

# Not an epidemic, but a global problem: the authorities' construction of HIV/AIDS in Russia

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## Abstract

The article deals with the ways Russian authorities have constructed the social problem of HIV/AIDS (human immunodeficiency virus/acquired immune deficiency syndrome) in Russia. The statistical construction of HIV/AIDS includes data indicating the significant rise of HIV prevalence in Russia since 2000. The study focuses on what and how Russian authorities speak about HIV/AIDS, while there are official data on the rapid spread of the virus in the country. The work is based on a discourse analysis of the authorities' rhetoric about HIV/AIDS. During his first presidential terms, Vladimir Putin constructed HIV/AIDS not as an epidemic in the country, but as a "global problem," representing Russia as a participant in international efforts to combat AIDS. The president problematized the HIV spread through the rhetoric of endangerment but without its crucial term "epidemic," while at the same time de-problematized HIV in Russia by the strategy of naturalizing ("this is a problem that all countries face"). The Russian authorities appealed to traditional moral values and spoke about marginal or risk groups, rather than risk practices. After the deterioration of relations with Western countries since 2007, the Russian president excluded HIV/AIDS problem from his public agenda, despite the existence of the data on steep HIV growth in Russia. The Russian president's traditionalism, de-problematization, and silence concerning HIV/AIDS lead to the absence of the HIV/AIDS issues in media agenda, the agenda of local authorities, and consequently the personal agendas of Russian citizens. The consequences are ignorance, fears, stigmatization of people living with HIV, semi-legal status of needle, and syringe exchange programs for intravenous drug users, low antiretroviral therapy coverage, and the continuing HIV epidemic.

**Abbreviations:** AIDS = acquired immune deficiency syndrome, HIV = human immunodeficiency virus.

**Keywords:** authorities, human immunodeficiency virus/acquired immune deficiency syndrome power, problematization, rhetoric, Russia, social problem

## 1. Introduction

In Russia, there are different constructions of the social problem of HIV/AIDS (human immunodeficiency virus/acquired immune deficiency syndrome): statistical, governmental, expert, media,

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common ones. The Joint United Nations Programme on HIV and AIDS notes that Eastern Europe and Central Asia is the only region in the world where the HIV epidemic continues to rise rapidly, with more than 80% of the region's new HIV infections were in the Russian Federation.<sup>[1]</sup> There are official data about the significant and rapid increase of HIV infection in Russia since 2000. By 2000, about 31,000 HIV cases were registered among Russian citizens, by 2005 this number rose to 300,000, by 2010 to 530,000, by 2015 it exceeded 900,000.<sup>[2]</sup> By June 30, 2019, according to the Federal AIDS Center, 1,376,907 cases of HIV infection have been registered among Russian citizens, 335,867 people with HIV died. The number of people living with HIV who are aware of their diagnosis of "HIV infection" was 1,041,040 by the middle of 2019.<sup>[3]</sup> Coverage of antiretroviral therapy, according to the Federal AIDS Center, by June 30, 2019, was 44.8% of the number of people living with the diagnosis of "HIV infection".<sup>[3]</sup> As stated earlier by the Federal AIDS Center, "the treatment coverage achieved in Russia does not play the role of a preventive measure and does not allow to reduce the spread of the disease radically".<sup>[4]</sup>

The focus of this study is on the rhetoric of Russian authorities: what and how Russian authorities speak about HIV/AIDS in the period when official data indicate the significant rise of HIV prevalence in the country.

The study is based on the constructionist approach to social problems.<sup>[5–9]</sup> In constructionist terms, social problems are not "objectively existing" harmful, dangerous, threatening conditions, but claims-making, "the activities of individuals or groups making assertions of grievances and claims with respect to some putative conditions" (p. 75).<sup>[5]</sup>

Constructionism understands social problems as complex language games, in which different participants create different

meanings. A strict version of the constructionist approach suggests that the researcher “never leaves language” (p. 64)<sup>[7]</sup> and refrains from making assumptions about “objective conditions,” regarding which the problematizing or de-problematizing rhetoric unfolds.

Ibarra and Kitsuse have developed a research program that focuses on rhetorical idioms that are definitional complexes through which the problematic status of a condition is elaborated, and counterrhetorics that are discursive strategies to counter the claims-making. Rhetorical idioms as ways of problematization provide participants with discursive materials “to structure and lend urgency to their claims” (p. 27).<sup>[7]</sup> The constructionists have formulated the following idioms: loss, entitlement, endangerment, unreason, and calamity. Each rhetorical idiom draws upon a cluster of images and has a specific vocabulary. The counterrhetorics, on the contrary, are discursive strategies to oppose the definition of the condition as a problem. These ways of de-problematization include the following strategies: naturalizing, representing the condition as natural and inevitable; the counterrhetoric of the costs involved in changing the condition; declaring impotence; perspectivizing, presenting the claim as just 1 of the possible “opinions”; tactical criticism, the critique of the tactics of constructing the problem; antipatterning, the presentation of a claim as characterizing not a full-scale social problem, but “isolated incidents”; the counterrhetoric of the “telling anecdote”, locating an instance, that “shows that the generality of the analysis offered by claimants is suspect”; the counterrhetoric of “insincerity” of those who construct the problem; and the counterrhetoric of their “hysteria” (pp. 33–38).<sup>[7]</sup>

Constructionists also studied the interests of the authorities in the processes of social problems. According to Lenoir, raising a situation to the rank of a “social problem” is of interest to the government either because this definition involves “solutions” that the state can implement, or because it is considered possible to comprehend and measure it with a fair degree of accuracy, creating an impression of being able to keep it under control (p. 139).<sup>[9]</sup>

The Russian authorities’ rhetoric concerning HIV/AIDS has been studied in different perspectives. According to Burke, a notion of cementing traditional family values promoted by Russian authorities forces drug users, men who have sex with men, and sex workers vulnerable to HIV to the margins of society.<sup>[10]</sup> Colborne emphasizes that while HIV infection rates in Russia continue to climb, the Kremlin persists in rejecting preventive harm-reduction approaches, such as needle exchanges, methadone replacement therapy, and promoting condom use, which could help curb the epidemic.<sup>[11]</sup> Russian president’s rhetoric on HIV/AIDS has been analyzed as the securitizing move<sup>[12]</sup> and the security threat framing.<sup>[13]</sup> Pape concludes that “Russia has thus far failed to confront HIV, as the government is not prepared to fully acknowledge the underlying causes of the epidemic or introduce necessary policies” and that the main problem in addressing HIV in the country is the lack of political will.<sup>[14]</sup> Brown points out that there is a high price paid for President Putin’s procrastination on HIV in the form of continuing ignorance about the virus among the general population.<sup>[15]</sup>

The constructionist approach to social problems can add 1 more dimension to the study of the rhetoric of Russian authorities about HIV/AIDS: an analysis of the ways of problematization and de-problematization. The research question is in what

discursive ways HIV/AIDS is problematized and de-problematized by Russian authorities?

## 2. Methods

The chronological frameworks of the study are based on presidential terms of Vladimir Putin (2000–2004, 2004–2008, 2012–2018, and the current one from 2018) and Dmitry Medvedev (2008–2012). The statistical construction of HIV/AIDS in Russia includes data about a significant increase in the prevalence of HIV infection since 2000. From the same year, the official website of the president has existed.

A search on the Kremlin website, used as the source of Russian authorities’ rhetoric on HIV/AIDS, by the keywords “HIV” and “AIDS” revealed 93 texts published from July 2000 till December 2018. Thirty-two texts from this amount include statements on HIV/AIDS by presidents Putin and Medvedev.

The rhetoric of the authorities, found through the study of official speeches, was sorted with the vocabularies of rhetorical idioms and counterrhetorics for revealing the ways used to problematize and de-problematize HIV/AIDS.

The ethical approval of this research was not necessary because it did not involve human participants, the data are not sensitive, and there were no risks of harm.

## 3. Data and discussion

A study of Vladimir Putin’s statements on HIV/AIDS since 2000 shows that during his first presidential term and the first half of the second one, this theme regularly appeared on his agenda. Putin reported his intention to work closely with the USA in solving the problem of HIV infection,<sup>[16]</sup> made decision about Russia’s participation in the Global Fund to Fight AIDS, Tuberculosis and Malaria, noted the high incidence of AIDS in Kaliningrad Region<sup>[17]</sup> and the Siberian Federal District,<sup>[18]</sup> spoke about HIV/AIDS during TV “direct lines”<sup>[19,20]</sup> and in annual addresses to the Federal Assembly.<sup>[21,22]</sup>

Most of Putin’s statements about HIV/AIDS during his first presidential terms were caused by international events and had a global context. He called AIDS and tuberculosis “the most serious and worrisome diseases of mankind”,<sup>[23]</sup> spoke about “uniting efforts in the international arena”<sup>[24]</sup> and “international solidarity in the fight against the spread of AIDS”.<sup>[25]</sup> Russia in these statements was presented mainly not as a country in which the HIV epidemic takes place, but as a participant in global efforts to combat HIV/AIDS, including humanitarian programs.

At the same time, Putin problematized the spread of the disease in Russia. The terms used by the president correspond to the vocabulary of the rhetorical idiom of endangerment: “an avalanche-like spread of AIDS”,<sup>[26]</sup> “AIDS epidemic”,<sup>[19]</sup> “deadly AIDS virus”,<sup>[27]</sup> “threat”,<sup>[22]</sup> “a very acute problem”,<sup>[20]</sup> “a very actual” problem,<sup>[24]</sup> “extremely dangerous disease”.<sup>[28]</sup>

Putin, during this period, declared the responsibility of the authorities: “We are obliged to reduce the prevalence of infectious diseases, including HIV infection, significantly”.<sup>[29]</sup> In the mid-2000s, he reported about an increase of 20 to 30 times of the financing of treating people with HIV<sup>[20]</sup> and promised cautiously: “If the planned programs are implemented, we will provide access to medicines for all who need it and for all carriers of HIV infection by 2010”.<sup>[30]</sup>

In first terms of his presidency (2000–2004, 2004–2008), Putin problematized not only the spread of AIDS, but also the

stigmatization of people living with HIV: “*There is an extremely acute problem of people infected with HIV and other dangerous diseases which in fact become outcasts and have to cope both with their disease and the difficulties of adapting to a full life in a society*”.<sup>[28]</sup>

From 2000 till 2020, the President of Russia delivered only 1 speech about HIV/AIDS, exactly in this “early” period. It was delivered as the opening remarks at the State Council Presidium meeting on April, 23, 2006 to April 21, 2006.<sup>[31]</sup> The president’s speech included recognition of the significance of the problem:

More than 342,000 people have now been registered as carriers of HIV infection in Russia. The situation in Russia so far is a concentrated epidemic, that is to say, an epidemic concentrated in several risk groups. However, specialists are already observing a dangerous trend of infection moving beyond the confines of these groups.

Both elements of usual authorities’ game in social problems<sup>[9]</sup> were present in the president’s rhetoric about HIV/AIDS: the possibility of a “solution” and “exact knowledge” of the problem, creating an impression of control. Putin endowed the HIV/AIDS with the status of the problem, while at the same time presented the “solutions” implemented by governmental agencies:

The rate of HIV infection was reduced from 88,000 cases in 2001 to 35,000 cases last year – that is to say, the infection rate more than halved. The Healthcare national project allocates sizeable funds to the prevention, diagnosis, and treatment of HIV infection and viral hepatitis. Only this year, 3.1 milliard roubles, many times more than ever in the past, were allocated to this work.

Putin also emphasized the “knowledge” of the state about the problem:

Our second task is to organize accurate and objective monitoring of the epidemic. I emphasize: Russia is one of the few countries in the world to keep combined statistics on HIV infection. These statistics have been kept at both federal and regional levels since 1987. Today, however, we need to establish a monitoring system that meets common international standards. We need to establish a comprehensive database that will enable us to make a real evaluation of the causes of the illness and the effectiveness of medical and social preventive measures so that we can make the right responses in our fight against HIV infection.

In his speech, Putin initiated an appeal to moral values in statements about HIV/AIDS: “*Our common task is to promote a healthy way of life and raise awareness of the importance of moral values*”.<sup>[31]</sup> Previously, this rhetoric was not used by the president regarding HIV/AIDS. Unlike earlier statements, he used the term “*carriers of HIV infection*” and mixed the terms “HIV” and “AIDS”: “*people infected with AIDS,*” “*the birth of AIDS-infected children.*”

Since 2007, the theme of HIV/AIDS was not an item on the public agenda of Russian presidents (Putin and Medvedev). Dmitry Medvedev, when he was the President of Russia (from 2008 to 2012), spoke only twice about HIV/AIDS, both times answering questions from citizens of Western countries. Medvedev called HIV a “big” and “very severe problem”.<sup>[32,33]</sup> Putin did not publicly touch on the theme of HIV during his third presidential term (2012–2018) and only in April 2018 mentioned HIV, at a meeting with the acting governor of the Kemerovo

Region Sergey Tsivilev.<sup>[34]</sup> The excluding of HIV/AIDS from the presidential public agenda coincided with a change in rhetoric regarding the USA and West European countries and deterioration of the relations with them since a speech delivered by Putin in February 2007 in Munich.

Presidents Putin (during his first terms) and Medvedev also de-problematized HIV/AIDS in Russia, using the strategy of naturalizing that presents the phenomenon as natural and inevitable. The variety of this strategy is the widening of phenomenon frameworks and defining it not as national, but as a global problem. Putin, in the cases of critical questions about corruption, violations of human rights and freedoms, brutal suppression of peaceful protests, the annexation of Crimea, full control of the authorities over TV channels, dismissals and murders of journalists in Russia, begins his answers by presenting these conditions as existing not only in Russia but also in other countries, primarily western ones. Putin and Medvedev used the same strategy in their statements about HIV/AIDS:

Today we consider the problem that is global in character and concerns not only Russia but the entire world (Putin).<sup>[31]</sup>

Even the most prosperous states fail to reduce the level of such severe diseases like AIDS, tuberculosis (Putin).<sup>[35]</sup>

One must admit that this is a common threat. It is peculiar, frankly speaking, not only to Russia, not only to the countries of Eastern Europe (Medvedev).<sup>[32]</sup>

The constant emphasis on HIV/AIDS as a “common threat,” global problem and challenge, removes part of the responsibility for the problem from Russian authorities.

As to the term “epidemic,” Putin used it several times referring to HIV/AIDS in Russia in the first half of the 2000s, but in 2005 he said: “The problem is very acute, but still it does not have the nature of epidemic”.<sup>[20]</sup> Later, neither Putin nor Medvedev used this term concerning HIV/AIDS in Russia. In December 2016, the Russian Minister of Health Veronika Skvortsova said: “There are no single criteria for defining HIV as an epidemic... No epidemic has been announced yet in our country”.<sup>[36]</sup>

One of the motifs of the Russian authorities’ rhetoric at present is “traditional values.” During his third and fourth presidential terms (2012–2018, from 2018 onward), Vladimir Putin used the expression “traditional values” dozens of times:

Altogether we must emphasize, of course, our traditional values, first of all, the traditional moral values, which have always been the basis of our power in the broadest sense of the word. Because these traditional values made it possible for us to build, win, and fly into space.<sup>[37]</sup>

A healthy family and a healthy nation, the traditional values passed to us by our ancestors, combined with a focus on the future, stability as a condition for development and progress, respect for other nations and states while guaranteeing the security of Russia and protecting its legitimate interests are our priorities.<sup>[38]</sup>

The protecting of the “traditional values” by the authorities embodied in legislation contributes to sexual prejudices and prevents sexual education in schools, dissemination of safe sex practices (use of condoms), harm reduction programs for drug users, introduction of substitution therapy for drug addicts. In Russian secondary schools, the discussion of condoms use is in fact forbidden due to Federal Law No. 436, “On protecting children from information that is harmful to their health and development.” The same law contains the provision prohibiting

the dissemination among children of the information that “denies the family values and propagandizes non-traditional sexual relationships.”

The terms “moral values,” “risk groups,” “marginal groups” in the authorities’ rhetoric on HIV/AIDS put HIV and deviance in 1 context and contribute to stigmatization and self-stigmatization of people living with HIV. The research results get by Balabanova, Coker, Atun and Drobniowski show that the perception that HIV is associated with immoral behavior underpins stigma,<sup>[39]</sup> while Pape highlights that HIV-related stigma is an obstacle to responding adequately to the epidemic, creating a culture of neglect and avoidance.<sup>[14,10,40]</sup>

In October 2016, the Russian government approved the “State strategy to combat the spread of HIV in Russia through 2020 and beyond”. The strategy does not include the term “epidemic” but includes the traditionalist moral rhetoric: “to *strengthen traditional family and moral values.*” It has neither statements on harm reduction programs for drug users, sex education and promoting condom use, nor any financial dimension.<sup>[41,42]</sup>

#### 4. Conclusion

The HIV/AIDS disappeared from the agenda of the Russian president since 2007, at a time when the statistical construction of the HIV/AIDS problem presented a significant increase in HIV prevalence. This silence points out the pragmatic game of the authorities in the problem of HIV/AIDS: it was used by Russian authorities to represent Russia as a full participant in the international coalition to fight the challenges of our time, but the Russian president stopped to construct this problem after the deterioration of relations with Western countries.

There are parallels found between Putin’s governance and former South African President Mbeki anti-science AIDS denialism.<sup>[43,44]</sup> At the same time Putin’s public inattention to HIV/AIDS is similar to Ronald Reagan’s one during the first years of HIV epidemic in the United States<sup>[45]</sup> but the difference is in the vector: not from silence to late definition of HIV/AIDS as a problem but vice versa, from defining it as a global problem to a silence.

Meanwhile, people living with HIV in Russia talk about fear, violence, rupture of relationships, labeling in health care institutions by the medical code “B20,” denials in medical care caused by their HIV status.<sup>[46]</sup> The explanation of why the Russian authorities have silenced the topic of HIV/AIDS in official discourses goes beyond the constructionist framework of this study. But the significant differences between the authorities’ construction of the HIV/AIDS problem and the utterances of people living with HIV clarify the factors that contribute to a further HIV spread in Russia. The Russian president’s traditionalism, de-problematization and silence concerning HIV/AIDS lead to the absence of the HIV/AIDS issues in media agenda, the agenda of local authorities, and consequently the personal agendas of Russian citizens. The consequences are ignorance, fears, stigmatization of people living with HIV, semi-legal status of needle and syringe programs for intravenous drug users, low antiretroviral therapy coverage, and the continuing HIV epidemic.

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