

Institution: Aberystwyth University
Unit of Assessment: 21: Politics and International Studies
Title of case study: Global Health and Foreign and Security Policy
<p>1. Summary of the impact</p> <p>This case study describes the impact on public policy and public policy discussions, nationally and internationally, of research conducted in the Centre for Health and International Relations (CHAIR) at Aberystwyth University. The research concerned the relationship between global health and foreign and security policy by its director Professor Colin McInnes, and research by McInnes and Dr Simon Rushton on the national security implications of HIV/AIDS. The beneficiaries have been UK government officials and policy makers and officials and policy makers in relevant international health organisations globally. Professor McInnes and the Centre's staff remain actively involved in shaping national and global discussion on health policy.</p>
<p>2. Underpinning research</p> <p>The mission of CHAIR, established in 2003, has been to produce world-leading research on the international politics of global health. Since its inception, McInnes has been researching the political dimensions in the emergence of 'global health'. This work is multi-disciplinary in nature and much of it has been conducted with partners in Schools of Public Health, especially the London School of Hygiene and Tropical Medicine (LSHTM), and in collaboration with colleagues at CHAIR, notably with Dr Simon Rushton, based at CHAIR in Aberystwyth from 2004 until August 2012.</p> <p>McInnes, who holds the UNESCO Chair in HIV/AIDS, Health Education and Security in Africa at Aberystwyth University, was one of the first researchers in the UK to identify how the shift from 'international' to 'global' health had created opportunities for new relationships with other policy sectors and especially foreign and security policy (3.1). This case study focuses on two linked elements of this research: the relationship between global health and foreign and security policy; and HIV/AIDS as a national security issue.</p> <p>First, through 2003-07 with Professor Kelley Lee of LSHTM, McInnes began to identify potential links between global health and foreign and security policy and to identify how they might work together (what is now referred to as 'global health diplomacy'). This was research sponsored in large part by a grant from The Nuffield Trust (3.7). With Lee, McInnes was instrumental in developing a new articulation of this relationship. Specifically McInnes and Lee engaged with the initial narrow focus on communicable diseases and bio-terrorism, and demonstrated how the relationship may be broadened to include non-communicable diseases (such as tobacco-related illnesses) and structural issues such as access to medicines (3.2).</p> <p>McInnes also conducted specific research on the UK and health and foreign policy for the Nuffield Trust. This led him to develop a template of eight questions, the answers to which provided a means of assessing success in linking health and foreign policy (3.3). Additionally, McInnes and Rushton, supported by a grant from the ESRC New Security Challenges programme (3.8), examined the potential use of health as a 'bridge for peace'. They argued that health investments might be used for political effect in conflict and post-conflict settings by using the superordinate quality of health to engage warring parties in negotiations and trust-building. In particular they argued that such investments might be incorporated into peace-building strategies (3.4).</p> <p>Second, McInnes with Rushton also conducted detailed research on the relationship between high prevalence of HIV/AIDS, especially in sub-Saharan states, and national security (3.5). In research completed prior to Rushton's departure from Aberystwyth in 2012, McInnes and Rushton directly challenged the prevailing wisdom on the relationship between HIV/AIDS and national security. The initial hypothesis was of a strong link between HIV/AIDS and national security. This was based upon assumptions made about the socio-economic impact of HIV, conflict acting as a vector for the</p>

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spread of the disease, and peacekeepers being both vulnerable to HIV when deployed and spreading the disease in mission country and on their return. These assumptions had underpinned the UN Security Council discussion in January 2000 and the subsequent Resolution 1308. By the middle of the decade, however, a reaction had set in questioning the validity of these assumptions and the status of HIV/AIDS as a national security issue. At the end of the decade, McInnes and Rushton demonstrated that the relationship did exist but that 'the links between HIV/AIDS and security are far from straightforward and a greater appreciation of nuances is required' (3.6).

3. References to the researchResearch outputs:

- 3.1 Lee, K. and McInnes, C. (2004) A conceptual framework for research and policy. In Ingram, A. (ed.) *Health, Foreign Policy and Security*. London: Nuffield Trust and Nuffield Health and Social Services Fund, pp. 10-18. ISBN 1-905030-00-2. This chapter reflects on background papers by McInnes on health and foreign policy and security studies. Notes on quality: an output attached to a major and prestigious grant; cited in subsequent academic literature.
- 3.2 McInnes, C. and Lee, K. (2006) Health, security and foreign policy. *Review of International Studies*, 32 (1): 5-23. DOI: 10.1017/S0260210506006905. Notes on quality: peer-reviewed article; published in a leading journal in the field; widely cited in subsequent academic literature.
- 3.3 McInnes, C. (2005) *Health and Foreign Policy in the UK: The Experience since 1997*. London: The Nuffield Trust. ISBN 1-905030-10-X. Notes on quality: an output attached to a major prestigious grant; cited in subsequent academic literature.
- 3.4 McInnes, C. and Rushton, S. (2006) The UK, health and peace-building. *Medicine, Conflict and Survival*, 22 (2): 94-109. DOI: 10.1080/13623690600620940. Notes on quality: peer-reviewed; published in a well-respected journal; cited in subsequent academic literature.
- 3.5 McInnes, C. and Rushton, S. (2013) HIV/AIDS and securitization theory. *European Journal of International Relations*, 19 (1): 115-138. DOI: 10.1177/1354066111425258. Notes on quality: peer-reviewed; published in a leading journal in the field; cited in subsequent academic literature.
- 3.6 McInnes, C. and Rushton, S. (2010) HIV, AIDS and security: where are we now? *International Affairs*, 86 (1): 244 (225-245). DOI: 10.1111/j.1468-2346.2010.00877.x. Notes on quality: peer-reviewed; published in a well-respected journal in the field; cited in subsequent academic literature.

Grants associated with research:

- 3.7 Nuffield Trust Health and Social Services Fund-sponsored grant awarded under *Joint UK Global Health Programme*. Principal Investigators: Professor Colin McInnes with Professor Kelley Lee, LSHTM. Dates of grant: 1/9/2003-31/8/2006. Total value of grant: £191 728. Notes on quality: highly prestigious grant; resulted in numerous high-quality publications cited in subsequent academic literature.
- 3.8 Economic and Social Research Council-sponsored grant under New Security Challenges for project entitled *Global Health, Security and Foreign Policy*. Principal Investigators: Professor Colin McInnes with Dr E. Sondorp (LSHTM). Dates of grant: 1/4/2004-31/3/2005. Total grant awarded: £100 000. Notes on quality: highly prestigious and competitive award; resulted in numerous high-quality publications cited in subsequent academic literature.

4. Details of the impact

McInnes' research has generated impact on both public policy and on public policy discussions of officials and policy makers, nationally and globally. This impact has been had in two areas: in policy framings of the relationship between health and foreign and security policy, and in understandings of HIV/AIDS and security.

First, the research on the relationship between global health and foreign/security policy had a direct impact on the White Paper *Health is Global: A UK Government Strategy 2008-13*. The process leading up to this impact started with initial dissemination of findings in co-operation with The Nuffield Trust, which organised a series of seminars, conferences and workshops with practitioners. These were held in the UK, US and Australia and included senior level policy makers (up to and including Foreign Minister) and senior civil servants. From the UK, senior officials from Department for International Development (DfID), Department of Health (DoH) and the Foreign and Commonwealth Office (FCO) attended, including the Permanent Secretary at the Department of Health. Following these initial contacts, McInnes was subsequently invited to a series of workshops held jointly between the Department of Health and Foreign and Commonwealth Office, under the auspices of the UK Chief Medical Officer. McInnes' research findings on a broadened agenda with regard to health and security provided the focus of a dedicated workshop in this series. These provided the background to the development of a UK Global Health Strategy.

This process of informing policy discussions culminated in policy impact in 2008, seen in the publication of *Health is Global: A UK Government Strategy 2008-13*, a cross-Departmental White Paper linking health and foreign policy as well as development. The impact of McInnes' work for The Nuffield Trust is reflected both in the broader perspective taken in the White Paper on the relationship between health and foreign policy, and by his recommendations on assessment being openly cited in the White Paper as providing a potential template for judging the *Strategy's* success (5.1). In the subsequent *Impact Assessment of 'Health is Global: A UK Government Strategy 2008-13'*, five of the ten underpinning principles in the impact assessment (principles 2,3,4, 6 and 10) directly reflect questions in McInnes' template (questions 2, 4,5 and 8) (5.2).

Further impact on policy discussions of McInnes' research on the broadened agenda of health and security is reflected in the invitation to speak to a High Level Cabinet Office meeting in 2009. The purpose of the meeting was to assess the National Security Strategy and discuss its future development. Reflecting his research expertise on global health and security, McInnes was specifically asked to speak to the meeting on the position of health as a security issue for the UK (5.3).

The impact of McInnes' research on policy discussions in the UK has been on-going. In 2012 McInnes was also invited to attend a meeting of the Health Protection Agency's Global Health Technical Committee (5.4). This was a sub-committee of the Health Protection Agency's Board, chaired by a Non-Executive Director of the Board. It reported directly to the Board on global health issues affecting the UK. McInnes, on the recommendation of the Chair of Global Health Technical Committee, was approached 'regarding global health and security issues, given HPA's role in improving global health security, as part of the UK government's *Health is Global outcomes framework* (sic).' He was specifically asked to 'present on [his] work on new global security challenges' and to participate in the subsequent discussion on developing the UK's preparedness for health threats (5.4).

Internationally, McInnes' research on health and foreign and security policy also led to him being invited to become a Temporary Adviser to the World Health Organization in developing its global health diplomacy network (5.5). Specifically, the World Health Organization, on the recommendation of the current Global Health Security Adviser at the US National Security Council, requested that McInnes and Rushton's 'really good paper' on health as a bridge for peace be provided as the background brief to a meeting in July 2009 (5.6). This paper was based on the research funded by the ESRC and had been published as 3.4.

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Second, CHAIR's research on HIV/AIDS and security has also impacted on policy discussions. Research on this relationship led to an invitation for McInnes to speak on the subject at a workshop in Thailand in April 2009 (5.7). The workshop, on the politics of HIV/AIDS, was co-organised by the Senior Adviser to the Executive Director of the Joint UN Programme on HIV/AIDS (UNAIDS), and was sponsored by UNAIDS. The workshop's agenda was to inform discussions building up to the UN High Level Meeting on HIV/AIDS and the subsequent Special Session of the Security Council, both held in 2011, and the 2012 conference of the International Aids Society, the largest and most significant professional/civil society actor in the global fight against the disease.

McInnes' research and contribution to the workshop led directly to him being asked by the Senior Adviser to contribute to the framing of the General Assembly and Security Council meetings by commenting on the draft 'White Paper'. McInnes' contributions were received as being of 'immense help' (5.8). The influence of McInnes' contributions to policy discussions in the UN is seen in the address of UNAIDS' Executive Director to the Security Council in 2011. His statement was in stark contrast to that of his predecessor, Peter Piot's, declaration of a strong link between HIV and security, made in the January 2000 meeting of the Security Council. In 2011 UNAIDS Executive Director, directly echoing McInnes' argument on HIV/AIDS and security (3.6, that 'the links between HIV/AIDS and security are far from straightforward and a greater appreciation of nuances is required'), and repudiating the claims of a few years previously that there was no link, stated that: 'The risk HIV poses to peace and security is far more nuanced than we thought in 2000'. This was reiterated in the official UN press release accompanying the meeting, and in the report on the UN website (5.9).

CHAIR staff remain very active in public engagement and impact generation. For example, in 2012 McInnes and colleagues hosted a major symposium at Chatham House presenting research findings of recent research on global health governance to an audience of 100 practitioners and policy makers, which in turn resulted in CHAIR staff being invited to consult for the Norwegian-government funded Commission on Global Governance for Health, and produce the Commission's report for presentation at the UN General Assembly. CHAIR under the leadership of Professor McInnes is then set to continue to serve as a site of important nationally and globally relevant high-quality research on global health.

5. Sources to corroborate the impact

- 5.1 *Health is Global: A UK Government Strategy 2008-13*. HMSO, 2008.
- 5.2 *Impact Assessment of 'Health is Global: A UK Government Strategy 2008-13'*, archived version available at:
http://webarchive.nationalarchives.gov.uk/20130107105354/http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_088698.pdf.
- 5.3 High Level Conference: The National Security Strategy One Year On, Programme, Cabinet Office/IPPR/BAE Systems, 27 April 2009.
- 5.4 Email from representative of the Health Protection Agency, 24 April 2012.
- 5.5 Letter of invitation from representative of World Health Organization, 4 May 2009.
- 5.6 Email from representative of the World Health Organization, 28 April 2009.
- 5.7 Letter of Invitation from organisers to attend International AIDS Society/UNAIDS Conference, Bangkok, April 2011.
- 5.8 Email from Senior Adviser to the Executive Director of UNAIDS, 5 May 2011.
- 5.9 Unanimously adopting 1983 (2011) Security Council encourages inclusion of HIV Prevention, Treatment, Care, Support in implementing peacekeeping mandates. UN Security Council, 6547th meeting, 7, June, 2011. Available at:
<http://www.un.org/News/Press/docs//2011/sc10272.doc.htm>.
See also associated News Release available at:
http://www.un.org/apps/news/story.asp?NewsID=38640#.UTm_xzdmeFA.