ Vital 2005: 307

group strongly espouses a conception of common good and is able to act on and enforce it. At the same time, wider audiences might inherently disagree with the promoted conception of common good, but for a variety of reasons might conform to it and if chooses to dispute it publicly, does so in a very subdued manner. At the margins, other sub-elite groups and political parties keep advocating radically different set of political obligations, engrained in a different set of values. The summary characteristics of South African national purpose are provided below:

Table 5.1 Indicators of national purpose

CHAPTER 6. HIV/AIDS POLICY IN RUSSIA

In the early 2000s in Russia the rates of the HIV infection grew exponentially, exacerbating the perceived demographic crisis. At the same time, an incredible success in curbing the pandemic across the globe proved that the international take on the HIV/AIDS treatment policy was indeed effective. In 2006 President Vladimir Putin discussed the issue of HIV/AIDS at the State Council.¹ Subsequently, Russian political elite actively responded to the challenge. Many domestic and international observers publicly lauded Putin's acknowledgment of HIV/AIDS as a serious threat to the country. Yet, in spending significant amount of efforts and resources to mitigate HIV/AIDS, the Kremlin chose to follow the international recommendations only selectively. In general, governmental actions were marred by only partial, or inefficient, implementation, and sometimes by open resistance to critical elements of international guidelines and recommendations.

This chapter argues that Russian HIV/AIDS policies were shaped by the deployment of the Sovereign Democracy--the

¹ Prezident razrabotal mery po bor'be so SPIDom, *Kommersant-Daily* № 72 (3403), 22.04.2006

historically contingent and country-specific content of social purpose. The most important outcomes of this impact include three broad clusters of effects. First, in accordance with the strong state component of national purpose, it affected the general political understanding and framing of the domestic epidemic and linked it to the highly desired demographic security as the major tool in having a strong state; it impinged on the human rights principles in providing ARVs to the key vulnerable populations as these principles were seen as undermining the strong Russian state; politicized and filtered the desirable pool of partners, as well as shaped the permissible role of civil society in their combat against HIV/AIDS. Second, in accordance with the social responsibility component of national purpose, it led to the significant increase in public spending for healthcare and infectious diseases and efforts at universal and free medical coverage, and shunning the private sector as a potential partner. Third, in accordance with the great power component of national purpose, it stimulated the Kremlin to act like a donor/leader on the international arena, fend off the expertise and resources of well-established international health organizations, and attempting to revamp the country's position in the pharmaceutical markets.

While there some compelling accounts of Russian HIV/AIDS policies, the emphasis on the politically contingent conception of

common good as the intervening variable helps providing a more encompassing account of adopting international health recommendations. The effects of deploying social purpose on the domestic HIV/AIDS policies are summarized in the Table 6.1 below.

Table 6.1: Summary of the HIV/AIDS policy in Russia

TREATMENT

Indicator 1a: Epidemic in the context of state weakness

Russian government did not emphasize the need to respond to the epidemic as a serious public health crisis in its own right, instead viewing the epidemic in the context of two broader socio-political issues. First, HIV/AIDS was linked to the looming demographic decline, which was perceived as threatening the power and survival of the state.² Second, the Russian government linked the spread of HIV/AIDS as a secondary factor almost exclusively to the intravenous drug users (IDUs), which legitimized ruling out the human rights component of the governmental response.

The spread of HIV/AIDS was framed in this context as the issue of demographic decline and state weakness, rather than an

² For the overview of Russian health, see Powell 2005.

alarming public health crisis in its own right. In the 2003 address to the Federal Assembly Putin directly linked the impending consequences of the epidemic to the challenges to achieve the strong state. Following this address, several high-ranking members of the government, including Igor Ivanov (then the Minister of Foreign Affairs) and Aleksandr Zhukov (then First Deputy Prime Minister), warned about the negative effects of HIV/AIDS on national security and survival. On March 30, 2005, Zhukov indicated that “[t]he HIV epidemic is far more than just a health issue: in the light of [Russia’s] on-going demographic decrease, it presents a serious threat to Russia’s strategic, social, and economic security.”³

The notion of the strong state required a strong state solutions. In 2005 the Kremlin announced its decision to create a new governmental institution under the direct patronage of the President -- the Council for the Implementation of National Priority Projects and Demographic Politics (CNPPDP). The Council was supposed to reverse the adverse demographic tendencies and smartly invest money in several critical areas, including health.

By 2006 Russia got obsessed with pending demographic collapse. Even Mikhail Khodorkovsky, writing to the popular

³ Robert Coalson, Russia: Media's AIDS Awareness Campaign Off To Slow Start, RFE/RL; April 11, 2005

newspaper *Kommersant-Daily* from jail, imagined strong Russian state inhabited by 220-230 million people, which meant an increase by 90 million.⁴ A notable demographer Anatoly Vishnevsky indicated that Russian political elite did not perceive the unfolding demographic crisis as a long-term consequence of the socialist-era economic disproportions. Instead, the mainstream political elite, in accordance with the formula of the “wild 1990s,” viewed the demographic decline either as the outcome the neoliberal ideology and the state weakness, or even as a consequence of purposeful subversive strategies, aiming at the reduction of the “indigenous” populations across the globe.⁵ More radical politicians and activists made claims that the diminishing population of ethnic Russians and the increasing influx of various immigrants would undermine the unity of the country and signal its end as an autonomous political organization.⁶

Mikhail Grishankov was one of the most highly visible political leaders involved in the fight against HIV/AIDS and publicly tying the extant views on national purpose with HIV/AIDS policy. He had a KGB background, served as a Deputy of the State Duma, First Deputy of the State Duma Committee on Security, and later he became

⁴ Mikhail Khodorkovsky, *Levyj povorot-2*, *Kommersant-Daily* № 212(3296); 11.11.2005

⁵ Vishnevsky 2004

⁶ Alexseev 2006: 95—147

Fist Deputy of the Committee on Corruption. In one of his interviews, he claimed that AIDS was not only threatening the strength of the state, but could have been prevented by maintaining the great power status. He offered an instructive phrase that

...had we foreseen the advent of HIV/AIDS, somebody would have thought <about its future repercussions>, would not have destroyed the USSR, would have maintained the Iron Curtain, and <then> we would have had neither narcotic abuse, not AIDS.⁷

The official statistical data always downplays the rate of HIV infection in the country. According to the official estimates, the most recent number of people registered as HIV positive reached 370, 000.⁸ The majority of the estimates provided by the independent from the state bureaucracy organizations and experts strongly suggested that the actual number of HIV infected population could be as much as 1 million people or even approaching 1.5 million.⁹ This discrepancy has been always duly noted in the relevant literature, even though not given an adequate interpretation.¹⁰ In essence defending these low numbers feeds the unwarranted conviction that the epidemic would

⁷ Mikhail Grishankov, *Rasprostranenie SPIDa v Rossii: sposobno li gosudarstvo ego sderzivat'*. Interview for radio station "Ekho Moskvy," 12.01.2005.

⁸ Gennady Onishchenko, *VICH-politizirovannyj, Rossijskaja gazeta*, №3719; 03.15.2005.

⁹ UNAIDS 2004 : 4 (UNAIDS/04.18E).

¹⁰ Twigg 2007: 2—4, CIRA 2004.

remain limited to some marginalized groups, which in turn gives the necessary justification to deploy harsh and repressive measures in treating the IDUs.

As late as in 2009 the majority of state officials, acknowledging the unprecedented growth in reported HIV infection, failed to learn that it was very likely that the epidemic would soon become generalized. Once reaching more than 1% of the general population, the epidemic affects a variety of groups. The references to the feminization of the epidemic—as the first signal that it traveled beyond the marginal and negatively constructed populations—were made only once by the President, and once by the junior member of the Federation Council, responsible for health education. In essence, Russian policy-makers remained entrenched in old perceptions of the pandemic, which associated the disease with the IV drug-users and prostitutes as the only vulnerable group. It is not by coincidence that Grishankov explained his original motivation behind an aggressive bringing of the disease to the fore as follows:

Working in the commission in my own region, Chelyabinsk oblast, I really saw that the problem of drug abuse is very closely linked to the problem of HIV/AIDS. And we have to acknowledge that today the majority of HIV/AIDS positive

people in the country are heroin addicts. Thus, dealing with the problems of narcotics, we cannot but deal with the problems of HIV/AIDS.¹¹

This dominant theme was extended in the series of official assertions that the domestic epidemic was mostly a result of the increasing domestic abuse of narcotic substances related to the increased harvest of opiates in Afghanistan since the US invasion. During the State Duma's hearings "On the causes and consequences of the Afghan narco-traffic for the Russian Federation" its Speaker Boris Gryzlov claimed that Russia entered in the state of war with those who spread opiates from Afghanistan as a deliberate strategy to destroy the Russian gene pool.¹² As I will discuss shortly, the top political leadership delegated the rights to formulate and implement AIDS policy to the law enforcement agencies, most notably to the Federal Drug Control Service of the Russian Federation (FSKN).

In general, sorting the meaning of epidemic through the narrow state-centric lenses inhibited the political urgency to combat HIV/AIDS as a public health crisis. Russian president Dmitry Medvedev, for instance, failed to mention HIV/AIDS as a national health crisis even once in all his multiple newspaper and on-line

¹¹ Mikhail Grishankov, VICH/SPID: Uroven' Opasnosti, Interview for radio station «RADIO ROSSII», 14.04.2006

¹²Information available at <<http://russianews.ru/second/21815/>>

interviews, as well as speeches addressed to the members of the NPP Council. This seems especially strange since in his capacity as First Vice Prime-Minister Dmitry Medvedev was de facto in charge of the National Priority Projects, including Health.

Indicator 1b: Standardized protocol in treatment

The Russian government never rejected the life-saving role of ARV in fighting HIV/AIDS and in this context its response did not deviate from the international consensus on the antiretrovirals. In the early 2000s Russia used monotherapy (AZT), yet after 2006 the Russian government switched to the triple therapy and started its universal disbursement.

Standardized protocol also means the strict adherence to the medically prescribed regimen.¹³ The best way to guarantee it is to institutionalize orderly and uninterrupted purchase of the appropriate line and combination of pharmaceuticals. On the one hand, Russian officials tried to enforce a more centralized and transparent mechanism of procuring the necessary pharmaceutical products. The centralized system of drug procurements and disbursement is consistent both with

¹³ Breaching the standardized protocol is dangerous for both HIV-positive patients and the general population, as it may lead to the wide-spread resistance to the older medicines and the virus mutation.

the kind of political environment the social purpose underpins and with the international policy consensus. On the other hand, the government failed to enforce it. Purchasing the insufficient number of therapy components, delays in the drug tenders, intergovernmental coordination, and institutional reshuffles endangered the enforcement of the standardized protocol.

In 2005 the Ministry of Health and Social Development (often referred to in an abbreviated form as Rosminzdrav, or Minzdravsocrazvitija) and its head Mikhail Zurabov became the “favorite” target of public scrutiny and criticism. The inefficiency of his Ministry was so pervasive and evident that many newspapers imbued the reporting on domestic health issues with profuse reflections on Zurabov’s prospective sacking.¹⁴ Since in 2006 the state became more proactive in public health, all these problems became obvious. These and other scandals attested to the state’s low efficiency in procuring the lifesaving medications and perhaps some elements of corruption, even though the criminal charges were not pressed.

The biggest political scandal erupted in late November 2006, when Rosminzdrav single-handedly ordered to replace the less

¹⁴Anastasija Makrjashina, Umirat' ot SPIDa stanet deshevle, *Gazeta.ru*, 30.03.05; Andrej Stenin, Jelja Vermisheva, Minzdrav podvergsja VICH-atake, *Gazeta.ru*, 14.05.05; Ada Gorbacheva, Poluchilos', kak vseгда: V regionah zhdut lekarstvennyh buntov, *Nezavisimaja Gazeta*, 11.02.2005; Marija Bondarenko, Zurabov pokinul blindazh, *Nezavisimaja Gazeta*, 16.02.2005

expensive first and second-line drugs with a very costly newer pharmaceutical product. The executive order № 785, which excluded first-line Combivir, as well as Trisivir, Teataz and Fusion (all second-line), and replaced with the third-line Darunavir. Subsequently, the Deputy Minister Vladimir Starodubov signed an executive order № 786, amending the medical standard of HIV treatment. It prescribed to treat 50% of adult patients and children with this new medication, even though the benefits and adverse effects of darunavir on children had not yet been studied (some still argued it should have been considered as an experimental drug). As the outburst of the Russian epidemic started in the late 1990s and the majority of patients began receiving the ARV treatment only recently, the resistance to the prescribed combination of drugs was not widespread. Thus, darunavir should not be included in all treatment plans, which made prescribing any individual appropriate ARV combination (“cocktail”) of drugs very difficult. One of the leading Russian epidemiologists Vadim Pokrovsky estimated that that among 30,000 patients receiving treatment only 300 could have really benefited from the new pharmaceutical, while not more than 3,000 could be treated with it overall. This decision did not make sense from the financial standpoint either, as the cost of treatment was projected to increase by 30 percent (in absolute numbers the cost of darunavir was about \$14, 000 a year).

¹⁵ In the context, the decision was highly inadequate both from medical and financial standpoints. Moreover, according to the new standard, the new drug had to be administered in hospitals rather than disbursed for individual treatment at home. These orders were signed without any consultation with other AIDS bodies, which traditionally were in charge of developing standards of HIV treatment.¹⁶

After an outburst of public criticism, Zurabov called the decision “a statistical error.” His deputy Starodubov retorted that this decision was supposed to diminish the price on the medicines though the support of those foreign companies, including Janssen-Cilag and Makiz-Farma, which were willing to manufacture pharmaceutical drugs on the Russian soil.¹⁷ These justifications sounded like an intentional cover-up of inefficiency, furtiveness, and corruption. Grishankov raised the issue about the incompetence and corruption in the Ministry:

The standard has been developed for the particular company and for the particular winner of the request for tender. This can destroy the whole presidential campaign for HIV treatment.

We addressed to the presidential administration and Dmitry

¹⁵ Ibid

¹⁶ Elena Gorlanova, Zurabov oshibsja na \$37 mln, *Gazeta.ru*; 18.01.07

¹⁷ Vladimir Starodubov, VICH-inficirovannye pacienty ne ostanutsja bez lekarstv, *Ria-Novosti*; 21.12.2006

Medvedev with the request to sort out the secret tendering of Minzdravsocrazvitija. Additionally, the group of State Duma deputies, including myself, sent an address to President Vladimir Putin, retelling all the “achievements” of Minzdravsocrazvitija, machinations with financial assets, including the executive order on the new standard of HIV treatment.¹⁸

This incident of purchasing quite expensive and relatively inefficient drugs was not single. Seven month later, in June 2007, the WHO informed about the global recall of a protease inhibitor “Viracept,” some batches of which contained a high level of cancer-causing substance.¹⁹ This recall brought on the spotlight yet another staggering case. In essence, the government purchased enough of this drug to treat as much as 15 percent of patients. For some unclear reason, Viracept cost a lot more for the Russian government than to others. Furthermore, from the same recall statement it turned out that the WHO had already recommended using different protease inhibitors, especially in post-exposure prophylaxis packs. As the representative of the Russian PLWA community put it:

¹⁸ Julija Taratuta, Dmitrij Krjazhev, Minzdrav ne nashel u sebja simptomov korrupcii, *Kommersant-Daily* № 240 (3571); 22.12.2006

¹⁹ WHO statement on ROCHES’s Viracept recall, 14 June 2007, available at <http://apps.who.int/prequal/info_press/ViraceptWHOstatementJune14-07_En.pdf>

The bureaucrats follow a strange logic, purchasing the least effective pharmaceuticals for the most expensive price. This logic undercuts patients' interests, as opposed to the commercial interests of <trading> parties.²⁰

Another endemic problem was in recurring flaws in streamlining the procuring and disbursing the necessary pharmaceutical products, causing unintended interruption of HIV treatment. In June—July 2006, for instance, the AIDS-centers disbursing the antiretrovirals on the ground in Moscow oblast, Rostov-on-Don, Bashkortostan, Voronezh and Khabarovsk had to interrupt the standardized treatment protocol for many patients as the governors decided to cut the regional health care budgets and rely on the federal government to supply their regions with the necessary antiretrovirals.²¹

At the same time, in March 2006 the Ministry of Health, while having spent more than \$13 million on the ARVs in general, failed to procure 10 out of 15 essential pharmaceuticals to be used in the combination treatment. The regional disbursement was delayed by two month (from March to May), and in the meanwhile the only regions covered by the nongovernmental sector (GFATM's Globus program)

²⁰ Anastasija Makrjashina, VICH ostalsja bez lekarstva, *Gazeta.ru*; 16.06.07

²¹ Anastasija Makrjashina, VICH krepchal, *Gazeta.ru*; 20.06.06

had enough supplies to cover the gap of disbursement. High powered health officials acknowledged the “difficulties” and lamented about their consequences.²² Similarly, in 2007 the government committed more than \$25 million (the sum almost doubled since the previous year), yet both the tender to procure the treatment and its disbursement was delayed by six month.²³ In effect, the HIV treatment had either to be reduced to two drugs instead of three, or to be postponed for those who already had started it. This meant a complete failure of enforcing the standardized protocol in treatment by the federal government.

To deal institutional inefficiency, Medvedev initiated moderate organizational reshuffling. The Federal Agency on Health and Social Development (Roszdrav) was no longer in charge of purchasing the ARVs, while these function were transferred to Rospotrebnadzor, the agency primarily responsible the surveillance of health safety and consumer rights.²⁴ While Aleksandr Goliusov they key official in HIV/AIDS surveillance at Rospotrebnadzor was pleased with this change, many observers and journalists remained confused what agency exactly would be in charge of public procurement of the ARVs. In fact, the functional distinctions between these two

²² According to the other data provided by NPP, in 2006 the government failed to procure 13 out of 26 necessary; see < http://www.rost.ru/themes/2006/07/251825_4422.shtml>

²³ Elena Gorlanova, SPID vmesto organa pravitel'stva , *Gazeta. Ru*; 17.05.08

²⁴ See the report of the final conference on the result of NPP health implementation in 2008 29- 30.10.2008,< <http://www.infoshare.ru/news/?id=908>>

surveillance agencies remained overlapping and their mandates excessive.

Indicator 1c: Check on prices and the availability of generics

Prior to 2006 the government did not propose any specific and coherent policies how to ensure the continuous flow of cheaper pharmaceutical products into the country. After 2006 the situation turned around. The government increasingly resorted to protectionism, mandatory state purchases of the domestically produced drugs, and even developed an ambitious plan to build a strong and innovative domestic pharmaceutical industry almost from scratch. This kind of policy choices was clearly underpinned by perceived role of state as the initiator and implementer of economic policy and is consistent with the second core element of Russian social purpose.

In 2000-2004 many developing countries negotiated ARV treatment at significantly reduced prices.²⁵ While costs of ARV therapies in Russia remained very high (about \$12,000 per year per patient), Russian government did not formulate any coherent policy towards the pharmaceutical companies in order to decrease prices.

²⁵ Using or threatening to use the compulsory licensing, and emphasizing the domestic development of generic version of brand-name drugs. These three components are the principal ways of ensuring appropriate access to treatment are discussed at length in Chapter 2.

Moreover, antiretroviral generic drugs were simply not registered in the country, despite massive civil society and PLWA campaigns.²⁶

Things soon changed. In March 2005 the Ministry of Health and Social Development for the first time negotiated the reduced prices on ARVs, which slashed the cost of treatment to about \$3,000 a year. In 2005 Zurabov announced the further decreases in prices.²⁷ Since December 2008, according to the executive director of the Association of Clinical Trials Organizations (AOKI) Svetlana Zavidova, Russian health agencies pressed the Western pharmaceutical companies to reduce prices by additional 15 percent as a precondition for signing trade contracts. At the same time, Russian pharmaceutical companies got preferential treatment and got the governmental discounts.²⁸ Today this strategy might no longer work since Russia became a “donor” country and is no longer qualified for getting antiretroviral drugs at reduced prices.

The new grand strategy was proposed in October 2008, when the Kremlin chose import substitution as its principal pharmaceutical strategy (sometimes referred to as “pharmaceutical security,” or “pharmaceutical sovereignty”). The Kremlin set up the Council for the

²⁶ Denis Bulanichev, Irina Golosova, Berezovyy sok pomozhet ot SPIDa , *Gazeta. Ru*; 19.10.05

²⁷ Anastasija Makrjashina, Umirat' ot SPIDa stanet deshevle, *Gazeta. Ru* ,30.03.05

²⁸ Julija Taratuta, Goszakupki lekarstv dlja VICH-inficirovannyh okazalis' pod ugroznoj sryva, *Kommersant-Daily* № 109 (4164); 20.06.2009

Development of Pharmaceutical and Medical Industry. The principal objective of the Council was to devise measures to spur the domestic biomedical industry and help other governmental agencies to achieve partial import substitution by 2020. Roszdravnadzor, for instance, recommended substituting as much as 5351 foreign drugs with domestic ones in the first half of 2009 alone. Also, the objective was to increase the capital volume of domestic pharmaceutical market from 306 billion rubles in 2008 to 1.5 trillion rubles in 2020. Not by coincidence, the Vice Prime-Minister Igor Sechin, believed to be the informal leader of siloviki clan, became the Council's supervisor. He called for stricter law enforcement measures in controlling the pharmaceutical procurement in the regions.²⁹

To lay down more specific stages in achieving the “pharmaceutical sovereignty,” the Ministry of Industry and Trade (Minpromtorg) developed a long-term doctrine and specified five ambitious goals to be achieved by 2020. They included

1. to increase the overall domestic drugs price share in the internal market by 50% (comparing to 19% in 2009);

²⁹ Dar'ja Nikolaeva, Farmacevty vyzvali konkurentam doktora, *Kommersant-Daily* № 186 (4241) ; 07.10.2009

2. to increase the number/variety of the available domestic brand-name (“innovative”) drugs and their percentage in the manufacturers’ portfolios;
3. to increase exports 8 times compared to 2008 levels; 4) to achieve the pharmaceutical security of the country; and
4. to stimulate the domestic production of the pharmaceutical substances.³⁰

In general, it is difficult to ascertain whether or not this strategy was oriented towards the decreasing the prices of pharmaceutical products for domestic consumers. The doctrine did not directly discuss the necessity of the decreasing the prices as a strategic objective, perhaps it was assumed that domestic medicines would be cheaper by definition, especially in the context of a massive replacement of the foreign brand name drugs. Yet the doctrine formulated its objectives in terms of price-share, rather than total increase of domestic vs foreign drugs. The major point that bears emphasis is that this state-led strategy intended to check the power of the foreign industry and trigger domestic production.

Besides “pharmaceutical sovereignty” the government remained a generous spender and supported a whole range of research and development activities. In 2008 the federal budget allocated about

³⁰ Minpromtorg 2009 (Section 1)

\$5.7 million to the State Centre of Virology and Biotechnology, about \$614,000 -- to the Ivanovsky Institute of Virology, about \$1.2 million to the St. Petersburg State University, and about \$8.7 million to the Federal Medico-Biological Agency (FMBA).³¹ More generally, the 2008-2010 federal budgets allocated \$41 million for HIV/AIDS vaccine research and for the improvements of the HIV/AIDS monitoring and control centers.

UNIVERSALITY

Indicator 2a: Providing the ARVs to key vulnerable groups

Treating the key vulnerable populations is imperative as it helps preventing the spillover of the epidemic to the generalized population.

In Russia the main bridge population consisted primarily of the intravenous drug users (IDUs). At the same time, since treating the bridge population was in large part based on observing of human rights, which was at odds with Russian version of national purpose. As a result, Russian government pursued policy initiatives inconsistent with the mainstream international recommendations and practices.

In Russia key vulnerable populations include (1) 0.5 to 3.5 million injection drug users and 9 million sex partners of IDUs; (2)

³¹ KFF daily updates, Friday, January 11, 2008

500,000 to 700,000 commercial sex workers;³² (3) 1.3 to 2.5 million their clients; and (4) about 1 million prison inmates, often injecting drugs intravenously. The other groups include 2.7 million men who have sex with men (MSM) and migrant workers from Central Asia [no official estimates found]. From the public health perspective, these seemingly isolated, but often overlapping groups in the later stages of the epidemic typically transmit the disease to the generalized population. In Russia, this trend becomes evident with the rapidly recently increasing numbers of HIV incidence among women and heterosexual population. Many Russian health care professionals, as well as domestic and international civil society clearly saw the value of harm reduction and tried to promote it as part of the international medical consensus.³³

Domestic arguments against harm reduction programs reflected national purpose's state-centrism. The head of FSKN Victor Cherkesov rejected decriminalizing HIV/AIDS policy as inappropriate. In his view, promoting OST was strongly tied to domestic criminal and international lobby's purposeful activity to

³² TPAA 2006; According to various estimates, 3 to 30% all sex workers are infected with HIV. The figures for some regions were much higher (St. Petersburg approximating 48%), TPAA 2006a.

³³ See for instance, Mendeleovich 2006; IMENA 1998; HRW 2004; HRW 2007

undermine the strength and sovereignty of the Russian state.³⁴ A Deputy Head of FSKN Aleksandr Mikhailov in his 2005 interview on the pro-liberal radio “Ekho Mosvy” offensively argued against harm reduction measures because they were enrooted in the “incomprehensible reflections related to human rights.”³⁵ Similarly, Victor Ivanov (the head of the State Anti-Narcotic Committee (GAK) and the new director of FSKN) rejected human rights aspects of treating the IDUs as it was associated with liberal ideology and was incompatible with conception of common good.³⁶ Siloviki argued that the spread of HIV/AIDS was not curbed because the government had been way too liberal in prosecuting the IV drug users and dealers, as well as being unable to stop the production of opiates in Afghanistan.³⁷

Since the FSKN and siloviki in general perceived themselves as the major champions of common good, they acted as domestic policy entrepreneurs. Besides multiple interviews, they spread brochures and information compatible with the official views of

³⁴ See, for instance, Viktor Cherkosov, *Kak sdelat' bor'bu s narkotikami jeffektivnoj?* for the radio station «Ekho Moskvyy», aired 19.12.2005 and his interview *Kak pobedit' legalizaciju narkodohodov*, *Rossijskaja Gazeta*, №4609, 12.3.2008

³⁵ See for instance Interview with Aleksandr Mikhailov's for the radio station “Ekho Moskvyy”, 23.03.2005

³⁶ See Viktor Ivanov, *O konsolidirovannoj antinarkoticheskoj politike gosudarstva, obshestva i Cerkvi*, opening speech at the conference entitled “Spiritual and medicinal help in overcoming the sins of narcotic addiction, alcoholism and tobacco-smoking.”

³⁷ Viktor Ivanov, *O prichinah i posledstvijah «afganskogo narkotrafika» dlja Rossijskoj Federacii, zakonodatel'nyh i inyh merah po zaschite obschestva ot narkoagressii*, speech at the State Duma hearings, 19.02.2009

FSKN. For instance, in 2007 FSKN distributed to all of its regional branches Hegumen Anatoly Berestov's a book-length diatribe against the western approaches to treating the IDUs.³⁸

Siloviki spearheaded punitive rather than rehabilitative measures in dealing with the vulnerable groups.³⁹ Domestic policy environment also rejected harm reduction and human rights as the kinds of action inappropriate for public policy. Moscow mayor Yuri Luzhkov, for instance, claimed that Russian approach to IDUs and MSMs should not be borrowed from the western democratic standards.⁴⁰ Some health care professionals and medical doctors surmised that harm reduction programs aggravated the contemporary demographic problems in the Russian Federation. In this interpretation, the GFATM's and the World Bank's humanitarian rhetoric disguised their furtive subversive agenda.⁴¹

In any case, the proponents of the harm reduction programs and human rights watchers (pravozashitniki)—since they were associated with the liberal ideology and the dissident movement-- were rendered more dangerous than HIV/AIDS itself. Andrey Leonov of a Moscow network TV station accused them of building societal

³⁸ Berestov, Shevtsova, Kakliugin 2007

³⁹ See, for instance, Sarang, Rhodes, Sheon, and Page 2010

⁴⁰ See Yury Luzhkov, Speech of the mayor of Moscow at the opening of the Second International Conference "HIV/AIDS in developed countries;" 04.02.2008

⁴¹ Krasnov et al 2005

tolerance to these sins and sneaking destructive ideas into the Russian laws. Also, he referred to the repressive Soviet policies as a highly commendable practice:

In the USSR there were 2-3 human right watchers and no more than two hundred thousand narcotic addicts. Today in one Russia by different assessments there are several hundred human right watchers and from 4 up to 10 million addicts... They carry out the same function, as goats which were held at slaughterhouses to lead the whole herd to death. One such animal was enough to kill hundreds of thousands without any problems.⁴²

Similarly, Alexei Nadezhdin (in 2005 the chief of the division of adolescent narcology of the National Scientific Center at Ministry of Health) lashed out against the foreign-sponsored actors as follows:

... “human rights observers” (pravozashitniki) and “humanists” shift the vector of public perception from the interest of the majority... to the pathological minority. And, supporting this minority, crudely impinge on the interests of the healthy majority, threatening the security of the state.⁴³

⁴² Alexey Leonov in the “Moscow Week” show at the TVC station; 30.01.2005, synopsis available at <http://www.narkotiki.ru/tv_5892.html>

⁴³ Interview with Alexey Nadezhdin (2005) available at <http://www.narkotiki.ru/expert_5900.html>

As a result, the Russian government systematically underpromoted the necessary health services for the IDUs as a main vulnerable population. First, IDUs were given a low priority on the treatment waiting list. Judith Twigg noted that the regional AIDS centers treated IDUs without proper guidelines to support treatment adherence.⁴⁴

Second, the official position on the long-term sustainable HIV/AIDS policy for the generalized population was dissociated from the harm-reduction strategies and treating the IDUs.⁴⁵ Sometimes the harm reduction therapy was opposed to and rejected on the purely technical grounds. Russian chief public health official Gennady Onishchenko, the long-time director of Rospotrebnadzor for instance went on record against opiate substitute treatment (OST) and needle and syringe exchange programs (NSP) as ineffective.⁴⁶ In 2009 Onishchenko defended the view that IDUs simply walked away from treatment, thus making the provision of treatment irrelevant and even harmful in terms of drug resistance. Clearly, the blame was placed not

⁴⁴ Twigg 2007: 11.

⁴⁵ China and countries of South-East Asia, on the other hand, were presented as an example of a successful fight against narcotics *without* observing the western recommendations and human rights standards, see for instance, Frolova and Zazulin 2003; Elshansky 2003

⁴⁶ Gennady Onishchenko, Zamestitel'naja terapija. Legalizovannyj oborot narkotikov v nemedicinskoj srede sravnim s katastrofoj, *Rossijskaja Gazeta*, №4868; 17.03.2009

on the inefficient and punitive withdrawal programs at governmentally funded narcological institutes, but on the victim.⁴⁷

Third, the government often relegated the funding of harm reduction services to the international and domestic non-governmental organizations, rather than providing the necessary services with the state health care infrastructure. As a result, the number of NSPs increased very slowly up to only 75 SEPs programs by 2003, which was absolutely inadequate to the scope of the epidemic. The modest progress in harm reduction programs was almost always associated with the civil society's initiatives, rather than governmental programs. According to numerous newspaper and advocacy reports, states officials continuously harassed the nongovernmental programs, using substitute treatment and harm reduction techniques.⁴⁸ Today the majority of the IDU-related programs are in danger, as Russia may no longer qualify for the international assistance and thus will fully depend on the governmental funding.

Fourth, the 1998 Federal Law on Narcotic and Psychoactive Substances was amended in 2003 in order to allow some flexibility in the policy towards the IDUs. The 2003 amendments to the Criminal Code were relatively liberal and seen as a major step in

⁴⁷ For the details on the inefficiency of the Russian practice of treating PLWA in narcological clinics and on continuing discrimination, see HRW 2007

⁴⁸ See for instance, Maria Fikhte, Shpric obmenu ne podlezhit, *Gazeta.ru*; 25.08.08

decriminalizing key vulnerable populations. However, the moderate liberal changes were quickly repealed in 2006. The 2005–2009 federal anti-drug programs stressed the primacy of the law enforcement agencies in carrying out a series of comprehensive measures, including projects aimed at prevention, treatment, and rehabilitation.⁴⁹

According to Alexandra V. Orlova, “most of the federal funds for anti-drug efforts still go to law-enforcement agencies rather than to financing preventative measures.”⁵⁰ Yet in certain respects the law remained vague and was not universally enforced. Thus regional governments and civil society, despite regional freeze of these services, can develop more or less adequate treatment programs for IDUs and sex workers.⁵¹

Indicator 2b: Scaling up as a proxy for universality

The federal government continuously advocated the universal treatment coverage. This commitment fully matched the international best practice, and reflected the governmental imperative of attaining social obligations, as expressed in national purpose. Providing the universal coverage, especially in the context of the generalized

⁴⁹ For detailed analysis see Orlova 2009: 27—29.

⁵⁰ Orlova 2007: 28.

⁵¹ On regional HIV/AIDS initiatives, see TPAA 2007: 6-7; TPAA 2008. For detailed analysis of HIV/AIDS policies in Russian regions, see Lussier and McCullaugh 2009: 35–46.

HIV/AIDS epidemic is very costly for the public sector, as it demands funding treatment, education and care programs, as well as maintaining and improving the health care infrastructure. Despite these complications, the Russian government embraced the political obligation to be a provider of resources and social services and placed a strong priority on the rapid increase of funding allocated to treatment among other important components of HIV/AIDS response.

In principle, the federal laws guarantee the free and universal access to ARV therapy. Russia's first comprehensive legislation concerning HIV/AIDS directly called for universal access to HIV medication and comprehensive public education.⁵² Subsequently, in November 2001 the federal government approved program "Preventing and combating the socially significant diseases (2002–2006)," including the HIV/AIDS, which included a specific provision for purchasing and disbursing the "most effective" ARVs.⁵³ The so-called Moscow Declaration, which that was adopted in April 1st, 2005 at the ministerial meeting of governmental officials, representatives of

⁵² Federal Law 38-03 of 1995

⁵³ For the detailed discussion of the law and its historical context, see TPA 2004: 1–11

the civil society, and health care practitioners, also called for scaling up responses to the HIV/AIDS.⁵⁴

In September 2005 Vladimir Starodubov, the Deputy Minister of Health and Social Development, claimed that the budget would cover all mothers to prevent transmission of the virus to children (MTCPT, 6253 people), as well as all those who need treatment (up to 15000 people).⁵⁵ By 2008 most regions covered more than 70% of people who needed treatment. By 2007 more than 30,000 patients received therapy. To put these numbers in comparison to 2002, when the ARVs were available for fewer than 2,000 patients, the progress is truly staggering.⁵⁶ The official statements gave a strong impression that the universal treatment was fully achieved. However, the official data sometimes become the source of controversy and public discussion.

Many independent observers noted, however, that the near-triumphant governmental declarations fell short of the meaningful targets, even though the general spending on HIV/AIDS became quite sumptuous. According to Michel D. Kazatchkine, Executive Director of the Global Fund to Fight AIDS, by the end of 2009 only 23% of

⁵⁴ Morrison and Kates 2006; the text of the Moscow Declaration available at <www.unodc.org/pdf/event_2005-03-31_declaration.pdf>

⁵⁵ Valery Panjushkin, SPID usmiren , *Kommersant-Daily* № 226 (3310), 01.12.2005

⁵⁶ Aleksandr Golusov, O realizacii prioritetnogo nacional'nogo proekta v sfere zdravoohraneniya "Profilaktika VICH-infekcii, gepatitov B i C, vyjavlenie i lechenie bol'nyh VICH" v 2008 g.

HIV-infected population received treatment. Other independent experts and observers estimated that ARV treatment is available and accessible to only 6 to 15 percent of people who need to even as low as 2% to 4% of the infected population, according to more pessimistic numbers.⁵⁷ Comparing to the average of 40% among other nations, this was definitely an underachievement. Moreover, the treatment is received only by a small fraction of the populations.

The ambiguity might arise from the fact that the number of HIV-positive population in Russia might be significantly higher than the official statistical data recognizes. Also, the Russian government accepted the model of treatment, which recommends providing treatment after the specific viral load, and not since the infection is detected. The WHO recommends that treatment should be started if the CD4 count goes below the certain threshold, which estimated by the availability of CD4 and viral load testing.⁵⁸ In any case, despite some ambiguity and discussion revolving around numbers, it would not be warranted to accuse the Russian government of an intentional policy to resist scaling-up treatment. The figures in the Table 6.2 demonstrate that NPP Health funded not only treatment, but also diagnosis which included the viral load testing.

⁵⁷ <<http://www.physorg.com/news175964193.html>>

⁵⁸ WHO 2006: 11—15. Generally, treatment should be considered if CD4 count is below 350 cells/mm³ and must be started if CD4 count drops below 200 cells/mm³.

Indicator 2c: Treatment as an integral part of prevention

In general, the evidence whether or not government accepted the international consensus on treatment is dubious.

There is a significant variation in regional responses to HIV/AIDS, in which the Moscow government continuously advocated prevention as more important than treatment. In 2003 the Moscow government openly argued that money should be spent on prevention, understood as the war against consumption of narcotics and prostitution, rather than on treatment of the HIV-positive persons.⁵⁹ Even when HIV/AIDS was framed as a matter of national emergency, Liudmila Stebenkova (the chair of the Moscow Duma committee on the protection of medical and social health) insisted that the epidemic could be curbed by promoting healthy lifestyles, enforcing the moral sexual behavior, and restricting the outreach of the nonstate educational campaigns on sexual education.⁶⁰ These choices reflect personal views of Moscow Mayor Yury Luzhkov's and his

⁵⁹ Sergey Syrov, Moskva vracham ne verit, *Kommersant-Daily* № 96 (2699); 04.06.2003; Irina Reznik, Moskva zarazilas' profilaktikoj SPIDa, *Gazeta.Ru*; 26.03.09; and Irina Reznik, Zhena vmesto prezervativa, *Gazeta.Ru*; 2.09.09

⁶⁰ Speech of the mayor of Moscow at the opening of the Second International Conference "HIV/AIDS in developed countries;" 04.02.2008; Aleksej Mazus and Evgenij Kozhokin, SPID i demograficheskaja pustynja, *Rossijskaja Gazeta* № 149 (4115), 12.07.2006.

entourage's idiosyncrasies, rather than intervening effects of social purpose.

At the same time, contrasting treatment to prevention did not evolve into cancelling or downshifting of the money allocated to treatment. In terms of financial commitments, often the financial data is rather imprecise and the figures of how much money was allocated and for what exact purposes remain contradictory. Twigg demonstrates that the Kremlin in 2007 allocated significantly more resources to prevention than treatment: 4,600.0 million rubles on prevention vs. 3,200.0 million allocated for treatment.⁶¹ Twigg's figures for NPP for 2007 are very different from the official numbers. In any case, as the post-2006 evidence demonstrates, the spending on treatment was significant and undeniably important in curbing the epidemic in Russia (see the Table 6.2).

Table 6.2: Summary of the HIV/AIDS budget

A) Source of financing: National Health Project, National Priority Projects, Millions of rubles, \$1 = 27 RUB⁶²

	Diagnosis	Prevention	Treatment	Research	Construction	Total
--	-----------	------------	-----------	----------	--------------	-------

⁶¹ Twigg 2007: 12--13.

⁶² Data available at <<http://hivpolicy.ru/publications/index.php?id=469>>

2006	1,200.00	200.00	1,700.00	0.00	0.00	3,100.00
2007	2,277.50	200.00	5,322.50	0.00	0.00	7,800.00
2008	2,799.32	200.00	4,800.00	0.00	0.00	7,799.32
2009	3,400.00	400.00	5,500.00	0.00	0.00	9,300.00
2010	3,404.74	400.00	8,143.30	0.00	0.00	11,948.04
Total	13,081.56	1,400.00	25,465.80	0.00	0.00	39,947.36
% of NPP	32.75%	3.50%	63.75%	0.00%	0.00%	

B) Source of financing: Federal Targeted Program, Subprogram

HIV, Millions of rubles, \$1 = 27 RUB⁶³

(Department of State Targeted Programs and Capital

Investments, Ministry of Economic Development of the

Russian Federation (Mineconomrazvitija)

	Construction	Research	Various	Prevention	Treatment	Total
2006	107.90	16.10	0.00	56.80	13.70	194.50
2007	249.40	25.59	95.20			370.19

⁶³ Federal target program "Prevention and Treatment of the Socially Important Diseases," subprogram HIV, data available at <<http://fcp.vpk.ru/cgi-bin/cis/fcp.cgi/Fcp/ViewFcp/View/2010/218/>>

2008	372.29	27.50	63.73			463.52
2009	221.76	0.00	75.28			297.04
2010	415.34	3.62	8.86			427.82
Total	1,366.68	72.82	243.07	56.80	13.70	1,753.07
% of FTP	77.96%	4.15%	13.87%	3.24%	0.78%	

PARTNERSHIPS

Indicator 3a: Public-private partnerships

The intentional efforts to implement public-private interaction mechanisms and contract from private sector for the public needs (PPP) are pivotal to increase the capacity of the public health care sector.

Evidence strongly suggests that the Kremlin overcommitted to act as the sole provider of finance for health sector, while shying away from meaningful engagement of the private sector. Rapid expansion of the state sector of health care was prompted by not only newly available money from the hydrocarbons, but also by an intentional commitment to state-led development (the government as an economic deliverer). It is debatable whether or not NPPs had adverse implications for public health. At most, the overextended economic

obligations exacerbated by the weak state capacity, inefficiency, and corruption lead to the inefficient allocation of resources. Throughout all the described period the government remained willing to cover the costs of treatment exclusively from its budget.⁶⁴ Not surprisingly, even the dramatic increase of the budget surplus based on the high prices of the hydrocarbon products, might not be sustainable in the longer term. Since the state came to control all the spending, the government was able to dictate priorities in spending and inhibit alternative recommendations from civil society.

In Chapter 4 I discussed how the National Priority Projects (NPPs) related to the national purpose. NPPs were created as the state-centric tool in initiating and implementing national economic improvement. More specifically, National Priority Projects were created as a mechanism of an intense and “smart” investment to prompt economic development in certain areas and improve certain social services.⁶⁵ In essence, NPPs provided funding to upgrade the public health sector. By the Russian standards, the spending turned out to be truly colossal and historically unprecedented, especially as compared to the 1990s. In general the state funding for HIV/AIDS-related programs grew exponentially from 2005. In 2007 alone the

⁶⁴ TPAA 2003: 23

⁶⁵ See especially Dmitry Medvedev, Nacional'nye proekty: ot stabilizacii - k razvitiyu, *Kommersant-daily* № 9 (3585), 25.01.2007

government spent \$444.8 million to fight HIV and additional \$105 million went to GFATM. In 2009 Russia has pledged about \$392 million for various HIV/AIDS initiatives.

The total funding through NPPs in 2006—2010 amassed to more than \$1 billion. The funding for HIV/AIDS went primarily through NPPs and by far surpassed other sources of governmental funding of AIDS, including the Federal Targeted Program, World Bank project, Globus project, Global Fund disbursements, as well as regional budgets. In 2006—2010 the overall health-related spending in the framework of NPPs reached 400 billion rubles (which was approximately \$13.5 billion). In April 2010 Putin, now Prime-Minister, announced additional 460 billion rubles to be invested to modernize the health care infrastructure and increase its capacity inside next several years (approximately \$15.5 billion).⁶⁶ The Council primarily oriented NPP Health to rebuild the public health care infrastructure, to raise the salaries of doctors and nurses; to increase the number of broadly trained health care practitioners, as opposed to the narrow specialists, among others. According TPAA/GBC analysis, as much as 86% of the committed resources were channeled to

⁶⁶ Na modernizaciju zdravoohraneniya planiruetsja vydelit' 460 mlrd rublej, *Kommersant-Online* 23.04.2010

building the physical infrastructure, while the provision of treatment and palliative care received only 14% of resources.⁶⁷

The 2006 collective report, compiled by the well-known domestic liberal economists and health care practitioners, by and large evaluated the general NPP approach to the reforms in health sector positively.⁶⁸ At the same time, this report indicated that the Kremlin's picked up too many social obligations. However, many liberal economists did not recognize the NPP as a meaningful vehicle of economic transformation.⁶⁹ The lack of state efficiency and capacity plagued this massive spending, significantly undermining the whole purpose of upgrading public health care. Judith Twigg noted that "even in a resource-rich environment, Russia's capacity to spend money effectively and without unintended negative consequences remains uncertain."⁷⁰ Putin himself acknowledged that despite the overall increase of invested resources, only 33% of patients were satisfied with the provided health care services.⁷¹

While the government rapidly expanded public sector, its partnerships with the private sector stalled, if not overtly deteriorated.

⁶⁷ TPAA 2006b:

⁶⁸ See, for instance, collective report Vishnevsky et al 2006.

⁶⁹ See for instance, Larissa Popovich from the High School of Economy (State University), reported in Vadim Visloguzov, Dar'ja Nikolaeva, Dmitriy Butrin, *Bol'she gippokratii, bol'she socializma, Kommersant-Daily* № 70 (4370), 21.04.2010.

⁷⁰ Twigg 2007: 1.

⁷¹ *Medicinskaja reforma skoroj ne vyhodit, Kommersant* № 66 (4366); 15.04.2010

In March 2003 the representatives of high-powered business circles including Arkady Volsky and Fedor Prokopov of the Russian Union of Industrialists and Entrepreneurs (RSPP) lamented that they cannot meaningfully participate in the fight against HIV/AIDS as long as the government did not formulate a clear strategy how private sector could fit in the governance of HIV/AIDS.⁷² Furthermore, the government chose to increase taxes: In spring 2010 Prime-Minister Putin announced that in 2011—2012 the private sector would be taxed an additional 2% to cover the governmental failures of the public health care sector reform.⁷³ The money--460 billion rubles-- was to be allocated to reconstructing the hospital buildings and clinics, increasing the quality of the health care services, and some unspecified additional help for pensioners.⁷⁴ This decision effectively disregarded the multiple pleas of the RSPP members, as well as the representatives of general business circles.

Thus, while the Kremlin poured more and more money to upgrade the public sector, its partnership with private sector remained far from productive. At the same time, the government was not able to increase the capacity and efficiency of its public sector. From the

⁷² See Natalija Mustafina, Rossijskuju jekonomiku pogubit SPID, *Kommersant-Daily* № 57 (2896); 31.03.2004

⁷³ Dar'ja Nikolaeva, Minzdrav zatejal dvuhprocentnyj remont, *Kommersant-Daily* № 71 (4371); 22.04.2010

⁷⁴ Bol'she gippokratii, bol'she socializma, *Kommersant-Daily* № 70 (4370); 21.04.2010

liberal standpoint, building the universal free public health care without private sector was criticized as harmful to the health care services and perpetuating endemic and increasing inefficiency.

Indicator 3b: Partnerships with international health organizations

Russia collaborated with various international health organizations, living up to best international practices. At the same time, the Kremlin used partnerships with international health organizations to play a great-power role.

First, Russian government decided to act like a donor rather than like a recipient of international health organizations, despite the fact that its domestic federal and regional disbursements never reached satisfactory levels. In 2003, after two years of protracted negotiations and resistance, Russia signed the \$48 million loan with the World Bank to improve the regional HIV/AIDS services, including treatment. In 2004, for instance, the international funding for Russian HIV/AIDS prevention was more than \$13 million, comparing to approximately \$4 million domestic funding coming from the federal budget. In 2003—2008 the EU committed more than €16 million for various transborder and internal projects to combat HIV/AIDS. The United States Agency for International Development (USAID) budgeted \$106 million in

2004 and \$61 million in 2007. Yet later, after the GFATM's grants in aggregate reached over \$250 million, Russia has promised to reimburse the Fund for all \$270 million of its grant funding, and even pledged to contribute additional up to \$100 million to the Fund.⁷⁵ To put Russia in comparison: Brazil, for instance, preferred to use international resources to build strong domestic programs and achieve the universality of treatment, rather than overextended commitments and overstretched much needed resources.

Even the federal revenues from the steeply increased prices on the hydrocarbon products, could not be turned entirely to cover all the domestic ARV expenses. On several occasions Medvedev proudly stated that Russia became “a creditor, not a debtor,” like it was in the 1990s. To a large degree, Russia remained dependent on the international resources, expertise and logistical help. More realistic and cautious practitioners revealed their concern for the scenario when Russia would not be able to qualify for the international grants. In 2008, however, GFATM's Executive Director Michel Kazatchkine proposed to continue the funding of “increasingly wealthy countries that do not yet have the infrastructure to effectively

⁷⁵ See KFF Daily Report, 05.05.2008

fight HIV/AIDS, TB and malaria” and perhaps including loans in the Fund’s work.⁷⁶

Second, Russia pursued a more assertive international role by sponsoring and organizing several regional HIV/AIDS initiatives, reinventing its role as a leader in the Commonwealth of Independent States (CIS). In 2005, for instance, the Russian government hosted a ministerial meeting, attended by CIS governmental officials, representatives of civil society, health care practitioners from the public and private sectors, as well as the officials from the UN specialized agencies.⁷⁷

Starting from 2006 Russia hosted three regional Eastern Europe and Central Asia AIDS Conferences (EECAACs) on HIV/AIDS, organized by Rospotrebnadzor. According to its declared objectives, the First conference was “gathered to strengthen and consolidate a large-scale response to HIV in the region through high level political commitment and leadership and create partnerships with civil society and people living with HIV/AIDS.”⁷⁸ The Second conference was intended to accelerate access to HIV prevention, treatment and care. The self-evaluation reports claimed strong success,

⁷⁶ See KFF Daily Report, 05.05.2008

⁷⁷ The Ministerial Meeting “Urgent response to the HIV/AIDS epidemics in the Commonwealth of Independent States” was convened from 31 March to 1 April 2005, in the President Hotel, Moscow

⁷⁸ EECAAC 2006

but this conclusion does not seem fully warranted.⁷⁹ The stated grand objectives were clearly not achieved.

The evaluation paper proudly claimed that 2,056 participants from 52 countries attended the conference, while the overwhelming majority of participants came from Russia, Belarus and Kazakhstan. Many participants were only loosely related to the issue area, and some of those had questionable expertise credentials. These gatherings most definitely were not designed to serve as policy arenas for fostering international cooperation. Different civil society actors were not able to voice their concerns and could not articulate their organizational positions on the national policies. Less sedately put, especially if compared to such gatherings as International AIDS conferences, these regional initiatives did not perform any meaningful political or technical function.

Indicator 3c: Partnership with civil society sector

For the Russian government fostering partnerships with civil society is not just a technical necessity in diversifying the ways of providing treatment, but also a political choice whether to help civil society sector bringing changes in public health policies and implementing

⁷⁹ EECAAC 2008

new practices according to the internationally prescribed standards. However, the Russian government was reluctant to engage civil society as the independent advocacy and political actor, even though the Kremlin was willing to accept the civil society as a subordinate “technical” provider of some AIDS-related services. This policy towards nongovernmental organizations (NGOs) became possible since Sovereign Democracy implied that acting on the alternative conception of common good and proliferating alternative spheres of authority was absolutely subversive and inappropriate. According to this, the independent civil sector and especially externally funded non-state actors involved in politics and advocacy were not perceived as fully legitimate.

In his May 2004 address to the Federal Assembly, President Putin belligerently accused non-profit sector in receiving money from abroad, while not taking part in solving any pressing domestic problems.⁸⁰ In 2005—2006 Putin suggested the infamous law significantly increasing bureaucratic control over civil society in Russia as a part of the sweeping changes in domestic political system.⁸¹ All the NGOs working in Russia were forced to undergo

⁸⁰ Putin 2004, available at
<<http://archive.kremlin.ru/text/appears/2004/05/71501.shtml>>

⁸¹ Federal Law Number 18-Φ3, 2006, available at
<<http://www.rg.ru/2006/01/17/nko-poryadok-dok.html>>

additional complicated registration procedures, submit very frequent reports, and so on. According to the report of the Moscow Helsinki Group, while some NGOs were specifically chosen for public closure and even televised harassment; as a direct result of this legislation 2300 NGOs were simply shut down by the end of 2007.⁸²

In 2008 Putin extended this legislation to the remaining non-governmental organizations receiving grants and funding by the foreign sponsors. This legislation burdened the majority of NGOs with an excessively heavy taxation. According to some calculations, the number of tax-free NGOs was cut by 90 per cent. The Global Fund was among one of the internationally funded NGOs which were included on the heavy tax list (25%). Heavy taxation and arcane red tape effectively constrained the role of NGOs in Russia.⁸³ The trend to develop additional restrictive measures against civil society sector peaked by January 2007, when the draft legislation proposed to shut any NGO down if it “creates a threat to the sovereignty, political independence, territorial integrity, national unity and originality (samobytnost’) cultural heritage and national interests.” However, in

⁸² Il'ja Kriger, *Dura lex: Gosudarstvo posledovatel'no vytesnjaet nekommercheskie organizacii s pravovogo polja*, *Novaja gazeta*, 24.07.2008

⁸³ Svetlana Bocharova, *Putin zadavil Krasnyj Krest i «zelenyh»*, *Gazeta.Ru*, 02.07.08

July 2009 Medvedev proposed some cosmetic amendments to the law and slightly relieved the bureaucratic pressure on civil society.⁸⁴

The public reaction to this legislation neatly reflected the split between the Kremlin-sponsored articulated audiences and their liberal opponents. For liberal observers and commentators, these legislative restrictions were an example of the autocratic turn. The proponents of the sovereign democracy praised these restrictions and regurgitated the core arguments about the necessity to curb the western involvement in the domestic affairs and the general uselessness of many civil society organizations. In essence, international organizations were perceived as a potential threat for the state's strength and agents of pernicious ideological influences at the broader levels of collectivity as well. Some public figures spoke of transnational civil society sector with unqualified and unconcealed suspicion.

Right before the issue of HIV/AIDS was discussed at the State Council in 2006, Liudmila Stebenkova, the Deputy of the Moscow City Duma, claimed that "Under the guise of prophylaxis (prevention) the Western Foundations advertise pedophilia, prostitution and immoral behavior."⁸⁵ She petitioned President Putin to further restrict the Western NGOs' activity in Russia. Some commentators went as far

⁸⁴ For the details see HRW report *An Uncivil Approach to Civil Society*, 2009.

⁸⁵ Valery Panjuskin, Aleksandr Voronov, Anna Geroeva, V Kremli' zaneslo infekciju, *Kommersant-Daily* № 70 (3401), 20.04.2006

as claiming that transnational HIV/AIDS programs, including GFATM, Open Health Institute (OHI), Soros Foundations, AIDS Foundation East-West (AFEW), and Population Services International (PSI) aim to “create and consolidate the socially harmful and dangerous for the rest of the population elements—homosexuals, prostitutes, narcotics users.”⁸⁶ Nikolay Kakliugin also claimed that the US government covertly supported these organizations’ subversive activities to turn Russia into the liberal democracy.⁸⁷

James Richter described the way Kremlin interacted with the civil society in conjunction with the discussion about the Public Chamber, purposefully designed to to organize and supervise the “messy” civil society sector. Richter captured the conditions under which President Putin personally viewed civil society as benign:

The Kremlin even tolerated organizations dependent on foreign funding so long as they pursued projects that did not contradict state interests: organizations that helped educate society on domestic violence or prevent the trafficking of women for prostitution, for example, or environmental organizations that sought to preserve and

⁸⁶ Nikolay Kakliugin, Strategija «snizhenija vreda» v bor'be s VICH / SPIDom kak faktor destabilizacii demograficheskoj situacii na territorii Rossijskoj Federacii 2007, the full text available at <http://www.narkotiki.ru/mir_6514.html>

⁸⁷ Ibid.

protect existing natural areas. By contrast, those organizations that actively challenged the state's position, that criticized the construction of oil pipelines, the dumping of chemical or radioactive waste by defense industries, or human rights violations in Chechnya were portrayed as alien and even harmful to the interests of society.⁸⁸

On the other hand, the Kremlin pledged to fund the charity and socially important organizations. In other words, while not ruling out the need to collaborate with the civil society sector as a subcontractor in social service delivery, the Russian government detested the idea of civil society as policy advocates and norm entrepreneurs. For instance, in 2006 and 2009 the government included a number of civil society representatives in the Governmental Committee on HIV/AIDS, which, at least in theory, was supposed to formulate the consolidated national health strategy. Unfortunately, this special multisectoral Committee remained by and large defunct since its inception.

To be fair, many elected politicians demonstrated willingness to work closely with the civil society sector. In addition to the State's Duma Health Committee, Artur Chilingarov, Tatiana Yakovleva, Olga Borzova, Nadezhda Gerasimova, and Aleksandr Chuhrajov among

⁸⁸ Richter 2009: 45; see also Richter 2009a

others, were active participants in the newly organized the State Duma Commission on the prevention of HIV/AIDS and other socially important diseases. In 2004—2008 their cooperation and commitment empowered the most prominent organization in Russia--Transatlantic Partners against AIDS/Global Business Coalition (TPAA/GBC), despite its external sources of funding. The Chairwoman of the Duma Health Committee Tatiana Yakovleva, for instance, defended NGOs underscoring their important role in educating wider audiences on prevention and increasing trust to the domestic health care sector. Even this modest level of partnerships is under suspicion. According to Judith Twigg, the mentioned partnerships were strategically initiated by HIV/AIDS-related organizations to secure themselves politically, rather than state officials out of the genuine commitment to the cause of curbing the pandemic.⁸⁹ Despite of increasing the level of individual-level partnerships between the governmental and non-governmental sectors, the overall governmental strategy was to exercise surveillance and control over independent NGOs.⁹⁰ As only few Russian NGOs have true financial security, are experienced in the competent advocacy, and possess requisite capacity to implement

⁸⁹ Twigg 2007: 15

⁹⁰ HRW 2009: 10—21.

health services independently from the state, the civil remains very vulnerable.⁹¹

Despite these tensions and uncertainties, civil society continues playing an important part in curbing the Russian governance of HIV/AIDS. According to different estimates, there are between 100 and 300 smaller non-governmental AIDS service organizations, working as subcontractors for the bigger NGOs and the regional governments. Among the most active NGOs working in the country are Family Health International (FHI), International HIV/AIDS Alliance (IHAA), Partners in Health (PIH), AIDS Foundation East-West (AFEW), and the American International Health Alliance (AIHA). Five transnational organizations formed a NGOs consortium to curb AIDS in Russia. This consortium included the Open Health Institute (OHI) as the principal recipient of international funding and the leading force in the GLOBUS Project, funded by the Global Fund.

Transatlantic Partners Against AIDS (TPAA), the AIDS Foundation East-West (AFEW), and the Global Business Coalition against AIDS (GBC) formed a very strong inter-organizational alliance, which quickly became prominent in the country. TPAA which was able to forge closer connections with the regional

⁹¹ For detailed characteristics of the civil society sector, see Mendelson and Gerber 2007: 50—75; for the perspective of domestic civil society sector, see Stachowiak and Peryshkina 2006.

governments and public health care officials in Tatarstan, Orenburg, Samara, Krasnoyarsk, St-Petersburg, and Tomsk. In 2007, TPAA expanded their activities by implementing “an educational course for the regional governmental officials on effective strategies to develop and implement regional HIV/AIDS programs.”⁹² TPAA was especially active in raising awareness, engaging in advocacy, providing treatment and various services both for PLWA and general public in Russia. It has the broader public outreach through Online Policy Resource Center on HIV/AIDS (OPRC) and high-level policy conferences. TPAA’s policy annual reports, policy briefs, analysis of regional health programs, and advocacy of certain health issues remains the principal (if not only) nation-wide alternative source of information on the epidemic and governmental policies.

CONCLUSION

Russian consensus about the new conception of common good shaped the general response to HIV/AIDS crisis as an existential threat to the polity and made possible certain policies not devised before.

Generally, political elite elevated the issues of HIV/AIDS high on the national policy agenda, as it understood the growing rates of infection

⁹² TPAA 2008

to become an additional factor contributing to the declining population, thus impinging on the much desired strong state.

On balance, I do not claim to explain all nine indicators of the global consensus, yet the provided analysis both contributes to the existing explanations and covers important elements of the domestic HIV/AIDS politics not covered before. For instance, the continuous problems with treatment procurement and delays in tenders should not be attributed to the impact of national purpose, but rather to corruption, lack of state capacity and efficiency (indicators 1b and 2c in the table below). For other components of the policy (indicators 1c and 2b), Russian national purpose can be used as a partial explanation.

In regard to the first core component of HIV/AIDS policy, Russia subsumed the issues of HIV/AIDS under the looming demographic crisis and generally linked it to the growing consumption of narcotic substances, rather than addressing the epidemic as a public health crisis in its own right (Indicator 1a). The standardized protocol (in terms of what line of products should be purchased reflecting Russian state of epidemic) was often breached, despite the broad acknowledgement of the life-saving role of the ARVs. The consistent supply of the pharmaceuticals to the patients almost every year was punctuated by month-long delays (Indicator 1b). Although neither the

Kremlin, nor the public health officials overtly questioned the importance of generic medicines for the check on prices and increase of coverage, the whole issue was downplayed in favor of developing and import-substitution pharmaceutical industry (Indicator 1c).

In the context of the Russian epidemic the most vulnerable group was the intravenous drug users (IDUs), which in the 2000s became the principal driver of spreading the epidemic into the generalized population. The vulnerable populations definitely were disadvantaged, as the federal legal provisions stimulated criminalization of IDUs and put this group at the mercy of the lower-level bureaucrats and officials from the so-called power ministries (Indicator 2a). The government accepted the necessity of the universality of access to treatment and consistently worked to scale up the treatment access as evident in massive financial commitments to procure these medicines (Indicator 2b). At the same time, many highly visible representatives of Russian political elite and public health officials aggressively advocated very narrow prevention strategies, confined to abstinence, family values, and health lifestyle. Simultaneously, such legitimate prevention strategies as the substitute treatment and syringe exchange was by and large excluded from the preferred measures in protecting population's health (Indicator 2c).

The Kremlin generally overemphasized the role of the government in curbing HIV/AIDS and intentionally downplayed the significance and desirability of partnership with other sectors. There is strong evidence to suggest that the National Priority Projects—framework of disbursing resources and transforming the health care sector—was designed to fend off the potential role civil society and private sector could have played in domestic health policies. In the context of the expansion of the public sector and massive financial inflows into health care projects, it shied away from any meaningful engagement of the private sector (Indicator 3a), and forcefully imposed strict legal boundaries under what conditions non-governmental organizations can participate in curbing the epidemic (Indicator 3b). At the same time, Russia embarked on and even initiated a number of international AIDS initiatives, which are typically seen as commendable from the vantage point of international health community (Indicator 3c).

Table 6.3: Summary of the impact of national purpose on HIV/AIDS policy

CHAPTER 7. HIV/AIDS POLICY IN SOUTH AFRICA

By the beginning of Thabo Mbeki's presidency, the global consensus on ARVs became not only fully articulated as a broad political commitment, but also was supported by the undeniable practical success as evident in multiple national HIV/AIDS health care interventions around the globe. Despite all this, Mbeki immersed himself in the public discussion on the HIV/AIDS-related issues, eventually making himself an easy target for the global opprobrium and the wide-spread domestic animosity. The Cabinet devised the gamut of governmental policies and initiatives to respond to the epidemic, which not only went against the global consensus on HIV/AIDS, but sometimes were very unique. In general, the governmental approach to the HIV/AIDS issue-area and its resulting policies were more complex than a simple denial and rejection, as typically claimed by the infuriated domestic health activists.

This chapter argues that South African HIV/AIDS policies were shaped by the deployment of the African Renaissance--the politically contingent and country-specific content of national purpose. The most important outcomes of this impact include three broad clusters of effects. First, pursuing indigeneness (nativism,

Africanism) impinged on the standardized protocol in treatment, stimulated the production of traditional medicines, and subsequently institutionalized their national governance. It also contributed to the politicization and filtering the desirable pool of partners, as well as shaped their permissible role in curbing HIV/AIDS. Second, the stress on marketization (economic neo-liberalism) undermined the universal rollout of the antiretrovirals in public health sector, and protected the private sector from sharing the burden of health response. Third, the commitment to exceptionalism (ubuntu) politicized the domestic epidemic and put it in the global context of colonialism; contributed to the pursuit of the national pharmaceutical product at the expense of procuring generics; and empowered the counter-epistemic community of AIDS dissidents.

The aim of attaining the specific conception of common good as captured in the notion of African Renaissance points up to the profound effects on the general content of the domestic ARV policies in comparison to the global ARV consensus. These effects are summarized in the Table 1 below. The more nuanced arguments are provided in relation to each component and indicator of the ARV policy in the appropriate subsections.

Table 7.1: Summary of the ARV policy in RSA, 2000—2008

TREATMENT

Indicator 1a: Common epidemiology in understanding the pandemic

The South African government claimed that the nature of the HIV/AIDS epidemic in the country was very different and unique from the pandemic in the rest of the world, including other African countries and especially the West. This claim was consistent with the notion of exceptionalism as the one of the core components of social purpose and was the first step in staking a claim about the inapplicability of the Western solutions to the South African epidemic.

According to Pieter Fourie, the Mbeki administration's response to HIV/AIDS epidemic was an ongoing attempt to reappraise the structural variables that drove the epidemic.¹ There are several general themes, variations of which the Cabinet, Mbeki, and his supporters articulated throughout his presidency. First, Pretoria claimed that the majority of the diagnoses made in rural areas was inaccurate, unreliable, and led to overestimating the number of the HIV-positive in South Africa. This formulation went against the global consensus that the estimates from the pre-natal clinics and mortality data in South Africa were by and large accurate.

¹ Fourie 2006: 141.

Second, the outbreak of the disease in the West was often attributed to the overuse of prescription drugs, abuse of narcotic substances, as well as to the alternative lifestyle issues (the HI virus then was simply a carrier of the Western drug-related diseases). In Africa, it was extreme poverty and malnutrition triggered the outbreak of HIV/AIDS. According to Feinstein, in his address to the ANC parliamentary caucus in 2000 Mbeki claimed that 90% of death attributed to AIDS was the result of poverty.² Others emphasized the poverty alleviation as a precondition for disease eradication (Prof. Sam Mhlongo, Head of the Department of Family Health and Primary Health).³ While such bodies as the World health Organization (WHO), Southern African Regional Poverty Network (SAPRN) and other international and domestic health organizations name poverty and malnutrition as factors exacerbating the effects of the epidemic and even making the ARV treatment less effective, yet they hardly pinpoint these factors as the root causes of the spread of the HI virus in South Africa.⁴

Third, the neo-colonial and racially skewed Western science in general used an African as an object of negative construction, denied

² Feinstein 2009: 112.

³ An interview with Samson Mhlongo available at <
<http://www.virusmyth.com/aids/hiv/jsinterviewsm.htm>>

⁴ See, for instance, Butler 2005; Schneider and Stein 2001

him/her a human dignity, and treated him/her like a child. The outbreak of HIV/AIDS gave an ideal opportunity to represent an African as the Other, “natural born promiscuous carrier of germs,” thus reinforcing the Western imaginings of Africa.⁵ Mbeki argued against pointing fingers at the sexual immorality of African people, who were “prone to rape and abuse of women” and upheld “a value system that belongs to the world of wild animals.”⁶ Nkululeko Nxesi, in 1999—2004 the National Director of National Association of People Living with AIDS (NAPWA) echoed this theme. He claimed that the nature of the epidemic in South Africa was different even from the rest of the continent because of the very specific legacies of the apartheid, forced labor migrations, and the stifled discussions of sexuality.⁷ NAPWA, along with the government, sought to resist the derogatory and disempowering stigmatization African people living with AIDS as “sufferers” and “victims.”⁸

The last theme fell on a rich soil of more radical and conspiratorial formulations, which in the 1990s-early 2000s were in broad circulation. These collective articulations ranged from beliefs that the HI virus was created artificially to undermine African

⁵ See also Wertheimer 2007: 29, 31, 33 in Falola and Heaton 2007.

⁶ Cite taken from *Castro Hlongwane*.

⁷ See Helen Epstein’s interview with Nxesi in Epstein 2007: 170-171.

⁸ For NAPWA’s official website, see <http://www.napwa.org.za>.

population growth⁹ to popular perceptions of AIDS as an American, or sometimes Afrikaner, Invention to Discourage Sex (hence the acronym). Other perceptions ranged from conspiratorial notions that the Central Intelligence Agency (CIA) propagated the belief that HIV causes AIDS to the imageries of witchcraft with white doctors, treatment activists and representatives of Western pharmaceutical sector as reinvented “sorcerers.”¹⁰

Mbeki set in motion a broad campaign to substantiate more specific assertions of racialism and neo-colonialism dominating the research on HIV/AIDS. The important “Castro Hlongwane” report (most likely co-written by Mbeki and Peter Mokaba) heavily borrowed from the early literature on the impact of racism and prejudices in collecting the evidence on AIDS in Africa in the 1980s. By and large it repeated the accusations of Zimbabwean scholars Richard and Rosalind Chirimuuta, the authors of *Africa, AIDS and Racism* (1987).¹¹ Later on, Robert Suresh Roberts tried to locate Mbeki in the tradition of “pro-native” and anti-colonialist thinking of Frantz Fanon. He linked Mbeki’s views to Harriet A. Washington’s *Medical Apartheid: the Dark History of Medical Experimentation on Black*

⁹ van der Vliet 2004: 73, 85.

¹⁰ Ashforth 2002: 124; Ashford 2005; also van der Vliet 2001

¹¹ For the detailed analysis of this document as an anti-colonial statement, see Wang 2008

Americans from Colonial Times to the Present (2006) and Celia Farber's *Serious Adverse Events: An Uncensored History of AIDS* (2006). Roberts insisted that global science was ridiculing the native quest for African solutions and thus was skewed by racial politics. In essence, these books over-exaggerated certain policy blunders of the 1980s out of proportion.

Mbeki's April 2000 letter to world leaders on AIDS in Africa is a well-known and often-cited document. It illustrated the deep distrust in the Western science.¹² This important letter provided direct evidence that placing a strong emphasis on the indigenous, native medicines was an intentional commitment, rather than a mere policy blunder. The letter stated that,

... as Africans, we have to deal with this uniquely African catastrophe... 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

¹² For the detailed analysis of the content and context of the letter, see Eboko2005: 40—45 in Patterson 2005. For the international response, see Milan Vesely, Thabo Mbeki ignites AIDS inferno, *African Business*, 06.01.2000

proceeding would constitute a criminal betrayal of our responsibility to our own people.¹³

This letter was helpful in neither justifying, nor explaining the South African position at least for international audiences. Soon, the South African government became more defensive about their policies and started talking about the pandemic in the regular terms. Although questioning the epidemiology of the disease and the uniqueness of epidemic in the country by and large disappeared from the official discourse, the government stayed committed to the kinds of actions underpinned by African Renaissance.

At the same time, domestic spin-doctors tried to gloss over Mbeki's prior record, claiming that he had never been an AIDS dissident, never questioned the value of ARV treatment, and even was able to point out the shortcomings of the global biomedical science before they became apparent to the Western scientists.¹⁴ Unwilling to discuss his biomedical views openly, in a private letter to a member of his politico-intellectual entourage, Mbeki still clung to the view that the Western neo-colonial science dictated its will to the champions of native (traditional) knowledge:

¹³ Thabo Mbeki, Letter to the World Leaders, April 03, 2000. The full text available at < <http://www.pbs.org/wgbh/pages/frontline/aids/docs/mbeki.html>>

¹⁴ Roberts 2007: 186-191

Not surprisingly, the most virulent of the debates, about knowledge, has been the contest concerning the science that informs the global and our own programmes on HIV and AIDS. It is most interesting that the most vocal in this contest centered their argument... on the demand that all the discussion must be terminated, and that all that had to be done was to implement what directly and indirectly, the pharmaceutical companies said should be done to dispense the drugs they produce as widely and as quickly as possible.¹⁵

Indicator 1b: Standardized protocol in treatment

In 2004—2008, the Cabinet placed the strong emphasis to promote native medicines, which was consistent with indigeneness as the core component of national purpose.¹⁶ At first, Pretoria briefly emphasized the use of complementary and alternative medicine (CAMs) and later promoted the value of various African traditional

¹⁵ Roberts 2007: 181 (letter dated 1 January, 2006).

¹⁶ On the distinctions among different types of traditional healers, see Gumede 1990; Ashforth 2005: 52—57; on the place of indigenous medicine practitioners in select African states, see Marlise Richter, *Traditional Medicines and Traditional Healers in South Africa*; *Discussion paper prepared for the Treatment Action Campaign and AIDS Law Project*, 27 November 2003; Kibuka-Sebitosi 2008; on relationship between “traditional authorities” and the ANC, see Koenane 2008. For the overview of traditional healing of sexually transmitted diseases (STDs) and AIDS in the country prior to Mbeki, see Green 1994: 135—178.

medicines (ATM, muthi) for the treatment of both HIV and the number opportunistic diseases. While the notions of the ARVs' toxicity and inefficiency were only briefly entertained, this commitment to indigenous solutions proved to be more robust and resilient to both internal and external criticism.

According to Anthony Brink of the Treatment Information Group (TIG), his 1999 book draft "Debating the AZT: Questions of Safety and Utility" led Mbeki to begin inquiry into the safety of AZT.¹⁷ Whether or not this book was the exact trigger, Mbeki accused multiple international actors of concealing the scientific evidence about AZT inefficacy.¹⁸ The semi-official position stated that the human immunodeficiency virus (HIV) could not solely cause the whole syndrome of opportunistic diseases (AIDS), thus the links between the human immunodeficiency and AIDS-associated diseases to be discarded. Moderate voices in the Cabinet insisted that AZT treatment was simply not helpful in curbing the pandemic, because it treated people who are already sick (Nkosazana Dlamini-Zuma, Minister of Health 1994—1999, Minister of Foreign Affairs in 1999—2009). Because the ARVs would neither cure a set of opportunistic

¹⁷ <http://www.tig.org.za>; Brink 2000.

¹⁸ Mbeki letter to Leon, published in *Sunday Times*, 07.09.2000. Such a statement dismissed the results of the domestic SA trials of AZT and nevirapine treatments in Chris Hani Hospital during 1996-2000, see d'Adesky 2004: 183.

diseases, nor alleviate the root causes of poverty and malnutrition, the antiretroviral treatment was at best useless. The most radical anti-colonialist position surmised the Western conspiracy in cramming the toxic drugs into African nations. This discourse revealed the desire to suspend the domestic distribution of the internationally approved medicines and replace it with something else.

The above sentiments culminated in the unprecedented interest to integrate indigenous herbal medicines and potentially commercially valuable genetic resources into national healthcare systems.¹⁹ The point of the revival of indigenous knowledge systems was to demopolize neo-colonial science and refute the Afro-pessimists' claims that natives are unfit to produce original knowledge.²⁰ According to Mbeki, one of the primary objectives was to “defend, uphold and promote our culture in the face of strong encroachments of alien cultures some of which seek deliberately to destroy our indigenous cultures.”²¹ Similarly, in 2006 during the Toronto International AIDS Conference Dr. Mantombazana Edmie Tshabalala-Msimang (MTM, Health Minister in 1999—2008) attacked the Western cultural imperialism, criticizing its negligent attitude towards

¹⁹ Reihling 2008

²⁰ See, for instance, Roberts 2007: 215-222.

²¹ Cite taken from *Response of the President of South Africa, Thabo Mbeki, to the debate of the National House of Traditional Leaders*, Tshwane Municipal Chambers, 04.02.2008

the traditional medicine. The Health Ministry infused these views with additional value: native “scientific methodologies that stretch back thousands of years” are “essential and irreplaceable component of the comprehensive care.”²²

Although these formulations may seem very similar to the ones formulated at the international arena, no international guideline actually prescribes preserving and fostering indigenous knowledge as a core substitution for the standard biomedical products. Thus, Pretoria came dangerously close to rejecting the standardized protocol of the anti-retroviral treatment.

The South African leadership undertook a massive set of practical measures to promote native medicines and institutionalize their governance. The Cabinet invested resources in researching the efficacy of ATM, elevated the status of traditional healers under the Traditional Health Practitioners Bill (2004), reserved the right to define the standards of traditional healing, drafted National Policy on African Traditional Medicine to provide a legal framework to rollout native medicines in the public healthcare system (2008).²³

More specifically, to throw some institutional support behind these initiatives, in 2006 the Cabinet established the Presidential Task

²² MBewu and Simelela 2003: 86

²³ The draft is available at <<http://www.doh.gov.za/docs/policy/atm.pdf>>

Team on African Traditional Medicine in South Africa and the Directorate of Traditional Medicine within the DOH.²⁴ These bodies were supposed to alleviate the differences among traditional healers' group and to offer policy recommendations for the government. They had to decide 1) whether to incorporate traditional healers into the dominant health care system or to make the indigenous system of health care fully separate and grant it an exclusive status; 2) whether the ARVs were toxic and should be replaced by traditional medicines; 3) whether alternative treatment should be offered as complementary, or even as a full substitute to the Western biomedicines.²⁵

Other organizations involved in the promotion of native science included the South African Traditional Medicines Research Unit in Medical Research Council (MRC), National Reference Centre for African Traditional Medicines (NRCATM), and African Health Care Systems Research Network (AHCS). The National Research Foundation (NRF) managed the governmental funds directed to the study of indigenous knowledge and traditional healing practices.²⁶ In

²⁴ Department of Health, Government Gazette, 25 July 2005, No 31271, General Notice No 906

²⁵ For the overview of different views on the epidemiology and ARVs among various traditional healing organizations, see Richter 2003, Working Papers of the Centre for Social Science (CSSR) Nos. 153, 170, 209, 210. On the official position on the traditional medicines and healing practices see WHO 2002; WHO 2004a; WHO 2005.

²⁶ Margie Inngs, Plant strippers threaten traditional healing, *Business Report*, September 7, 2007

2006 the Department of Science and Technology (DST) sponsored the study of the local knowledge as an alternative (and better) foundation for the local decision-making as opposed to the international knowledge.²⁷ DST's Indigenous Knowledge Unit linked the development of indigenous knowledge to the resistance to the Western neo-colonial domination in devising the health care models and called for the protection of native science as intellectual property collectively owned at the local level.²⁸ In 2009 DST and NRF made a research call for The South African Research Chairs Initiative (SARChI) pursuing to demonopolize the Western knowledge and making South Africa a strong contender to the global knowledge as formulated by the North.²⁹

The evidence suggests that ATMs became deeply enrooted at the local (provincial) level as well. In KwaZulu-Natal (KZN) traditional healers were integrated into HIV treatment and care in 2005. In 2006—2008 Member of Executive Council (MEC) Peggy Nkonyeni forged strong connections with the already established native organizations and she hosted an information workshop featuring thirty prominent anti-treatment advocates, who condemned the use of ARVs. She also courted such outspoken opponents of ARVs as Dr

²⁷ DST 2006

²⁸ Mosimege 2005

²⁹ http://www.nrf.ac.za/sarchi/call_sarchi_reschairs_082008.pdf

Cyril Khanyile (Medunsa University) and Nhlavana Maseko (the president of THO), who were vocal against the rollout of ARVs and spending money on the biomedical research. Simultaneously, Nkonyeni tried to roll out herbal remedies for treating HIV/AIDS patients at public hospitals.³⁰ Similarly, Mpumalanga Health MEC Sibongile Manana, frequently ordered doctors not to prescribe the ARVs.³¹

Besides intentional efforts to promote traditional medicines, the Cabinet allowed people of different walks of life (but with highly questionable medical qualifications) to sell a variety of herbal mixtures as genuine alternatives to ARVs. Medical reports and the media typically described their product as brown liquids of suspicious origin, having no benefits for the health of the patients. Consider some telling examples.

In 2000 a local inyanga (healer) Lulu Ngubane claimed to treat and/or reverse the HIV virus with the recipe which came to him in a dream. In 2001 Phyto Nova produced immune-boosting Sutherlandia, potentially useful for the people with HIV. In 2001 Siphwe Hadebe amassed a fortune by treating about 600 patients with “umbimbi.”

³⁰ Kerry Cullinan, KZN Health minister mimics Manto and punts herbal remedies for Aids, *Health-e News Service*, 11. 23, 2006; Kerry Cullinan, MEC keeps up pressure on Manguzi, *Health-e News Service*, 24.06.2008

³¹ Anso Thom ‘Tyrant’ Manana made to pay doctor, *Health-e News Service*, 22.10.2008

Among his high-powered patients was Mbekis' loyalist Peter Mokaba, who soon died from the lung infection, most likely AIDS-related. In 2003 the Health Minister gave permission to the former nurse Tine van der Maas to conduct trials of her "African solution" in public hospitals and clinics.³² In 2005 another traditional healer and a former truck driver Zeblon Gwala offered a mixture of 89 herbs "uBhejane" to be taken simultaneously with ARVs. Gwala's product have been marketed and sold extensively over the years with an active support of various provincial and national health officials.³³ In 2007 lawyer Christine Qunta of Comforter's Healing Gift produced the extract of sonneblom —yet another untested nutritional supplement to cure AIDS.³⁴ These and other healers often persuaded patients to stop taking ARVs, while asserting that their treatment reversed the course of the disease or killed AIDS. Yet the government intentionally kept the window of opportunity open for them.

Indicator 1c: Check on prices and availability of generics

³² Deane 2005 in Karim: 540; Kerry Cullinan , Health Minister promotes nutritional alternative to ARV roll-out, *Health-e News Service*, 30.05.2005

³³ Ndaki in Cullinan and Thom 2009: 149—153.

³⁴ For the best account of traditional healers' backgrounds and marketing strategies, see an excellent collection of essays *The Virus, Vitamins & Vegetables: The South African HIV/AIDS Mystery*, edited by Kerry Cullinan and Anso Thom, especially Ndaki in Cullinan and Thom 2009: 143—156.

The universality of treatment crucially depends on securing the uninterrupted supply of medicines at the cheaper price. One realistic option is to negotiate discounts with the international pharmaceutical companies and use generics. Yet Pretoria refused either negotiating the discounted prices, or using generics as a leverage tool.

Purchasing ARVs from the pharmaceutical giants even at the reduced price was nailed as reinforcing the predatory power of “pharmaceutical colonialism”, bringing by far more problems to South Africans than solutions. The member of government argued that “price reductions negotiated with manufacturers were neither substantive not a permanent solution.”³⁵ Pretoria turned down the pharmaceutical companies’ offer to enter talks on price reduction to the poorest African nations, refused to accept the Boehringer Indelheim’s offer of free Nevirapine for the pregnant women in the mid-2001, and refused Glaxo’s offer to buy AZT at a 70% slashed price.³⁶ In 2000 the presidential spokesperson Parks Mankahlana asserted that pharmaceutical companies and their propagandists were profiteering from the epidemic being uncurbed. In his presentation, the pharmaceutical sector was misusing the information about the pandemic and exaggerating the positive effects of their medicines:

³⁵ Gumede 2007: 196. In 2000, the UN announced the negotiated deal with five major pharmaceutical companies.

³⁶ See, for instance, Youde 2007: 82

HIV/AIDS is not going to succumb to the machinations of the profiteering pharmaceuticals and their propagandists. Like the marauders of the military industrial complex, the profit takers who are benefiting from the scourge of HIV/AIDS will disappear to the affluent beaches of the world to enjoy the wealth accumulated from humankind ravaged by a dreaded disease. And we shall continue to die from AIDS.³⁷

All this was very surprising as, in 1997—1999 South African government seemingly followed the global consensus by challenging big transnational pharmaceutical corporations. The South African Medicines Act of 1997 allowed the domestic production of the generic drugs, parallel import and compulsory licensing. In defending the Act, the government resisted Vice President Al Gore's and the United States Trade Representative's (USTR) pressures to accept the rules for pharmaceutical production as formulated by the international pharmaceutical sector.³⁸ Despite the media portrayed this resistance as a big success of pro-treatment and anti-globalization forces, the relevant literatures soon noted the furtiveness of the Medicines Act. As it turned out, the hidden purpose was to manufacture local

³⁷ Mankahlana, 23 March 2000.

³⁸ For the details see Behrman 2004: 142—148.

pharmaceutical alternatives to ARVs, independently from the international pharmaceutical sector.³⁹ Neither acquiring the cheaper ARVs, nor pressing for the Agreement on Trade-Related Aspects of Intellectual Property (TRIPS) safeguards, was on the real agenda. Most strikingly, believing in the inevitable success of the domestic medicine, the South African government lost an interest in legal action against foreign pharmaceutical sector. As a result, the government at some point decided to accommodate pressures of the pharmaceutical companies, neglecting to enact the compulsory licensing safeguard.

The Cabinet's put all its bets on the development of Virodene® PO58 (1997—2002).⁴⁰ This controversial, but genuine, passion for the local drug started in 1997, when three physicians from the University of Pretoria announced the invention of a cheap and effective anti-AIDS drug on the basis of an industrial solvent used in cryopreservation. From the outset this discovery was under suspicion as it had been neither peer reviewed, nor published in respected scientific journals, while its inventors hardly possessed relevant medical qualifications. Not surprisingly, in February the MCC banned

³⁹For the further discussion see Barnard 2002: 159-174.

⁴⁰For the detailed accounts of the Virodene affair, see Van der Vliet 2001: 164; Deane 2005: 539—540; Fassin 2007: 41—49; Myburgh 2007; Youde 2007: 81—87. Subsequently, under the name Imunoxx® the drug was marketed by Namibia Medical Investments and, after being banned, offered to Congo.

the drug and stopped its testing.⁴¹ However, the inventors skilfully deployed an argument against the Western pharmaceutical neo-colonialism, which in turn generated a firm political and financial backing.⁴² Despite the alleged continuous support and financial involvement of some senior members of the ANC, this attempt to produce a local pharmaceutical product failed.

The failure of the original domestic pharmaceutical product did not abate the specious drug-colonization rant. As Rath vitriolled,

At their 2007 conference in Heiligendamm, Germany, the G8 heads authorized the largest genocide program in modern history - the promotion of toxic ARV drugs across Africa and the developing world. ...this plan provides the blueprint for the economic and political subversion and control of the African continent by the former colonial empires...Under the terms of implementing human rights, fundamental freedoms, peace and democracy, this plan is an outline for the recolonialisation of the African continent on behalf of the pharmaceutical drug cartel. Under the term of universal access to ARV drugs and improving the health

⁴¹ Lesley Cowling, The other Aids 'miracle cure': An Aids breakthrough on the other side of the world puts South Africa's hopes in perspective, *Mail & Guardian* (Johannesburg) - January 31, 1997; Lesley Cowling, Aids 'breakthrough' broke all the rules: Experts wonder why researchers did not come to them with their startling find, *Mail & Guardian* (Johannesburg) - January 24, 1997

⁴²See Fourie 2006: 152.

of African people, the \$60 Billion attack plan with “chemical weapons” called ARV drugs is specified in detail.⁴³

In this context, advocating generics was pinned down as a part of a plot to undermine President Mbeki’s and the ANC’s authority, threaten the black lives and turn the country into a banana republic. Roberts, for instance, politicized the treatment activism as the AIDS-drug promotion conspiracy. Using defamatory language, he lashed out against “the elite media and its anti-ANC AIDS-drug agitation,” as well as “the AIDS-drug lobby lore” of David Cameron, Tony Leon, Zackie Achmat, Mark Heywood, Kerry Cullinan, Nicoli Natrass, and even “celebrity colonialism” of Nadine Gordimer.⁴⁴ Rath-sponsored *End AIDS: Break the Chains of Pharmaceutical Colonialism* was a book-long accusation of multinational pharmaceutical industries of re-colonizing the continent. In this diatribe, the global pharmaceutical neo-colonialism was infiltrating the county via civil society, which castigated Mbeki’s take on the multinationals only to promote the multi-billion dollar ARV business in South Africa.⁴⁵ In this

⁴³ Mathias Rath, G8 Genocide Plan for Africa, available at <http://www4.dr-rath-foundation.org/THE_FOUNDATION/genocide_plan_africa.html>

⁴⁴ Roberts 2007: 185, 198—199, 201.

⁴⁵ SANCO 2007: 33

presentation, civil society simply detracted Mbeki from opposing the mass import of toxic ARV drugs.⁴⁶

In 2002/2003 the SA government responded very negatively to the domestic activist groups' efforts in smuggling generics to the country. The local production of generics begun as late as in 2003, when its role as a tool in cutting deals with the pharmaceutical sector decreased.⁴⁷ Some policy analysts noted that advocates of the generics, such as The Clinton Foundation, were quietly pushed aside.⁴⁸ According to one report, “[M]any generic companies complained of being shut out of the process — which mostly seemed tailored to favour the Western pharmaceutical industry and/or possibly, the development of South African sources.”⁴⁹ By 2006, the South African government failed to secure licenses for the generic manufacture and production of second-line drugs.⁵⁰

UNIVERSALITY

⁴⁶ SANCO 2007: 236

⁴⁷ GSK granted voluntary licenses to Aspen Pharmacare to produce three generics in Sub-Saharan Africa, Kerry Cullinan, Aspen's generics ensure affordable AIDS treatment, *Health-e News Service*, 18.01.2006

⁴⁸ The Clinton Foundation was instrumental in driving down the prices of generics for SA and brokering deals with generic manufacturers.

⁴⁹ Theo Smart, “South Africa completes negotiations for large-scale antiretroviral procurement,” *Health-e News Service*, 02. 22, 2005

⁵⁰ Anso Thom, Registration of critical ARV drug delayed, *Health-e News Service*, 09.02.2006, Hassan 2006: 33-36; Hassan 2005: 73-89

Indicator 2a: Providing ARVs to key vulnerable groups

The international policy consensus underscored the critical importance of treating key vulnerable groups, which might become bridge populations. The provision of the ARVs to mothers is viewed as a high priority, as mothers constitute the key target vulnerable population, in which the transmission of HIV is highly preventable. In South African case, despite the decreasing prices and increasing efficiency and safety of the drugs, the Cabinet was reluctant to offer mother to child prevention transmission (MTCTP) programs. However, once international funding became available, the Cabinet reversed its decision. This evidence is consistent with the strategy of marketization as the core component of African Renaissance.

The following policy choices attracted most attention in the South African mass media. In October 1998 the Health Minister Dr. Dlamini-Zuma, along with the various provincial Members of Executive Council for Health (MECs), decided not to make AZT available to MTCTP and discontinue the pilot projects.⁵¹ In 2000 Phakamile “Parks” Mankahlana indicated that the MTCPT policy, if fully implemented, will result in dramatic increase of orphans and

⁵¹ Kerry Cullinan, Bitter court battle ahead over HIV babies, *Health-e News Service*, 23.11.

vulnerable children (OVC), which would deplete the state resources.⁵² Dr. Nono Simelela (Chief Director for HIV, AIDS and STDs in the National Department of Health) argued that implementing MTCPT would imperil the other vital health needs of all South Africans. This argument continually translated into attempts to stop and then delay the universal rollout of drugs as related to the most vulnerable population.

Calculations made by the prominent domestic health economists had no impact on the DOH's position, "despite medical and economic research showing that the costs of MTCTP were more than offset by the cost-savings associated with reduced numbers of HIV-related paediatric cases."⁵³ According to James Myberg, the funds were diverted to other way less critical goals "The R80m it would have cost to roll out this programme was to be spent instead on an anti-AIDS advertising campaign. This was launched on October 9 1998 by Mbeki in a nationally televised address."⁵⁴ While the provinces of Gauteng, KwaZulu-Natal and the Western Cape were able to start more or less decent MTCTP, the national officials

⁵² Parks Mankahlana was presidential spokesman for Mandela and Mbeki, before he died in 2000 of AIDS-related illness at the age of 36. Loyalists claimed that he died because he took the ARVs, see Russell 2009: 224.

⁵³ Natrass 2004: 47—48; on the cost-efficiency of HAART see also Badri et al. 2006.

⁵⁴ Myberg 2007: part III.

obstructed the logistical support and planning of the rollout in the rest of the provinces.⁵⁵

This policy was promoted against the backdrop of strong public criticism and pressure from the ANC's traditional allies.⁵⁶ Prominent political figures, including Nelson Mandela, Desmond Tutu, and Mbhazima Shilowa joined the set of "traditional" critics of the cabinet and Ministry of Health. According to Patrick Furlong and Karen Ball, "state response to criticism from traditional supporters was the cabinet's dramatic recommitment on 17 April 2002 to fighting AIDS...the cabinet also asserted that universal rollout of PMTCT drugs and supportive programs for rape survivors were on track."⁵⁷

Yet the real change in the policy did not come until generous financial aid from international sources became available. According to Theo Smart, "given South Africa's history on the issue, without pressure from PEPFAR, it is not clear how far those efforts would have favoured the roll-out of ART."⁵⁸ Since the beginning of PEPFAR disbursements:

- 3,045,400 pregnant women began receiving HIV counseling and testing services for PMTCT ;

⁵⁵ Khopotso Bodibe, Where is the ARV roll-out? *Health-e News Service*, 09.02.2004

⁵⁶ van der Vliet 2004: 71.

⁵⁷ Furlong and Ball 2005: 142 in Patterson 2005.

⁵⁸ Theo Smart, Is PEPFAR competing or cooperating in treatment scale-up? *Health-e News Service*, 06.23.2006

- 462,400 HIV-positive pregnant women receiving antiretroviral prophylaxis for PMTCT ;
- 528,100 orphans and vulnerable children (OVCs) were served by the program in FY 2008 alone.⁵⁹

Indicator 2b: Scaling up as a proxy for universality

The rapid improvement of biomedical technology, the fast-growing generics industry in the developing world (India, Brazil, and Thailand), and subsequently steadily decreasing prices on pharmaceutical products at least in principle made ARVs affordable for the national rollout. Yet the South Africa put forth unaffordability argument, which stemmed from marketization as the core component of African Renaissance. In essence, it prescribed to curb the spending in the public sector. However, once international funding became available, the Cabinet was willing to comply with the global consensus of scaling up.

The extant elite's commitment to marketization prompted the Cabinet to keep the HIV treatment programs down or discontinuing the modest AZT treatment programs, which were available at that juncture in time. Pretoria stayed committed to the argument of

⁵⁹ Information taken from <<http://www.pepfar.gov/countries/southafrica/index.htm>>

unaffordability in the context of continuous public outcry against these policies headed by the strengthening pro-treatment coalition in particular and the leftist critics of neo-liberal economic principles in general. Scholars and practitioners describe a variety of high-profile activities, including meetings and conferences, civil disobedience campaigns, litigation campaigns, as well as negotiations and talks at key “consensus-seeking institutions.” The special attention is paid for the Durban Declaration (2000), Framework Agreement on a National Prevention and Treatment Plan for Combating HIV/AIDS (the National Economic Development and Labour Council, NEDLAC 2002), and “Dying for Treatment” campaign (2003).⁶⁰ As a result of this pro-treatment mobilization, the Cabinet gave in to the scale-up demands and announced the new Operational Plan for Comprehensive HIV and Aids Care, Management and Treatment for South Africa (19 November 2003). This plan officially stipulated the universal antiretroviral treatment provision in the framework of the public health care system. This plan also arranged for a significant increase of AIDS-related funding and set up numbers of a steady raise of the patients to be covered by the ARVs.⁶¹

⁶⁰For the summary of key events in building the pro-treatment coalition, see Ijumba et al 2003/04: 324, van der Vliet 2004: 48—96.

⁶¹Doherty and Colvin 2003: 191—212; Alison Hickey, New allocations for ARV treatment: An analysis of 2004/5 national budget from an HIV/AIDS perspective, Occasional Papers of IDASA, AIDS Budget Unit, 31 May 2004

However, according to the more cautious assessments, the victory of the pro-treatment coalition over the absenteeism of the South African government was marred by the palpable governmental reluctance to scale-up the ARV roll-out as required. Although the number of treated patients in the public sector constantly rose almost to the targets set in the Operational Plan, further reports suggested the inherent problems with the government's commitment to the universality of treatment. Generally, after November 2003 Pretoria continued to stall the scale-up efforts.⁶² In 2003—2005 such prominent think tanks as the South African Health System Trust (HST), International Treatment Preparedness Coalition (ITPC) and Institute for Democracy in South Africa (IDASA) expressed some concerns with the implementation of the Operational Plan.⁶³ Their reports indicated, first, that the government designated much less money for the full implementation of the announced targets than required. Second, the national and provincial health departments delayed the procurement of drugs, for a variety of reasons not able to use the significant portion of resources allocated by the Treasury for the comprehensive rollout. Most importantly, by 2005 there was only

⁶² See, for instance, Kerry Cullinan, Eastern Cape - Health Care Crisis, *Health-e News Service*, 07.04.2004 ; Keith Alcorn and Theo Smart, TAC accuses South African govt of back pedalling on treatment promise, *Aidsmap.com* 02.26.2003

⁶³ For the further details of the Plan implementation, see Ijumba 2003/04: 319—338; Stewart and Loveday 2005: 224—246.

23% ARV rollout countrywide, comparing to 85% in Botswana.⁶⁴ In the province of KwaZulu-Natal the problems with ARV provision persisted until 2009; in the Free State the department of health imposed a moratorium to stop initiating ARV treatment for new patients, which was not lifted after a as four-month period as first planned.⁶⁵ All this, of course, can be viewed as simply logistical challenges, related to the state's low capacity and efficiency.

These logistical difficulties plague the country's anti-AIDS battle today as well. Yet in 2000s the lack of any extensive or elaborate plan for ARVs disbursement aggravated these problems.⁶⁶ It mentioned treatment in a very generic way (not even antiretrovirals, but treatment of opportunistic diseases, along with care and support), while limiting the use of ARVs only to the post-exposure situations (such as sexual assault and occupational exposure in public health facilities). It was recommended that the research on the use of ARVs to be reviewed and re-evaluated.⁶⁷ Thus, to a certain extent the Cabinet turned logistical difficulties into an excuse not to scale up the treatment.

⁶⁴ Hassan (2005: 73) reported 18% being treated in the public sector.

⁶⁵ See, for instance, Antiretroviral Treatment Moratorium in the Free State November 2008—February, AIDS Law Project, 11 February 2009

⁶⁶ See, for instance, the official National Strategic Plan (NSP) 2000—2005).

⁶⁷ NSP 2000—2005.

In all this, Pretoria pitched itself against the WHO's 3X5 initiative by the target year of 2005. The Health Minister directly challenged the initiative, saying that she did not "...want to be pushed or pressurised by a target of three million people on antiretrovirals (ARVs) by 2005. WHO set that target themselves; they didn't consult us. I don't see why South Africa today must be the scapegoat for not reaching the target."⁶⁸

Finally, since the South African government received a generous PEPFAR funding, it changed its strategy and decided to scale-up the ARVs. This funding significantly mitigated the resource scarcity to achieve the universality of treatment. According to Natrass, inflow of the external funding and support provided by PEPAFR and GFATM was fundamental to the increase of the universal ARV coverage in South Africa and quicken the rollout speed. Thus, the PEPFAR funding significantly contributed to the scale-up as indicated in the following Table 2.

Table 7.2: PEPFAR's funding for treatment in RSA⁶⁹

⁶⁸ Anso Thom, 866 000 waiting on ARV treatment in SA - UNAIDS and WHO, *Health-e News Service*, 06.29. 2005

⁶⁹ The data are taken from the U.S. Global AIDS Coordinator's Annual Reports to Congress, available at < <http://www.pepfar.gov/about/82444.htm>>

In 2006—2007 the volume of general criticisms against the domestic health policy and specific calls to dismiss Tshabalala-Msimang peaked, along with the more general process of crumbling support for Mbeki as a national leader. Subsequently, NSP 2007—2011 shows a remarkable breakthrough: it sets forth expanding access to appropriate treatment as a key priority area, while downgrading the research on the efficacy of traditional and complementary medicines for HIV treatment and OI prophylaxis as a secondary concern. This NSP for the first time clearly set the targets for scaling up care and support (80% of all HIV-positive people and their families by 2011).⁷⁰

Indicator 2c: Treatment as an integral part of prevention

The South African government chose not to use treatment for the purposes of prevention. First, the Cabinet resisted the policy of providing nevirapine as a central component of vertical prevention from mother to child.⁷¹ Until 2007 it continued to obstruct particular plan for mother to child transmission prevention (MTCTP) protocols. Second, until 2004 the government was resolute to use complementary

⁷⁰ NSP 2007—2011: 10.

⁷¹ On the completely erroneous and artificial separation of prevention from treatment, see Natrass 2004: 171. On the exact numbers of prevention with and without ARVs, see Natrass 2004: 115.

m micronutrients and nutritional supplements as products preventing the development of AIDS.

The central component of vertical prevention is to roll out nevirapine—the essential drug for mother to child prevention transmission (MTCPT). Nevirapine significantly reduces the chances of HIV transmission to infants and significantly alleviates the burden of the palliative/paediatric care to be carried out in the public health sector. The South African government, however, resisted this policy component by referring both to the drug safety issues and broader economic reasons of the treatment rollout. Pretoria even tried to “debunk” the results of Uganda-based study (HIVNET012) and deregister nevirapine.⁷² Later on, after nevirapine was made available to South Africa free of charge, the official position stated that “the costs of testing all pregnant women for HIV, of introducing necessary counselling service, and of providing infant formula (to prevent transmission of HIV through breast milk) were too high.”⁷³

The argument against separation of prevention and treatment became very important in the advocacy efforts of the pro-treatment groups. Over the period of several years, Treatment Action Campaign

⁷² See, Nevirapine safe for PMTCT, *Health-e News Service*, 12.04.2005; Kerry Cullinan, New evidence to avert Nevirapine crisis, *Health-e News Service*, 07.08.2003

⁷³ Natrass 2004: 67.

(TAC) activists argued that treatment was an indispensable part of the prevention strategies and it should be universally provided within the public health care system and that the separation of the two policy components was unacceptable. At the XV International AIDS Conference, TAC decisively brought the issue of the role of treatment in prevention at the international arena (Thailand, 2004). Backed by Dr. Jim Yong Kim (WHO director for HIV/AIDS) TAC chairperson Zackie Achmat exposed the SA health department's position on the resistance to the use of nevirapine for MTCPT as a "vertical prevention" measure.

Even after the Constitutional Court ruled to administer nevirapine in the public health sector, the resistance continued. In 2002 Mpumalanga's MEC Dr. Sibongile Manana did not comply with the order.⁷⁴ In August 2003 Medicines Control Council (MCC) withdrew the license for the use of nevirapine, ignoring both the domestic studies and trials, as well broad international practice of administering the drug.⁷⁵ In essence, the pro-active vertical prevention measures were announced as late as in November 2007, only when the governmental resolve to resist the pro-treatment coalition significantly

⁷⁴ van der Vliet 2004: 69—71, 75.

⁷⁵ For the trials conducted at the Chris Hani Baragwanath Hospital, see D'Adesky 2004: 184; Julian Meldrum, "Nevirapine conflict eased - no South African ban, PMTCT programmes will continue," *Aidsmap.com*, 08.07.2003

weakened. In 2007 Deputy President Phumzile Mlambo-Ngcuka chaired a meeting with South African National AIDS Council (SANAC) and announced a new PMTCT protocol consistent with the global prescriptions.⁷⁶

While stalling the vertical prevention, the government actively promoted the idea of prevention through nutrition. In 2000-2004, the Cabinet actively promoted the “immune-boosting” concoctions and various nutritional supplements as the major alternative to the internationally sanctioned medicines. In 2003 Dr. Manto Tshabalala-Msimang publicly suggested several variations of the so-called nutritious recovery regimen and the “Mediterranean diet,” consisting of garlic, ginger, beetroots, and olive oil. There is no doubt that an adequate nutrition is a part of generic healthiness, yet from the standard medical viewpoint should not be adopted as the primary and exclusive preventive measure against AIDS. Roberto Giraldo, the Health Minister’s official nutritional advisor was a strong advocate of complementary and alternative treatment programs, notorious for making some outlandish claims to about the near miraculous results associated with alternative medicines:

⁷⁶ AnsoThom, New PMTCT protocol in two weeks, *Health-e News Service*, 30.11.2007

The use of food, micronutrient/antioxidant supplements, and herbal remedies can reverse the effects of AIDS and can prevent the progression of HIV-positive individuals to AIDS. Their use can avoid the “transmission” of what is known as HIV from person to person and from mother to child during pregnancy, delivery, and breastfeeding. Their use can arrest “HIV viral loads” and can reverse AIDS dementia... Food, nutritional/antioxidant supplements and indigenous herbs are an effective and inexpensive alternative for the prevention and treatment of AIDS. Testimonies explained that it could cost as little as US \$7 per month.⁷⁷

PARTNERSHIPS

Indicator 3a: Public-private partnerships

The intentional efforts to implement public-private interaction mechanisms and contract private sector for the public needs (PPP) are pivotal to increase the capacity of the public health care sector, where

⁷⁷ Giraldo addressing the Southern African Development Community (SADC), Meeting on Nutrition and HIV/AIDS, Johannesburg November 28 and 29, 2002.

the ARVs are rollout to anybody who needs them. The critical evidence suggests that the South African government opted to protect private sector, while keeping the expenditures in the public sector as minimal as possible to prevent the undesired overspending. This evidence is consistent with the strategy of marketization as the core component of African Renaissance.

Prior to 2001 90% of the seropositive patients were treated in the private sector (yet overall it was just a fraction of people who needed treatment at heat time). In 2004 only 11,000 HIV-positive people received treatment from the public health system, which was 1 out of every 50 AIDS patients who were medically ready for ARVs.⁷⁸ After 2004, however, the government did not resist to PPP overtly, but avoided decisive policies in transferring risks to the private sector in achieving the universality of treatment. More specifically, in 2005—2008 the annual editions of the South African Health Reviews emphasized the continuing accumulation of resources and expertise in the private sector, the absence of public-private interaction mechanisms, and, with a few exceptions, the governmental reluctance to contracting private sector for the public needs.⁷⁹ As one chapter

⁷⁸ Craig Timberg, “S. Africans With AIDS See Ray of Hope: Drugs Begin to Help the Few Poor Patients Who Can Get Them,” *Washington Post Foreign Service*, Tuesday, November 30, 2004; Page A01

⁷⁹ Wolvaardt et al 2008 in Barron and Roma-Reardon 2008: 223—236.

from the 2005 Health System Trust (HST)'s South African Health Review (SAHR) report put it,

The financial disparity in health spending between the two sectors has widened, with the private sector spending approximately seven times more per capita than the public sector, on less than 20% of the population. The public sector serves 84% of the population (mainly the uninsured and poor), spending approximately 41% of total health funding.⁸⁰

Once again, the missed targets indicated Pretoria did not consider the possibility of sacrificing the empowerment of marketization in order to implement more redistributive, social-oriented programs. In the most outspoken form, the claim that the universal access in the public sector was not sustainable in the long run lasted from 1998 to 2003.⁸¹ In 2001 Dr. Ayanda Ntsaluba (in 1998—2003 Director-General for Policy and Planning in the National Department of Health) underscored the logistical challenges behind the universal rollout in the public sector, which would hamper its

⁸⁰ See Leon and Maboep 2005: 33 in Ijumba and Barron 2005

⁸¹ On the problems of SA health system transformation in relation to the disparities between public and private sector, see Schneider, Barron and Fonn 2007:289—311

implementation.⁸² In 2003 Dr. Tshabalala-Msimang argued that the provision of treatment would be sustainable only if the government adequately tackled the problem of improving the domestic health care system infrastructure.⁸³ While a large-scale AIDS intervention with HAART was estimated between 1 and 3%, these arguments were but exceeding rationalization of why the universal rollout in public sector was undesirable.

The budgetary financial constraints got alleviated at the moment when external donor assistance programs amassed to the half of the money for the universal antiretroviral rollout. The availability of resources, however, did not change the domestic stress on marketization. According to several domestic reports, the South African government continued to view the provision of ARVs in public sector as an “additional to, and not a replacement for, existing ARV access through managed private sector care schemes.”⁸⁴ Nicoli Natrass argued that the external financial inflows to South Africa had an adverse effect on public sector, as they essentially had taken all the pressure off the national Department of Health to use available

⁸² Dr. Ntsaluba also served as a Chair of the Steering Committee of the South African AIDS Vaccine Initiative, the board member of the MRC, the Health Professions Council, and the member of the WHO’s Commission on Macro-Economics and Health. In 2000 he defended the PAAP.

⁸³ Ijumba et al 2003/04: 334

⁸⁴ Julian Meldrum and Theo Smart, “South African HIV treatment to depend on generic drugs,” Aidsmap.com, 08. 07.2003

domestic resources.⁸⁵ This means that the Cabinet government used the influx of foreign resources not to strengthen its public sector, but rather to protect its private sector. Subsequently, the Cabinet critics became concerned about the potential effects of donor dependency, locking in the weakness of the public sector, as it happened in some other African countries as well. The Cabinet chose not to be engaged in this discussion.

The second part of the story is the Cabinet's strategy to decrease the policy-making capacity of the public sector, including health agencies, medical research units, health regulatory bodies, and prominent individuals, while putting them under the direct control of Manto Tshabalala-Msimang. In the late 1990s the SA government undermined the authority of the MCC by reversing its decision on Virodene as toxic and unsafe (see the previous subsection), and disputed the safety of nevirapine. MMC, however, reaffirmed its independence as it kept refusing to sanction its clinical trials.⁸⁶ The Cabinet went as far as firing Peter Folb, then director of the MCC and the ANC member. In 2004 the government-backed Dr. Rath Foundation published a petition to disband the MCC, calling it "an agency whose members are directly or indirectly dependent on the

⁸⁵ Natrass 2004

⁸⁶ Adele Baleta, "No clinical trials sanctioned for South Africa's controversial HIV drug," *The Lancet*, Volume 353, Issue 9147, Page 125, 9 January 1999

international pharmaceutical industry, and whose decisions have consistently served these foreign interests at the cost of the health and lives of the people of South Africa.”⁸⁷ In 2008 Tshabalala-Msimang promoted the legislation to replace “the ineffective and slow” MCC with Regulatory Authority for Health Products (RAHP), which was intended to “close loopholes by covering traditional and complementary medicines” and command more staff and resources.⁸⁸

Other examples include the governmental restraints on the Medical Research Council (MRC), as well as its president Malegapuru Makgoba, the prominent epidemiologists from the University of Witwatersrand, once Mbeki’s supporter. Makgoba’s objections to the governmental stance on the ARV policy were dismissed by Mbeki himself, which in effect ended their partnership. The Cabinet put constraints on MRC’s mandate, censured the body’s research findings, and accused it of being hostile to the government.⁸⁹ The apparatus permeated the Department of Health as well. In 2007 Deputy Minister Nozizwe Madlala-Routledge was fired after having participated in the International AIDS Conference in Barcelona. While the official reason was her failure to secure a direct presidential

⁸⁷ Rath 2004, <http://www.dr-rath-foundation.org.za/open_letters/open_letter_2004_10_07.html>

⁸⁸ Clare Kapp, “New hope for health in South Africa,” *The Lancet* Vol. 372, No 9645, (4—10 October 2008), pp. 1207-1208

⁸⁹ For the further details, see van der Vliet 2004: 67; Russell 2009: 207.

approval, the media attributed the firing to her mainstream beliefs about the role of ARV treatment.

Indicator 3b: Aid and expertise of international health organizations

Today international recommendations have become almost universally recognized as important tools in improving domestic policies, including public health. This implies that following the guidelines and recommendations provided by international health organizations, such as the WHO, UNAIDS, and others is indispensable in developing adequate domestic health policies. In 1994—1996, the government explicitly embraced partnerships with international governmental organizations, private sector and civil society.⁹⁰ In the late 1990s, the stress on exceptionalism and continental leadership as elements of common good prompted the Cabinet to establish an alternative forum of the HIV/AIDS-related biomedical expertise and later claim that the international health organizations' prescription and guidelines are misinformed and ill-suited for South African realities.

Instead of pursuing closer partnership with international health organizations, in the early 2000s Pretoria turned to the AIDS dissidents as chief partners in formulating the appropriate policies in

⁹⁰Fourie 2006: 109.

response to the epidemic. This decision went against the grain of the common biomedical expertise. Most importantly, first, the AIDS denialist movement was hardly a recognizable and legitimate international force since 1996, when many dissidents refused to take the newly available ARV medications and passed away. Second, the Cabinet valued the dissidents' approach as it was believed to be open to the African knowledge and not committed to the Western science methodologically. The irony of this commitment was that the dissident theory had been formulated by the Westerns scientists, as many political observers snidely remarked. In essence, sponsoring select biomedical pariahs from across the globe was intended to challenge the expertise of mainstream international health organizations, as well as to the medical and pharmaceutical establishment of the Global North. The public criticism of the dissidents was interpreted as an orchestrated campaign, using racially skewed science to suppress Africa's independent quest for unique solutions.⁹¹

More specifically, South African government and President Mbeki personally commissioned the Presidential AIDS Advisory Panel (PAAP, or the Pretoria Panel), of which the dissidents comprised at least a half. PAAP brought together notable dissidents Prof. Peter

⁹¹ See, for instance, First Meeting of the Presidential Advisory panel on AIDS, Opening Speech by President Thabo Mbeki, Pretoria 6 May 2000.

Duesberg, Prof. Sam Mhlongo, Dr. Valendar Turner, and Dr. David Rasnik. Their recommendations for South Africa were based on the claims that AIDS was not contagious, although many of the opportunistic infections were; AIDS was not sexually transmitted; AIDS was not caused by HIV; the admittedly toxic anti-HIV drugs were killing people; the drug-induced toxic effects caused AIDS-defining conditions that cannot be distinguished from AIDS.⁹²

This counter-epistemic community gave President Mbeki and his supporters a quasi-scientific vocabulary to refute the conventional epidemiological wisdom that HIV was the cause of AIDS, and reject the cost-efficient and safe drugs. As a result, Mbeki created a self-deceptive possibility to select among a large number of legitimate health policy options how to deal with the epidemic domestically. In the summary policy document, PAAP fused two contradictory sets of recommendations. AIDS denialists recommended suspending all HIV testing in the country, using no ARVs to treat patients, while eradicating other infectious diseases, and improving nutrition and sanitation.

Under the strong pressures applied by international-domestic pro-treatment coalition, the PAAP was disbanded and never reconvened again in the same format. The disbanding PAAP, however,

⁹² See PAAP 2001: 59.

converted neither into the acceptance of the expertise of the international health organizations, nor in straightforward endorsement of the mainstream science. After an enormous international and domestic outcry Mbeki distanced himself from AIDS activists by asking AIDS dissidents not to use his name for the fundraising purposes. Yet this distancing remained somewhat duplicitous.⁹³ In 2007 Roberts politicized the public criticism of bringing the dissidents on the panel. He charged critics being informed by colonial scholarship, racial stereotypes, and the beliefs in black incompetence and native unfitness for governance:

But why, upon mature reflection, would anybody be surprised that a responsible elected official wants to acquaint himself “with all sides” of a science that everybody says is central to a massive health crisis under his watch? It is an elementary intellectual procedure, unless of course the leader is implicitly denied the right to or faculty of intellect. He must just shut up. He must just obey... Mbeki’s sin was to reject a drug-based intellectual protectionism in favour of a free exchange of ideas on the proper solution to the AIDS pandemic... Mbeki’s methodical inquiry was recast as native

⁹³ *Business Day*, November 07, 2007

stubbornness...Mbeki is cast as a heathen, a non-believer—indeed as the proverbial Kaffir in that rich and resonant word’s original sense.⁹⁴

After the whole dissident debacle was over, the Cabinet turned to more subtle ways not to forge partnerships with the international health organizations. The Department of Health resisted the adoption of an adequate monitoring and evaluation system, which would have enabled comparison between the domestic progress and international guidelines and objectives. In general, the crucial evidence is that the overwhelming majority of the domestic policy documents either did not follow these prescriptions, or attempted to reframe them.⁹⁵

For instance, the first official update report “Progress Report on the Declaration of Commitment on HIV and AIDS” submitted by DOH in 2006 was widely criticized in eluding the discussion and presentation of any tangible data that would allow to compare the domestic progress with the international guidelines and objectives. Evading the monitoring and evaluation mechanism was also pervasive on the provincial level as well. According to the Joint Civil Society Monitoring Forum (JCSMF) by 2006 the provincial health departments provided neither disaggregated data on HIV/AIDS

⁹⁴ Roberts 2007: fn 181, 192, 195, 202

⁹⁵ See, for instance, “Monitoring & Evaluation Framework for the Comprehensive HIV and AIDS Care, Management and Treatment for South Africa” (2004)

expenditures, nor the information about rollout for the domestic monitoring agencies.⁹⁶ Only in 2007, the National Strategic Plan for 2007—2011 making provisions for the large national ARV rollout, soon to be praised internationally, recommended to follow international prescriptions in establishing the monitoring and evaluation framework.⁹⁷

Indicator 3c: Partnership with civil society sector

In this subsection I argue that Pretoria pursued selective partnerships with domestic civil society organizations. It refused to cooperate with those organizations, which the Cabinet perceived as disloyal to the South African common good, sided with the neo-colonial global pharmaceutical sector, and used international arena to discredit the country. The Cabinet preferred to forge connection with organizations advocating local solutions for the country's exceptional problems, which is consistent with the core components of social purpose.

Treatment Action Campaign (TAC) remained the most visible and internationally supported AIDS treatment advocacy group. TAC fully embraced the international consensus on the nature of the

⁹⁶ Nhlanhla Ndlovu and Daswa, Rabelani, Review of progress and expenditure on the Comprehensive Plan for HIV and AIDS for South Africa, (Occasional Paper, IDASA, 2006): 3

⁹⁷ NSP 2007—2011

pandemic (and therefore the norm of ARVs as a biomedical solution. Because of its strong resolve and consistence with the global consensus on ARVs, by 2004 TAC received an international recognition and was broadly praised for its efforts to promote the use of antiretrovirals in the country. Moreover, to a great extent, it was able to frame the global academic discussion about HIV/AIDS politics in South Africa and advertised its cause via the eye-grabbing campaigns of civil protests.

TAC effectively became a linking pin between domestic and international civil society organizations since its active participation at the international AIDS conferences, which brought TAC international supporters. At the XII International AIDS Conference (Durban, SA July 2000) TAC and Doctors without Borders (MSF) organized a joint satellite conference “Improving Access to HIV/AIDS Drugs in Developing Countries.” In 2002, following the Barcelona Conference, TAC tried to bring together most visible civil society organizations across Africa to create a unified pro-treatment advocacy network under the name of Pan-African HIV/AIDS Treatment Access Movement (PHATAM).⁹⁸ In 2006 At the XVI International AIDS Conference TAC co-organized the march for the Global Day of

⁹⁸ Activists Launch Pan-African Drive To Demand Treatment, U.N. Wire, *August 23, 2002*.

Action in Brazil, Canada, China, and South Africa. Thus, the early 2000s the domestic pro-treatment coalition was able to forge the strong international links.⁹⁹

As TAC gained more international recognition and credibility, the members of Mbeki's administration became evermore hostile and unwilling to collaborate with it. According to the ANC member Andrew Feinstein, who took notes during Mbeki's speech at the ANC caucus meeting in 2000, Mbeki blamed TAC for lobbying the special interests of the pharmaceutical sector (and thus acting as an agent of foreign influence).¹⁰⁰ According to TAC's Secretary-General Siphon Mthathi, in 2004 the governmental representatives charged the organization with "using international podiums to embarrass the South African government and of not being patriotic."¹⁰¹ In 2006, Pretoria attempted to exclude TAC (as well as Friends of TAC, and the AIDS Law Project, ALP) from participating in the Review Meeting on the UNGASS Declaration of Commitment, taking place at the United Nations in New York in 2006. Ultimately, the Cabinet strongly

⁹⁹ For the details on forging the international connections between the South African pro-treatment organizations and the global access treatment, see Smith and Siplon 2006: 85—88. For the history of TAC's activism and its strategy of using the human rights approach and litigation as a principal strategy, see, for instance, Friedman and Mottiar 2005; Mbali 2004. TAC was a linking pin between domestic and international pro-treatment advocacy groups. For the broader analysis on the role of NGOs as an integral part of domestic-international coalitions against HIV/AIDS in Southern Africa, see Webb 2004: 19—32 in Poku and Whiteside 2004.

¹⁰⁰ Feinstein 2009: 113.

¹⁰¹ Sue Valentine, TAC appeals to AIDS conference, *Health-e news service*, 14.07.2004

disapproved of the domestic civil society's participation in international health conferences and their appeal to the international arena. This animosity notwithstanding, TAC was gaining political momentum and domestic prominence.

The Cabinet chose to support organizations, which were hostile to “AIDS-drug lobby” and backed up the governmental call for the African solutions for African problems.¹⁰² For instance, the Dr. Rath Foundation, the SA National Civic Organisation (SANCO), and the Treatment Information Group (TIG)—for a long time were favored in the DOH. The official Operational Plan for Comprehensive HIV and AIDS Care, Management and Treatment for South Africa went as far as incorporating Robert Giraldo's alternative nutrition-related interventions in its policy recommendations.¹⁰³ The governmental links with these organizations remained quite strong as long as the Cabinet's strategy to promote complementary and alternative solutions for African epidemic endured. Tshabalala-Msimang maintained personal relations with Dr. Matthias Rath and Robert Giraldo. The former proposed treating HIV/AIDS with his multivitamin supplement VitaCell and claimed that G8 was involved in the genocide and recolonization conspiracy against Africa; while the latter was the

¹⁰² Especially the reports of the KFF award-winning journalist Anso Thom, available at <www.health-e.org.za>

¹⁰³ MBewu and Simelela 2003: 79—86.

Minister's personal nutritionist.¹⁰⁴ The governmental partnership with persons and groups promoting nutritional treatment flourished until 2008, when the Cape High Court ruled multivitamin trials illegal and instructed to investigate Rath's activities.

Besides these intentional partnerships with these unhinged nutritionists, the Cabinet was generally supportive of those organizations and groups, which concentrated on poverty and malnutrition as deep structural variables driving the epidemic, while not rejecting the life-saving role of the ARVs. At one point, the Department of Health became the major donor of the South Africa's National Association of People Living with HIV/AIDS (NAPWA), an organization boasting 90 branches with estimated 300,000 members, yet suffering from the lack of funding and the crisis of legitimacy.¹⁰⁵

Not surprisingly, domestic AIDS dissidents sought to support Mbeki's AIDS policies and attack his "drug-lore" opponents as well. In 2007 Treatment Information Group (TIG) drafted a 59-page bill of indictment for the prosecution of Zackie Achmat at the International Criminal Court at the Hague on a charge of genocide for his direct criminal role in the deaths of thousands of South Africans from ARV

¹⁰⁴ For the in-depth story of the governmental engagement with the dissidents, see Thom and Cullinan 2009; On Rath's background, see Youde 2007: 107—108.

¹⁰⁵ Cullinan and Thom 2009: 105.

poisoning.¹⁰⁶ By that time Mbeki's be supporters still were actively seeking a personal access to the President, since the speculation about his dissident views had never ceased to circulate in the country. Yet Mbeki cautiously avoided any public association with these individuals, and tried to revamp himself as a decision-maker in search of a specific and sensible policy.

The government became willing to cooperate with the pro-treatment activist movement only when Mbeki and Tshabalala-Msimang lost their expressiveness in the public debate about AIDS and subsequently loosened their grip in controlling the health-related agencies.¹⁰⁷ In 2005—2006 new Deputy President Phumzile Mlambo-Ngcuka tried to restructure the organizational governance of HIV/AIDS in the country. The new National Strategic HIV/AIDS Plan (NSP 2007—2011) intended to return to the South African National AIDS Council (SANAC) the status of a linking-pin between the government and the civil society.¹⁰⁸ To fulfill these objectives, Mlambo-Ngcuka brought on board a number of civil society representatives, including Mark Heywood of TAC as the deputy chair. Under her brief leadership, SANAC organized the 3rd National AIDS Conference in order to resolve the key contentious issues regarding the

¹⁰⁶ Brink 2007; Brink 2008

¹⁰⁷ Gumede 2007: 212—213.

¹⁰⁸ NSP 2007: 101, 107; see also Natrass 2004: 50

HIV/AIDS.¹⁰⁹ Despite these efforts received an international recognition, they were effectively countered when the Health Minister returned from a sick leave in 2007. Quickly after her recovery, Tshabalala-Msimang once more tried to restructure SANAC in order to counterbalance the growing influence of the civil society representatives.¹¹⁰ Although her plan to keep only functionaries and loyalists ultimately failed, SANAC remained stuck between being an integrative and coordinating body, representative of South African AIDS community, and a rubber-stamp institution.

Yet these modest elements of cooperation came out of necessity, and were never accepted as a principled policy. According to the report of International Treatment Prevention Coalition (ITPC) one 2006 report, the Cabinet continued “efforts to inhibit full participation of civil society.”¹¹¹ Roberts, accordingly, once again accused AIDS activists and pro-treatment movement of generating the AIDS debate in order to discredit the South African democracy and gloss over the consequences of the apartheid rule, and perhaps even to rehabilitate it:

¹⁰⁹ “Building Consensus on HIV Prevention, Treatment and Care,” the summary of the conference available at <<http://www.info.gov.za/issues/hiv/consensus.htm>>

¹¹⁰ Mandy Rossouw, Move to Manto-ise Aids council fails, *Mail&Guardian*, 09.15.2007.

¹¹¹ ITPC 2006: 38

In the South African political context, it has been easier and more politically convenient... to blame black incompetence and even callousness for the AIDS epidemic that manifested itself immediately after 1994, than to acknowledge the obvious momentum of history in creating it. The AIDS debate marks the most notable success of those who seek to erase apartheid and colonial history from South Africa's present-day self-understanding.¹¹²

CONCLUSION

This chapter asserts that in South Africa domestic responses to the global consensus on HIV/AIDS and the antiretroviral treatment were based on the deployment of an African Renaissance, the historically contingent and country-specific content of national purpose. In other words, the national purpose significantly impinged on the transfer of the global policy consensus on ARVs, prompting the Cabinet and its high-power members to challenge this consensus in public. On balance, I do not claim to be able to explain all nine indicators of the global consensus, yet the provided analysis both contributes to the existing explanations and covers important elements of the domestic

¹¹² Roberts 2007: 213—214

HIV/AIDS politics not spotlighted before(see the indicators 1a, 1b, 2b, 3a, 3b, and 3c in the table below).

South African elites questioned the sameness of epidemiological trajectory of the disease in South Africa and the rest of the world. Elite framed the domestic epidemic as a local developmental problem in opposition to the lifestyle issues and the massive consumption of various toxic drugs, including the antiretroviral medications, in the West (Indicator 1a). As an extension of this reasoning, political elites worked to revive and institutionalize the alternative/indigenous medicines as either a full substitute to the “toxic AZT,” or an addition to the Western biomedical products in general (Indicator 1b). In this context, Pretoria for a while was not quite concerned about the rapid importation and domestic disbursement of generic pharmaceutical products; in certain cases even attempting to prosecute the smugglers of generics (Indicator 1c).

In South African epidemiological conditions the most vulnerable group was mothers carrying the virus giving birth to children. Despite the decreasing prices and increasing efficiency and safety of the available drugs, for a while the Cabinet was reluctant to offer mother to child prevention transmission program as too expensive and pharmaceutically unsafe (Indicator 2a). To keep the

expenditures in the public sector as minimal as possible to prevent the undesired overspending, both Pretoria and provincial health officials consistently stalled the national roll-out programs on the ground and tried to block the universality of access to treatment in principle (Indicator 2b). The South African government was resolute to use complementary micronutrients and nutritional supplements for prevention of the development of opportunistic diseases (Indicator 2c).

The critical evidence suggests that Pretoria chose to protect the relatively successful private sector and did not employ it to improve the dismal health care conditions in the public sector (Indicator 3a). The prospects of partnership with civil society sector were tainted by the latter's support of the Western biomedical products. As a result, the Cabinet preferred to forge connection with organizations advocating alternative and complementary treatment (Indicator 3b). Finally, Pretoria legitimized a counter-epistemic community of health dissidents and worked to make traditional healers to be recognized internationally. The government seemed to accept partnership with the international organizations, only when their financial assistance alleviated the burden of the public sector, which was consistent with the emphasis on slashing the spending (Indicator 3c).

Table 7.3: Summary of the impact of national purpose on HIV/AIDS policy

The consequences of deploying national purpose to HIV/AIDS issue-area as a particularly South African problem were self-defeating inasmuch as doing so it thwarted adequate, quick and appropriate response to the country's looming health crisis. Pretoria missed the international targets of curbing HIV/AIDS and failed to acknowledge how grave the epidemiological situation was.

CHAPTER 8. PLACING SOCIAL PURPOSE IN THE CONTEXT OF RELEVANT LITERATURE

Chapters 4 and 5 traced how Russian and South African political elites constructed and legitimized their new social purposes, which were respectively labeled “Sovereign Democracy” and “African Renaissance.” In these chapters, I examined how country-specific and politically contingent conceptions of common good legitimized certain kinds of policy actions and inhibited others.

In both countries the advent of new social purpose occurred simultaneously with the spread of the epidemic of HIV/AIDS. Because the spread of the pandemic threatens the existence of the state and hinders the physical survival of population, providing the antiretroviral treatment becomes a fundamental common good. Chapters 6 and 7 demonstrated how, why and to what extent social purpose politicized domestic policy responses to HIV/AIDS and prompted the kinds of actions considered legitimate and appropriate. In this context, the key decision-makers from these two countries have significantly filtered the standardized policy prescriptions to the pandemic through the pursued conceptions of common good.

The question remains whether or not my emphasis on social purpose as an intervening variable is robust to major alternative explanations, which might explain the cross-national deviations from the international best-cases practices. This chapter places social purpose in three primary policy transfer explanations, including peer learning, coalition-building, and external pressures. This move sharpens my analytical focus and confirms social purpose as a plausible explanatory variable.

In many cases, norm diffusion explanations provide very credible models demonstrating the adoption of or resistance to international, or foreign policies in the domestic arenas. Locating national purpose within broader explanations of norm diffusion will help me not only to test my findings from the previous chapters, but also facilitate thinking about how identity factors into in norm diffusion processes more generally.

Wade Jacoby's classification is a good starting point, as it delineates among combination of foreign and domestic influences in the process of transfer, ranging from the uttermost involvement of the powerful outsiders to their exclusion, and is agnostic about the underlying normative logic of norm diffusion processes. According to

Jacoby's classification, the menu of policy transfer includes external influences, coalition-building and learning.¹ One caveat here is that other scholars might use a different list of diffusion mechanisms, sometimes including regional competition, normative imitation, socialization, and so on.² In this chapter I will not consider those mechanisms which either employ very specific scope conditions, or may not be relevant for the regions other than the European Union (EU), or can be subsumed under the broader norm diffusion models.³

Table 8.1: Summary of the relationship between variables & explanations

It is conjectured here that to the extent to which learning, coalition-building, and external pressures cannot explain the filtering of international policy initiatives in regard to HIV/AIDS, the focus on social purpose an explanatory variable becomes analytically warranted. I assert that the strength of domestic commitments to the formulated social purpose (both among elites and wider audience) may alter the theoretical predictions of policy transfer, otherwise having a

¹ Jacoby 2006

² See, for instance, Simmons, Dobbin and Garret 2006; Weyland 2005; Simmons and Elkins 2004.

³ Some specific issues, such as the links between socialization and learning mechanisms, are addressed in the following sections below

strong explanatory logic of how external prescriptions of change and innovation are adopted domestically. While I am not claiming that social purpose is the single explanation of the variation in national responses to the emerging infectious diseases, on balance it helps us explain how the deep-seated political commitments shape public policies.

EXPLANATION 1: LEARNING

A standard account of learning

How does national purpose factor into learning as an explanation of policy transfer processes? It is hypothesized here that if social purpose has no impact on learning, then norm-taking elites should consider all available information and select the best case practices for domestic adoption. If the benefits of international policy are indeed tangible, selecting and implementing a “rival” policy is the most straightforward indicator of the failure of learning. If social purpose does impact learning, then only a particular subset of the available practices will be considered and implemented. This, however, does not mean that we should strongly expect to see an observable deviation from the global policy consensus. Rather, we should expect to trace how certain components of common good filter what is available internationally.

For instance, international policy prescriptions might conform to the content of the social purpose and even amplify it.

In the learning explanation (sometimes called “inspiration”) policy adoption occurs as a direct result of domestic elite buying into the foreign norm simply by being exposed to it at the global arena, and then realizing that an outside norm has significant benefits to improve domestic public health. More specifically, domestic decision-makers purposefully initiate the change in domestic policy inspired by a measurable policy success in other countries, anticipated benefits in its own country. These choices sometimes get mediated via the existing epistemic/medical networks, providing and interpreting the necessary technical (biomedical) information.⁴ In other words, domestic policy-makers are “inspired” by the outside-generated policies, prescription, and norms and then proceed to implement this policy domestically. In the best-case scenario, domestic elites screen and evaluate all the available information.

This model is by and large should have been applicable to Russia and South Africa—since the availability of more effective, relatively non-toxic, fixed-dose combination of triple therapy proved its effectiveness as a policy solution in many other countries. Neither

⁴ For the useful summary of academic literature on learning, see Stone 2004: 548—549; Dolowitz and Marsh: 5—24; Simmons and Elkins 2004: 175; Checkel 2001; James and Lodge 2003.

Russia, nor South Africa have been isolated from the international area and international health organizations during the time of the pandemic, which rules out any major domestically-generated political roadblocks to the policy transfer. In most cases, the technological expertise and help, especially since the early 2000s, was readily available. There is plenty of transnational communication about the appropriate HIV/AIDS policies at various conferences, international organizations, medical exchange civil society networking, and diplomatic venues, to name a few. If necessary, argument, reasoning, persuasion, information access, or even some material incentives may be employed at these venues to convince leaders to move faster and more decisively on the issue. Obviously, various social movements, non-governmental organizations, representatives of the private sector and several epistemic communities may purposefully facilitate the learning about the global consensus on the HIV/AIDS policy and the subsequent adoption of antiretrovirals.

In the learning model the adoption of an innovative foreign norm is most of the time an advantage. Indeed, quickly adopting the HIV/AIDS treatment can protect countries from the potentially devastating consequences of the pandemic, such as the demographic collapse, spreading the disease among civil servants, teachers, increasing number of orphans and so on. However, this model implies

that the prospective technological success and biomedical information should be difficult to misinterpret and perceive as irrelevant for domestic circumstances. Thus, learning model does not account for the possibilities of the competing interpretations of and contestation around a given policy. On the contrary, it predicts relatively fast, smooth, and almost “natural” adoption of ARVs across the globe, provided some basic level of state capacity.⁵ In essence, the learning model described here is very similar to the “classical’ definition of policy diffusion, used by Everett Rogers’ followers in sociology:

...policy innovations are communicated in the international system and adopted voluntarily by an increasing number of countries over time. Diffusion refers to an international spread of policy innovation driven by information flows rather than hierarchical or collective decision making within international institutions... Diffusion becomes manifest only through the accumulation of individual cases of imitation or learning with respect to one and the same policy item.⁶

In this context, an important qualification for the learning model is that it links various deviations from the standard spreading

⁵ Compare to Finnemore’s (1998) notion of norm cascade.

⁶ Busch, Jorgens and Tews 2005: 149.

policy to the particular timing when certain countries are up for adopting the norm. As HIV/AIDS is an acute health care crisis, it can be asserted that the sense of urgency prompts governments to act decisively and adopt the international recommendations when the infection rates skyrocket. In the context of the generalized epidemic a country is more likely to adopt the international policy prescriptions as there is no time to develop radically different health intervention measures, while the policy solutions to combat HIV/AIDS are readily available for decision-makers. In the context of contained epidemic international guidelines can be discussed, debated, or simply ignored for the time being. Some broader observations point out that quite often the sense of emergency and the need to respond to pending health crisis is associated with neither certain epidemiological threshold, nor international projections of the global spread of HIV/AIDS. Brazil and Uganda, for instance, took the decisive steps in the late 1980s—early 1990s, when the very nature and implications of the disease were hotly debated. Other countries have been rejecting the state of national emergency, with infection rates estimated to come close to 20 percent of population. In other words, adopting, challenging, or ignoring international consensus is likely to be a function of purposeful governmental choices, and not a function of seroprevalence.

As this dissertation was in progress, the HIV prevalence in South Africa rapidly increased to 20—25% of population, while in Russia even the most pessimistic estimates hardly exceeded 2 or 3% of the country's citizens. If this conjecture were accurate, Pretoria should have adopted and strictly observed the international consensus, while the Kremlin still had time to mull over the set of appropriate responses. Contrary to this expectation, South African Cabinet did not follow international recommendations even though the entire country's health collapse was looming large. Russian leaders pursued quite an aggressive government intervention, even though they believed that the epidemic would remain contained to vulnerable subpopulations. Yet qualifying my cases as or simply being laggards will completely overlook the political component in policy transfer.

Generally, one may argue that cross-national variations in health policies, as well as “deviation” from the global consensus grow from the differences in the epidemiological conditions, the HIV-infection prevalence, and the quality of health care sector (structural variables), rather than domestic policy environments, shaped by particular conceptions of public good. In both countries the epidemic of HIV/AIDS impacts different populations (mothers and orphans in South Africa, drug users in Russia), and while growing in the magnitude of its impact, contributes to the dissimilarity of

epidemiologic situation. From the health policy standpoint, individual countries should adjust their policies to the specific epidemiological trajectories and characteristics. Policy variations might emerge, for instance, in relation to at what point antiretroviral treatment should be provided regarding the decrease of to the specific number of T-cells. Thus the health crisis will be to be addressed somewhat differently. All this does not mean, however, that the epidemic should be addressed in terms other than public health crisis.

Learning in South Africa

While various elements of the global consensus on the HIV/AIDS treatment were spreading rapidly among African countries, the opportunities for learning were ample.⁷ As several policy experts indicate, prior to 1998 Pretoria was following the international prescriptions. More specifically, in the 1994 National AIDS Plan (NAP) was dubbed the ideal policy drafting process and reflected the majority (if not all) international prescriptions how to curb the pandemic. Russel noted that in the early to mid-1990s Mbeki publicly demonstrated a strong interest in spearheading the fight against AIDS, proactively filling in Mandela's lack of leadership on the issue. His

⁷ For the overview of the pre-Mbeki AIDS policy, see Furlong and Ball 2005 (in Patterson 2005)

vision was compatible with UNAIDS program,” which impressed both Peter Piot of the UNAIDS and AIDS activists.⁸ In other words, the preconditions for learning about the global consensus to emerge after 1996 were all in place. There is no solid way to claim that the country was simply a laggard case in norm diffusion as an alternative explanation of learning failure.

In Chapter 6 I argued that South African understanding and responding to the epidemic was shaped by elite’s conception of common good, known as African Renaissance. It made an entry in the policy environment circa 1998, when the positive achievements of the previous years in following the global consensus were reversed and the process of “unlearning” was triggered. The stress of the Mbeki’s presidency was placed on medicines developed in Africa for Africa, which would both strongly reaffirm the capacity of the former liberation movement to govern, and disprove the Western neo-colonial stereotypes about the native incapacity to solve their local problems using indigenous tools. In the early stage of his presidency it the priority was given to domestic Virodene, in 2004—2006—to alternative and nutritional medicines of various sorts, and after that the focus was placed exclusively on the institutionalization of native medicines. At the same time, the additional opportunities for learning

⁸ Russel 2009: 205—206.

remained ample: several domestic health agencies, mainstream scientists, and many concerned members of the ANC fed enough information to the country's political leadership through both formal institutional channels and informal sources of personal and electronic communication.⁹ The general approach to treatment simply dismissed the results of domestic trials, which proved the efficiency of antiretrovirals¹⁰ and confirmed the adverse effects of abusing nutritional and vitamin supplements.

Having whipped up these attitudes, Mbeki officially yet unwillingly withdrew from the HIV/AIDS debate. Pro-treatment activists attributed this to their protest and litigation campaign; Richard Calland attributed Mbeki's silence to the influence of his spin-doctors and aids, more specifically Bheki Khumalo and Joel Netshitenzhe 2006.¹¹ This silence was prompted by anything but genuine learning, as since 2002 Mbeki and his entourage tried to promote the same views, this time in a more secretive manner. The anonymous report "Castro Hlongwane," controversially regurgitating the substandard views on the pandemic and drugs, was attributed to Mbeki and Peter Mokaba and was traced to a computer in the presidency. It challenged the very assertion of learning from the

⁹ Cherry in Cullinan and Thom 2009: 16—35.

¹⁰ D'Adesky 2004: 183

¹¹ Calland 2006: 191.

biomedical experts: “that only scientists and medical doctors are capable of understanding this medical condition” and epidemiology of HIV and AIDS.¹² Later on, Mbeki remained wishy-washy about his biomedical views when his biographer Mark Gevisser confronted him with more tough questions while preparing the President’s biography. Even after 2007, when the country launched the globally approved large-scale national ARV program, Mbeki shied away from speaking in public about the benefits of this treatment.¹³

More broadly, South African policy environment got primed to overemphasize the importance of genetic medicinal resources and traditional healing practices. In this context, the Cabinet and many provincial health departments did not internalize the global consensus either. In accordance with prescription to find African (indigenous) solutions to the specific incidence of AIDS in Africa, in 2004—2008 Pretoria shifted focus to emphasize the indigenous knowledge and traditional medical practices.¹⁴ According to the Health Minister, African Traditional Medicines (ATMs), apart from their medicinal values defined South Africans as people, values which some mysterious forces attack: “it is this heritage amongst others that we are simply not going to give away purely because of the humiliation

¹² *Castro Hlongwane*

¹³ Russel 2009: 222.

¹⁴ For an illustrative example on such a construction, see Gqaleni et al 2007: 175-188

we get subjected to for the things we believe in.”¹⁵ In general, both public intellectuals and governmental agencies claimed that the emphasis on the indigenous knowledge was counter-hegemonic and anti-colonial in nature and thus affirming the values of African Renaissance.¹⁶ Alternative treatments were pursued not as some nice niche thing to show off the respect for the local cultural heritage, but rather as a serious replacement of the ARVs. This downplayed the gravity of the problem of epidemic and demedicalized it by putting it in the context of poverty. As the solution to the epidemic, it fit in the African Renaissance as an integral part of the resistance to the (neo)colonial attitudes to undermine traditional medicine.¹⁷

Furthermore, in pursuing this policy, the Cabinet actively looked for the alternative international health guidelines compatible with the domestic policy choices on traditional healing. Despite the WHO’s and the World Bank’s international guidelines concerning preservation of traditional knowledge were by and large vague and cautious, the South African government tried to elevate these international guidelines to the prescriptive status, thus trying to justify the switch from ARVs to ATMs and challenging the Western

¹⁵ Quoted from Cullinan and Thom 2010: 145.

¹⁶ See, for instance, Odora Hoppers 2002: 2—22; Pitika Ntuli 2002: 53—66 [all in Odora Hoppers 2002];

¹⁷ See the multiple speeches by Minister of Health (6 September 2007, 23 February 2008, 26 September 2008)

medicines with alternative treatment agenda. Pretoria also promoted ATMs at the international arena. For instance, in 2007 the government hosted the 3rd Ordinary Session of the Conference of African Ministers of Health (CAMH3) in the framework of the African Union (AU) decade on African traditional medicine.¹⁸ The Cabinet invented and began observing African Traditional Medicine Day. The consequences of not learning about the HIV and ARVs and obscuring the connections between treatment and prevention were self-defeating in as much as they made possible the rejection of the safe, efficient and cost-effective mainstream measures to curb the epidemic. This rejection resulted in a grim toll with attributable loss of 334,300 lives with more than 2.2 million life-years lost according to the Journal of Acquired Immune Deficiency Syndrome.¹⁹

Learning in Russia

Unlike many other states, Russian government was never in overt denial of the disease, even in the 1990s, when other numerous pressing social and economic problems overwhelmed Russian politicians.²⁰ As early as in 1990 Boris Yeltsin's pledged to donate a part of his

¹⁸ CAMH 2007

¹⁹ See, for instance, Chigwedere 2008

²⁰ For the overall analysis of the health and AIDS policies in the soviet era, as well as in the post-soviet Russia, see Twigg and Skolnik 2005

autobiography's honorarium to combat HIV/AIDS.²¹ The federal legislature enacted the stream of AIDS-related laws and programs, including the provision for the free access to treatment, even when the official number of HIV-infected population was about 1000 people. At the same time, the constantly growing epidemic (number of the infected population was at least doubling each year starting the late 1990s) and the rapid increase of IV drug users did not translate in an acute epidemiological awareness, let alone understanding HIV/AIDS as the looming public health crisis. In general, prior to 2006 the government has significantly underfunded the response, spending only about five million dollars per year, had no streamlined national policy how to respond to HIV/AIDS, and was vague on acknowledgement what the spread of the disease actually meant for Russia's development etc. Despite overwhelming financial shortcomings and perhaps meager state capacities, the preconditions for learning were all in place. There is no solid way to claim that the country was simply a laggard case in norm diffusion as an alternative explanation of learning failure.

In Chapter 6 I argued that Russian understanding and responding to the epidemic was shaped by national purpose, a genuine concern for the demographic future of the polity, and a public relation

²¹ Yelstin 1990

exploit. The stress on demographic decline was not random. Russian political elite viewed it as the consequence of the state weakness in the 1990s, thus being at odds with the imperative of attaining the strong state as the principal component of national purpose. While the observers correctly praised Putin's acknowledgment of HIV/AIDS as a serious threat to the country, the kind of actions Russian government pursued was not based on the meticulous screening all the available technical information, success stories and best cases, On the contrary, the Kremlin's integrated those elements from the global consensus, which seemed to be appropriate inasmuch as they were consistent with Sovereign Democracy. As a result, Russia failed to learn in two crucial respects.

First, technological efficiency and humanity of harm reduction programs were unambiguously ruled out of the national policy response as highly inappropriate and illegitimate. For instance, the western recommendations about human rights standards and efficiency in treating the vulnerable populations went against the grain of Sovereign Democracy's anti-liberalism. In some radical formulations, the harm reduction programs were rendered more dangerous than HIV/AIDS itself, whose spread was attributed to the "aggressive alien ideology of the western origin." Human rights advocates, with the notable exception of the "domesticated" ombudsman Vladimir Lukin,

were seen as regimes' Other. The more repressive policy choices, characteristic of China and some South-East Asian countries, on the other hand, were presented—without much hard evidence or even appropriate discussion—as great examples of a successful fight against narcotics and the epidemic.²² In the narrow sense, stigmatization can generically explain the difficulties of reaching out to the key risk groups [from below] and having them to come forward to discuss the desired ARV policies. Yet the national strategy should definitely become more pro-active in providing treatment and legal framework, as the focal point of public health prevention practices. This filtering went against various international and domestic biomedical and epidemiological experts' policy recommendations for the government how to follow the global policy consensus on ARV.

Second, the Kremlin understood the looming epidemic of HIV/AIDS as a secondary factor, rather than a public health crisis in its own right—despite the mounting attention and expressive political urgency attached to the topic globally. Dmitry Medvedev in both of his capacities as the President and previously the person responsible for the improvement of Russians' well-being and health, never mentioned HIV/AIDS as a national health crisis even once in all his multiple newspaper interviews, on-line appearances and blogging, of which he

²² Frolova and Zazulin 2003; Elshansky 2003

proved to be so fond of. The special multisectoral Governmental Committee, which in theory was put together to be in charge of formulating the consolidated national strategy to respond to HIV/AIDS as a broad public health crisis remained by and large defunct since its inception. After several year of the initial recognition of AIDS as a potential threat, it became obvious the Russian government did not formulate an adequate strategy in accordance to the international consensus on AIDS.

In general, the overemphasized stress on the law enforcement agencies and return to very harsh, some would say truly repressive measures, in many aspects of domestic political and economic affairs, should be seen as a distinct contribution of Putin's administration, legitimized and propagated by the Sovereign Democracy and engrained in the newly found passion of the Russian political elite--its disdain for liberalism and human rights. Scholars tend to explain the resistance to decriminalization of IDU treatment strategies in general and SNPs in particular in terms of the deeply enrooted legacies of the soviet repressive policies.²³ Indeed, in the late 1980s the legislation adopted several severely restrictive and criminalizing measures, which violated the principle of human rights (including resource-demanding and ineffective mass involuntary testing, deportation of the foreigners

²³ For this explanation see, especially, Wallander 2006.

with HIV, and so on). Yet the overemphasized stress on the law enforcement was significantly punctured in the 1990s (for instance, by Yeltsin's multiple reorganizations of the state security and intelligence community). The Yeltsin-era "quiet" on the epidemic, it can be conjectured here, in case of the ability to dispose the requisite resources was less likely to imply ignoring the human rights issues in addressing the pandemic (there are some evidence of pro-active legislation on this count, including voluntary testing, illegality to fire infected workforce, etc).

EXPLANATION 2: COALITION-BUILDING

A standard account of coalition-building

How does national purpose factor into coalition-building as an explanation of policy transfer processes? If social purpose does not matter, then national elites are likely to utilize international norm in order to broaden their support, or reach out to additional would-be supporters, and cement the prospective support groups together. In case if elite can capitalize on the constituents' negative attitude of the norm, we should expect a consistent effort of providing various resources (financial, logistical etc) to mobilize them into broader anti-norm coalition. In case if the strong coalitions with a "positive" take

on the international norm are already formed, domestic elites are expected to bandwagon them. If social purpose does matters, we should expect domestic elites to stick to the localized interpretation of the policy, and pursue the selective policy promotions even with the danger of losing some political support. In other words, the value of pursuing coalitions and partnerships is likely to be determined on the basis whether or not sub-national groups share elite's commitment to a certain conception of common good, rather than their generic utility in reaching out to those constituents that do not support the contents of social purpose in principle.

According to Jacoby, coalition-building is the most common way how foreign norms and practices achieve domestic prominence. In general, more or less powerful outside norm-givers achieve domestic change by empowering, sponsoring, or simply encouraging existing minority traditions, which become their allies in injecting international norms in domestic contexts and building their general attractiveness. Minority traditions are defined as “domestic movements, parties, or sub-sets of state officials who have pursued, but never achieved a particular institutional solution to an important political problem.” This account focuses on how minority entrepreneurs can sway otherwise recalcitrant governments in changing their policies. Even if the government strongly opposes the proposed international policy for

domestic adoption, if the minority tradition is gaining a momentum, especially if backed up the powerful foreign actors, it is more likely to give in to it.

Similarly, a number of constructivist scholars—especially under the rubric of “boomerang model”—have discussed this kind of international interactions, including a wide range of relationship between norm-takers and norm-givers in terms of networks, social movements, and transnational coalitions.²⁴ Even if there are many domestic norm entrepreneurs, the one with stronger international endorsement, more effective organizational capacities and broader popular appeal, is likely to get an advantage in the contestation.²⁵ In the context of multiple contending norm entrepreneurs, the internationals become a factor helping minority traditions to get an upper hand in the contestation around the principles of policy change. Indeed, a potent transnational network is very important, as it can significantly empower the domestic agents of change and put significant pressures on state governments.²⁶ Here the process of norm diffusion commences with tactical concessions norm-takers (governments) being made to entrepreneurs, which slowly turns into

²⁴ See, for instance, Klotz 2002; Tarrow 2001; Risse-Kappen 1994

²⁵ On empowering credibility and legitimacy of domestic norm entrepreneurs, see, for instance, Risse, Ropp and Sikkink 1999.

²⁶ Keck and Sikkink 1998; Thomas 2001

adopting a new norm. In this case, even if governments strongly reject the instrumental utility and principled value of the incoming norm, they still might adopt a policy in question for a number of any strategic reasons. In reverse, the governments might side with domestic forces opposing the global consensus, especially if society is split in its reaction to the incoming policy. Ultimately, this explanation underscores that it is the calculation of specific political gains, rather than a technical value of the policy, that drives the policy transfer.

The caveat is that in examining some empirical cases of coalition-building, the power of individual leaders is often deemed pivotal, if not incredibly exceptional. Particular coalition-building instances in the process of policy transfer may reflect leader's principled beliefs, his/hers personal political tastes, ideological likes and even some deeply engrained idiosyncratic convictions. Political leaders might empower some marginal and radical domestic and international actors to express, promote, and apply their substandard [in my case biomedical] convictions in the country. Thus, some deviations in anticipated course of how the process of coalition-building occurs may be attributed to the leadership factor, making the partnership choice seemingly contingent and singular. In the context of this project, political leaders do not stand alone: they belong or even spearhead domestic elites, which generate and propagate a certain

conceptions of common good. Thus, political leaders as individuals are expected to act on this conception to promote their self-efficacy and self-esteem. In other words, powerful leaders should be analyzed in conjunction with domestic level of analysis.

Coalition-building in South Africa

The relevant literatures suggested that instrumental coalition-building around HIV/AIDS policies in South Africa was hardly possible. In the context of post-apartheid state the conflict around AIDS was “a battle between certain state and non-state actors to define who has the right to speak about AIDS, to determine the response to AIDS, and even to define the problem itself.”²⁷ In other words, the governmental strategy of coalition-building clearly was not driven by the anticipated value of political gain.

Prior to Mbeki administration, the government purposefully cooperated with major domestic health-related actors to formulate and implement the appropriate responses to the epidemic. In the early 1990s, the National AIDS Coordinating Committee of South Africa (NACOSA) developed a national AIDS strategy, bringing on board a diverse group of consisting of NGOs, AIDS-service organizations

²⁷ Schneider 2002: 145.

(ASOs), government officials, business representatives, private sector, political parties, individual AIDS activists, and trade unions. They all played a major role in drafting the 1994 National AIDS Plan.²⁸ During the Mbeki presidency, the broad pro-treatment coalition included increasingly influential and diverse groups, such as the Treatment Action Campaign (TAC, founded in 1998), The South African National NGO Coalition (SANGOCO, an umbrella body of South African NGOs consisting of provincial and sectoral affiliates, operating since 1995), the Nelson Mandela Foundation, the Congress of South African Trade Unions (COSATU, operating since 1985), the National Economic Development and Labour Council (NEDLAC, the peak-level representative and consensus-seeking body, providing negotiation arena for business, labor, government and domestic community-level organizations).

In Chapter 6 I argued that South African understanding and responding to the epidemic was shaped by the conception of common good known as African Renaissance, while TAC spearheaded the movement to bring Pretoria to compliance with the global consensus. It is really puzzling that despite long-standing and increasingly powerful and angry “pro-treatment” coalition in South Africa

²⁸ For the detailed history of SA organization response to HIV/AIDS, see IDASA 2004e: 10—17.

combined with an obvious governmental oversensitivity to the criticism of their HIV/AIDS policies, South African elites were reticent of any links and relationships with TAC. The TAC's domestic and international popularity, prominence, and legitimacy strongly suggested the rapidly decreasing instrumentality of using the resistance to the norm of ARVs in order to seek broader domestic coalition. By 2004 not building coalitions with AIDS activism was counterintuitive given that such an alliance could have been instrumental in building up [or at some later point restoring] governmental credibility in the international arena.²⁹

In essence, TAC was a domestic minority tradition, which in the end was able to achieve its own programmatic goals. The newly made international icon Zachie Achmat and other TAC's leaders toured the United States to celebrate their victory and appeared in the glamour magazines. Although the government made significant tactical concessions, they signalled changes in neither what kind of actions Pretoria considered appropriate, nor how government evaluated the benefits of various domestic groups to ally with. Pretoria remained very hostile to health activists pushing for the universal access to ARVs, accusing them with disloyalty to South African

²⁹ Save for the brief *tacit* alliance described in previous chapter.

transformation process.³⁰ The independent AIDS dissident Andre Brink (not to be confused with a prominent writer!), at some point being on the payroll of the Rath Foundation, claimed that the presidency secretly put him in charge of building an organizations counterweight to TAC, which was supposed to express the dissident viewpoint.³¹ Thus, Pretoria did not adopt the global consensus on the ARV treatment politically as a resource to broaden its own support and win its increasingly influential opposition.

Second, Pretoria directly supported domestic and international health-related organizations, which revised or resisted the international definition of epidemiology, despite their relative organizational weakness in garnering popular support and financial liability. The Cabinet empowered multiple domestic and international actors to express their radicalized political views, as well as promote and apply their substandard biomedical convictions in the country. The Cabinet-sponsored strange alliance of the dissident Treatment Information Group (TIG, Andre Brink), the vitamin-peddling Rath Foundation, the Traditional Healers Organisation of South Africa (THO, Nhlavana Maseko) with its stress on the native medicines, the South African National Civic Organisation (SANCO, Mlungisi Hlongwane), the

³⁰ Fourie 2006: 119.

³¹ See Cullinan in Cullinan and Thom 2009: 96.

South Africa's National Association of People Living with HIV/AIDS (NAPWA), and soon to become universally reviled Mbeki's biographer and spin-doctor Robert Suresh Roberts, whom media scorned as the permanently pouting Caribbean clown, aka Ron the Con.³² This type of coalition-building lacked any obvious political benefits and was by and large counterintuitive, as most of the organizations named above either had been marginalized internationally, or were simply very weak and needed the strong support and sponsorship themselves. Giving these organizations both direct and indirect support looked counterproductive and did not conform to the political calculations to win uncommitted or broaden its political base.

The government began to support alternatives to ARV treatment, despite its decreasing benefits for garnering domestic and international political support and the apparent lack of instrumentality in coalition-building with traditional healers. Although the estimated number of on the ground healers fell somewhere in 200,000 to 350,000, they had neither a strong organizational structure, nor international support, nor consistent (permanent) and active clientele.³³

³² Cullinan in Cullinan and Thom 2009: 104-106.

³³ For the attempt to disaggregate the generalized claims about how many South Africans use the services of traditional healers and in what circumstances, see Ashforth 2005: 51.

Although the official statistics claimed that up to 70 or 80% of South Africans used the services of traditional healers, independent studies projected the majority of South Africans to have a good understanding of ARVs by 2005.³⁴ On the other hand, it is true that even skeptically-minded reporters, which were highly uncomfortable with unscrupulous people profiteering from the desperate people's hope to get cured from AIDS, often were not ready to question *muthi*. Genetic medicinal resources and healing practices were described as a legitimate part of their culture, "something that always been there, a familiar belief," not to be simply discarded.³⁵ Wider audiences viewed ATMs and ARVs as equal, and kept purchasing the expensive native medicines even after the ARVs had been made free in the public sector.

While the tangible political benefits of resisting the norm of treatment were far from obvious, the Cabinet kept sending mixed and confusing messages to its constituents.³⁶ Government decision to allow the partial rollout of the ARVs in November 2003 it by and large undermined the value of pursuing the closer alliance with traditional healers. At the same time, traditional health organizations did not overcome the differences in outlook on the value and appropriate regulation of traditional medicines, bringing on organizational

³⁴ Nachega et al 2005: 196—201; Ndaki in Cullinan and Thom 2009: 143.

³⁵ Ndaki in Cullinan and Thom 2009: 145.

³⁶ Chopra et al 2006. Thus, the audiences could have been swayed either way.

rivalries, personal skirmishes, and conflicting biomedical views. At one point, the Department of Health became the major donor of NAPWA, an organization boasting 90 branches with estimated 300,000 members (the numbers are highly questionable).³⁷ The Cabinet remained NAPWA's donor, despite their lack of legitimacy and coherent and inconsistent outlook on traditional versus western biomedicines.³⁸

Third, South Africa reinvented itself as a global champion of anti-colonialism. In this context, an optimal option would have been to forge coalition with Brazil, India, and Thailand as they were rising as the principal challengers to the pharmaceutical sector. These countries would have been the natural ally for the South African government in widening its international coalition legitimacy and prestige in the Third World. At the same time, the government chose to play no active role in the creation of the new generation of AIDS organizations.

Although the relevant literature acknowledges the South African contribution to the foundation of UNGASS and GFATM, this

³⁷ Cullinan 2010: 105.

³⁸ For instance, in his October 2001 address to *South African Partnership against AIDS* NAPWA's Thanduxolo Doro insisted that fighting poverty along with nutritious recovery and discrimination elimination was a necessary precondition of mitigating the impact of the epidemic (see NAPWA Resolutions, 1st NAPWA Congress, 25-27 May 2001). As late as in 2007, Nxesi still insisted that the focus of treatment should not be ARVs, rather traditional medicines and holistic healing (see *Mail&Guardian*, 9/16/2007). At the same time, NAPWA's leaders also argued in favor of the antiretroviral treatment as a part of the comprehensive strategy to respond to the looming health crisis.

contribution was very modest, especially comparing to the support provided by other countries.³⁹ The choice of not building any international coalitions proactively was counterintuitive, as the members of this coalition widely used the anti-colonialist discourse and wished to curb the power of the Global North.⁴⁰ However, joining any of these global coalitions also implied to promote generics at the expense of traditional medicines and to give full backing to the free delivery of the antiretroviral in the public sector at the expense of marketization. Obviously, Pretoria was not ready to make these choices.

Coalition-building in Russia

Russian government pursued two types of coalitions. The first one with transnational nongovernmental actors, and the second one with various Eastern European and Eurasian states. In both coalitions Russia wanted to play a position of a leader, principal, rather than a follower. In neither case, coalitions were pursued to widen the Kremlin's support base or win the uncommitted. Rather, joining

³⁹ See Patterson and Ciemenis 2005: 182.

⁴⁰ See *The Third World Quarterly* special issue, including the contributions of Nana Poku, Fantu Chery, Caroline Thomas and Mark Heywood. See also the Amsterdam Statement on "burden sharing" between developed and developing world, 't Hoen 2002: 34.

coalitions to combat HIV/AIDS helped the Kremlin to deploy its vision of great power on a very practical level.

In 2003 the experts from the Center of Strategic and International Studies (CSIS) and the Brookings Institute specified the desired components of partnership between the Kremlin and the civil society. They called the Russian government to promote policies that not just tolerate the existence of the non-governmental organizations, but rather encourage its growth and robustness via giving generous tax incentives, setting up training programs for NGOs' leaders, increasing financial resources available to them, and, last but not least, creating trust and predictability in the working relationships between state officials and NGOs.⁴¹ These goals were extensive and ambitious, but reasonably attainable given the palpable, but brittle, presence of the civil society in Russia.

At the domestic arena, Russian approach to the coalition-building with the nonstate actors was highly selective: the Kremlin was willing to accept the civil society's role as a "technical" provider of AIDS-related services, while it was reluctant to engage civil society as the independent advocacy and political actor. On the one hand, Putin particularly endorsed a whole range of health NGOs, strengthened their resolve and even contributed to the building of a

⁴¹ See the series of Center of Strategic and International Studies (CSIS).

large informal coalition, uniting European NGOs, the EU-sponsored programs and domestic “non-human rights” organizations.

Transatlantic Partners against AIDS (TPAA), one of the leading transnational health advocacy organizations, boasted its connections with the government and the Duma’s deputies. This evidence is to a certain degree consistent with the null hypothesis that elites may use the global norm as a resource to widen a coalition for their political support and win uncommitted. On the other hand, the Russian government during Putin’s presidency purposefully legislated to obliterate the political and financial independence of many NGOs through both severe bureaucratic restrictions and making governmental sponsorship available to the approved domestic recipients. In general, both sharp liberal critics of the Kremlin and its conservative supporters acknowledge that the Kremlin’s approach to NGOs was definitely connected to the central tenets of Sovereign Democracy. The doctrine prescribed keeping the direct governmental control over non-state actors involved in politics and advocacy, preventing the foreign meddling in the domestic politics by curtaining the foreign funding and sponsorship available to the domestic recipients.

The Kremlin used the epidemic as a public relation exploit in an attempt to aggrandize its efforts in response to the epidemic. The

coverage of the issue-area was meant to be truly impressive. The informational company “Be in touch with your health” was aired on the national TV in all Russian regions, and supplemented with special shows and ads, discussing the nature of the domestic epidemic. By 2009, the federal and regional TV channels televised the nine educational videoclips more than 50 thousand times, while private channel REN-TV aired 9 films about people living with HIV/AIDS based on real characters.⁴² According to Ellen Mickiewicz, the state-controlled TV channels to a large extent tended to characterize the epidemic as an outside problem, which has been successfully dealt with. In her study of the ordinary citizens’ perception of the official coverage of AIDS, “Russians spoke of the state channels as reducing real and necessary news about HIV/AIDS in Russia by blending it in with HIV/AIDS as a global problem,” and “alter what they know to be true to give a false impression of security.”⁴³ Furthermore, Mickiewicz’s focus groups felt that the private coverage of the epidemic was perceived as far more accurate and grave. Not surprisingly, the compliance to the foreign norm, or even underscoring the role of international organizations and nonstate sector was not part of the domestic informational campaign.

⁴² See Goliusov’s 2008 report on the implementation of the NPP “Health.”

⁴³ Mickiewicz 2008: 45, 47. For the role of TV in Russian politics, see Lipman and McFaul 2010.

Thus, the Kremlin wanted to convey an image of successful and unique struggle against AIDS among the global failure to deal with the pandemic, which is consistent with its imagery of the great power. At the global arena, the Kremlin tried to establish an extensive and credible reputation as one of the key norm entrepreneurs in global health and sought to be a leader in certain coalitions. As Judith Twigg put it, “A newly assertive Russia has been determined to reclaim its position as both regional hegemon and global power. To this end, Russia has been anxious to cast itself as part of the solution—rather than part of the problem—when it comes to key issues of global social and economic development.”⁴⁴

Since the early 2000, the Russian government maintained normal connections with various international organizations, including the World Bank, the Global Fund, UNAIDS, and the United Nations specialized agencies. While the increase in cooperation with these organizations was generally expected in the context of the growing incidence of HIV infection, certain political choices looked somewhat less conventional. The imagery of the restored great power status required Russia to be a donor, not a recipient. Russia was willing to part with much needed financial resources to buy its way into the global club. In 2003 Russia rejected \$150 million offered by the World

⁴⁴ Twigg 2007: 10

Bank while recognizing that even Brazil—which was viewed as a model response by the key medical professionals and bureaucrats—was using its loans. Several years later, in February 2007 President Putin committed \$270 million to the Global Fund. Given the dismal state of Russian health care in public sector, the quality of its response to the health crisis, and the capacity to lead at the international arenas, all these choice look counter-intuitive from the vantage point of benefits.

There was definitely a strong agenda for the leadership and coalition-building in the Central and Easter Europe and Central Asia. Russia pursued a more assertive international role by sponsoring and organizing several regional HIV/AIDS initiatives, reinventing its role as a leader in the Commonwealth of Independent States (CIS). Starting from 2006 Russia hosted three regional Eastern Europe and Central Asia AIDS Conferences (EECAACs) on HIV/AIDS. These gatherings most definitely were not designed to serve as policy arenas for fostering international cooperation. Less sedately put, especially if compared to such gatherings as International AIDS conferences, these regional initiatives did not perform any meaningful political or technical function. Russian action in the context of the G-8 Summit in St. Petersburg attracted most international attention and received a high approval. President Putin used Russia's presidency to elevate

infectious diseases and global health as one the core priorities of the summit. Beyond the G-8, Russia tried to take the position of the global leader for the Health Leadership Forum (G-8 health ministerial meetings), reaching out to China, India, Brazil, South Africa, and Mexico.⁴⁵

In contrast to this described gamut of activities, any international action was avoided, when the Kremlin felt it would play the role of the international follower. For instance, Russian government could have chosen to embark on the global movement to keep the pharmaceutical sector accountable and pursue closer alliances with the developing world. Such a form of international action was important for the strategic coalition-building to pursuing the parallel importation from Brazil or India, and for the closer alliance with transnational civil society to keep the issue visible on the global agenda. Yet doing so would have implied that the status of great power and domestic sustainability had not been achieved.

EXPLANATION 3: EXTERNAL PRESSURES

A standard account of external pressures

⁴⁵ Morrison and Kates 2006: 6.

How does social purpose factor in external influences as an explanation of policy transfer processes? If national purpose does not matter, then we should expect national elites to interact strategically with external entrepreneurs of a certain international norm/policy based on the calculation of costs and benefits. If the costs associated with the resistance to the international policy are high, we should expect domestic elites to comply with the international norm. If the costs of non-compliance are low, we should expect the domestic elites to resist international policy initiatives. In case if national purpose does matter, we should expect a selective adaptation of external demands filtered through national purpose, and selective resistance even when external pressures are high and the costs of non-compliance can be potentially detrimental for domestic elites.

The external pressures mechanism of norm diffusion portrays policy transfers in terms of powerful external norm-givers being able to displace domestic norms and policies by the international ones, even against the strong domestic opposition to it. There is no doubt that in some cases the outsiders become, to borrow a phrase, “causal behemoths,” unquestionably dominating what happens in the domestic policy landscape and determine the process and outcomes of policy

transfer.⁴⁶ In this line of reasoning, the mounting external pressures and incentives from outsiders lead to the substitution of previous domestic practices.

Observers tend to attribute primacy in norm diffusion to the powerful outside norm-givers, such as the World Bank, the United States, and others as they provide much needed financial and logistical support. Circa 2003 new generation of AIDS health organizations started providing direct material incentives to comply with the international consensus on antiretroviral policy by allocating generous grants both to the governments and local ASOs to curb HIV/AIDS. In countries, where domestic capacities are lacking altogether, we can expect that the suppliers of the pharmaceutical products and the international technical expertise to play an overwhelming role in domestic HIV/AIDS politics. Recipient states are expected to be invariably interested in financial influx and not particularly concerned about challenging the external arrangements for the domestic governance of HIV/AIDS. This proposition may be empirically correct for some individual cases such as Zambia and Mozambique, whose compliance with the global norms depended on the strong external

⁴⁶ See, for instance, Vachudova (2008) on the European Union's impact on the countries of Central and Eastern Europe

presence and support, while implementation depended on some domestic material factors.

The analytical power of this explanation, however, raises many questions. First, it is unlikely that external pressures alone displace local policies, especially in the absence of credible domestic norm promoters, among others. Scholars constantly remind us that “external influences can almost never have any real purchase unless they are joined together with domestic influences,”⁴⁷ or that assigning too much value to the power of external pressures will bracket the domestic politics altogether.⁴⁸ For instance, some smaller countries like Turkmenistan, Malawi, Swaziland, and Cuba were able to enact domestic policies at odds with the rising global consensus (even though it significantly exacerbated the epidemiological gravity of the epidemic).⁴⁹

Second, for the nations with relatively meager financial capacities and infrastructure policy displacement is a function of foreign pressures mediated by the resource exchange patterns. In this context, the donor dependency might diminish domestic incentives to muster a strong HIV/AIDS health care response in the public sector. In

⁴⁷ Jacoby 2006

⁴⁸ The opponents of the economic neoliberal policies sometimes tend to exaggerate the power of the international financial institutions in the HIV/AIDS issue-area and seem eager to trigger domestic contestation against them (which brings us back to the contestation and collation-building politics. See, for instance, O'Manique 2004.

⁴⁹ Poku 2000:291

these cases we might expect to observe the compliance with the external prescriptions, but actually not see it. In this light, it is not surprising that many pro-treatment health activists start arguing against the overreliance on the external financial and logistical help.

External pressures in South Africa

In essence, the South African Cabinet did not experience any real external pressures—separate from the transnational pro-treatment coalition’s—as there are really no strong material sanctions for non-compliance with the international donors and health organizations. Thus, the costs of non-compliance remained low (vague opprobrium, bad image in mass media, and so on). In Chapter 6 I showed that South African response to the epidemic was shaped by African Renaissance.

Following the African Renaissance’s prescriptions, South Africa showed variation to the externally prescribed models of curbing HIV/AIDS. While the government picked up a fight against the WHO, MDGs and UNGASS and tried to put GFATM under its own control as it could have empower the Cabinet’s “AIDS-drug lobby” rivals, it was more willing to accommodate the model of policy approach as promoted PEPFAR. The simple explanation for this is that using PEPFAR was able to alleviate governmental concern about

disempowering the economy for the sake of delivery (marketization), while the other models had some conditionality inbuilt in their prescriptions, which went against the grain of the African Renaissance.

In 2000 the presidential spokesperson Mankahlana asserted that the pharmaceutical sector misused information about the pandemic, exaggerated the positive effects of antiretroviral medicines, and benefited from the unmitigated scourge of AIDS.⁵⁰ Pretoria intentionally pitched itself against not only against the international and domestic “AIDS-drug lobby,” but also against the WHO’s and UNGASS’s recommendations and guidelines.⁵¹ According the reports the country made no progress regarding various international guidelines regarding the universality of treatment as a part of global consensus on the HIV/AIDS. The Health Minister was either trying to downplay the role of Millennium Development Goals reports, thus clearly shying away from the globally articulated responsibilities. According to the Resident Coordinator of UN SA country team, “[t]he first South African MDG Report was released in September [2005], but the Government chose to make this a very low-key event.”⁵²

Second, Pretoria intentionally tried to resist the pressures of the Global Fund in empowering the local AIDS Service Organizations

⁵⁰ Mankahlana 2000

⁵¹ ITPC 2006: 40

⁵² RCAR 2005

essentially circumventing the government. Instead of simply disbursing the money to the domestic AIDS service organizations on the basis of their merit and prior performance, the Cabinet tried to either control who gets international health-related grants, or seize them to redistribute as it saw fit.⁵³ In 2002, Mbeki attacked the Global Fund for “flouting its own rules by funding AIDS programs without proper government approval.”⁵⁴ The biggest controversy arose when Mbeki announced that the government would seize a grant targeted specifically to the province of KwaZulu-Natal (KZN) and add it to the general South African grant. For more than a year, the government stalled the influx of international resources, refused to sign the agreements with GFATM in order to finalize the funds transfers.⁵⁵ In result, the South African grant portfolio went almost exclusively to the country’s Cabinet-level departments.⁵⁶ The Cabinet’s governing of GFATM’s Country Coordinating Mechanism (CCM), led by Jacob Zuma and Health Minister Dr. Manto Tshabalala-Msimang (MTM) was entirely dedicated to this goal.⁵⁷ The Country Coordinating Mechanism (CCM) was not supposed to be another controlling and

⁵³ SA UNGASS country report (02 May 2006)

⁵⁴ “South African President Mbeki Criticizes UN AIDS Fund Grant”, available at <<http://www.thebody.com/content/policy/art20730.html>>

⁵⁵ van der Vliet 2004: 79

⁵⁶ Available at

<<http://www.theglobalfund.org/programs/country/?countryid=SAF&lang=en>>

⁵⁷ ITPC 2005: 80—81.

distributive body, a layer between these levels. As late as in 2006 The International Treatment Preparedness Coalition (ITPC) reported that the GFATM CCM was not yet functioning [appropriately].⁵⁸

On the other hand, in South Africa both governmental and nongovernmental programs funded by PEPFAR were running quite smoothly. PEPFAR worked with South African National Defence Forces (SANDF), Department of Correctional Services (DCS), and Department of Social Development (DSD), as well as nongovernmental organizations, such as Nurturing Orphans and AIDS for Humanity (NOAH), Hope Worldwide (HW), Society of Family Health (SPH), Centre for the AIDS Program of Research in South Africa (CAPRISA).⁵⁹ Once the government received a generous PEPFAR funding, it changed its strategy and decided to scale-up the ARVs, seemingly giving in to the international pressures. This funding, however, significantly mitigated the resource scarcity to achieve the universality of treatment. Nicoli Nattrass argued that the external financial inflows to South Africa had an adverse effect on public sector, as they essentially had taken all the pressure off the national Department of Health to use available domestic resources, to protect

⁵⁸ ITPC 2006: 38

⁵⁹ See, Theo Smart, “*PEPFAR working closely with South African government to support HIV treatment and care*”, Monday, June 13, 2005; Theo Smart, “*PEPFAR-funded NGOs present progress at 2nd South African AIDS Conference*,” Monday, June 13, 2005.

its private sector, and keep its public sector weak. In other words, the availability of these resources alleviated neoliberal concerns of diverting too much domestic resources predominantly to ARVs, which is compatible with the marketization as the core component of the national purpose. This means that the Cabinet government continued and gave in to the international pressures very selectively as it saw fit.

External pressures in Russia

In a way similar to South Africa, Russia did not experience any definitive external pressures as there were really no strong material sanctions for non-compliance with the global consensus on ARVs. Yet in Russia we would not expect external pressures to play a significant part of norm transplantation in a broader sense. While external pressures definitely occur, they might have played a limited role in pushing the Kremlin into the partnership with the transnational AIDS actors. According to Judith Twigg, “the international community has played a significant role in shaping the dynamic of Russia’s response, and its continued involvement—including a strong bilateral U.S. presence—will remain an important determinant of Russia’s

success.”⁶⁰ Yet the role of international community had to be highly qualified.

There is only some scant evidence concerning international prescriptions and perhaps very limited pressures, regarding the domestic distribution of international grant. the Ministry of Health created the Country Coordinating Mechanism (CMM) to procure the fourth round of grants from the GFATM. The CCM was not supposed to be another controlling and distributive body on behalf of the national governments, but rather a layer between these levels—directly empowering domestic civil society sector on the grounds of the merit of their proposals and prior performance on the ground. As the typical critique goes, the Russian government did not grant the country’s CMM an independent political authority, but instead chose to control the procurement of international resources to combat to HIV/AIDS, and even hijacked some programs as it saw fit.⁶¹ More specifically, the Global Fund-sponsored harm reduction programs were geographically limited to 10 out of 86 Russia’s regions, while the consequences even in the covered regions became uncertain.⁶²

Highjacking the Country Coordinating Mechanism (CMM) was

⁶⁰ Twigg 2007

⁶¹ The third round of funding (the GLOBUS project) was achieved without governmental supervision and arguably was more effective. Some observers claim that the government decided to create the CMM as a response for the growing influence and autonomy of the civil society organizations.

⁶² Talbott 2005

stipulated by the sovereign democracy's clearly articulated imperative not to allow the foreign control of the domestic civil society implemented through the generous and unaccounted foreign financial influx not controlled by the state authorities.

On the other hand, pursuing highly unique health policies can be explained referring to the profound institutional legacies of the communism, which under certain conditions could have been re-entrenched again.⁶³ Ambrosio argued that dealing with looming AIDS crisis for Russia is a precondition to play a great-power role, which its political elite started craving—as expressed in its national program for the country.⁶⁴ However, before Russia started tackling the issue of HIV/AIDS more assertively the soviet legacy of the country's self-perception as a great power had been notably uprooted. Thus, by no means it should have over-determined the following ARV policies, while keeping open a range of potential options and strategies for the decision-makers in the 2000s. Russia's self-image as a great-power--one of the most notable and palpable components of the soviet legacy--did not fully disappear from the national policy environment after the end of the Cold War. However, it did not manifest itself a relevant factor in prompting Russian politicians to deal with looming AIDS

⁶³ See, for instance, Wallander 2006

⁶⁴ Ambrosio 2006: 2

crisis until it was re-legitimized as a component of a new national purpose. In sum, it can be said that it was the new conception of common good--Sovereign Democracy –which reintroduced these legacies rather than mitigated them.

CONCLUSION

In this Chapter, I located social purpose as a potential intervening variable in the context of relevant literatures. It also examines whether or not social purpose as an intervening (and explanatory) variable is robust to country-specific and individual-level explanations. The principal caveat to any overarching cross-national argument about policy transfer is that in the overwhelming majority of the developing countries the state capacity and state efficiency is extremely limited.⁶⁵ This project focuses mostly on political choices that affect AIDS policies even prior to the implementation stage. On the other hand, problems that seem to be purely implementational might be inherently linked with these prior political choices.

Indeed, in any country which lacks the requisite amount of resources, is plagued with corruption, possesses insufficient technical

⁶⁵ On the importance of building strong state institutions to fighting HIV/AIDS effectively see, for instance, Fukuyama 2004.

expertise and suffers from the shortages of professional doctors and nurses, a deviation from the global consensus may simply be an inability to implement the policy appropriately due to the weakness and inefficiency of the available state institutions.⁶⁶ Amy Patterson summarizes these challenges. The state capacity might be undermined by the interlocking phenomena of the incapacitating role of traditional patriarchy in Africa, the dependence on international financial resources, the lack of consistency in political and economic commitments, the inability to design and implement long-term treatment and prevention programs, and even the civil society challenging states' authority.⁶⁷ This list can be easily expanded to include regional and national factors. At the same time, state capacity and efficiency are important, but not over-determining factors. Just how simply having enough money to throw at a problem may not mitigate its adverse impacts, strong political commitments in certain cases may overpower the institutional deficiencies of the state, and reallocate scarce resources.⁶⁸ In Russian case, for instance, the yearly

⁶⁶ Material argument can be deployed as an excuse for the poor governance and policy performance: we do whatever they can to the best of the ability in the policy environment plagued by the multiple constraints.

⁶⁷ For an excellent edited volume, examining the African HIV/AIDS politics from the perspective of the African states' efficiency and capacity and documenting various crucial aspects how the absence of capacity and efficiency debilitated responses to the epidemic at a state level, see Patterson 2005

⁶⁸ Westhuizen (2005), for instance, discusses in details the South African government's largest acquisition of the conventional-weapons in the history of the

delays in procuring and disbursing the antiretroviral treatment were clearly a result of endemic corruption, lack of state capacity and coordination among various segments of bureaucracy. Yet elite's choice to uptake more social responsibilities in providing public services (as a part of its conception of common good) definitely contributed to the unintentional failure in the timely procurement and disbursement of pharmaceutical products. In the following final Chapter—Conclusion--I summarize my empirical and theoretical results, focusing on the effects of social purpose on public policy. The final note here concerns material capacities as an additional alternative explanation.

country in the absence any direct military threat, while choosing to spend next to nothing on the looming domestic pandemic (in 1999).

CHAPTER 9. CONCLUSION

Empirical analysis of data and evidence regarding the content of national responses to HIV/AIDS crisis in Russia and South Africa reveals the strong impact of social purpose. Social purpose becomes causally relevant to the extent it underpins certain kinds of policy actions and responses, which were not entailed to the same extent in the absence of social purpose or prior to its emergence. Studying social purpose is relevant not only to spell out the kinds of actions the ruling elite considers appropriate, but also to ascertain the kinds of actions domestic policy environment is likely to stimulate and sustain.

To examine the analytical purchase of social purpose this work gauges its impact on the externally introduced policy recommendations, guidelines, and advice. This move also helps to keep social purpose as the explanatory variable separate from the subsequent policy choices (dependent variable). Today intergovernmental organizations and transnational professional community play increasingly important roles in formulating sophisticated policies, providing expertise, and assisting in service delivery. In this context, international prescriptions become almost universally recognized as instrumental to improve domestic policies,

including public health. Yet under certain circumstances a strong societal commitment to the particular conceptions of common good might politicize international public policy, or even become hostile to it. I am not claiming, of course, that social purpose can solely explain the processes of policy transfer and the reasons why some issues get politicized. Instead this dissertation maps out the empirical ways in which social purpose does make a difference and summarizes its effects theoretically.

My findings resonate with prior scholarship on HIV/AIDS politics. For instance, they speak to Michael Bosia's analysis on the neoliberal reform in France and its impact on the contestation around the HIV/AIDS policies.¹ In a series of academic articles, Bosia documented how the change in the conception of common good (or, "moral ambition" in his parlance) had an adverse impact on the spread of AIDS through the blood supply, which resulted in the bitter contention around the principles of public health. The framework adopted in this dissertation conceptualizes French transition from an exceeding government presence to neoliberalism and austerity as a clear case of the elite's attempt to redefine, or alter the public accepted conception of common good. Cutting social spending, looking out for the profitable blood products ensued. Activists understood an adverse

¹ Bosia 2005; Bosia 2006.

impact on the blood supply and thus the spread of AIDS in connection with the ethical mission of the Republic. Since the domestic policy environment was not shaped or significantly influenced by neoliberal concerns, social contestation among the participants in public health followed. Thus, the analysis of socially accepted conceptions of common good might help find and explain patterns in contestation around AIDS politics well beyond Russia and South Africa.

At the same time, this dissertation advances the current study of deep-seated political determinants of public policy, that is, what guides the politics of policymaking. Using social purpose I can explain specific types of policy actions governments pursue in order to curb AIDS. If racial/ethnic boundaries, according to Evan Lieberman, help explain the aggressiveness and quickness of the response to the epidemic, the attention to social purpose help us explain governmental politics of policymaking and the nature of societal contention around it well beyond this initial timeframe. More generally, bringing social purpose to the analysis of AIDS complements the abundant anthropological and sociological approaches to the pandemic.²

² For the review of scholarly research on AIDS in Africa, see Schoepf 2010; for an array of sociological and anthropological approaches, see Ndinga-Muvumba and Pharoah 2008.

BRINGING SOCIAL PURPOSE INTO EFFECT

How does social purpose emerge and how does it become socially acceptable? In the previous chapters I traced in details how Russian and South African political elites constructed and legitimized their conceptions of common good, which were respectively labeled “Sovereign Democracy” and “African Renaissance.” In this part, my dissertation expanded traditional academic focus placed on subnational, smaller identity entrepreneurs and social movements as the agents of change to the exploration of elite’s commitment to a certain conception of common good, which is legitimized via the perception that country’s political sustainability depends on providing it. When successful, intentional and systematic efforts to present national identities as vital for the existence and survival of the state as an autonomous political organization in the context of one-party dominance implied their public acceptance. Thus, both countries met criteria under which the role of national purpose was expected to matter most.

This dissertation examined the empirical content of the social purposes in relation to its political distinctiveness, economic empowerment, and the imagery of its desired systemic position. This

dissertation also ranked social purpose in two countries, delineating between:

1) commitments (more narrow examination of domestic elites linking their self-efficacy and self-esteem to some specific conceptions of common good);

2) the extent to which the influence on policy environment (a broader examination of the kinds of action embedded by elites in a given political context and considered appropriate and legitimate); and

3) the extent to which the articulated substantive components of a given social purpose are reflected at the broader level of collective articulations, mostly popular culture.

The concept of Sovereign Democracy encapsulates three important themes: the ultimate political value of a strong state power (vlast, gosudarstvennost) with a special stress on its social responsibility and economic delivery in the context of state-led economy, and the necessity to reassert and actively exercise Russia's great power status in global politics. Not only these particular themes (strong state, state-led economy, and great power complex) clearly stand out as three most important components in the Russian political discourse, but they were turned into prescriptions how to protect the country as an autonomous political organization. An integral part of

Sovereign Democracy--the discourse of the “wild 1990s”--pulled together various collective articulations together in order to appeal to broad audiences. The chief proponents of the Sovereign Democracy pitched themselves against the liberals (the Other), who allegedly strove to dismember the state, absolve it from any economic obligations for its citizens, and “put Russia back on her knees.” Except for its liberal critics, Sovereign Democracy received by and large positive response in Russian society.

In South Africa, “African Renaissance” at first was received with criticism and confusion. Some outside observers not involved into its conceptual development, beset African Renaissance as “the new ideology of self-deception, the refusal to acknowledge the current realities that parameter even our own political space.”³ This assessment is too tough and does not give African Renaissance a full justice. Yet similarly critical or pessimistic kinds of responses for a while seemed to be pervasive in South Africa. It implied that many in the country were simply not buying into the notion. Combined with the limited ability of Mbekiites to influence policy environment, including press, it implied a significant limitation in deploying the African Renaissance in society. However, from reading the canonic texts and supporting publications, three themes stand out very clearly.

³ Mandaza 2001: 137

African Renaissance prescribed to find and utilize only the local solutions for local problems (indigenouness), to promote the economic empowerment of South Africans based on boosting the private sector and relying on market economy strategies rather than governmental delivery and redistribution (marketization), and to claim a moral continental—and perhaps global—leadership (ubuntu). Chief proponents of African Renaissance pitched themselves against Afro-pessimists and neo-colonialists, all scheming to keep South Africa subjugated to the West and denying the country its subjectivity.

Besides some casual interest in tracing domestic debates about elite, nation, and their purposes, the analytical value of social purpose might be challenged. To keep separate social purpose as the explanatory variable with the subsequent policy choices (dependent variable) I examined the impact of social purpose on external policy initiatives. In the previous chapters, I broke down the broad notion of social purpose into several distinct graspable components.

Subsequently, I demonstrated how and why each specific component of social purpose affected certain indicators of health policy response (See also Table 1.4 in Introduction). In the following two sections I briefly summarize the causal impact of social purpose on public policies.

THE EFFECTS OF SOCIAL PURPOSE ON PUBLIC POLICY

What kind of effects does social purpose have on public policy? The provision of the antiretroviral treatment is a fundamental obligation domestic elites should carry out in order to ensure the physical survival of their polities. Very few politicians would deny that having a healthy domestic population underpins economic development, human and national security. As the HIV/AIDS policy hinges on the technological solution (the availability of treatment) it is reasonable to expect its relatively smooth and comprehensive diffusion. Yet even purely technical choices that unconditionally follow international prescriptions may challenge domestic legitimacy and sovereignty, accountability and influence, thus might become unacceptable for domestic policy-makers.⁴ Thus, in some circumstances adopting international prescriptions could trigger a highly politicized reaction. I argue that such a reaction is linked to the deployment of social purpose. This dissertation asserts that social purpose informs the kinds of actions the ruling elite considers appropriate, and helps ascertaining how domestic policy environment interacts with international AIDS initiatives.

⁴ Mbembe 2001: 75—76.

In other words, national purpose made possible a range of potential policy responses, which otherwise would have been either less viable, or not pursued as a core components of national responses to HIV/AIDS. For instance, the indigenous turn in South African policy environment as a part of elite-driven conception of common good (African Renaissance) legitimized their wider use and aimed to institutionalize governance of native medicines, or African traditional healing practices. Otherwise, this kind of actions would have been on the margins of the national policy response, rather than in its center. Similarly, in Russia the harsh restrictions of the harm-reduction approach, syringe and needle exchange programs (SNP) and medically assisted therapy (MAT), as well as persecution of its promoters, became possible as a result of as inhibiting liberal values in the context of domestic policy environment dominated by the value of strong state (Sovereign Democracy).

My findings indicate that the effects of deploying social purpose are observable in all three dimensions of HIV/AIDS policy (dependent variable). Policy-makers evaluate the benefits of international policy initiatives from the vantage point of their commitment to a certain conception of common good. This “sorting through” impacts on defining the guidelines of the provision of a particular public good (treatment), which populations should benefit or

be excluded from the consumption of public good (universality of access), and who gets to participate in shaping public health policy (partnership). All this does not mean that governments either stop providing at least some rudimentary services in regard to HIV/AIDS, or fully reject and deviate from the global consensus. While some observable variations are very exotic and eye-grabbing, others are more subtle, the impact of social purpose is quite palpable. I delineate between five main effects of social purpose in public health policy.

The first effect of social purpose stems from the fact that the uncurbed epidemic is a direct challenge to the ontological security of a state a functioning political organization. This implies that elites are likely to frame and respond to the epidemic as a threat to their conception of common good. The nature of HIV/AIDS threat in the global arena is defined as a massive public health crisis. Of course, Russia responded to AIDS as a health crisis. Yet this response was in large part a reaction to the perceived weakening of the state. For Russia the threat of HIV/AIDS implied the weakening of the state mediated by the looming demographic crisis and the growing consumption of narcotic substances. For South Africa the threat of HIV/AIDS implied a challenge to its elite commitment to distinctiveness. Since South African elites wanted to uphold the uniqueness of the country, they became less willing to use multiple

international recommendations and more willing to give support to the alternative and traditional medicines as either a full substitute, or an addition to the western biomedical products.

The second effect of social purpose is related to the developed conceptions of how much (if any) common good should be provided. Thus the ideally non-exclusive and non-rivalrous provision of public goods might be challenged by the considerations which populations should be protected in the first hand, who should benefit or be excluded from the consumption of public good and why.

In general, Russian government did not question the necessity of the universality of access and consistently worked to scale up the treatment access among general populations. Once the nature of threat was formulated, Russian government committed to a massive domestic procurement and disbursement of the life-saving medicines. At the same time, the shortages and yearly scandals about the effective and uninterrupted provision of the antiretroviral treatment was better explained by other factor, including state efficiency, pervasive corruption, lack of coordination etc. In South Africa, the Cabinet clung to the idea that spending should be limited and thus was reluctant to provide it as too expensive. The alleged toxicity and unsafeness of the international pharmaceutically products added to the reluctance to

ensure the universal access to treatment. The South African government was resolute to use complementary micronutrients and nutritional supplements for prevention of the development of opportunistic diseases. As a result, both Pretoria and provincial health officials consistently stalled the national roll-out programs on the ground and tried to block the universality of access to treatment in principle.

The third effect of social purpose stems from the fact that conception of common good is pinned on the understanding of who the contending political actors are. Thus, it helps define which actors and on what terms get to participate in shaping the policy as governmental partners. Elites are likely either to exclude those actors which embrace an alternative conception of common good, or enter only highly contingent and unstable partnership relations with them.

The Kremlin generally overemphasized the role of the government in providing services to the population single-handedly, without any help of private sector or nonstate organizations. Government shied away from any meaningful engagement of the private sector, and forcefully imposed strict legal boundaries under what conditions non-governmental organizations can participate in curbing the epidemic. In Russian political imagery neither private

sector, nor nonstate sector were perceived as trustworthy allies: the former was at odds with the goals of economic development and the latter was susceptible to embrace the liberal conception human rights. In South Africa, the Cabinet believed that civil society sector was tainted by the latter's role in an unconditional support of international (read Western) policy initiatives as related to treatment. The tacit partnership of November 2003 was soon broken by the government. As a result, the Cabinet preferred to forge connection with organizations advocating alternative and complementary treatment, including a counter-epistemic community of health dissidents, strongly questioning connections between HIV and AIDS. The government seemed to use selectively partnership with the "mainstream" international organizations only when they were instrumental in alleviating the burden of the public sector and thus did not impinge on the conception of common good.

The fourth effect of social purpose is related to the extent to which elites are successful in making their conception of common good legitimate among wider audiences, or the whole nation. If social purpose becomes truly nationally legitimate, it is likely make policy choices intersubjectively shared, or simply undoubted. On the other hand, disagreements about the legitimacy or content of common good

are likely to prompt societal clashes around the desired principles of public policy.

At minimum, elite's commitment to act on a particular iteration of social purpose might be supported by pure enforcement. Their success, especially if matched by the broader level of public articulation as expressed in the means of popular culture, strongly implies a public acceptance of the proposed policy responses how to deal with health crises. At maximum, domestic policy environment significantly shaped by social purpose can simultaneously empower various elite-friendly groups, and disempower various nongovernmental organizations, civil society groups, and social movements with the set of demands conflicting and inconsistent with the official policy responses. In this context, alternative behavioral choices might be advocated either moderately, or not observable all. Overall, the strength and limits of political mobilization in given societies is likely to be shaped by the extent to which alternative behavioral choices become either delegitimized, or simply not considered as viable in a given domestic policy environment. Societal disagreements might stem from elites' failure to influence domestic policy environment.

Since Mbeki was never fully able to dominate domestic policy environment, civil society sector was able to advocate and convince many that alternative policy choices were not only practical, but more humane and morally superior. Putin and his entourage were much more successful in influencing domestic policy environment. As a result, the official policy responses in regard to HIV/AIDS received much less criticism and precluded a broad mobilization of the groups with conflicting demands in regard to its health policy. Thus, many observers from the non-governmental sector, including the representatives of Transnational Alliance against AIDS (TPAA), repeatedly gave an overall positive evaluation of the Russian response to the pandemic. In stark contrast, the majority of South African AIDS initiative continuously received very bad press.

The fifth effect of social purpose is that it prompts a relatively coherent and elaborate policy response, which pulls together previous uncommitted domestic health policy initiatives and approaches. Because HIV/AIDS has many implications, in general it is likely that domestic policy responses will not have a common denominator in the absence of strong commitment to a single conception of public good.

As many policy experts indicate, for the most part of the period following the democratic transitions, Pretoria was following the

mainstream international policy initiatives. This portrayal glosses over the fact that the HIV/AIDS policy in the 1990s was far from coherent and contained somewhat conflicting trends. For instance, the 1994 National AIDS Plan (NAP) reflected the majority of international prescriptions how to curb the pandemic, the drafting process included all the relevant stakeholders and was dubbed “ideal.” At the same time, this period was punctuated by series of grave setbacks: the first democratically elected President Nelson Mandela did not exercise any leadership on the issue, the scarce funds were allocated towards very dubious projects (infamous play *Sarafina II*, or developing a domestic substitute to AZT), and so on. Since Mbeki took power, the government not only publicly demonstrated a strong interest in spearheading the fight against AIDS, but also began to tackle the issue exclusively in terms of local socioeconomic problem requiring a set of unique solutions.

Somewhat similar dynamic characterized the situation with HIV/AIDS policy in Russia. Not only in the 1990s, when the rate of the epidemic was low, but even during the years when the infection rates grew almost exponentially (1999—2006), Russian awareness of the pandemic and seeming willingness to deal with it remained low. Yet this inaction did not mean that the government did not learn or adopt some international recommendations. For instance, the notion of

the universality of treatment was reflected in several federal laws. In 2006 President Vladimir Putin quickly put the issue of HIV/AIDS high on the federal political agenda and demonstrated his government's undeniable commitment to deal with the epidemic. Thus, in the absence of the coherent and consolidated social purpose, different bureaucratic agencies are expected to pursue their narrowly defined tasks, not implying any wider social goals.

THE EFFECTS OF SOCIAL PURPOSE ON POLICY TRANSFER

What kind of effects does social purpose have on policy transfer mechanisms? To make more specific theoretical claims about the effects of social purpose on policy responses and fit them in the relevant literatures, this dissertation locates social purpose in the three causal mechanisms of policy transfer (see Chapter 8). I do not claim, of course, that learning, coalition-building and external pressures become less relevant as causal explanations. Rather, I assert that the strength and consistency in political elites' commitment to the formulated social purpose may sharpen the theoretical predictions based on policy transfer mechanisms.

In terms of learning, governments may learn about and adopt different policies for different reasons and at different speed rates. So

much is well known. This dissertation generally argues that domestic decision-makers at the top of political hierarchy and in more modest policy positions may learn via sorting the core questions of public policy through the broader set of political obligations they explicitly commit to. When given international answers how to respond to the HIV/AIDS crisis, elites are likely to “filter” them to select the responses most similar to the kind of choices informed by their conception of common good. Put differently, elites for sure learn about the content and potential applicability of international approaches. Yet they do not choose to adopt them without qualifications. Social purpose is likely to define what kinds of actions will inspire elites to take action. All this entails a profound impact on many specific indicators of domestic HIV/AIDS policy.

In both cases, this early policy discrepancy did not predetermine what political elites are likely to learn and why, the opportunities for either the wholesale or partial adoption of the international consensus remained wide left wide open. However, with the advent of social purpose, elites chose to act in accordance to its contents and discredit the kinds of actions elites consider inappropriate. Thus, governments in both countries were not simply inspired by all the best cases from an externally available pool of recommendations and best cases. All this gave critical observers the

solid ground to indicate Russia's unwillingness to "draw on the successful experiences of many countries around the world that have met this challenge to ensure the availability of treatment in a manner that is fair, efficient, and sustainable."⁵

Coalition-building perspective typically gives us a strategic view of policy transfer: governments may adopt or challenge the policy in order to broaden their support, or reach out to additional would-be supporters, and cement the prospective support groups together. When governed by legitimate social purpose, governmental choices in policy coalitions are not motivated by the desire to expand domestic and international political support. In fact, building coalitions with their opponents presents elites with an additional challenge to their legitimacy, sense of self-efficacy and esteem. Rather, coalition-building is likely to be conditional on whether or not these coalitions "fit" in and can maximize governmental delivery of the common good.

In this context, it becomes clear why South African Cabinet remained reticent of any links and relationships with increasingly powerful "pro-treatment" coalition, without resorting to an individual-level explanation. Despite the expected value of improving its international reputation, South African elites' commitment to its conception of common good collided with those actors, which

⁵ TPA 2003: v.

determined to bring Pretoria to compliance with the global consensus on the basis of a different conception of common good. Russian government was aggressive in regard to domestic civil society sector, especially those organizations actively engaged in advocacy and protest. Yet the Kremlin accepted the nongovernmental organizations as somewhat subordinate actors inasmuch as their activity and service did not impinge on the principles of Sovereign Democracy. In this context, my research explained limited and conditional partnership with the groups committed to the different conception of common good was possible.

In terms of external pressures, or substitution, Jacoby notes that it “occurs when external actors attempt to promote and execute specific reforms on their own... when outsiders intervene directly, without active insider support, to push a reform they favor.”⁶ It is clear, however, that international HIV/AIDS policy initiatives are not likely to be meaningfully and uniformly enforced by international actors across the globe. Thus, the wholesale adoption (or the radical norm displacement, to use constructivist parlance) is not likely to be observed. Elites can certainly calculate both benefits of conforming to the external influences and potential costs of challenging them. This means that elites will adopt certain international policy

⁶ Jacoby 2006: 630

recommendations (for instance, in the context of issue-linkage), or back down in case if the deviation from the global baseline causes an international opprobrium. Yet elites are less likely to fall for external pressures policies if this external pressure is challenging their conception of common good.

It can be reasoned that the sufficient material capacities are likely to be translated into independent health policies challenging the global consensus. Although both countries are expected to be sensitive to the external recommendations and assistance both Russia and South Africa chose to act as international leaders in response to HIV/AIDS. Russia and South Africa both attempted to promote specific policy choices in response to HIV/AIDS on their own, thus pitching themselves as pro-active policy international entrepreneurs. The Kremlin wanted to assert itself as a regional rule giver and sponsor. Pretoria in a similar, but more exotic ways, tried to give international publicity and empower traditional healing movement, after its experiment with counter-epistemic community of health dissidents had collapsed.

EMPIRICAL SUMMARY OF HIV/AIDS POLICIES

In Chapter 2 I documented how international medical community, intergovernmental organizations, international financial organizations, specialized health agencies and AIDS advocacy and service organizations came to a shared understanding about the best measures to fight HIV/AIDS. At first, the efforts to promote this understanding globally were plagued at the international level with such detrimental problems as the necessity to conduct the permanent fundraising campaigns, donor fatigue in the developed states, constant squabble about the appropriate amount of donations as related to the country's GDP, preference for bilateral funding versus multilateral programs, uncoordinated effort in suggesting health policy guidelines, erratic supply of very expensive and relatively ineffective drugs, and the inability of various international actors to overcome their parochial political goals. However, around 1996 the majority of health-related global actors finally agreed what the HIV/AIDS treatment policy should be like and started actively promoting this understanding. This became possible due to the combined effects of the biomedical technological breakthrough, steadily decreasing prices of antiretrovirals, and the simplification of treatment regimen. WHO, UNAIDS, UNGASS and other influential international actors combined their efforts to promote this vision of the desirable response to the threat of HIV/AIDS.

In the nutshell, the global consensus on the HIV/AIDS treatment comprises of three identifiable components. First, rolling out the approved antiretroviral treatment is a core policy prescription. AIDS therapy shifts what used to be a terminal disease to a chronic health condition and is absolutely indispensable for the dramatic improvement of patients' health and prolonging their lives as productive members of society. Questioning the biomedical consensus of ARVs (and HIV and AIDS hypothesis), and/or enforcing the substandard protocol at the expense of treatment constitute a significant deviation from the standardized policy prescription. Second, the universality of access to treatment is an additional policy prescription intended to ensure access to ARVs to all the infected population. Denying the universality of treatment and excluding principal vulnerable populations will make the containment of the disease more difficult, if not outright impossible. Third, partnership with relevant stakeholders is helpful in shaping domestic policy responses to specific conditions on the ground. Other potential benefits include diversifying services, improving outreach, and simply psychologically supporting patients and vulnerable groups. Restraining partnerships and excluding relevant stakeholders might be conducive to massive policy failures and create an environment, in which health issues might not get enough attention.

In regard to the first core component of HIV/AIDS policy, Russia subsumed the issues of HIV/AIDS under the looming demographic crisis and generally linked it to the growing consumption of narcotic substances, rather than addressing the epidemic as a public health crisis in its own right (Indicator 1a). The standardized protocol (in terms of what line of products should be purchased reflecting Russian state of epidemic) was often breached, despite the broad acknowledgement of the life-saving role of the ARVs. The consistent supply of the pharmaceuticals to the patients almost every year was punctuated by month-long delays (Indicator 1b). Although neither the Kremlin, nor the public health officials overtly questioned the importance of generic medicines for the check on prices and increase of coverage, the whole issue was downplayed in favor of developing and import-substitution pharmaceutical industry (Indicator 1c).

In the context of the Russian epidemic the most vulnerable group was the intravenous drug users (IDUs), which in the 2000s became the principal driver of spreading the epidemic into the generalized population. The vulnerable populations definitely were disadvantaged, as the federal legal provisions stimulated criminalization of IDUs and put this group at the mercy of the lower-level bureaucrats and officials from the so-called power ministries

(Indicator 2a). The government accepted the necessity of the universality of access to treatment and consistently worked to scale up the treatment access as evident in massive financial commitments to procure these medicines (Indicator 2b). At the same time, many highly visible representatives of Russian political elite and public health officials aggressively advocated very narrow prevention strategies, confined to abstinence, family values, and health lifestyle. Simultaneously, such legitimate prevention strategies as the substitute treatment and syringe exchange was by and large excluded from the preferred measures in protecting population's health (Indicator 2c).

The Kremlin generally overemphasized the role of the government in curbing HIV/AIDS and intentionally downplayed the significance and desirability of partnership with other sectors. There is strong evidence to suggest that the National Priority Projects—framework of disbursing resources and transforming the health care sector—was designed to fend off the potential role civil society and private sector could have played in domestic health policies. In the context of the expansion of the public sector and massive financial inflows into health care projects, it shied away from any meaningful engagement of the private sector (Indicator 3a), and forcefully imposed strict legal boundaries under what conditions non-

governmental organizations can participate in curbing the epidemic (Indicator 3b). At the same time, Russia embarked on and even initiated a number of international AIDS initiatives, which are typically seen as commendable from the vantage point of international health community (Indicator 3c).

South Africa elites questioned the sameness of epidemiological trajectory of the disease in South Africa and the rest of the world. Elite framed the domestic epidemic as a local developmental problem in opposition to the lifestyle issues and the massive consumption of various toxic drugs, including the antiretroviral medications, in the West (Indicator 1a). As an extension of this reasoning, political elites worked to revive and institutionalize the alternative/indigenous medicines as either a full substitute to the “toxic AZT,” or an addition to the western biomedical products in general (Indicator 1b). In this context, Pretoria for a while was not quite concerned about the rapid importation and domestic disbursement of generic pharmaceutical products; in certain cases even attempting to prosecute the smugglers of generics (Indicator 1c).

In South African epidemiological conditions the most vulnerable group was mothers carrying the virus giving birth to children. Despite the decreasing prices and increasing efficiency and

safety of the available drugs, for a while the Cabinet was reluctant to offer mother to child prevention transmission program as too expensive and pharmaceutically unsafe (Indicator 2a). To keep the expenditures in the public sector as minimal as possible to prevent the undesired overspending, both Pretoria and provincial health officials consistently stalled the national roll-out programs on the ground and tried to block the universality of access to treatment in principle (Indicator 2b). The South African government was resolute to use complementary micronutrients and nutritional supplements for prevention of the development of opportunistic diseases (Indicator 2c).

The critical evidence suggests that Pretoria chose to protect the relatively successful private sector and did not employ it to improve the dismal health care conditions in the public sector (Indicator 3a). The prospects of partnership with civil society sector were tainted by the latter's support of the western biomedical products. As a result, the Cabinet preferred to forge connection with organizations advocating alternative and complementary treatment (Indicator 3b). Finally, Pretoria legitimized a counter-epistemic community of health dissidents and worked to make traditional healers to be recognized internationally. The government seemed to accept partnership with the international organizations, only when their financial assistance

alleviated the burden of the public sector, which was consistent with the emphasis on slashing the spending (Indicator 3c).

FEEDBACK LOOPS AND IMPLICATIONS

The findings of this dissertation strongly suggested that social purpose can filter outside norms, guidelines, and policy initiatives. It also confirmed that both countries of my analysis politicized the epidemic, often with adverse consequences for public health. It is reasonable to believe that in the long term domestic social purpose can be profoundly affected by the public policy outcomes it helped generate. Studying the feedback loops can be very informative in terms of the exogenous sources of social purpose change, yet this objective definitely goes beyond the scope of this research project. In this section I venture to offer only some cursory remarks.

Overall, in the longer term, given the visible (positive or adverse) result of the implemented policy, national purpose may be profoundly affected by the feedback effects challenged and transformed if the policy turned out to have negative consequences, or reinforced if the results are positive. The next step in the research is to extend my dissertation work investigating to what extent, when, how and why does the success or failure to adopt international policy

prescriptions trigger a feedback effect on social purpose. In other words, it would be helpful to probe the conditions under which the success or failure to adopt international policy prescriptions triggers changes in the content of national identities and contestation around them.

South African part of the story is more or less straightforward. President Thabo Mbeki's HIV/AIDS policies definitely contributed to the discrediting of the African Renaissance. In Russian case, the adverse effects of repressive measures, and multiple inefficiencies did not generate a massive retaliation against Sovereign Democracy. New President Dmitri Medvedev offered a new master-narrative of "modernization" (with 4-I emphasis on institutions, investments, infrastructure, and innovations), mildly assaulting Sovereign Democracy. Some political observers believed it to replace the imagery Sovereign Democracy in Russia, of which Medvedev had been publicly critical on several occasions. In this context, it would be informative to examine whether or not new political emphases are likely to generate any real consequences for changing the current public health policy.

It is also interesting to examine these variations as related to the degree to which elite-driven social purposes are embedded at the

broadest level of collective articulations, that is, popular culture. South African elites, for instance, failed to embed marketization as a pivotal component of national identity in the collective articulations. All Russian political obligations, on the other hand, were strongly embedded in the collective articulations as expressed in the country's popular culture. The role and importance popular culture plays in supporting national identity in general has been widely acknowledged in the relevant literature (Iver Neumann, Ted Hopf). More inductive work to be pursued in order to ascertain the degree to which conceptions of common good remain supported because of being embedded in public culture.

CONCLUSION

In general, my empirical findings indicate that in responding to the domestic epidemic of HIV/AIDS the key decision-makers in both countries have significantly transformed the international standardized policy prescriptions to the pandemic in accordance with the social purpose's content. Rather than treating the epidemic as a pressing public health issue, the imperatives of Sovereign Democracy prompted the government to respond to the domestic epidemic as the issue of demographic survival and criminal drug abuse, subsequently eroding

the human rights component from the official policy, overstretching the public financial commitments, and refusing to cooperate with private sector. The imperatives of African Renaissance reframed the HIV/AIDS epidemic as a local developmental problem to be addressed by local solutions only. As a result, the Cabinet supported substandard biomedical treatments and indigenous healing practices, consistently resisted the universal and free rollout of treatment in order to avoid the undesirable governmental expenditures and redistributive strategies. In both countries, these policy choices resulted in the adverse consequences for public health and prompted a protracted contestation among various state and non-state actors around the principles of the desired public health policies.

BIBLIOGRAPHY

- ‘T Hoen, Ellen 2003. TRIPS, Pharmaceutical patents and access to essential medicines: Seattle, Doha and Beyond. In *Economics of AIDS and Access to HIV/AIDS Care in Developing Countries: Issues and Challenges*, edited by T. B. J P Moatti, B Coriat, Y Souteyrand, J Dumoulin and Y A Flori. Geneva: ANRS - Agence Nationale de Recherches sur le Sida (National Agency for Aids Research), France.
- A/60/262. 2006. Setting National Targets for Moving Towards Universal Access. Political Declaration on HIV/AIDS. New York: United Nations General Assembly.
- A/60/737. 2006. Towards universal access: assessment by the Joint United Nations Programme on HIV/AIDS on scaling up HIV prevention, treatment, care and support. New York: United Nations General Assembly.
- A/RES/55/2. 2000. Millennium Declaration. New York: United Nations
- A/RES/55/2. United Nations Millennium Declaration. Resolution adopted by the General Assembly, 8 September 2000
- A/RES/S-26/2. 2001. Declaration of Commitment on HIV/AIDS "Global Crisis — Global Action". New York: United Nations General Assembly (UNGASS).
- Abdelal, Rawi. 2000. *National Purpose in the World Economy: Post-Soviet States in Comparative Perspective*. Ithaca: Cornell University Press.
- Acharya, Amitav. 2004. How Ideas Spread: Whose Norms Matter? Norm Localization and Institutional Change in Asian Regionalism. *International Organization* 58 (2):239-275.
- Adler, Nanci. 2005. The future of the soviet past remains unpredictable: The resurrection of Stalinist symbols amidst the exhumation of mass graves. *Europe-Asia Studies* 57 (8):1093-1119.
- Afanas'ev, Mihail. 2009. Rossijskie jelity razvitija: zapros na novyj kurs: Fond Liberal'naja missija.—“Russian developmental elites: the request for the new course”
- AFR/RC50/R3 .Promoting the Role of Traditional Medicine in Health Systems: A Strategy for the African Region. World Health Organizations, regional committee for Africa, adopted at Ouagadougou, Burkina Faso, 28 August - 2 September 2000
- AFR/RC50/R3. Promoting the Role of Traditional Medicine in Health Systems: A Strategy for the African Region
- Ainsworth, Martha, and Waranya Teokul. 2000. Breaking the silence: setting realistic priorities for AIDS control in less-developed countries. *Lancet* 356:55-60.
- Ainsworth, Martha. 1998. Setting government priorities in preventing HIV/AIDS. *Finance & Development* 18--21.
- Ajulu, Rok. 2001. Thabo Mbeki's African Renaissance in a Globalising World Economy: The Struggle for the Soul of the Continent. *Review of African Political Economy* 28 (87):27 - 42.
- Allensworth, Wayne 1998. *The Russian question : nationalism, modernization, and post-Communist Russi*. Lanham, Md.: Rowman & Littlefield.
- Alonzo, Angelo A., and Nancy R. Reynolds. 1995. Stigma, HIV and AIDS: An exploration and elaboration of a stigma trajectory. *Social Science & Medicine* 41 (3):303-315.
- Altman, Dennis. 2003. HIV and Security. *International Relations* 17 (4):417-427.

- Ambrosio, Thomas. 2006. The Geopolitics of Demographic Decay: HIV/AIDS and Russia's Great-Power Status. *Post-Soviet Affairs* 22 (1):1-23.
- Ashforth, Adam. 2005. Muthi, medicine and witchcraft: regulating 'African Science' in post-apartheid South Africa? *Social Dynamics* 31 (2):211 - 242.
- Ashforth, Adam. 2002. An Epidemic of Witchcraft? The Implications of AIDS for the Post-Apartheid State. *African Studies* 61 (1).
- Åslund, Anders, and Michael McFaul, eds. 2006. *Revolution in orange: the origins of Ukraine's democratic breakthrough*. Washington, DC: Carnegie Endowment for International Peace.
- Atun, Rifat, and Michel Kazatchkine. 2010. The Global Fund's leadership on harm reduction: 2002-2009. *International Journal of Drug Policy* 21 (2):103-106.
- Badri, Motasim, Gary Maartens, Sundhiya Mandalia, Linda-Gail Bekker, John R. Penrod, Robert W. Platt, Robin Wood, and Eduard J. Beck. 2006. Cost-Effectiveness of Highly Active Antiretroviral Therapy in South Africa. *PLoS Medicine* 3 (1):48--56.
- Ball, Andrew Lee. 2007. Universal access to HIV/AIDS treatment for injecting drug users: Keeping the promise. *International Journal of Drug Policy* 18 (4):241-245.
- Barnard, David. 2002. In *The High Court Of South Africa, Case No. 4138/98: The Global Politics Of Access To Low-Cost AIDS, Drugs In Poor Countries*. Kennedy Institute Of Ethics Journal 12 (2):159-174.
- Barnett, Michael. 1999. Culture, Strategy and Foreign Policy Change: Israel's Road to Oslo. *European Journal of International Relations* 5 (1):5-36.
- Barron, Peter, and Josianne Roma-Reardon, eds. 2008. *South African Health Review 2008*. Durban: Health Systems Trust.
- Behrman, Greg. 2004. *The Invisible People: How the U.S. Has Slept Through the Global AIDS Pandemic, the Greatest Humanitarian Catastrophe of Our Time* Simon and Schuster.
- Berestov, Anatolij, Julija Shevcova, and Nikolaj Kakljugin, 2007. Ostorozhno – metadon! Zamestitel'naja metadonovaja terapija v «Programmah snizhenija vreda».
- Bond, Patrick. 2001. South Africa's agenda in 21st century global governance. *Review of African Political Economy* 28 (89):415 - 428.
- Bond, Patrick. 2003. *Against global apartheid: South Africa meets the World Bank, IMF, and International Finance*. 2 ed. Lansdowne: UCT Press.
- Bongmba, Elias K. 2004. Reflections on Thabo Mbeki's African renaissance. *Journal of Southern African Studies* 30 (2):291 - 316.
- Bosia, Michael J. 2005. "Assassin!" AIDS and Neoliberal Reform in France. *New Political Science* 27 (3):291 - 308.
- Bosia, Michael J. 2006. *Written in Blood: AIDS Prevention and the Politics of Failure in France*. *Perspectives on Politics* 4 (4):647-653.
- Brink, Andre. 2000. *Reinventing a Continent: Writing and Politics in South Africa 1982 - 1998*: Zoland Books.
- Brink, Anthony. 2000. *Debating AZT: Mbeki and the AIDS drug controversy*. Pietermaritzburg: Open books.
- Brink, Anthony. 2007. *In the International Criminal Court at The Hague Criminal Complaint against Abdurazzack "Zackie" Achmat*. Cape Town: Treatment Information Group.
- Brink, Anthony. 2008. *"Just Say Yes, Mr. President": Mbeki and AIDS*. Cape Town: Open Books.
- Brudny, Yitzhak M. 1998. *Reinventing Russia: Russian Nationalism and the Soviet State, 1953-1991*. Cambridge: Harvard University Press.

- Burkhalter, Holly. 2004. The Politics of AIDS: Engaging Conservative Activists. *Foreign Policy* 83 (1):8-14.
- Busch, P. O., H. Jorgens, and K. Tews. 2005. The global diffusion of regulatory instruments: The making of a new international environmental regime. *Annals of the American Academy of Political and Social Science* 598:146-167.
- Buse, Kent, and Gill Walt. 2000. Global public-private partnerships: part I – a new development in health? *Bulletin of the World Health Organization* 78 (4).
- Buse, Kent, and Gill Walt. 2000a. Global public-private partnerships: part II – what are the health issues for global governance? *Bulletin of the World Health Organization* 78 (5).
- Butler, A. 2005. South Africa's HIV/AIDS policy, 1994-2004: How Can it be Explained? *African Affairs* 104 (417):591-614.
- Bye, S. N., and M. F. Dutton. 1991. The inappropriate use of traditional medicines in South Africa. *Journal of Ethnopharmacology* 34 (2-3):253-259.
- Caldentey, Esteban Pérez. 2008. The Concept and Evolution of the Developmental State. *International Journal of Political Economy* 37 (3):27-53.
- Calland, Richard. 2006. *Anatomy of South Africa*. Cape Town: Zebra Press.
- Cameron, Edwin. 2005. *Witness To AIDS*: I. B. Tauris.
- Campbell, David. 1992. *Writing Security: United States Foreign Policy and the Politics of Identity*. Minneapolis: University of Minnesota Press.
- Carmody, Pdraig. 2002. Between Globalisation and (Post) Apartheid: The Political Economy of Restructuring in South Africa. *Journal of Southern African Studies* 28 (2):255 - 275.
- Carnaghan, Ellen. 2007. Do Russians Dislike Democracy? *PS: Political Science & Politics* 40 (1):61-66.
- Carnaghan, Ellen. 2007. *Out of Order: Russian Political Values in an Imperfect World*. University Park: Pennsylvania State University Press.
- Carter, Michael. 2004. Uganda's success against HIV due to abstinence, behaviour change and community, not condoms: NAM.
- Chadaev, Aleksej. 2005. *Putin: Ego ideologija*. Moskva: Evropa.
- Chapman, Michael. 2006. *Art Talk, Politics Talk*: University of KwaZulu-Natal Press.
- Checkel, Jeffrey. 2001. Why Comply? Social Learning and European Identity Change. *International Organization* 55 (3):553--588.
- Chin, James. 2007. *The AIDS Pandemic: The Collision of Epidemiology With Political Correctness* Radcliffe Publishing.
- Chipkin, Ivor. 2003. 'Functional' and 'Dysfunctional' Communities: The Making of National Citizens. *Journal of Southern African Studies* 29 (1):63 - 82.
- Chipkin, Ivor. 2003. The South African Nation. *Transformation* 51:25-47.
- Cochrane, Michel. 2003. *When AIDS Began: San Francisco and the Making of an Epidemic*. London: Routledge.
- Cocks, Michelle, and Anthony Dold. 2000. The role of "African Chemists" in the health care system of the Eastern Cape province of South Africa. *Social Science & Medicine* 51:1505-1515.
- Cocks, Michelle, and Valerie Møller. 2002. Use of indigenous and indigenised medicines to enhance personal well-being: a South African case study. *Social Science & Medicine* 54 (3):387-397.
- Coetzee, JM. 2001. *Stranger Shores: Literary Essays*. New York: Viking.
- Coetzee, JM. 2003. *Elizabeth Costello*. New York: Viking

- Correa, Carlos M. 2002. Implications of the Doha Declaration on the TRIPS Agreement and Public Health. Geneva: Department of Essential Drugs and Medicines Policy (EDM), World Health Organization.
- Cullet, Philippe. 2003. Patents And Medicines: The Relationship Between TRIPS And The Human Right To Health. *International Affairs* 79 (1):139-160.
- Cullinan, Kerry, and Anso Thom, eds. 2010. *The Virus, Vitamins & Vegetables: The South African HIV/AIDS Mystery*. Johannesburg: Jacana Media.
- d'Adesky, Anne-Christine. 2004. *Moving Mountains: The Race to Treat Global AIDS*. London: Verso.
- Danzon, Patricia M., and Adrian Towse. 2003. Differential Pricing for Pharmaceuticals: Reconciling Access, R&D and Patents. *International Journal of Health Care Finance and Economics* 3 (3):183–205.
- Davies, Rebecca. 2007. Rebuilding the Future or Revisiting the Past? Post-apartheid Afrikaner Politics. *Review of African Political Economy* 34 (112):353 - 370.
- Diala, Isidore. 2001-2002. Nadine Gordimer, J.M.Coetzee, and Andre Brink: Guilt, Expiation, and the Reconciliation Process in Post-Apartheid South Africa. *Journal of Modern Literature* 25 (2):50-68.
- Diala, Isidore. 2003. Andre Brink and the Implications of Tragedy for Apartheid South Africa. *Journal of Southern African Studies* 29 (4):903 - 919.
- Diepen, Maria van. 1988. *The National Question in South Africa*. London and New Jersey: Zed Books.
- Doherty, Tanya, and Mark Colvin. 2003/2004. HIV/AIDS. In *Access to Antiretroviral Therapy* edited by P. Ijumba, D. C and N. A. Durban: South African Health Review.
- Dolby, Nadine. 2006. Popular Culture and Public Space in Africa: The Possibilities of Cultural Citizenship. *African Studies Review* 49 (3):31-47.
- Dolowitz, David, and David March. 2000. Learning From Abroad: The Role of Policy Transfer in Contemporary Policy-Making. *Governance* 13 (1):5-24.
- Drezner, Daniel W. 2001. Globalization and Policy Convergence. *The International Studies Review* 3 (1):53-78.
- DST. 2006. *African Traditional Medicines: The Role of Indigenous Knowledge Systems in Bioprospecting and Product Development in South Africa*. Pretoria, South Africa: National Office of Indigenous Knowledge Systems, Department of Science and Technology.
- Duesberg, Peter H., and Bryan J. Ellison. 1990. *Is the AIDS Virus a Science Fiction? Immunosuppressive Behavior, Not HIV, May Be the Cause of AIDS* In *Policy Review*. DC: Heritage Foundation.
- Duesberg, Peter, Claus Koehnlein, and David Rasnic. 2003. The Chemical Bases of the Various AIDS Epidemics: Recreational Drugs, Anti-viral Chemotherapy and Malnutrition. *Journal of Biosciences* 28 (4):383-412.
- Dunlop, John B. 1993. *The Rise of Russia and the Fall of the Soviet Empire*: Princeton University Press.
- Durrant, Sam. 2005. The Invention of Mourning in Post-Apartheid Literature. *Third World Quarterly* 26 (3):441-450.
- Eboko, Fred. 2005. Patterns of Mobilization: Political Culture in the Fight Against AIDS. In *The African State and the AIDS Crisis*, edited by A. S. Patterson. Aldershot: Ashgate.
- ECDC. 2010. *Progress on Implementing the Dublin Declaration on Partnership to Fight HIV/AIDS in Europe and Central Asia*: European Centre for Disease Prevention and Control, World Health Organization.

- Edwards, S. D. 1986. Traditional and modern medicine in South Africa: A research study. *Social Science & Medicine* 22 (11):1273-1276.
- EECAAC. 2006. Summary Statement from the Conference Organizing Committee: Eastern European and Central Asian AIDS Conference.
- EECAAC. 2008. Evaluation Report. In Second Eastern Europe and Central Asia AIDS Conference. Moscow, Russia.
- Elkins, Zachary, and Beth Simmons. 2005. On Waves, Clusters, and Diffusion: A Conceptual Framework. *The Annals of the American Academy of Political and Social Science* 598 (1):33-51.
- Ellen, Roy, Peter Parkes, and Alan Bicker, eds. 2000. *Indigenous Environmental Knowledge and Its Transformations: Critical Anthropological Perspectives*: Harwood Academic Publishers.
- Elliott, Richard, Joanne Csete, Evan Wood, and Thomas Kerr. 2005. Harm Reduction, HIV/AIDS, and the Human Rights Challenge to Global Drug Control Policy. *Health and Human Rights* 8 (2):104-138.
- Elshansky, Sergej. 2003. Nekotorye jeticheskie i psihologicheskie problemy realizacii programm snizhenija vreda sredi potrebitelej narkotikov. *Voprosy narkologii* 2:36-51.
- English, Robert D. 2000. *Russia and the Idea of the West: Gorbachev, Intellectuals, and the End of the Cold War*. New York: Columbia University Press.
- Epstein, Steven. 1996. *Impure science: AIDS, activism, and the politics of knowledge, Medicine and society*. Berkeley: University of California Press.
- Evans, Alfred B. 2008. Putin's Legacy and Russia's Identity. *Europe-Asia Studies* 60 (6):899-912.
- Farred, Grant. 2000. Morning the Postapartheid State Already? The Poetics of Loss in Zakes Mda's *Ways of Dying*. *MFS Modern Fiction Studies*, 46 (1).
- Fassin, Didier. 2007. *When Bodies Remember: Experiences and Politics of AIDS in South Africa*, California Series in Public Anthropology: University of California Press.
- Fee, Elizabeth, and Daniel M. Fox, eds. 1988. *AIDS: The Burdens of History*: University of California Press.
- Feinstein, Andrew. 2007. *After The Party: A Personal and Political Journey inside the ANC*. Johannesburg: Jonathan Ball.
- Feshbach, Murray. 2005. Potential Social Disarray in Russia Due to Health Factors. *Problems of Post-Communism* 52 (4):22-27.
- Fidler, David P. 2005. From International Sanitary Conventions to Global Health Security: The New International Health Regulations. *Chinese Journal of International Law* 4:325-392.
- Finkel, Madelon Lubin. 2007. *Truth, Lies, and Public Health: How We are Affected when Science and Politics Collide*: Greenwood Publishing Group.
- Finnemore, Martha , and Kathryn Sikkink. 1998. International Norm Dynamics and Political Change. *International Organization* 52 (4):887-917.
- Fourie, Pieter. 2006. *The Political Management of HIV and AIDS in South Africa: One Burden Too Many?* Basingstoke; New York Palgrave Macmillan
- Freedberg, Kenneth, and Yazdan Yazdanpanah. 2002. Cost-effectiveness of HIV Therapies in Resource-Poor Countries. In *Economics of AIDS and Access to HIV/AIDS Care in Developing Countries: Issues and Challenges*, edited by J.-P. Moatti, B. Coriat, Y. Souteyrand, T. Barnett, J. Dumoulin and Y.-A. Flori: MSF/DND Working Group.
- Freund, Bill. 2007. South Africa: The End of Apartheid & the Emergence of the "BEE Elite". *Review of African Political Economy* 34 (114):661 - 678.

- Frolova, N.A., and G. V. Zazulin. 2003. Aktual'nye voprosy antinarkoticheskoy politiki : Otechestvennyj i zarubezhnyj opyt. Moscow, StPetersbug: Orbita-M.
- Gaffen, Nathan. 2010. Debunking Delusions: The Inside story of the Treatment Action Campaign. Johannesburg: Jacana Media.
- Gagliano, Annie. 2004. Adapting the national imaginary: shifting identities in three post-1994 South African novels. *Journal of Southern African Studies* 30 (4):811 - 824.
- Galvão, Jane. 2005. Brazil and Access to HIV/AIDS Drugs: A Question of Human Rights and Public Health. *American Journal of Public Health* 95 (7):1110-1116.
- Gaman-Golutvina, Oxana. 2008. Changes in Elite Patterns. *Europe-Asia Studies* 60 (6):1033 - 1050.
- Garrett, Laurie. 2005. The Lessons of HIV/AIDS. *Foreign Affairs* 84 (4).
- Gel'man, Vladimir. 2008. Party Politics in Russia: From Competition to Hierarchy. *Europe-Asia Studies*, 913-930.
- Gevisser, Mark. 2007. Thabo Mbeki The Dream Deferred. Johannesburg: Jonathan Ball Publisher.
- Gevorkjan, Natalija, Natal'ja Timakova, and Andrej Kolesnikov, eds. 2000. Ot pervogo lica. Razgovory s Vladimirom Putinyom. Moskva: Vagrius.
- Gilks, Charles F., Siobhan Crowley, René Ekpini, Sandy Gove, Jos Perriens, Yves Souteyrand, Don Sutherland, Marco Vitoria, Teguest Guerma, and Kevin De Cock. 2006. The WHO public-health approach to antiretroviral treatment against HIV in resource-limited settings. *The Lancet* 368 (9534):505-510.
- Godzimirski, Jakub M. 2008. Putin and Post-Soviet. Identity: Building Block and Buzz Words. *Problems of Post-Communism* 55 (5): 14-27
- Gordenker, Leon, Roger Coate, Christer Jönsson, and Peter Söderholm. 1994. International Cooperation in Response to AIDS. London: Frances Pinter.
- Green, Edward C., Bongi Zokwe, and John David Dupree. 1995. The experience of an AIDS prevention program focused on South African traditional healers. *Social Science & Medicine* 40 (4):503-515.
- Grigor'ev, Maksim. 2007. Fake-struktury: prizraki rossijskoj politiki. Moskva: Evropa.
- Grmek, Mirko D. 1990. History of AIDS: emergence and origin of a modern pandemic. Translated by R. C. Maulitz and J. Duffin. Princeton, N.J. : Princeton University Press.
- Gumede, M.V. 1990. Traditional healers: a medical practitioner's perspective. Braamfontein: Skotaville Publishers.
- Gumede, William Mervin. 2007. Thabo Mbeki and the battle for the soul of the ANC. Updated ed. London Zed.
- Hajdu, David. 1999. The Ten-Cent Plague: The Great Comic-Book Scare and How It Changed America New York: Picador.
- Hale, Henry E. and Timothy J. Colton. 2010. Russians and the Putin-Medvedev "Tandemocracy" A Survey-Based Portrait of the 2007-2008 Election Season. *Problems of Post-Communism* 57 (2): 3-20
- Hall, John J, and Richard Taylor. 2003. Health for all beyond 2000: the demise of the Alma-Ata Declaration and primary health care in developing countries. *The Medical Journal of Australia* 178 (6 January 2003).
- Hall, Martin. 1995. Slaves, Rings and Rubbish. Isando: Heinemann.
- Hansen, Lene. 2006. Security as practice: discourse analysis and the Bosnian war. New York: Routledge.

- Harris, Paul G., and Patricia D. Siplon, eds. 2007. *The Global Politics of AIDS: Lynne Reiner*.
- Harrison, Stephen, Rakshika Bhana, and Antoinette Ntuli, eds. 2007. *The South African Health Review 2007 - The Role of the Private Sector within the South African Health System*. Durban: Health System Trust.
- Hassan, Fatima. 2005. *Country report: South Africa In Missing the Target: A report on HIV/AIDS treatment access from the frontlines*, edited by ITPC: International Treatment Preparedness Coalition
- Hassan, Fatima. 2006. *South Africa: Update on Treatment Delivery*. In *Missing the Target. Off target for 2010: How to avoid breaking the promise of universal access*, edited by ITPC: International Treatment Preparedness Coalition.
- Heywood, Mark. 2002. *Drug Access, Patents And Global Health: 'Chaffed And Waxed Sufficient'*. *Third World Quarterly* 23 (2):217--231.
- Hirsch, Alan. 2005. *Season of hope: Economic Reform under Mandela and Mbeki*: University of KwaZulu-Natal Press/IDRC
- Hobsbawm, Eric, and Terence Ranger, eds. 1983. *The Invention of Tradition*. Cambridge Cambridge University Press.
- Hobsbawm, Eric. 1992. *Nations and Nationalism since 1780: Programme, Myth, Reality*. 2 ed: Cambridge University Press.
- Hopf, Ted 2002. *Social Construction of International Politics: Identities and Foreign Policies, Moscow, 1955 and 1999*, Ithaca. Ithaca: Cornell University Press.
- Hoppers, Catherine Alum Odora. 2002. *Indigenous Knowledge and the Integration of Knowledge Systems: Toward a Philosophy of Articulation*. Pretoria: New Africa Books.
- HR/PUB/06/9. *International Guidelines on HIV/AIDS and Human Rights, 2006 Consolidated Version*, UNHCHR & UNAIDS
- HRW. 2004 *Povtorenie proždennyh oshibok. VICH/SPID i narushenija prav cheloveka v Rossijskoj Federacii* (Human Rights Watch, April 2004)
- HRW. 2007 *Rehabilitation Required; Russia's Human Rights Obligation to Provide Evidence-based Drug Dependence Treatment* (Human Rights Watch, November 2007)
- HRW. *An Uncivil Approach to Civil Society: Continuing State Curbs on Independent NGOs and Activists in Russia* (Human Rights Watch, June 17, 2009)
- IBRD. 1993. *World Development Report 1993: Investing in Health*. Oxford: Oxford University Press.
- Kljamkin, Igor, Tat'jana Kutkovec. *Kremlevskaja shkola politologii: kak nas uchat ljubit' Rodinu*. Moskva: Fond «Liberal'naja missija», 2006
- Ijumba, Petrida, Colwyn Poole, Gavin George, and Andy Gray. 2003/04. *Access to Antiretroviral Therapy In South African Health Review*, edited by P. Ijumba, D. C and N. A. Durban: Health System Trust.
- IMENA. 1998. *Narushenija prav grazhdan Rossijskoj Federacii v kontekste jepidemii SPIDA. Doklad № 1 (Vesna 1998 g.)*.
- IMENA. 1998a. *Narushenija prav grazhdan Rossijskoj Federacii v kontekste jepidemii SPIDA. Doklad № 2 (Osen' 1998 g.)*.
- INOP. 2008. *Ocenka sostojanija i perspektiv politicheskoy sistemy Rossii*. Moskva: Institut obwestvennogo proektirovanija.
- INSOR. 2008. *Demokratija: razvitie rossijskoj modeli*. Moskva: Centr politicheskikh tehnologij Instituta sovremennogo razvitija.
- INSOR. 2009. *Modernizacija Rossii kak postroenie novogo gosudarstva: Nezavisimyj jekspertnyj doklad*. Moskva: Institut sovremennogo razvitija.

- Irlam, Shaun. 2004. Unraveling the Rainbow: The Remission of Nation in Post-Apartheid Literature. *The South Atlantic Quarterly* 103 (4).
- Ivanov, Vitalij. 2006. Antirevoljucioner: Pochemu Rossii ne nuzhna oranzhevaja revoljucija. Moskva: Evropa.
- Ivanov, Vitalij. 2007. Okhranitel'. Moskva: Evropa.
- Jacobs, Sean, and Richard Calland, eds. 2002. *Thabo Mbeki's World: The Politics and Ideology of the South African President*. Scottsville: University of Natal Press, Zed Books Ltd.
- Jacoby, Wade. 2006. Inspiration, Coalition, and Substitution: A Review Essay on External Influences on Postcommunist Transformations. *World Politics* 58 (4):623-651.
- James, Oliver, and Martin Lodge. 2003. The Limits of 'Policy Transfer' and 'Lesson Drawing' for Public Policy Research. *Political Studies Review*:179--93.
- Johnston, Alastair Iain. 2005. Conclusions and Extensions: Toward Mid-Range Theorizing and Beyond *Europe International Organization* 59 (Fall 2005):1013-1044.
- Johnston, Krista. 2002. Redefining the Rules of the Game: State/society Relations in Contemporary South Africa. In *Thabo Mbeki's World: The Politics and Ideology of the South African President*, edited by S. Jacobs and R. Calland. Scottsville: University of Natal Press, Zed Books Ltd.
- Johnson, Krista. 2004. The Politics of AIDS Policy Development and Implementation in Postapartheid South Africa. *Africa Today* 51 (2):107--128.
- Johnson, Krista. 2006. Framing AIDS Mobilization and Human Rights in Post-apartheid South Africa. *Perspectives on Politics* 4 (4):663-670.
- Jönsson, Christer, and Peter Söderholm. 1995. IGO - NGO Relations and HIV/AIDS: Innovation or Stalemate? *Third World Quarterly* 16 (3):459-476.
- Jönsson, Christer. 2010. Coordinating Actors in the Fight against HIV/AIDS: From 'Lead Agency' to Public-Private Partnerships. In *Democracy and Public-Private Partnerships in Global Governance*, edited by M. Bexell and U. Mörtz. Houndmills: Macmillan Publishers.
- Joseph, Sarah. 2003. Pharmaceutical Corporations and Access to Drugs: The "Fourth Wave" of Corporate Human Rights Scrutiny. *Human Rights Quarterly* 25 (2):425-452.
- Kalichman, Seth C. 2009. *Denying AIDS: Conspiracy Theories, Pseudoscience, and Human Tragedy*: Springer.
- Karsten, Luchien and Honorine Illa. 2005. Ubuntu as a key African management concept: contextual background and practical insights for knowledge application. *Journal of Managerial Psychology* 20 (7): 607 - 620
- Kassianova, Alla. 2001. Russia: Still Open to the West? Evolution of the State Identity in the Foreign Policy and Security Discourse. *Europe-Asia Studies* 53 (6):821-839.
- Keck, Margaret, and Kathryn Sikkink. 1998. *Activists Beyond Borders: Advocacy Networks in International Politics*. Ithaca and London: Cornell University Press.
- Kellner, Douglas. 2010. *Cinema Wars: Hollywood Film and Politics in the Bush-Cheney Era*. Wiley.
- Kibuka-Sebitosi, Esther. 2008. Protecting Indigenous Knowledge And The Rights And Interests Of Indigenous Medicine Practitioners In Africa: law, leadership and governance. *Indilinga: African Journal of Indigenous Knowledge Systems* 7 (1):72-86.

- Klotz, Audie. 2002. Transnational Activism and Global Transformations: The Anti-Apartheid and Abolitionist Experiences. *European Journal of International Relations* 8 (1):49-76.
- Koenane, Mojalefa. 2008. The ANC and traditional authorities in historical perspective. *Indilinga: African Journal of Indigenous Knowledge Systems* 7 (1):87-102.
- Konstantin Remchukov, ed. 2007. *Russkaja političeskaja kul'tura: vzgljad iz utopii: lekcija Vladislava Surkova : materialy obsuzhdenija v Nezavisimoj gazete*. Moscow: Nezavisimaja gazeta, 2007
- Krasnov, V.N., Ivanec N.N., Dmitrieva T.B., Kononec A.S., and Tiganov A.S. 2005. «Net metadonovym programmam v Rossijskoj Federacii». *Medicinskaja gazeta*, 31.03.2005.
- Kratochvil, Petr. 2008. The Discursive Resistance to EU-Enticement: The Russian Elite and (the Lack of) Europeanisation. *Europe-Asia Studies* 60 (3):397 - 422.
- Lanegran, Kimberly. 2001. "South Africa's 1999 Election: Consolidating a Dominant Party System." *Africa Today* 48.2 (): 81-102.
- Langlois-Klassen, Deanne, Walter Kipp, and Tom Rubaale. 2008. Who's talking? Communication between health providers and HIV-infected adults related to herbal medicine for AIDS treatment in western Uganda. *Social Science & Medicine* 67 (1):165-176.
- Lanjouw, Jean O. 2002. A New Global Patent Regime for Diseases: US and International Legal Issues. *Harvard Journal of Law & Technology* 16 (1):1--40.
- Larsen, Susan. 2003. National Identity, Cultural Authority, and the Post-Soviet Blockbuster: Nikita Mikhalkov and Aleksei Balabanov. *Slavic Review* 62 (3): 491-511.
- Lawn, Joy E, Jon Rohde, Susan Rik, Miriam Were, Vinod K Paul, and Mickey Chopra. 2008. Alma-Ata 30 years on: revolutionary, relevant, and time to revitalise. *Lancet* 372 (917-27).
- Lee, Kelley, Kent Buse, and Suzanne Fustukian, eds. 2002. *Health Policy in a Globalising World*. Cambridge: Cambridge University Press.
- Liddell, Christine, Louise Barrett, and Moya Bydawell. 2005. Indigenous representations of illness and AIDS in Sub-Saharan Africa. *Social Science & Medicine* 60 (4):691-700.
- Lieberman, Evan. 2009. *Boundaries of Contagion: How Ethnic Politics Have Shaped Government Responses to AIDS*. Princeton: Princeton University Press.
- Lipman, Maria, and Michael McFaul. 2010. *The Media and Political Developments, In After Putin's Russia: Past Imperfect, Future Uncertain*, edited by S. K. Wegren and D. R. Herspring: Rowman & Littlefield Publishers, Inc.
- Livshin, Alexander, and Richard Weitz. 2006. Civil Society and Philanthropy Under Putin. *International Journal of Not-for-Profit Law* 8 (3):7-12.
- Loriaux, Michael. 1999. The French Developmental State as Myth and Moral Ambition. In *The Developmental State*, edited by M. Woo-Cumings. Ithaca and London: Cornell University Press.
- London, Leslie. 2002. Human Rights and Public Health: Dichotomies or Synergies in Developing Countries? Examining the Case of HIV in South Africa. *Journal of Law, Medicine & Ethics* 30 (4):667-691.
- Lotshwao, Kebapetse. 2009. The Lack of Internal Party Democracy in the African National Congress: A Threat to the Consolidation of Democracy in South Africa. *Journal of Southern African Studies* 35 (4):901 - 914.

- Lussier, Danielle N., and Marcy E. McCullaugh. 2009. Epidemic Breakpoint Confronting HIV/AIDS in Russia's Regions. *Problems of Post-Communism* 56 (1):35–46.
- Makgoba, Malegapuru William, ed. 1999. *African Renaissance: The New Struggle*. Johannesburg, Cape Town: Mafube and Tafelberg.
- Malfliet, Katlijn, and Ria Laenen, eds. 2007. *Elusive Russia. Current Developments in Russian State Identity and Institutional Reform under President Putin*. Leuven University Press
- Maloka, Eddy T. 2000. The South African "African Renaissance": Debate: A Critique. Paper written for the African Institute of South Africa, Pretoria.
- Mandaza, Ibbo. 2001. Southern African Identity: A Critical Assessment. In *Shifting African Identities* edited by S. Bekker, M. Dodds and M. M. Khosa. Pretoria: HSRC.
- Mann, Jonathan M., D. Tarantola, and Thomas W. Netter. 1992. *AIDS in the World*: Harvard University Press.
- Mann, Jonathan M., Sofia Gruskin, Michael A. Grodin, and George J. Annas, eds. 1999. *Health and Human Rights: A Reader*. New York, NY: Routledge.
- Marais, Hein. 2001. *South Africa: Limits to Change: The Political Economy of Transition*. 2 ed. London and New York, Cape Town: Zed Books Ltd, University of Cape Town.
- Matthews, Sally. 2004. Investigating NEPAD's Development Assumptions. *Review of African Political Economy* 31 (101):497 - 511.
- Mavimbela, Visu. 1998. *The African Renaissance: a Workable Dream*. Foundation for Global Dialogue Occasional Paper n° 17, October 1998.
- May, Christopher. *Challenging Global Norms: The State, Social Costs and Legal Action*, in Ostergard, Robert, ed. 2007. *HIV/AIDS and the Threat to National and International Security*. Edited by J. Whitman, Global Issues: Palgrave Macmillan.
- Mbeki, Thabo. 1998. *Africa: The Time Has Come: Selected Speeches*. Capetown, Johannesburg: Tafelberg, Mafube.
- Mbembe, Achille. 2001. *On the Postcolony*: University of California Press.
- MBewu, Anthony, and Nono Simelela. 2003. *Operational Plan for Comprehensive HIV and AIDS Care, Management and Treatment for South Africa*. Department of Health.
- McDonald, David A. 2010. Ubuntu bashing: the marketisation of "African values" in South Africa. *Review of African Political Economy* 37 (124):139 - 152.
- McInnes, Colin, and Simon Rushton. 2010. HIV, AIDS and security: where are we now? *International Affairs* 86 (1):225-245.
- Mda, Zakes. 2002. *The Heart of Redness: A Novel*. New York: Farrar, Straus and Giroux.
- Mendelevich, Vladimir. 2006. Zamestitel'naja Terapija Narkomanii - Novaja Problema Biomedicinskih Jetiki i Medicinskogo Prava. *Nezavisimyj psihiatricheskij zhurnal*, Vol. 1.
- Mendeloff, David. 2008. 'Pernicious History' as a Cause of National Misperceptions Russia and the 1999 Kosovo War. *Cooperation and Conflict: Journal of the Nordic International Studies Association* 43 (1):31-56.
- Mendelson, Sarah E., and Theodore P. Gerber. 2007. Activist Culture and Transnational Diffusion: Social Marketing and Human Rights Groups in Russia. *Post-Soviet Affairs* 23 (1):50-75.
- Mertus, Julie. 2007. The Rejection of Human Rights Framings: The Case of LGBT Advocacy in the US. *Human Rights Quarterly* 29 (4):1036-1064.

- Mickiewicz, Ellen. 1999. *Changing Channels: Television and the Struggle for Power in Russia*. Durham: Duke University Press Books.
- Mickiewicz, Ellen. 2008. *Television, Power, and the Public in Russia*. Cambridge: Cambridge University Press.
- Mikhail, Alexseev. 2005. *Immigration Phobia and the Security Dilemma: Russia, Europe, and America* New York: Cambridge University Press.
- Minpromtorg. 2009. *Strategii razvitija farmacevticheskoy promyshlennosti Rossijskoj Federacii na period do 2020 goda*. Moskva: Ministerstvo promyshlennosti i trgovli Rossijskoj Federacii.
- Mokaba, Peter. 2002. *Castro Hlongwane, Caravans, Cats, Geese, Foot & Mouth and Statistics: HIV/AIDS and the Struggle for the Humanisation of the African* (unpublished manuscript).
- More, Mabogo P. 2002. African Renaissance: The Politics of Return. *African Journal of Political Science* 7 (2):61-80.
- Morozov, Viatcheslav. 2002. Resisting Entropy, Discarding Human Rights Romantic Realism and Securitization of Identity in Russia. *Cooperation and Conflict* 37 (4):409-429.
- Morozov, Viatcheslav. 2008. Sovereignty and democracy in contemporary Russia: a modern subject faces the post-modern world. *Journal of International Relations and Development* 11:152-180.
- Morrison, J. Stephen, and Jennifer Kates. 2006. *The G-8, Russia's Presidency, and HIV/AIDS in Eurasia: The Center for Strategic and International Studies (CSIS); The Kaiser Family Foundation*.
- Mosimege, Mogege. 2005. *Intellectual Property and Indigenous Knowledge Systems: International Developments and Implications for South Africa*. Pretoria, South Africa: Indigenous Knowledge System Unit, Department of Science and Technology.
- Mulemi, Benson. 2003. African Worldview and Traditional Medicine. In *African Folklore: An Encyclopedia* edited by P. M. Peek and K. Yankah. London: Routledge.
- Murphy, Timothy F. 1994. *Ethics in an Epidemic: AIDS, Morality, and Culture* Berkeley: University of California Press.
- Myburgh, James. The Virodene affair I-V Politicsweb, 17--21 September 2007 2007; available at http://www.politicsweb.co.za/politicsweb/view/politicsweb/en/page71619?o_id=83156&sn=Detail
- Nabudere, Dani W. 2001. The African Renaissance in the Age of Globalization. *African Journal of Political Science* 6 (2):11-27.
- Narochnickaja, Natalija, ed. 2008. *Oranzhevyje seti: ot Belgrada do Bishkeka*. Sankt-Peterburg: Aletejja.
- Natalija, Gevorkjan, Natal'ja Timakova, and Andrej Kolesnikov, eds. 2000. *Ot pervogo lica. Razgovory s Vladimirom Putinyim*. Moskva: Vagrius.
- Natrass, Nicoli, and Jeremy Seekings. 2001. "Two nations"? Race and Economic Inequality in South Africa Today. *Daedalus* 130 (1):45-70.
- Natrass, Nicoli. 2004. *The Moral Economy of AIDS in South Africa*. Cambridge: Cambridge University Press.
- Natrass, Nicoli. 2007. *Mortal Combat: Aids Denialism and the Struggle for Antiretrovirals in South Africa*. Scottsville, South Africa: The University of KwaZulu-Natal Press.
- Natrass, Nicoli. 2008. AIDS and Scientific Governance of Medicine in Post-apartheid South Africa. *African Affairs* 107 (427):157-176.

- Nazarov, Mihail. 2005. *Vozhdju Tret'ego Rima: K poznaniju ruskoj idei v apokalipsicheskoe vremja*. 2 ed. Moskva: Russkaja ideja.
- Ndinga-Muvumba, Angela, and Robyn Pharoah, eds. 2008. *HIV/AIDS and Society in South Africa*. Scottsville, South Africa: University of KwaZulu-Natal Press.
- Ndlovu-Gatsheni, Sabelo J. 2008. Black republican tradition, nativism and populist politics in South Africa *Transformation: Critical Perspectives on Southern Africa* 68:53-86.
- Ndlovu-Gatsheni, Sabelo J. 2009. Africa for Africans or Africa for "Natives" Only? "New Nationalism" and Nativism in Zimbabwe and South Africa. *Africa Spectrum* 44 (1): 61-78.
- Nelkin, Dorothy, David P. Willis, and Scott Parris, eds. 1991. *A Disease of Society: Cultural and Institutional Responses to AIDS*. Cambridge: Cambridge University Press.
- Neuberger, Benyamin. 1990. Nationalisms Compared: ANC, IRA and PLO. In *The Elusive Search for Peace: South Africa, Israel and Northern Island*, edited by H. Giliomee and J. Gagliano. Cape Town; New York: Oxford University Press; IDASA.
- Neumann, Iver B. 2008. Russia as a great power, 1815–2007. *Journal of International Relations and Development* (2008) 11, 128–151.
- Neumann, Iver. 1996. *Russia and the Idea of Europe: A Study in Identity and International Relations*. Edited by B. Buzan and G. Segal, *The New International Relations*. London; New York: Routledge.
- Neumann, Iver. 1998. *Uses of the Other: "The East" in European Identity Formation*. Minneapolis: University of Minnesota Press.
- Nexon, Daniel H., and Iver B. Neumann. 2006. *Harry Potter and International Relations* Lanham, Md.: Rowman & Littlefield.
- Nichols, Eve K. 1989. *Mobilizing Against AIDS* Harvard University Press.
- NSP. 2007. *HIV & AIDS and STI Strategic Plan for South Africa 2007-2011*.
- Nuttall, Sarah, and Carli Coetzee, eds. 1998. *Negotiating the Past: The Making of Memory in South Africa*. Oxford: Oxford University Press, USA.
- Ó Tuathail, Gearóid. 2009. Placing blame: Making sense of Beslan. *Political Geography* 28 (1):4-15.
- O'Manique, Coleen 2004. *Neoliberalism and AIDS Crisis in Sub-Saharan Africa: Globalization's Pandemic*. Edited by T. M. Shaw, *International Political Economy Series*: Palgrave.
- Oates, Sarah. 2007. The neo-Soviet model of the media. *Europe-Asia Studies* 59 (8):1279-1297.
- Offenburger, Andrew. 2008. Duplicity and Plagiarism in Zakes Mda's *The Heart of Redness*. *Research in African Literatures* 39 (3):164-199.
- Okara, Andrei. 2007. Sovereign Democracy: A New Russian Idea or a PR Project? *Russia in Global Affairs* 5 (3): 8-20
- Olcott, Anthony. 2001. *Russian Pulp: The Detektiv and the Russian Way of Crime*: Rowman & Littlefield.
- Olivier, Gerrit. 2003. Is Thabo Mbeki Africa's Saviour? *International Affairs* 79 (4):815-828.
- Oppenheimer, Gerald M. In *the Eye of the Storm: The Epidemiological Construction of AIDS*, in Fee, Elizabeth, and Daniel M. Fox, eds. 1988. *AIDS: The Burdens of History*: University of California Press.
- Orlova, Alexandra V. 2009. The Russian "War on Drugs." A Kinder, Gentler Approach? *Problems of Post-Communism* 56 (1):23-34.

- Orsi, Fabienne, Lisa Hasenclever, Beatriz Fialho, Paolo Tigre, and Benjamin Coriat. 2003. Intellectual Property Rights, Anti-AIDS Policy and Generic Drugs. Lessons from the Brazilian Public Health Program. In *Economics of AIDS and Access to HIV/AIDS Care in Developing Countries : Issues and Challenges* edited by J.-P. Moatti, B. Coriat, Y. Souteyrand, T. Barnett, J. Dumoulin and Y.-A. Flori. Geneva: SIDA
- PAAP. 2001. A Synthesis Report of the Deliberations by the Panel of Experts Invited by the President of the Republic of South Africa, The Honourable Mr. Thabo Mbeki: Presidential Aids Advisory Panel
- Parkhurst, Justin O., and Louisiana Lush. 2004. The political environment of HIV: lessons from a comparison of Uganda and South Africa. *Social Science & Medicine* 59 (9):1913-1924.
- Parland, Thomas. 2005. The extreme nationalist threat in Russia : the growing influence of Western rightist ideas. London ; New York: RoutledgeCurzon.
- Patterson, Amy Stephenson, ed. 2005. *The African State and the AIDS Crisis*: Ashgate Publishing, Ltd.
- Patterson, Amy Stephenson. 2006. *The Politics of AIDS in Africa*. Boulder: Lynne Rienner Publishers.
- PEPFAR. 2004. *The President's Emergency Plan for AIDS Relief: U.S. Five Year Global HIV/AIDS Strategy*. Washington, DC: Office of the United States Global AIDS Coordinator.
- PEPFAR. 2005. *Engendering Bold Leadership: First Annual Report to Congress on PEPFAR*. Washington, DC: Office of the United States Global AIDS Coordinator.
- PEPFAR. 2006. *Action Today, A Foundation For Tomorrow: Second Annual Report to Congress on PEPFAR*. Washington, DC: Office of the United States Global AIDS Coordinator.
- PEPFAR. 2007. *The Power of Partnerships: Third Annual Report to Congress on PEPFAR*. Washington, DC: Office of the United States Global AIDS Coordinator.
- PEPFAR. 2008. *The Power of Partnerships: Fourth Annual Report to Congress on PEPFAR*. Washington, DC: Office of the United States Global AIDS Coordinator.
- Petzold, Jochen. 2001. In Search of a New National History: Debunking Old Heroes in Robert Kirby's *The Secret Letters of Jan van Riebeeck*. *Research in African Literatures* 32 (3):143-154.
- Petzold, Jochen. 2005. Children's Literature after Apartheid: Examining 'Hidden Histories' of South Africa's Past. *Children's Literature Association Quarterly* 30 (2):140-151.
- Phimister, Ian, and Brian Raftopoulos. 2004. Mugabe, Mbeki & the politics of anti-imperialism. *Review of African Political Economy* 31 (101):385 - 400.
- Poku, Nana, and Alan Whiteside. 2004. *The Political Economy of AIDS in Africa*: Ashgate Publishing.
- Poku, Nana. 2000. The Global Health Fund: Context and Opportunities. *Third World Quarterly* 23 (2):283-298.
- Poljakov, Leonid, ed. 2007. *PRO suverenju demokratiju*. Moskva: Evropa.
- Powell, David. 2005. Putin, Demography, Health and the Environment. In *Putin's Russia: past imperfect, future uncertain* edited by D. R. Herspring: Rowman & Littlefield Publishers, Inc.
- Prozorov, Sergei. 2007. The narratives of exclusion and self-exclusion in the Russian conflict discourse on EU-Russian Relations. *Political Geography* 26 309-329.

- Putin, Vladimir. 1999. Mineral'no-syr'evye resursy v strategii razvitija Rossijskoj jekonomiki. *Zapiski Gornogo instituta* 144 (1):1-11.
- PWG. 2006. *New Approaches to HIV Prevention: Accelerating Research and Ensuring Future Access: The Global HIV Prevention Working Group.*
- Rassool, Ciraj. 2010. Power, Knowledge and the Politics of Public Pasts. *African Studies* 69 (1):79 - 101.
- Rastogi, Pallavi. 2008. Citizen Other: Islamic Indianness and the Implosion of Racial Harmony in Postapartheid South Africa. *Research in African Literatures* 39 (1):107-124.
- Rauner, Marion, and Margaret L. Brandeau. 2001. AIDS Policy Modeling for the 21st Century: An Overview of Key Issues. *Health Care Management Science* 4 165-180.
- Reich, Michael R. 2002. Introduction: Public-Private Partnerships for Public Health. In *Public-Private Partnerships for Public Health*, edited by M. R. Reich. Cambridge, Massachusetts: The Harvard Center for Population and Development Studies (HCPDS).
- Reihling, Hanspeter. 2008. Bioprospecting the African Renaissance: The new value of muthi in South Africa. *Journal of Ethnobiology and Ethnomedicine* 4 (1):9.
- Remington, Thomas. 2008. Patronage and the Party of Power: President-Parliament Relations Under Vladimir Putin. *Europe-Asia Studies* 60 (6):959 - 987.
- Reus-Smit, Christian. 1999. *The Moral Purpose of the State: Culture, Social Identity, and Institutional Rationality in International Relations.* Princeton: Princeton University Press.
- Reus-Smit, Christian. 2004. *American Power and World Order.* Cambridge: Polity Press.
- Richards, Constance S. 2005. Nationalism and the Development of Identity in Postcolonial Fiction: Zoë Wicomb and Michelle Cliff. *Research in African Literatures* 36 (1):20-33.
- Richter, James. 2009. Putin and the Public Chamber. *Post-Soviet Affairs* 25 (1):39–65.
- Richter, James. 2009a. The Ministry of Civil Society? The Public Chambers in the Regions. *Problems of Post-Communism* 56 (6):7-20.
- Ries, Nancy. 1997. *Russian talk: culture and conversation during Perestroika.* Ithaca: Cornell University Press.
- Rijn, Kiran van. 2006. The Politics of Uncertainty: The AIDS Debate, Thabo Mbeki and the South African Government Response. *Social History of Medicine* 19 (3):521-538.
- Roberts, Ronald Suresh. 2007. *Fit to Govern: The Native Intelligence of Thabo Mbeki.* Ste Publishers.
- Rosenstone, Robert. 2006. *History on Film/Film on History.* PearsonLongman.
- Ruggie, John Gerard. 1982. International Regime, Transactions, and Change: Embedded Liberalism in the Postwar Economic Order. *International Organization* 36 (2):383-385.
- Ruggie, John Gerard. 2004. Reconstituting the Global Public Domain--Issues, Actors and Practices. *European Journal of International Relations* 10 (4):499--531.
- Russell, Alec. 2009. *Bring Me My Machine Gun: The Battle for the Soul of South Africa, from Mandela to Zuma.* New York: PublicAffairs.
- S/RES/1308. Resolution 1308 (2000) Adopted by the Security Council at its 4172nd meeting, on 17 July 2000. New York: United Nation, Security Council.
- SANCO. 2007. *END AIDS! Break the Chains of Pharmaceutical Colonialism: Dr. Rath Health Foundation, South African National Civil Organization.*

- Sarang, Anya, Tim Rhodes, Nicolas Sheon, and Kimberly Page. 2010. Policing drug users in Russia: risk, fear, and structural violence. *Subst Use Misuse* 45 (6):813-864.
- Schatteman, Renee. 2008. The Xhosa Cattle-Killing and Post-Apartheid South Africa: Sindiwe Magona's "Mother to Mother" and Zakes Mda's "The Heart of Redness". *African Studies* 67 (2):275-291.
- Schimmelfennig, Frank. 2001. The Community Trap: Liberal Norms, Rhetorical Action, and the Eastern Enlargement of European Union. *International Organization* 55 (1):47--80.
- Schneider, Helen, and Joanne Stein. 2001. Implementing AIDS Policy in Post-apartheid South Africa. *Social Science & Medicine* 52 (5):723--731.
- Schneider, Mark, and Michael Moodie. 2002. *The Destabilizing Impacts of HIV/AIDS*. Washington, D.C.: Center for Strategic and International Studies (CSIS).
- Schoepf, Brooke G. 2010. Assessing AIDS Research in Africa: Twenty-Five Years Later. *African Studies Review* 53 (1):105-142.
- Schwartländer, Bernhard, Ian Grubb, and Jon Perriens. 2006. The 10-year Struggle to Provide Antiretroviral Treatment to People with HIV in the Developing World. *The Lancet* 368:541-546.
- Sell, Susan K. 1999. Multinational Corporations as Agents of Change: The Globalization of Intellectual Property Rights. In *Private Authority and International Affairs*, edited by A. C. Cutler, V. Haufler and T. Porter. Albany: SUNY Press.
- Sell, Susan K., and Aseem Prakash. 2004. Using Ideas Strategically: The Contest Between Business and NGO Networks in Intellectual Property Rights. *International Studies Quarterly* 48 (1):143-175.
- Shadlen, K. C. 2007. The Political Economy of AIDS Treatment: Intellectual Property and the Transformation of Generic Supply. *International Studies Quarterly* 51 (3):559-581.
- Shaw, Timothy M., and Julius E. Nyang'oro. 2000. African Renaissance in the New Millennium? From Anarchy to Emerging Markets? *African Journal of Political Science* 5 (1):14-28.
- Shilts, Randy. 1987. *And the Band Played On: Politics, People, and the AIDS Epidemic*. St. Martin's Griffin.
- Shnirelman, Victor. 2009. Stigmatized by History or by Historians?: The Peoples of Russia in School History Textbooks. *History & Memory* 21 (2): 110-149.
- Siegel, Richard L. 1996. AIDS and Human Rights. *Human Rights Quarterly* 18 (3):612-640.
- Siplon, Patricia. 2002. *AIDS and the Policy Struggle in the United States*. Washington, DC.: Georgetown University Press.
- Simmons, Beth and Zachary Elkins. 2004. The Globalization of Liberalization: Policy Diffusion in the International Political Economy. *American Political Science Review* 98 (1):171--189.
- Simmons, Beth, Frank Dobbin, and Geoffrey Garret. 2006. Introduction: The International Diffusion of Liberalism. *International Organization* 60 (4):787-801.
- Sirayi, Mzo. 2001. Indigenous African Theater in South Africa. In *Pre-colonial and post-colonial drama and theatre in Africa* edited by L. Losambe and D. Sarinjeive. Claremont: New Africa Books.
- Sitze, Adam. 2004. Denialism. *The South Atlantic Quarterly* 102 (4):769-811.
- Sizwe, No. 1979. *One Azania, one nation : the national question in South Africa*. London: Zed Press.

- Smith, Anthony D. 2004. *Chosen Peoples: Sacred Sources of National Identity*. Oxford, New York: Oxford University Press.
- Smith, Kathleen E. 1996. *Remembering Stalin's Victims: Popular Memory and the End of the USSR*. Ithaca and London: Cornell University Press.
- Smith, Kathleen E. 2002. *Mythmaking in the New Russia: Politics and Memory during the Yeltsin Era*. Ithaca and London: Cornell University Press.
- Smith, Raymond A., and Patricia D. Siplon. 2006. *Drugs Into Bodies: Global AIDS Treatment Activism*. Greenwood Publishing Group.
- Söderholm, Peter. 1997. *Global Governance Of AIDS: Partnerships With Civil Society*. Lund, Sweden: Lund University Press.
- Stachowiak, Julie and Alena Peryshkina. 2006. *NGOs and HIV in Russia: Lessons from a Unique Case Study*. In *HIV/AIDS in Russia and Eurasia, Volume I*, edited by J. L. Twigg. New York: Palgrave Macmillan.
- Stewart, Rob, and Marian Loveday. 2005. *Public HAART Projects in South Africa Progress to November 2004*. Durban: Health Systems Trust.
- Stewart, Rob, Ashnie Padarath, and Lesley Bamford. 2004. *Providing Antiretroviral Treatment in Southern Africa - A Literature Review*. Durban: Health System Trust.
- Surkov, Vladislav. 2010. *Texts 1997 - 2010*. Moskva: Evropa.
- Suzuki, Shogo. 2005. *Japan's Socialization into Janus-Faced European International Society*. *European Journal of International Relations* 11 (1):137--164.
- Swaffar, Janet. 2000. *Identity Signifiers in Contemporary Russian Films: A Lacanian Analysis*. *American Imago* 57 (1):95-119.
- Taylor, Brian D. 2006. *Law enforcement and civil society in Russia*. *Europe-Asia Studies* 58 (2):193 - 213.
- Taylor, Brian D. 2007. *Russia's Power Ministries: Coercion and Commerce*. Syracuse: Institute for National Security and Counterterrorism, Syracuse University.
- TERG. 2006. *Review of the Global Fund Grant Portfolio—Funding the Right Things? A TERG Technical Report*.
- Thomas, Caroline. 2002. "Trade Policy and the Politics of Access to Drugs". *Third World Quarterly* 23 (2):251-264.
- Thomas, Daniel. 2001. *The Helsinki Effect: International Norms, Human Rights, and the Demise of Communism*. Princeton and Oxford: Princeton University Press.
- Thomas, David P. 2007. *The South African Communist Party (SACP) in the Post-apartheid Period*. *Review of African Political Economy* 34 (111):123 - 138.
- Thompson, Leonard. 1985. *The political mythology of apartheid*. New Haven Yale University Press.
- TPAA. 2003. *On the Frontline of an Epidemic. The Need for Urgency in Russia's Fight Against AIDS*. New York: Transatlantic Partners Against AIDS.
- TPAA. 2004. *Federal'nyj zakon «O preduprezhdenii rasprostraneniya v Rossijskoj Federacii zabojevanija, vyzyvajemogo virusom immunodeficitnogo cheloveka (VICH–infekcii)»: istorija, sodержanie, perspektivy*. In *Informacionnyj bjulleten' po VICH/SPIDu No 1 (2): Transatlanticheskie partnjory protiv SPIDa*.
- TPAA. 2006. *PRAVO NA ZDOROV'JE: Profilaktika i lechenie VICH–infekcii sredi ujazvimykh grupp*. In *Informacionnyj bjulleten' No 3(5): Transatlanticheskie partnery protiv SPIDa (TPPS)*.
- TPAA. 2006a. *Jepidemija VICH/SPIDa v Sankt-Peterburge*. In *Informacionnyj bjulleten' No 3(4): Transatlanticheskie partnery protiv SPIDa (TPPS)*.

- TPAA. 2006b. O finansirovanii mer po profilaktike i bor'be s VICH/SPIDom v Rossii. In *Informacionnyj bjulleten' No 3(7): Transatlanticheskie partnery protiv SPIDa (TPPS)*.
- TPAA. 2007. VICH/SPID v Respublike Tatarstan. In *Informacionnyj bjulleten' No 4(2): Transatlanticheskie partnery protiv SPIDa (TPPS)*.
- TPAA. 2008. Vozmozhnosti ispol'zovanija modeli chastno-gosudarstvennyh partnerstv v protivodejstvii VICH-infekcii i drugim social'no-znachimym zabolevanijam v Orenburgskoj oblasti. In *Informacionnyj bjulleten' No 5(2): Transatlanticheskie partnery protiv SPIDa (TPPS)*.
- Tuminez, Astrid S. 2000. *Russian nationalism since 1856: ideology and the making of foreign policy*. Lanham: Rowman and Littlefield.
- Twigg, Judyth. 2007. *HIV/AIDS in Russia: Commitment, Resources, Momentum, Challenges*. Washington, D.C.: Center for Strategic and International Studies.
- Uldricks, Teddy J. 2009. War, Politics and Memory: Russian Historians Reevaluate the Origins of World War II. *History & Memory* 21(2): 60-82.
- UNAIDS. 2004. *The changing HIV/AIDS epidemic in Europe and Central Asia*. Geneva, Switzerland.
- UNAIDS/05.17E. *Monitoring the Declaration of Commitment on HIV/AIDS: Guidelines on Construction of Core Indicators*. Geneva, Switzerland UNAIDS, July 2005
- UNAIDS/07.07E / JC1274E. *Practical guidelines for intensifying HIV prevention: towards universal access*. Geneva, Switzerland UNAIDS, 2007
- UNCTAD/DITC/TED/10. *Protecting and Promoting Traditional Knowledge: Systems, National Experiences and International Dimensions*. New York and Geneva, United Nations Conference on Trade and Development 2004
- Vachudova, Milada Anna. 2008. The European Union: The Causal Behemoth of Transnational Influence on Postcommunist Politics. In *Transnational Actors in Central and East European Transitions*, edited by M. A. Orenstein, S. Bloom and N. Lindstrom. Pittsburgh: University of Pittsburgh Press.
- Vale, Peter, and Siphon Maseko. 2002. Thabo Mbeki, South Africa, and the Idea of an African Renaissance. In *Thabo Mbeki's World: The Politics and Ideology of the South African President*, edited by S. Jacobs and R. Calland. Scottsville: University of Natal Press, Zed Books Ltd.
- Van Damme, Wim, Katharina Kober, and Guy Kegels. 2008. Scaling-up antiretroviral treatment in Southern African countries with human resource shortage: How will health systems adapt? *Social Science & Medicine* 66 (10):2108-2121.
- Vestergaard, Mads. 2001. Who's Got the Map? The Negotiation of Afrikaner Identities in Post-apartheid. *Daedalus* 130 (1):19-44.
- Vishnevsky, Anatoly. 2004. *Demograficheskoe budushee Rossii. Otechestvennye zapiski Vol. 4*.
- Vishnevsky, Anatoly, Jaroslav Kuz'minov, Igor' Shejman, Vladimir Shevsky, Sergej Shishkin, Lev Jakobson, and Evgeny Yasin. 2006. *Rossijskoe zdavoohranenie: kak vyjti iz krizisa: Modernizacija jekonomiki i gosudarstvo, Otechestvennye zapiski, № 2*
- Vital, Anthony. 2005. Situating Ecology in Recent South African Fiction: J.M. Coetzee's "The Lives of Animals" and Zakes Mda's "The Heart of Redness". *Journal of Southern African Studies* 31 (2):297 - 313.
- Vliet, Virginia Van der. 2001. AIDS: Losing "the new struggle"? *Daedalus* 130: 151-184.

- Volkov, Vadim. 2008. State Corporations: Another Institutional Experiment. *Pro et Contra* 5-6.
- Wallander, Celeste A. 2006. Russian Politics and HIV/AIDS: The Institutional and Leadership Sources of an Inadequate Policy. In *HIV/AIDS in Russia and Eurasia, Volume I*, edited by J. L. Twigg. New York: Palgrave Macmillan.
- Wang, Joy. 2008. AIDS denialism and 'The humanisation of the African'. *Race Class* 49 (3):1-18.
- Warhola, James W.. 1996. Politicized ethnicity in the Russian Federation: dilemmas of state formation. Lewiston: Edwin Mellen Press.
- Way, Lucan. 2008. The Real Causes of the Color Revolutions. *Journal of Democracy* 19 (3): 55-69.
- WB. 2005. The World Bank' Global HIV/AIDS Program of Action. Washington, DC: International Bank for Reconstruction and Development/The World Bank.
- Wedgwood Benn, David. 2010. The Teaching of History in Present-Day Russia. *Europe-Asia Studies* 62 (1):173 - 177.
- Weeks, John. 1999. Stuck in Low GEAR? Macroeconomic Policy in South Africa, 1996-1998. *Cambridge Journal of Economics* 23 (6):795-811.
- Weldes, Jutta, ed. 2003. *To Seek Out New Worlds: Exploring Links Between Science Fiction and World Politics*: Palgrave Macmillan.
- Wertheimer, Sophie. 2007. The Infectious Continent: Africa, Disease, and the Western Imagination. In *HIV/AIDS, illness, and African well-being* edited by T. Falola and M. M. Heaton. Rochester University of Rochester Press.
- Westhuizen, Janis van der. 2005. Arms over AIDS in South Africa: why the boys had to have their toys. *Alternatives* 30 (3):275-295.
- Weyland, Kurt. 2005. Theories of Policy Diffusion: Lessons from Latin American Pension Reform. *World Politics* 57 (2):262--95.
- WHO. 1978. International Conference on Primary Health Care, Alma-Ata, USSR, 6-12 September 1978.
- WHO. 2002. *Traditional Medicine Strategy 2002-2005*. Geneva: World Health Organization.
- WHO. 2004. *Scaling up antiretroviral therapy in resource-limited settings: Treatment guidelines for a public health approach: 2003 revision*. Geneva, Switzerland: World Health Organization.
- WHO. 2004a. *Tools for Institutionalizing Traditional Medicine in Health Systems in WHO African Region*: World Health Organisation.
- WHO. 2005. *National Policy on Traditional Medicine and Regulation of Herbal Medicines - Report of a WHO Global Survey*. Geneva: World Health Organization
- WHO. 2006. *Antiretroviral therapy for HIV infection in adults and adolescents: recommendations for a public health approach, HIV/AIDS Programme, Strengthening health services to fight HIV/AIDS, 2006 revision*, (Geneva, Switzerland WHO Press).
- WHO/EDM/TRM/2002.1 *Traditional Medicine Strategy 2002-2005*. Geneva, Switzerland: The World Health Organization
- Wilson, Amy R., and James G. Kahn. 2003. Preventing HIV in injection drug users: exploring the tradeoffs between interventions. *Socio-Economic Planning Sciences* 37 (4):269-288.
- Wilson, Jeanne L. 2010. The Legacy of the Color Revolutions for Russian Politics and Foreign Policy. *Problems of Post-Communism* 57 (2): 21 – 36

- Wilson, Richard A. 2001. *The Politics of Truth and Reconciliation in South Africa: Legitimizing the Post-apartheid State*. Cambridge; New York: Cambridge University Press.
- WIPO. 2003. Intergovernmental committee on intellectual property and genetic resources, traditional knowledge and folklore: matters concerning intellectual property and genetic resources, traditional knowledge and folklore - an overview In Intergovernmental Committee on Intellectual Property and Genetic Resources, Traditional Knowledge and Folklore : Fifth Session. Geneva, July 7 to 15, 2003.
- WIPO. 2006. Republic of South Africa: Indigenous Knowledge Systems Policy. In Intergovernmental Committee on Intellectual Property and Genetic Resources, Traditional Knowledge and Folklore: Ninth Session. Geneva, March 15, 2006.
- WIPO. 2006a. The Protection of Traditional Cultural Expressions/Expressions of Folklore: Revised Objectives and Principles. In Intergovernmental Committee on Intellectual Property and Genetic Resources, Traditional Knowledge and Folklore: Eleventh Session. Geneva, April 24 to 28, 2006.
- Yeboah, Ian E.A. 2007. HIV/AIDS and the construction of Sub-Saharan Africa: Heuristic lessons from the social sciences for policy. *Social Science & Medicine* 64 (5):1128-1150.
- Yergin, Daniel, and Joseph Stanislaw, eds. 2002. *The Commanding Heights: The Battle between Government and the Marketplace that is Remaking the Modern World*. New York: Touchstone.
- Youde, Jeremy R. 2007. *AIDS, South Africa, and the Politics of Knowledge Global Health*: Ashgate Publishing.
- Zezeza, Paul Tiyambe. 2009. What Happened to the African Renaissance? The Challenges of Development in the Twenty-First Century. *Comparative Studies of South Asia, Africa and the Middle East* 29 (2):155-170.
- Zerubavel, Yael. 1995. *Recovered roots: collective memory and the making of Israeli national tradition*. Chicago: University of Chicago Press.
- Zhou, Yanqiu Rachel. 2007. "If you get AIDS... You have to endure it alone": Understanding the social constructions of HIV/AIDS in China. *Social Science & Medicine* 65 (2):284-295.
- Zinn, Emily R. 2000. Rediscovery of the Magical: On Fairy Tales, Feminism, and the New. *South Africa. Modern Fiction Studies* 46 (1):246-469.
- Zürn, Michael, and Jeffrey T. Checkel. 2005. Getting Socialized to Build Bridges: Constructivism and Rationalism, Europe and the Nation-State. *International Organization* 59 (Fall):1045-1079.

APPENDIX

Table 1.1 Variables and cases

Independent variable	Intervening variable	Dependent variable
International consensus	Social purpose	Domestic policy
HIV/AIDS policy as a public health crisis requiring biomedical solutions	<p style="text-align: center;">“Sovereign Democracy” (Russia)</p> <p style="text-align: center;">—————→</p> <p style="text-align: center;">“African Renaissance” (South Africa)</p>	<p>demographic and criminal narcotic abuse, requiring strong state intervention</p> <p>local socioeconomic problem, requiring unique approach often at odds with the international consensus</p>

Table 1.2 The HIV/AIDS policy baseline indicators

Policy component	<u>Treatment</u> Addressing the epidemic as a public health crisis with standardized protocol	<u>Universality</u> Providing the access to treatment to everybody who needs it , ideally free of charge	<u>Partnerships</u> Including all stakeholders in the policy formulation and implementation
Indicators of standardized policy response (Chapter 2)	1a. Public health crisis 1b. Standardized protocol (ARVs) 1c. Check on prices (generics)	2a. Inclusion of vulnerable groups 2b. “Scaling up” access 2c. Prevention (ABC)	3a. Public-private partnership (PPP) 3b. Civil society /nonprofit sector 3c. International organizations
Indicators of opposite to the standardized policy response	1a. Any secondary framing 1b. Substandard protocols 1c. No check/excessive control	2a. Any forms of stigma and exclusion 2b. “Scaling down” 2c. No prevention/ or as a substitute	3a. Selective engagement 3b. Exclusion from policy-making 3c. Any restrictions and challenges
Policy indicators in the Russian Federation (Chapter 6)	1a. National security crisis 1b. Breaking the protocol 1c. Import substitution	2a. Criminalization of IDUs 2b. Distribution crises 2c. Alternatives to prevention	3a. Expansion of public sector 3b. Exclusion from policy-making 3c. Asserting its own leadership
Policy indicators in the Republic of South Africa (Chapter 7)	1a. Socioeconomic crisis 1b. Alternative medications 1c. Restrains on generics	2a. Limited rollout 2b. Stalling treatment 2c. Alternatives to prevention	3a. Priority to private sector 3b. Exclusion from policy-making 3c. Counter-epistemic community

Table 1.3 Summary of comparisons and explanations

	Social Purpose as an intervening variable (Chapter 3)		
Components	Political distinctiveness	Economic empowerment	Systemic role
	The Russian Federation: “Sovereign democracy” (Chapter 5)		
	Strong state	State-led economy	Great power
Treatment 1a. Public health crisis 1b. Standardized protocol (ARVs) 1c. Check on prices (generics)	1a. Demographic crisis (strong state should be populous; narcotic consumption crises due to Russia’s weak position in the world)	1b. Breaking the protocol (<u>secondary factor</u> : the overextended economic obligations exacerbated weak state capacity, inefficiency, and corruption)	1c. Import substitution and the desirability of the “pharmaceutical sovereignty” (undesirability of reliance on the foreign pharmaceutical sector, including generics)
Universality 2a. Inclusion of vulnerable groups 2b. “Scaling up” access	2a. Criminalization of drug users (in the context of strong state being incompatible with human rights)	2b. Scaling up crises (<u>secondary factor</u> : the overextended economic obligations exacerbated weak state capacity,	2c. Alternatives to prevention (attempts to ban sexual education as anti-Russian conspiracy, which may lead to the country’s international

2c. Prevention (ABC)		inefficiency, and corruption)	weakness)
Partnership 3a. Public-private partnership (PPP) 3b. Civil society /nonprofit sector 3c. International organizations	3b. Exclusion of civil society from policy-making (NGOs only as service organizations, their political and advocacy incompatible with strong state)	3a. Expansion of public sector (massive public spending ; creating additional governmental bodies responsible for public policy; tendency to ignore private sector)	3c. Asserting its own leadership (building redundant international and regional conferences, asserting regional leadership in curbing AIDS)

Table 1.3 Summary of comparisons and explanations, continued

	Social Purpose as an intervening variable (Chapter 3)		
Components	Political distinctiveness	Economic empowerment	Systemic role
	The Republic of South Africa: “African Renaissance” (Chapter 6)		
	Indigenusness	Marketization	Exceptionalism
Treatment 1a. Public health crisis 1b. Standardized protocol (ARVs) 1c. Check on prices (generics)	1b. Alternative medications 1c. Restrains on generics (both incompatible with the stress on indigenous solutions to local problems)	1b. Alternative medications (Marketization as an <u>additional explanation</u> : bioprospecting of genetic medicinal resources as important private economic activity)	1a. Socioeconomic and developmental crisis (more encompassing than public health crisis, enrooted in South Africa’s special historical and geopolitical circumstances)
Universality 2a. Inclusion of vulnerable groups 2b. “Scaling up” access 2c. Prevention (ABC)		2a. Limited rollout to MTCPT (incompatible with the stress on marketization and avoiding redistribution strategies) 2b. Stalling treatment	2c. Alternatives to prevention (<u>only partial explanation</u> : stress on poverty eradication and healthy lifestyle in relation to indicator 1a

Partnership 3a. Public-private partnership (PPP) 3b. Civil society /nonprofit sector 3c. International organizations	3b. Selective inclusion in policy-making (exclusion of those which stressed ARVs, generics and universality of treatment; including those which promoted genetic resources)	3a. Protecting private sector (incompatible with the stress on marketization and avoiding redistribution strategies)	3c. Counter-epistemic community (<u>secondary factor</u> : the desirability of providing exceptional leadership in international organization; evidence strongly suggest individual-level explanation)
---	---	--	---

Table 2.1: Global policy consensus on HIV/AIDS

Policy component (Chapter 2)	1. <u>Treatment</u> Addressing the epidemic as a public health crisis with standardized protocol	2. <u>Universality</u> Providing the access to treatment to everybody who needs it , ideally free of charge	3. <u>Partnerships</u> Including all stakeholders in the policy formulation and implementation
Indicators of standardized policy response	1a. Public health crisis 1b. Standardized protocol (ARVs) 1c. Check on prices (generics)	2a. Inclusion of vulnerable groups 2b. “Scaling up” access 2c. Prevention (ABC)	3a. Public-private partnership (PPP) 3b. Civil society /nonprofit sector 3c. International organizations
Indicators of opposite to the standardized policy response	1a. Any secondary framing 1b. Substandard protocols 1c. No check/excessive control	2a. Any forms of stigma and exclusion 2b. “Scaling down” 2c. No prevention/ or as a substitute	3a. Selective engagement 3b. Exclusion from policy-making 3c. Any restrictions and challenges

Table 3.1 National purpose in Russia and South Africa

Proposal's components	Russia	South Africa
0. Title	"Sovereign democracy"	"African Renaissance"
1. Political distinctiveness	Strong state	Indigeneousness
2. Economic empowerment	State-led economy	Marketization
3. Systemic role	Great power in the multipolar world	Continental leadership and exceptionalism

Figure 3.1: Major processes in social purpose

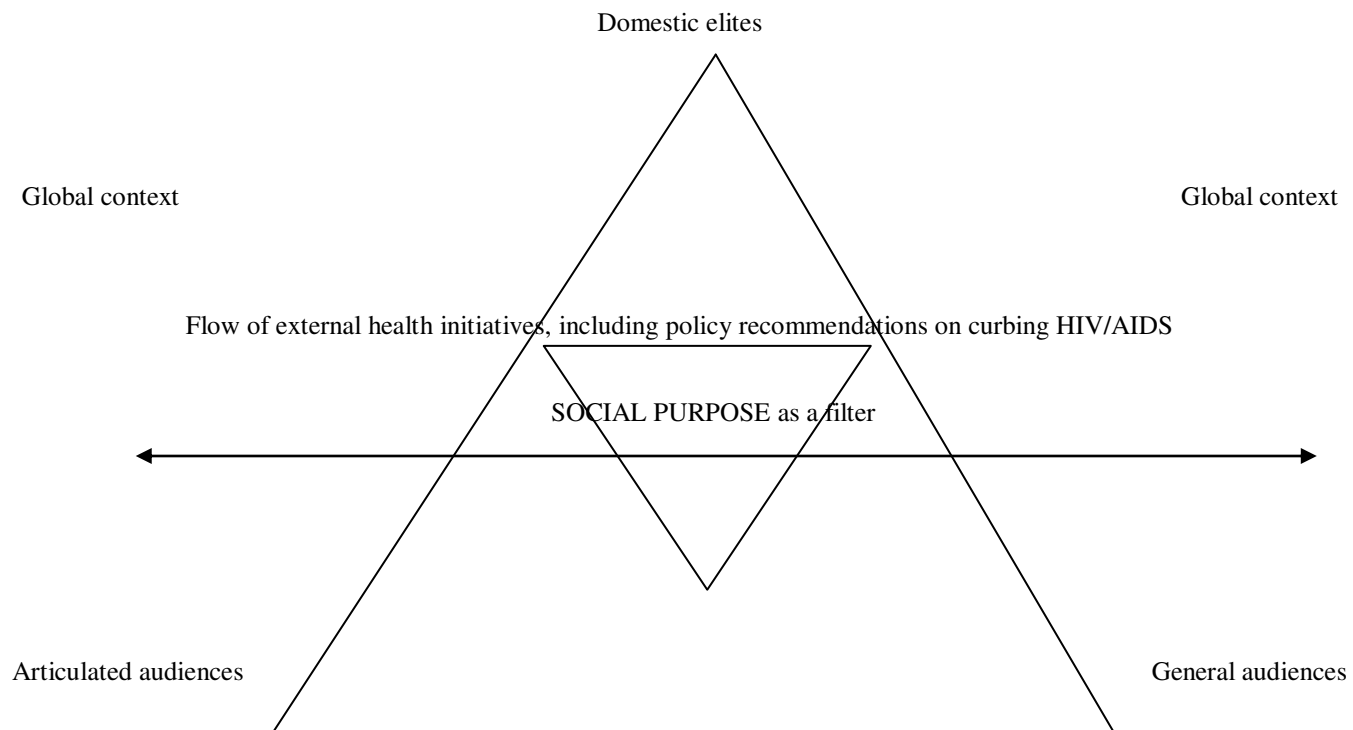


Table 3.2 Ranking social purpose

	Activity	Processes	Hypothesized effects on action
Absent	Commitment	<ul style="list-style-type: none"> • Elites do not commit to any definite country-specific conception of common good • Domestic policy environment lacks any definite legitimating discourses • Absence of discernible and elaborate discursive streams in public culture 	<ul style="list-style-type: none"> • Elite’s actions are not shaped social purpose, they do not imply commitment to a country-specific specific conception of common good • Alternative behavioral choices are possible, broadly advocated, and considered legitimate • Policy environment shaped by different bureaucratic agencies are expected to pursue their narrowly defined tasks
	Influence		
	Articulation		
Fractured	Commitment	<ul style="list-style-type: none"> • Contending elites strongly commit to alternative conceptions of common good • All contending conceptions of common good are strongly embedded in domestic policy environment • Public culture supports a plurality of contending articulations of common good 	<ul style="list-style-type: none"> • Only part of the elite is committed to the kinds of action it considers appropriate due to a specific conception of common good they embrace • Alternative behavioral choices are possible, broadly advocated, and considered legitimate • Broad conflicts in policy environment with unpredictable implications for public policy
	Influence		
	Articulation		

<p style="text-align: center;">Restrained</p>	<p>Commitment</p> <p>Influence</p> <p>Articulation</p>	<ul style="list-style-type: none"> • Elite strongly commits to a certain conception of common good, while its potential contender chose not to challenge it • This conception of common good is moderately embedded/legitimized in domestic policy environment • Public culture partially supports a dominant articulation of common good (or only some of its substantive components) 	<ul style="list-style-type: none"> • Elite is strongly committed to the kinds of action which social purpose underpins • alternative behavioral choices are generally delegitimized, but might be considered only with serious reservations • Minor conflicts in policy environment, yet the opponents of the enacted policy are significantly underprivileged
<p style="text-align: center;">Consolidated</p>	<p>Commitment</p> <p>Influence</p> <p>Articulation</p>	<ul style="list-style-type: none"> • Elite is strongly consolidated around a certain conception of common good • This conception of common good is strongly embedded/legitimized in domestic policy environment • Public culture strongly supports a dominant articulation of common good, including its all substantive components 	<ul style="list-style-type: none"> • Elite is strongly committed to the kinds of action which social purpose underpins • Alternative behavioral choices are considered inappropriate and strongly delegitimized • The enacted policy not disputed and considered unproblematic, by all segment of society; long-lasting effects to be observed

Table 4.1 Indicators of national purpose

Consolidated	Commitment	<ul style="list-style-type: none"> • Elite is strongly consolidated around a certain conception of common good 	<ul style="list-style-type: none"> • Elite is strongly committed to the kinds of action which social purpose underpins • Alternative behavioral choices are considered inappropriate and strongly delegitimized • The enacted policy not disputed and considered unproblematic, by all segment of society; long-lasting effects to be observed
	Influence	<ul style="list-style-type: none"> • This conception of common good is strongly embedded/legitimized in domestic policy environment 	
	Articulation	<ul style="list-style-type: none"> • Public culture strongly supports a dominant articulation of common good, including its all substantive components 	

Table 5.1 Indicators of national purpose

Restrained	Commitment (section one)	<ul style="list-style-type: none"> • Elite strongly commits to a certain conception of common good, while its potential contender chose not to challenge it 	<ul style="list-style-type: none"> • Elite is strongly committed to the kinds of action which social purpose underpins • Alternative behavioral choices are generally delegitimized, but might be considered only with serious reservations • Minor conflicts in policy environment, yet the opponents of the enacted policy are significantly underprivileged
	Influence (section two)	<ul style="list-style-type: none"> • This conception of common good is moderately embedded/legitimized in domestic policy environment 	
	Articulation (section three)	<ul style="list-style-type: none"> • Public culture partially supports a dominant articulation of common good (or only some of its substantive components) 	

Table 6.1: Summary of the HIV/AIDS policy in Russia

Policy component	Treatment	Universality	Partnerships
Definitions	Addressing the epidemic as a public health crisis with standardized protocol	Providing the access to treatment to everybody who needs it , ideally free of charge	Including all stakeholders in the policy formulation and implementation
Indicators of standardized policy response (Chapter 2)	1a. Public health crisis 1b. Standardized protocol (ARVs) 1c. Check on prices	2a. Inclusion of vulnerable groups 2b. “Scaling up” access 2c. Prevention (ABC)	3a. Public-private partnership (PPP) 3b. Civil society /nonprofit sector 3c. International organizations
Indicators of opposite to the standardized policy response	1a. Any secondary framing 1b. Substandard protocols 1c. No check/excessive control	2a. Any forms of stigma and exclusion 2b. “Scaling down” 2c. No prevention/ or as a substitute	3a. Selective engagement 3b. Exclusion from policy-making 3c. Any restrictions and challenges
Policy indicators in the Russian Federation (Chapter 6)	1a. State weakness 1b. Observing the protocol** 1c. Import substitution	2a. Criminalization of IDUs 2b. “Scaling up” access ** 2c. Alternatives to prevention	3a. Expansion of public sector 3b. Exclusion from policy-making 3c. Asserting its own leadership

Table 6.3: Summary of the impact of national purpose on HIV/AIDS policy

	The Russian Federation: “Sovereign democracy”		
	Strong state	State-led economy	Great power
<p>Treatment</p> <p>1a. Public health crisis</p> <p>1b. Standardized protocol (ARVs)</p> <p>1c. Check on prices (generics)</p>	<p>1a. State weakness</p> <p>(strong state should be populous; narcotic consumption crises due to Russia’s weak position in the world)</p>	<p>1b. Observing the protocol</p> <p><u>(full match)</u></p> <p>yet the overextended economic obligations exacerbated weak state capacity, inefficiency, and corruption)</p>	<p>1c. Import substitution and the desirability of the “pharmaceutical sovereignty”</p> <p>(undesirability of reliance on the foreign pharmaceutical sector, including generics)</p>
<p>Universality</p> <p>2a. Inclusion of vulnerable groups</p> <p>2b. “Scaling up” access</p> <p>2c. Prevention (ABC)</p>	<p>2a. Criminalization of drug users (in the context of strong state being incompatible with human rights)</p>	<p>2b. Scaling up</p> <p><u>(full match)</u></p> <p>yet due to state frequent interruptions of regimen and procurement delays)</p>	<p>2c. Alternatives to prevention</p> <p>(attempts to ban sexual education as anti-Russian conspiracy, which may lead to the country’s international weakness)</p>
<p>Partnership</p> <p>3a. Public-private partnership (PPP)</p> <p>3b. Civil society /nonprofit sector</p> <p>3c. International organizations</p>	<p>3b. Exclusion of civil society from policy-making</p> <p>(NGOs only as service organizations, their political and advocacy incompatible with strong state)</p>	<p>3a. Expansion of public sector</p> <p>(massive public spending ; creating extra-governmental bodies responsible for public policy; tendency to ignore private sector)</p>	<p>3c. Asserting its own leadership</p> <p>(building redundant international and regional conferences, asserting regional leadership in curbing AIDS)</p>

Table 7.1: Summary of the ARV policy in RSA, 2000—2008

Policy component	1. <u>Treatment</u>	2. <u>Universality</u>	3. <u>Partnerships</u>
	Addressing the epidemic as a public health crisis with standardized protocol	Providing the access to treatment to everybody who needs it , ideally free of charge	Including all stakeholders in the policy formulation and implementation
Indicators of standardized policy response (Chapter 2)	1a. Public health crisis 1b. Standardized protocol (ARVs) 1c. Check on prices (generics)	2a. Inclusion of vulnerable groups 2b. “Scaling up” access 2c. Prevention (ABC)	3a. Public-private partnership (PPP) 3b. Civil society /nonprofit sector 3c. International organizations
Indicators of opposite to the standardized policy response	1a. Any secondary framing 1b. Substandard protocols 1c. No check/excessive control	2a. Any forms of stigma and exclusion 2b. “Scaling down” 2c. No prevention/ or as a substitute	3a. Selective engagement 3b. Exclusion from policy-making 3c. Any restrictions and challenges
Policy indicators in the Republic of South Africa (Chapter 7)	1a. Socioeconomic crisis 1b. Alternative medications 1c. Restrains on generics	2a. Limited rollout 2b. Stalling treatment 2c. Alternatives to prevention	3a. Priority to private sector 3b. Exclusion from policy-making 3c. Counter-epistemic community

Table 7.3: Summary of the impact of national purpose on HIV/AIDS policy

	The Republic of South Africa: “African Renaissance” (Chapter 6)		
	Indigenusness	Marketization	Exceptionalism
<p>Treatment</p> <p>1a. Public health crisis</p> <p>1b. Standardized protocol (ARVs)</p> <p>1c. Check on prices (generics)</p>	<p>1b. Alternative medications</p> <p>1c. Restrains on generics (both incompatible with the stress on indigenous solutions to local problems)</p>	<p>1b. Alternative medications (Marketization as an <u>additional explanation</u>: bioprospecting of genetic medicinal resources as important private economic activity)</p>	<p>1a. Socioeconomic and developmental crisis (more encompassing than public health crisis, enrooted in South Africa’s special historical and geopolitical circumstances)</p>
<p>Universality</p> <p>2a. Inclusion of vulnerable groups</p> <p>2b. “Scaling up” access</p> <p>2c. Prevention (ABC)</p>		<p>2a. Limited rollout to MTCPT (incompatible with the stress on marketization and avoiding redistribution strategies)</p> <p>2b. Stalling treatment</p>	<p>2c. Alternatives to prevention (<u>only partial explanation</u>: stress on poverty eradication and healthy lifestyle in relation to indicator 1a)</p>

Partnership 3a. Public-private partnership (PPP) 3b. Civil society /nonprofit sector 3c. International organizations	3b. Selective inclusion in policy-making (exclusion of those which stressed ARVs, generics and universality of treatment; including those which promoted genetic resources)	3a. Protecting private sector (incompatible with the stress on marketization and avoiding redistribution strategies)	3c. Counter-epistemic community (<u>secondary factor</u> : the desirability of providing exceptional leadership in international organization; evidence strongly suggest individual-level explanation)
---	---	--	---

Table 8.1: Summary of the relationship between variables & explanations

Mechanisms	Predicted behavior (Null Ho)	Potential impact of identity on behavior
Peer learning	Elites consider all technical information and best cases to develop a policy response	Elites either are highly selective in adopting particular practices, or disregard all of it
Coalition-building	Minority traditions push elites to employ the policy to widen coalition and win uncommitted	Elites disregard the value of coalition-building as a resource to widen its political support
External pressures	Elites calculate benefits of external influence and/or costs of non-compliance	Elites pursue the selective adaptation of external demands

VITA

NAME OF AUTHOR: Vlad Kravtsov

PLACE OF BIRTH: Riga, Latvia

DATE OF BIRTH: July 30, 1977

GRADUATE AND UNDERGRADUATE SCHOOLS ATTENDED:

Syracuse University, Syracuse, NY

University of Delaware, Newark, DE

Russian State University for the Humanities, Moscow, Russia

DEGREES AWARDED:

Master of Arts in Political Science, 2005, Syracuse University

Master of Arts in Political Science, 2003, University of Delaware

Bachelor of Arts in History, 1999, Russian State University for the Humanities

AWARDS AND HONORS:

Certificate in University Teaching, 2010, Syracuse University

Certificate in Global Governance, 1999, Central European University

PROFESSIONAL EXPERIENCE:

Visiting Instructor, Northern Illinois University, DeKalb, IL 2009—
2010