

30 May 2012

HIV/AIDS and Security in Southern Africa

Not only do HIV/AIDS infection rates remain high across Southern Africa, they continue to shape the region's security dynamics. Is humanitarian intervention contributing to the problem or not?

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Yesterday [we outlined](#) how ethnic tensions and Southern Africa's long-historical memory of the apartheid era potentially compromise the security dynamics of the region. Our podcast with the Center for the Study of Violence and Reconciliation's (CSV) Delphine Serumaga serves to reinforce another major theme of our week-long focus on Southern Africa – namely that South Africa appears at times to be a reluctant regional hegemon. Yet it is not just race, ethnicity and a checkered past that impact upon the security and geopolitical outlook of the Southern African cone.

A range of social and economic problems that continue to compromise the wellbeing of Southern Africa have also contributed to perhaps the region's most pressing demographic problem. Not long after statistics began to be recorded, Southern Africa became synonymous with the spread of HIV/AIDS. As today's infographic feature shows, Southern Africa is home to the highest HIV/AIDS infection rates in the world. Moreover, the spread of HIV/AIDS is by no means concentrated within the region's most impoverished states. South Africa – the regional power in waiting – has one of the highest HIV infection rates across the region.

As health, economic and environmental problems are all increasingly understood as major challenges to security it would be wholly inaccurate to assume that HIV/AIDS does not impact on Southern Africa's geopolitics and security dynamics. And despite some positive statistics and analysis, the chances that HIV/AIDS will positively impact upon the geopolitics of the Southern Africa remain slim.

Southern Africa Bears the Brunt

The [Joint United Nations Programme on HIV/AIDS'](#) (UNAIDS) statistics on the spread of HIV/AIDS tell an obvious truth – that some of the most impoverished regions of the world have been worse affected by the disease than the developed world. And as today's infographic re-confirms, Southern Africa has the highest rates of infection not just in Africa, but in the world.

Despite such gloomy statistics, [UNAIDS' Report on the Global AIDS Epidemic 2010](#) used data gathered from 182 countries to predict that the international system had turned a corner and begun to reverse the spread of HIV/AIDS. Yet such bold predictions are unlikely to provide too much comfort for Southern Africa. In countries such as Botswana and (most significantly) South Africa, HIV/AIDS infection rates among 15 to 49 year olds remain as high as 24.8 and 17.8 per cent respectively. And as the most recent UNAIDS statistics demonstrate South Africa's backyard is hardly in better shape.

HIV/AIDS and the Region's Armed Forces

UNAIDS' statistics also add credibility to arguments that such high rates of infection inevitably impact upon the security of the Southern African region. If almost a quarter of the region's population is infected with HIV/AIDS, one can expect infection rates in the armed forces and individual states in that region to be similar. Indeed, it has previously been estimated that the HIV/AIDS infection rates among African armed forces are two to five times higher than the general population. If so, then almost 50% of soldiers in the South African National Defence Force (SANDF) could be infected with HIV/AIDS.

Academics like [Stefan Elbe](#) have outlined the threats to human security posed by armed forces with high HIV/AIDS infection rates. In particular, many armed forces with high rates of infection contribute to international peacekeeping operations. Accordingly, such armed forces act as a natural vector for the increasing spread of HIV/AIDS in war-torn and fragile states. Factors that contribute to the spread include sexual exploitation and the abuse of sections of the population by peacekeepers. HIV/AIDS infection rates increased in Sierra Leone, for example, partially as a result of troop contributions to the United Nations' peacekeeping mission (UNAMSIL) from armed forces with high infection rates such as Zambia.

Accordingly, not only is the SANDF the region's largest and most capable armed force, it is (at least theoretically) the most likely to make a significant contribution to increased HIV/AIDS infection rates while engaged in peacekeeping operations. Adding substance to this argument is that South Africa's post-apartheid rehabilitation into the international system, has allowed Pretoria to contribute to peacekeeping missions in Sudan and the Democratic Republic of Congo. Moreover, the SANDF is being deployed in [increasing numbers](#) along South Africa's borders with the likes of Zimbabwe in order to prevent illegal cross-border activities. Yet with such high HIV/AIDS infection rates, it might be assumed that the armed forces of the Southern African cone are constantly on the verge of collapse. However, recent studies suggest that jumping to such conclusions merely exaggerates the problem.

Instead the Social Science Research Council's (SSRC) [HIV/AIDS, Security and Conflict](#) argues that the picture "is much more complex and less alarming than previously presumed." Instead of a clear correlation between the prevalence of HIV/AIDS in the general population and its armed forces, the study finds some interesting statistical variations. For example, HIV prevalence among new recruits – predominantly young men from disadvantaged rural backgrounds – tends to be lower than among the general population. However, infection rates among senior officers tend to be higher than average.

The SSRC further argues that there is no real evidence to suggest that troops involved in peacekeeping missions contribute to increases in HIV/AIDS infection. Instead, the SSRC counters that infection rates among peacekeeping forces tend to be much lower than those of the host countries in which they are stationed. The reasons for this are simple enough - most troop-contributing countries are not only bolstering efforts to screen personnel, but do not deploy troops infected with HIV/AIDS on peacekeeping operations.

Implications for Southern Africa

While factors such as recent history and economic problems contribute to understanding South Africa's outlook for the Southern African cone, HIV/AIDS also contributes to Pretoria's geopolitical calculations. South Africa remains poised to (reluctantly) lead the region geopolitically - with one of the highest rates of HIV/AIDS infection in the world. Pretoria's immediate sphere of influence also continues to remain compromised by problems associated with poverty and state failure. As the SANDF's increased presence along South Africa's borders with its neighbors perhaps demonstrates, Pretoria remains concerned about the most pernicious aspects of illegal cross-border migration. And as HIV/AIDS is by no means mutually exclusive of such problems, this ongoing challenge to the health and welfare of Southern Africa helps to explain why Pretoria seems reluctant to assume regional leadership.

Editor's note:

For more content on Southern Africa, please see our [dossier](#) on the topic.

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