

## **Epistemic Communities and Cooperative Security: The Case of Communicable Disease Control in the Baltic Sea Region**

Michael Karlsson\*

*This study analyzes when, or under what conditions, epistemic communities succeed in promoting ideas about cooperative security to intergovernmental structures at the regional level. Following a preliminary case study of communicable disease control in the Baltic Sea region, we find that conditioners traditionally highlighted by specialists on epistemic communities apply to this case as well. The expert network on communicable disease control has been favored by consensus among the specialists, by uncertainty among policy-makers, and by an institutionalization of scientific advice. Moreover, we find little support for conditioners that have been borrowed from transnational relations research at large. This means that the epistemic community has been influential despite a low degree of density, a lack of resources, and a narrow use of communication strategies. The latter implies that the strength of the substantial arguments, in combination with the dramatic character of the issue, has made policy-makers susceptible to input from experts.*

**Keywords:** *epistemic communities, cooperative security, communicable disease control, Baltic Sea region*

### **1. INTRODUCTION**

There are today at least three transnational networks of scientists and experts that focus on various aspects of security in the Baltic Sea region.<sup>1</sup> The respective focus of these networks is radiation and nuclear safety (1992), fight against organized crime (1996), and communicable disease control (2000).<sup>2</sup> The three networks are all interacting with the Baltic Sea states, primarily through existing frameworks for multilateral cooperation. The network on radiation and nuclear safety operates as a formal working group, while the expert groups on organized crime and communicable diseases are both connected to task forces of personal representatives to the Heads of Government. The three groups of specialists have similar

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<sup>1</sup> The Baltic Sea is located in the northeastern part of Europe. Since 1992 it is surrounded by nine littoral states: Denmark, Estonia, Finland, Germany, Latvia, Lithuania, Poland, Russia, and Sweden. The term 'Baltic Sea state' does sometimes also include Norway which, due to its geographical proximity, often takes an active part in the Baltic Sea cooperation.

<sup>2</sup> Other epistemic communities in the Baltic Sea region that focus on security related matters include, for example, an expertise network on crisis management (1998) and the Kiel International ad-hoc group of experts on Kaliningrad (2002). Beside these networks, there are also a number of epistemic communities that are less explicitly concerned with security. These include, among others, the Conference of Baltic Oceanographers (1957) and the Baltic Marine Biologists (1968) (see e.g. Karlsson, 2002).

roles. They are to make situation reviews, in depth studies, give recommendations for actions, and function as knowledge bases within their respective fields. In doing this, the experts rely on a scientific approach. Questions about causes and solutions to problems are approached systematically by making use of previous research and established methods.

The three networks can be described as epistemic communities. Peter Haas, who invented the term, defines an epistemic community as “a network of professionals with recognized expertise and competence in a particular domain and an authoritative claim to policy-relevant knowledge within that domain or issue-area” (Haas 1992b: 3). Knowledge-based networks are of political significance since they may function as “channels through which new ideas circulate from societies to governments as well as from country to country” (Hass 1992b: 27). This dynamic has been well documented particularly in studies of the environmental and the economic issue-areas.<sup>3</sup> However, a survey of security studies suggests that epistemic communities may also be important channels for circulating new ideas about security. For example, a number of studies of US-Soviet relations in the 1980s and early 1990s, show that networks of scientists and experts, by influencing the way governments think about security, helped to create a favorable climate for subsequent security cooperation and arms-control agreements (Adler 1992; Checkel 1998; Evangelista 1995, 1999; Nye 1987; Risse-Kappen 1994; and Sigal 2000). It seems clear from these studies that epistemic communities succeeded in communicating “a shared *concept of national security*” (Hasenclever *et al.* 1997: 147) or “a new paradigm on security thinking” (Müller 2002: 380). The essence of the circulated idea about security has been described as a change from “a (sharply competitive) zero-sum game into a mixed-motive game, in which both sides could gain security through cooperation” (Hasencler *et al.* 1997: 147). From what it seems, there is little consensus in the referred literature on how to conceptualize this security idea. Cooperative security, common security, and security regime are some of the terms that are being used.

So far, there have been rather few attempts to explore systematically when epistemic communities are a source of learning and subsequent decision-making. Peter Haas assumed that the influence of epistemic communities was more likely if there was (a) a high degree of uncertainty among policy-makers; (b) a high degree of consensus among scientists and experts; and (c) a high degree of institutionalization of scientific advice (P. Haas 1992b: 3-4; cf. Hasencler *et al.* 1997: 151-2). However, even though we have some ideas about when knowledge-based networks play a role in international relations, it seems equally clear, in the words of Andreas Hasencler *et al.* (1997: 152-3), that “more research is needed in order to move forward from the insight that epistemic communities *can* have an impact on political outcomes to an understanding of *when* and *how* they are able to influence policy coordination.” The purpose of this study is to give one contribution to this call. More specifically, we will analyze when, or under what conditions, epistemic communities succeed in promoting ideas about cooperative security to intergovernmental structures at the regional level. For this purpose, we will develop an analytical framework and test it on a preliminary case study. As our empirical case, we have selected the previously mentioned epistemic community on communicable disease control, which interacts on a regular basis with multilateral frameworks of the Baltic Sea states.

<sup>3</sup> In fact, all except one article in the special issue of *International Organization* (Haas 1992a) on epistemic communities are related to the environmental and the economic issue-areas. The exception is Adler (1992), who focuses on the arms control issue.

The research question aims at explaining the outcome of the attempts (successful or not) to promote the idea about cooperative security. We will try to be theoretically innovative by not only testing existing propositions on a new case, but also by bringing recent findings from transnational relations research into the study of epistemic communities. This step is motivated by the critique of the study of epistemic communities for over-emphasizing the role of objective scientific knowledge, and for neglecting the strategic aspect of politics (e.g. Bäckstrand 2000; Eriksson 2001: 222-3; Litfin 1994). The strategic aspect is present at different levels. Sigal (2000: 297-308) pays attention to the politics of cooperative security at the national level, and shows that the role of epistemic communities is balanced by the images of officials, domestic politics, and bureaucratic politics.<sup>4</sup> However, in this study we will focus primarily on the international level, and on the interaction between experts and policy-makers that takes place within the framework of existing multilateral cooperation between the Baltic Sea states. In doing this, we will highlight explanatory factors that can be related to transnational actor strategies and communicative processes. The choice of factors reflect a call among transnational relations analysts that "(s)tructural conditions need to be complemented by agency-centered approaches to account for TNA [transnational actor] impact (Risse 2002: 267)." Our study will therefore have less to say about the importance of structural conditions such as the security context, democracy, and international institutions. For example, previous research suggests that the influence of non-state actors on governments tend to increase when international institutions exist (Simmons and Martin 2002: 204; cf. P. Haas 1989, 1990). However, considering that this study is limited to one region and to the post-Cold War years, there will be no or too little variation on the structural variables to make a serious test of them.

## 2. THE ANALYTICAL FRAMEWORK

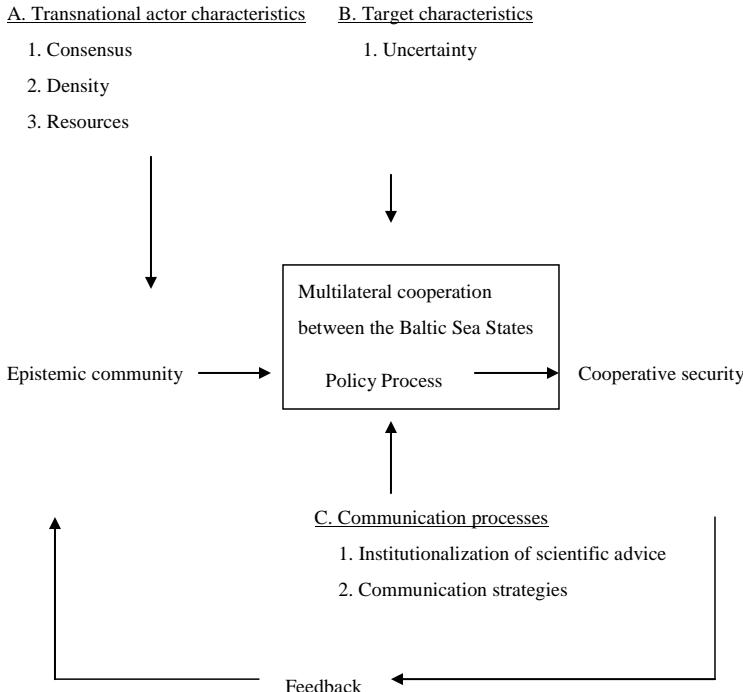
In this section we will construct a simple model for studying the role of epistemic communities in promoting the idea about cooperative security. Even though the level of specificity in models may vary, it should be remembered that all models are basically simplifications of reality (Stoker 1995: 17-8). By bringing together the most important factors, a model, to use a common metaphor, helps us to see the wood for the trees. Moreover, the model developed in this paper identifies conditions for when epistemic communities are likely to succeed in promoting the idea about cooperative security, but it does not specify the relationships between the conditions.

The model consists of five components (Figure 1). First, the independent variable is represented by the attempts of the knowledge-based network on communicable disease control to promote the idea about cooperative security among the Baltic Sea states. Second, the interaction between the experts and the policy-makers takes place in the form a policy process within the framework of existing multilateral cooperation between the Baltic Sea states (the target). Third, the phenomenon that is to be explained, or the dependent variable,

<sup>4</sup> Many scholars today agree that the extent to which governments are susceptible to the ideas of epistemic communities depends largely on domestic politics (Adler 1992: 124; Hasenclever *et al.* 1997: 153; Mitchell 2002: 506). The implication of this is that if governments are about to lose their political power, there is an obvious risk that they selectively will use or ignore scientific advice to support their own positions (Mitchell 2002: 506).

is the outcome of this process. That is, whether or not the epistemic community has been successful in promoting the idea about cooperative security. Fourth, by adding a feedback arrow to the model, we stress the dynamic nature of the interaction between experts and policy-makers. Our starting point is that the idea about cooperative security is being promoted by, among others, epistemic communities. As the Baltic Sea governments react to this lobbying, they create new conditions to which the lobbyists have to adapt. If the governments change their security thinking, the epistemic communities might become defenders of new policies. If the governments are not susceptible to the idea about cooperative security, the networks might have to try out new strategies.

**Figure 1.** Conditions for epistemic communities to promote the idea about cooperative security



Finally, to explain the outcome it is not enough to simply study the policy process, i.e. the link between the dependent and the independent variables. We must also consider a number of conditioners. These work as intervening variables and tell us when, or under what conditions, epistemic communities are more likely to successfully operate. Turning to the

research on transnational relations, we assume that there are three types of conditioners (cf. Risse 2002: 267-8). These refer to the characteristics of the transnational actor, to the characteristics of the target, and to that of the communication process. It should be noted that there is a very good match between the three categories of conditioners and the findings from previous research on epistemic communities (P. Haas 1992b: 3-4). Thus, as already mentioned, epistemic community influence is more likely if there is a high degree of consensus among the experts (transnational actor characteristics), if there is a high degree of uncertainty among policy-makers (target characteristics), and if there is a high degree of institutionalization of scientific advice (communication processes).

From figure 1, it should be clear that we intend to test all six conditioners. Beside the three variables already mentioned, we will test the relevance of three additional conditioners. These are related to the characteristics of the transnational actor (density, resources) and to the communication process (communication strategies). Before moving on to the case study, we will first take a brief look at each individual conditioner and specify when epistemic communities are likely to be influential.

**Consensus.** The influence of epistemic communities depends on the extent to which the members agree on important issues in their field of study (P. Haas 1992b: 3-4). If there is a lack of consensual knowledge then it will be impossible for the network to give coherent policy advice (Hasenclever *et al.* 1997: 150; cf. Adler and Haas 1992: 371; P. Haas 1989: 384, 1992b: 23). Put differently, "When an epistemic community loses its consensus, its authority is diminished and decision-makers tend to pay less attention to its advice" (Adler and Haas 1992: 385).

**Density.** Because networks (which is the typical form for epistemic communities) are upheld by the regular interactions between the members, we may assume that the density of the networks may be of some significance. The reason for including this factor into the analytical framework rests on the observation that transnational networks tend to operate best when they are dense, with many actors, strong connections among groups in the network, and reliable information flows" (Keck and Sikkink 1998: 28, cf. 206-7).

**Resources.** To be able to realize one's interests one must possess or be in control of some resource. The term here resource is seen as "a source of supply or support", which gives an actor "an ability to meet and handle a situation" (Merriam-Webster's Collegiate Online Dictionary). Typical examples of resources that give non-governmental actors an ability to act across nation-state borders are economic resources (e.g. money, personnel), communication resources (e.g. fax machines, computers with access to the internet), and organizational resources (e.g. secretariat, working groups). Because of the network character, epistemic communities in general have to rely on the aggregated resources of the individual members.

**Uncertainty.** It is believed that epistemic communities can exert considerable influence if there is a high degree of uncertainty among policy-makers (P. Haas 1992b: 3-4). Uncertainty, in the words of Thomas Risse (2002: 268), "provides a window of opportunity for knowledge-based epistemic communities to exert influence." Because of this, the function of experts is sometimes described as that of uncertainty reducers (Buzan *et al.* 1998: 73). The feeling of uncertainty appears to be particularly marked within issue areas that are characterized by much complexity (Adler and Haas 1992: 383; P. Haas 1992b: 3-4). This applies not in the least to issues that are linked to the environment and the economy, i.e. areas where the phenomena of interdependence clearly have changed political conditions. However, because of institutional inertia, policy-makers may not at once be susceptible to

scientific advice. On the other hand, it has been noted that this resistance is easily overcome in times of crisis when great values are at stake (P. Haas 1992b: 14; 1993: 187; cf. Hasenclever *et al.* 1997: 150).

**Institutionalization of Scientific Advice.** The influence of epistemic communities increases if they have access to policy-makers, or even become part of the bureaucratic structure itself (P. Haas 1992b: 3-4, 27, cf. 1989: 398, 1993: 179; Adler and Haas 1992: 374; Hasenclever *et al.* 1997: 150-1). In relation to this, we should note that it is common for the literature on interest groups to make a distinction between insider and outsider status, depending on whether or not the interest enjoys privileged access to policy-making (Maloney *et al.* 1995). In the case of insider status, a distinction is sometimes also made between core status (always centrally involved), specialist status (always centrally involved on technical issues), and peripheral status (only sometimes involved). It is suggested that insiders, particularly those who enjoy core or specialist status, are provided with the most opportunity to influence policy-making.

**Communication Strategies.** It is a matter of course for studies of transnational actors to pay attention to strategy (see e.g. Karlsson 1999; Mingst 1995; Moon 1988). Strategy has been defined as “an actor’s extensive and comprehensive planning of the use of available means with the object of attaining certain goals attempted in competition with others” (Sjöblom 1968: 30). Similarly, it may be assumed that knowledge-based networks do not act in a state of vacuum in which they can achieve their goals without taking into consideration the behavior of others. In other words, they have to compete against other actors (e.g. governments, companies, NGOs, and perhaps even with other epistemic communities) if they are to succeed in promoting the idea about cooperative security. There are a number of transnational strategies for exerting influence. For example, it is quite common among scholars to make a distinction between the power approach, the technocratic approach, coalition building, and grass-roots mobilization (see e.g. Karlsson 1999, 2001; Moon 1988; Mingst 1995). By using the power approach, transnational actors attempt to target top decision makers such as high-level government officials (Mingst 1995: 238). The second strategy, the technocratic approach, implies that transnational actors “use knowledge of procedural mechanisms as well as the legal system” (Mingst 1995: 239). The third strategy, the coalition-building approach, means that transnational actors “utilize domestic actors to build coalitions, forging domestic policy consensus” (Mingst 1995: 240). Finally, transnational actors may also employ the strategy of grass-roots mobilization, which means that they “try to build widespread public involvement in several countries” (Mingst 1995: 240). The strategies are more or less directly linked to lobbying. The first strategy focuses on how the lobbying itself is carried out, while the latter three are complementary strategies that in various ways affect how successful the lobbying will be. It is expected that it will be easier to communicate ideas about cooperative security if the experts of an epistemic community use a broad repertoire of influence strategies.

### 3. A CASE STUDY OF COMMUNICABLE DISEASE CONTROL<sup>5</sup>

#### 3.1. Introduction

The epistemic community on communicable disease control in the Baltic Sea region consists of some 390 experts (June 2003) on tuberculosis, HIV, antibiotics, and primary health care. The specialists work at public health authorities, research institutes, and other places specializing on these matters in the Baltic Sea countries. The network was established in the year 2000. Certainly, we can find some transnational contacts between public health specialists in the region prior to this year<sup>6</sup>, but it was only then that a separate and independent epistemic community on communicable disease control in the Baltic Sea area began to appear. The establishment of a regional network gave existing contacts an institutionalized framework, which brought together expertise from all Baltic Sea countries to jointly focus on the increasing problem of communicable diseases.

There are several reasons for why the expertise network was established. Most important was the dramatic increase of communicable diseases that occurred in Russia, Estonia, and Latvia in the late 1990s (Task Force 2002d). Following the dissolution of the Soviet Union, the newly independent states for some years witnessed a declining health of the population, which included rising rates of tuberculosis and severe outbreaks of HIV infections. Reports from the Baltic states talk of a spread of multi-drug-resistant tuberculosis that was among the highest in the world (Task Force 2002d: 7). In Russia, experts sounded the alarm as life expectancy only within a few years fell to the lowest level in Europe (Task Force 2000b). The development cause serious alarm among experts in all Baltic Sea countries, and was the primary reason for why the epistemic community was formed.

However, in order to fully understand the appearance and the activities of the network, we must also pay attention to an intergovernmental initiative on public health issues. At a Summit in Kolding, Denmark, on 12-13 April 2000, the Heads of Government of the eleven Baltic Sea states decided to "intensify regional co-operation and other measures to counteract the threat to public health caused by a sharp increase in communicable diseases" (Baltic Sea States Summit 2000). For this purpose, a Task Force of personal representatives of the Prime Ministers was set up to prepare a joint plan for increased disease control, and present it by the end of the year 2000. From the beginning the group was thought to be a non-recurring measure, but in January 2001 the Heads of Government decided to renew and extend the mandate for three more years (Task Force 2002a). The new mandate seizes upon the tasks of reviewing, implementing, and evaluating the joint plan as well as making recommendations on how to continue the cooperation in the future. The Task Force is expected to deliver a final report to the next Baltic Sea States Summit in 2004.

The group of personal representatives has 12 members, i.e. one from each member-state of the Council of Baltic Sea States (CBSS) and one representative of the Commission of the

<sup>5</sup> Please note that this is a preliminary version of the case study. The empirical evidence is so far based upon documents, but will later on be complemented with interviews.

<sup>6</sup> For example, some of the national societies for infectious diseases, especially those located in the Nordic countries, have since long had regular bilateral contacts. Some of these contacts have taken place within the framework of the International Society for Infectious Diseases (SID).

European Union.<sup>7</sup> The majority of the members have leading positions within the ministry of health (equivalent), but some are working in independent research institutes. Even though the members of the Task Force are highly qualified, from the start, it was clear that it would have to engage a large group of expertise in order to undertake the task effectively. For this purpose, the Task Force, has among other things, set up six working groups including some 60 public health specialists from the Baltic Sea States “to elaborate proposals for concerted action in relevant fields of communicable disease control” (Task Force 2000a). This means that governments and experts from the very beginning came to work closely together for controlling the emerging diseases.

In Table 1, we take a closer look at the national origin of the members of the epistemic community. We focus on the network at large as well as on the center of the network, i.e. including members who also belong to some of the six working groups. The table shows that clearly the network has a transnational character. In all there are some 390 experts belonging to the network (June 2003) and they come from 12 different countries, more or less directly connected to the Baltic Sea. Twelve members are described as transnational, which in this case means that they are experts employed at, for example, the Commission of the European Union or at international organizations such as the World Health Organization and the UNAIDS.

**Table 1.** The members of the Baltic Sea Communicable Disease Control Network grouped by country of origin (per cent).

Country of origin	Members of the whole network (N = 390)	Members of the six working groups (n = 58)
Russia	29.0	10.3
Norway	16.9	12.1
Lithuania	10.0	10.3
Estonia	10.0	8.6
Latvia	8.5	8.6
Sweden	7.2	8.6
Poland	5.4	6.9
Finland	5.1	8.6
Denmark	2.1	8.6
Germany	1.5	8.6
Iceland	1.3	6.9
Byelorussia	-	1.7
Transnational	3.1	-
<b>Sum</b>	<b>100.1</b>	<b>99.8</b>

Source: Task Force, 2003b.

<sup>7</sup> The Council of Baltic Sea States was established in 1992. It has eleven member-states (the nine littoral states, Norway, and Iceland) and is intended to “serve as an overall regional forum to focus on needs for intensified cooperation and coordination among the Baltic Sea States” (CBSS 1992). The mandate encompasses a large number of issue-areas (e.g. trade, health, environment, and transport). As regards security, the mandate has so far been limited to soft security issues (e.g. radiation and nuclear safety, 1992; civic security and combat against organized crime, 1996), while leaving military matters out of the cooperation.

The members are unevenly distributed among the Baltic Sea countries. Experts from Russia, Norway, and the three Baltic states dominate the network. Together, these members make up nearly three quarters (74.4 per cent) of the entire network, and about half (49.9 per cent) of the working groups. The share is somewhat smaller in the latter case because the selection of members is based mainly upon the principle of geographic representation. Thus, while the experts from Finland, Denmark, Germany, Iceland, and Byelorussia only make up ten percent of the entire network, they represent about one third (34.4 per cent) of the members of the working groups. Moreover, it should be noted that the number of Russian experts has increased significantly in recent years. Between the years 2002 and 2003, the relative share of Russians increased from some 20 per cent to 29 per cent. This can be compared with, for example, the share of German specialists, which has remained as low as about 1.5 per cent.

There are probably several reasons why experts from certain countries are more or less engaged in the network. Tentatively, the membership pattern should reflect the interests and the capacities of the parties involved. As regards interests, we expect specialists from Russia and the three Baltic states to have the strongest motives to participate considering these countries are the most affected by the spread of communicable diseases (Task Force 2000b). This circumstance is not least reflected by the fact that almost 95 per cent of all projects (213 in December 2003) are located in the East, while the remaining five per cent are transnational in character (Task Force 2003c). Similarly, the lowest participating shares are found among the least exposed countries. The only country to which this explanation does not apply is Norway. Despite low rates in Norway of diseases such as tuberculosis and HIV, Norwegian experts are well represented in the network. One interpretation of this could be that it reflects a higher risk perception, e.g. because of increasing movements of people across the border of the former Soviet Union. Certainly, one would expect Finnish experts to be even more concerned about transnational movements because of the long Finnish-Russian border, but this effect is probably reduced by the fact that Finland has a more restricted border control regime than Norway.<sup>8</sup>

Beside interests, it is also reasonable to expect that capacities, or lack of capacities, partly help to explain the membership pattern. The Baltic Sea is sometimes described as a 'River Grande', i.e. there is a considerable wealth gap between the countries in the West and the former Eastern bloc. This gap is also evident in the field of science. For example, it has been noted that research in the Baltic states is experiencing a lack of adequate finance, which has made it increasingly dependent upon financial assistance and transfer of knowledge from the West (Prunskienė and Altvater 1997). In the case of communicable disease control, we find a similar pattern. Nearly 95 per cent of all projects were in 2003 funded by Finland, Germany, Iceland, Norway, and Sweden, i.e. countries in Western Europe (Task Force 2003c: XVI). The commitment of these countries means that specialists from the most affected countries can turn to the Baltic Sea network for assistance and for exchange of knowledge and experience (Task Force 2000b: 17, 30-1). As witnessed by Guntis Kilkuts (2003: 11), Doctor of Medicine and a Latvian member of the Primary Health Care Program Group, it has been easier for professionals in the East to find support and partners through the program groups (Kilkuts 2003: 11). On the other hand, it should also be noted that the uneven distribution of funding among donor countries is causing concerns for dependence and vulnerability. The Task Force has therefore found it necessary to emphasize that the goal of the Task Force is to

<sup>8</sup> I am indebted to professor Olav F. Knudsen for this interpretation.

"serve as an instrument to identify and channel external financing to fill temporary and local financing gaps. From a longer perspective, however, the control programmes must be funded from sustainable national sources" (Task Force 2002d: 18).

### 3.2. Cooperative security

Even though the experts on communicable disease control hardly use the term 'cooperative security', they tend clearly to stress elements that are part of the definition. Emanuel Adler and Michael Barnett (1998: 50) define cooperative security, as "the notion that the security of states – defined in terms of the interdependence of military, economic, environmental, and human rights issues – is interdependent." From this definition, we find that cooperative security has three basic characteristics. First, cooperative security is a concept. This means that it is seen as an idea (Carter *et al.* 1992: 7) or an approach (Sigal 2000: 9) rather than a specific knowledge. As the idea is met with sympathy among policymakers, it may form the basis for subsequent decision-making and cooperative behavior. For example, cooperative security is assumed to have laid the foundation for the Code of Conduct that was adopted by the OSCE member states in 1994 (Nooy 1996: 1). Second, cooperative security is concerned with the security of states (cf. Knudsen 1999). In this respect, the concept reflects the traditional state-centric view of international relations (realism). By choosing states as the referent point, the second part of the term cooperative security acquires a concrete meaning. As pointed out by Barry Buzan (1991: 65), states' security can be threatened with respect to the idea of the state (nationalism), the physical base of the state (population and resources), and the institutional expression of the state (political system).

Finally, cooperative security assumes the security of states to be interdependent. The term interdependence has been defined as "situations characterized by reciprocal effects among countries or among actors in different countries" (Keohane and Nye 1977: 8). The phenomenon arises as a result of international transactions, but only to the extent that they can be associated with "reciprocal (although not necessarily symmetrical) costly effects" (Keohane and Nye 1977: 9). If the transactions cannot be associated with such effects, we have a situation of interconnectedness rather than mutual dependence. Thus, by emphasizing interdependence, the idea about cooperative security assumes that *states have to work together in controlling costly reciprocal security effects*. Furthermore, the definition given by Adler and Barnett also stresses the interdependence of issues. From what it seems, studies of cooperative security have tended to focus particularly on the relation between political and military issues (see, e.g. Carter *et al.* 1992; Nooy 1996; Sigal 2000). However, there is nothing in the definition that suggests a hierarchy among issues or a hard core of cooperative security. This means that mutual dependence on, for example, military issues is necessary, but not sufficient, for cooperative security to exist.<sup>9</sup>

As was said above, the experts on communicable disease control hardly use the term cooperative security themselves. However, if we take part of available documents, then it does not require much reading to realize that the core elements of the idea are widely spread

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<sup>9</sup> It should be noted that epistemic communities tend to be issue-area based, while cooperative security emphasizes the interdependence of issues. In this study we are looking at an expert network that is clearly issue-area based, but which is well aware of issue-linkages.

within the network.<sup>10</sup> This applies most clearly to the assumption about interdependence. This phenomenon, and its dual nature, seems to be well known among the experts. A good case in point is when the chief epidemiologists from the Baltic Sea states formed a working group to write a report on the present status on infectious diseases in the region and emphasized that "it should not be country for country, rather disease for disease" (Chief Epidemiologists 2002). Furthermore, because epidemic outbreaks may spread rapidly across borders, the experts paid attention to the risk that urgent information may be withheld for political or economical reasons. To counteract this obstacle they argued that more than one country must be observant on suspected sources. Besides emphasizing that the Baltic Sea states are mutually dependent with respect to the threats caused by communicable diseases, many experts do also pay attention to the interdependence of issues. The links between health and economic and social development are often pointed out (e.g. HIV/AIDS Program Group 2002a, 2002b).

As regards the referent object of security, we should emphasize that the expert network tends to operate with a wider definition. The concern of the experts is first of all related to the security of individuals and societies and less so to the states as such. In relation to this, we should also note that there is a current debate within security studies over the referent point of security (e.g. Terriff *et al.* 1999: 18-20). Besides the security of states, scholars have paid increasing attention to the security of societies and individuals. This debate has made little impact on the study of cooperative security, which so far has been more or less exclusively concerned with the security of states. This contrast should however not be exaggerated. In the case of communicable diseases, we can easily think of various links between the different referent points of security. For example, if the security of individuals and societies is threatened, then this will most probably have at least indirect implications for the security of states. This link was among others touched upon at a seminar in March 2002 on the control of infectious diseases in the armed forces of the three Baltic states (Task Force 2002b).

To what extent has the epistemic community on communicable disease control been successful in promoting the idea about cooperative security? In order to answer this question, we will first take a closer look at how the idea about cooperative security is appearing in existing multilateral health cooperation between the Baltic Sea states. Afterwards, we will then see if it is possible to somehow link the presence of this idea to the activities of the expertise network. In other words, is there any evidence suggesting that the idea about cooperative security has taken root as a result of epistemic community influence?

The idea about cooperative security is clearly discernible when it comes to regional cooperation on communicable disease control. The idea is rather well established within the Task Force of personal representatives and, from what it seems, at the level of prime ministers as well. Beginning with the Task Force, in June 2002 it presented an extensive report to the Heads of Government at the Baltic Sea States Summit in St. Petersburg. Beside descriptions of recent developments and ongoing activities, the report is also interesting because it gives an insight into some of the ideas behind the work. The following quotation seems to contain some elements of cooperative security (Task Force 2002d: 19-20):

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<sup>10</sup> The documents, which are found on the Task Force' web page ([www.baltichealth.org](http://www.baltichealth.org)), includes among other things minutes from the working groups, expert mission reports, and annual reports.

The work of the Task Force must be seen in the context of regional people-to-people development, one more element that fosters good relations among neighbors. Health has begun to increase its presence on the agenda in international politics. When it comes to international collaboration on control of communicable diseases, it is clear that all parties will gain from limiting further spread. But the importance of collaboration in the health field has further implications:

The US Security Council declared HIV/AIDS a security priority in 2001. It relates to loss of trained manpower and armed forces, to aspects of social inequality, discrimination and marginalisation. Large numbers of deaths from AIDS can undermine democracies, and destabilise regions.

A vicious circle prevails between ill-health and poverty. It is evident that poor, jobless and homeless individuals are the most vulnerable to disease. The Global Commission on poverty and health now advocates reversing the relationship. Health improvements lead to economic growth, indeed, health is a crucial factor in economic development.

The challenge is to turn the spiral; medical intervention can limit the spread of infections and reduce the hindrances for increased trade and travel in the Region. This will facilitate economic growth that again will reduce the burden of communicable diseases.

In comparison with the definition of cooperative security given by Adler and Barnett, we can draw two conclusions from this quotation. First, as regards the referent point of security, we find the Task Force to operate with a wider definition. It is not only concerned with the security of states, but also with the security of societies and individuals. As regards states' security, the reasoning seems to imply that it is threatened in at least two respects. Communicable diseases threaten the physical base of the state (population, resources) and the institutional expression of the state (armed forces, democratic institutions). Second, the Task Force appears to have adopted the idea that the security of states is interdependent. Even though it does not explicitly use this term, it clearly indicates that there is an interdependence of health, military, political, economic, and social issues. We should also note that the Task Force, to make this point, uses terms such as a vicious circle and the spiral, which suggest that developments within one issue-area are assumed to easily spillover into other areas and that all parties have to work together in controlling these reciprocal effects.

The Task Force report was well received by the Heads of Government. At the Summit in St. Petersburg on 10 June 2002, they made a special statement on the threat of communicable diseases. In the page-long statement, the Heads of Government reaffirm their commitment to the control efforts, and encourage relevant institutions to financially support the approved projects. As regards the idea about cooperative security, the first section of the statement is of particular interest: "The Heads of Government agree that sharp increases in communicable diseases remain a threat to human security and welfare across the Baltic Sea Region. This serious situation calls for strong counteractive efforts and concerted actions involving large segments of society" (Baltic Sea States Summit 2002). Interestingly, when we arrive at this stage of the process we find that the content of the term cooperative security has been somewhat diluted. In comparison with the Task Force, it seems clear that the Heads of Government make a more narrow interpretation of the referent point of security (humans, society) as well as of the interdependence of issues (human security, welfare). There is nothing in the statement about possible threats to states, or about the interdependence of military, political, and economic issues. In other words, what has been left out is the hard core of the term. So while the Task Force itself has come to fully accept the idea about

cooperative security, it is so far only a soft version of the idea that has found a hold among the Heads of Government.

Having established that existing multilateral health cooperation in the Baltic Sea region is based upon an idea closed to that about cooperative security, we should now see if it is possible to somehow link the presence of this idea to the activities of the expertise network. On the one hand, the influence has been described as quite unproblematic. In the words of M.D. Guntis Kilkuts (Latvian member of the program group on primary health care): "Professionals sounded the alarm, and expressed great concern over tuberculosis and HIV infections. Politicians at the highest level reacted" (Kilkuts 2003: 11). On the other hand, even though we cannot rule out such a straightforward course of events, it should be remembered that any attempt to establish some sort of a positive relationship between the influence efforts of the epistemic community and the conclusions of the Task Force and the Heads of Government involves severe methodological difficulties (cf. Arts 1998: 75-7, 2000: 137-9). However, by pointing out the presence of four necessary conditions required for influence, we can at least state that such an influence is most likely.

First, we should emphasize that there is an intention of influencing the policy-makers. The basic reason for why the experts interact with the Task Force is to make politicians aware of the situation and to take action. A good case in point is project in 2001-2003 by regional epidemiologists to establish an early warning system for exchange of information on outbreaks of communicable diseases. According to the project plan, these experts regard national and regional authorities as their target group (Task Force 2001b). Second, we should note that there are several instances showing how influence attempts precede conclusions drawn by the policy-makers. This sequence was already seen in the background document in December 2000, which gives a first overview of the health situation together with proposals for regional cooperation (Task Force 2000b). In preparing this document, the Task Force received input from the expert community (including research departments and science oriented NGOs), through a process of consultations and deliberative talks (Task Force 2000a, 2000b: 17). One result of this input is a reference to a regional interdisciplinary expert meeting in October 2000 on prevention and control of the tuberculosis epidemic, which emphasized the need for an integrated approach and for regional cooperation and exchange of knowledge (Task Force 2000b: 18). Similar inputs from experts can be seen in more recent documents as well. As the first generation of projects is coming to an end, the Task Force has also been able to include extracts from expert reports directly into its own documents (e.g. Task Force 2003a). Third, as previously noted, we have found that the content of the policymakers' conclusions in 2002 is in congruence with the preferences of the epistemic community. Even though it is not fully congruent, it is clear that something very close to the coherent view of cooperative security has evolved.

In addition to this, we find at least a certain support for the requirement that the target of the influence does attempt something it otherwise would not do. One problem with the last-mentioned requirement is the aspect of resistance. In other words, should influence be reserved for the event when the target changes from opposition to open support, or should it also include cases when it changes from inactivity to activity? The main reason for paying attention also to the second type of cases is that epistemic communities have shown to play an important role in situations when governments choose to be inactive because of uncertainty. Or, in the words of Thomas Risse (2002: 268), uncertainty "provides a window of opportunity for knowledge-based epistemic communities to exert influence." In the case of communicable disease control, the experts seem to have met an open door rather than

resistance (the role of uncertainty is examined in more detail in the next section). If there has been any resistance, this has been related to resources or to priorities. However, this seems secondary considering that a task force has been set up and that the communicable disease issue is already on the intergovernmental agenda. It therefore seems reasonable to conclude that the transnational experts have had a certain influence. Parts of the idea about cooperative security have streamed on from the network to the Task Force and to the Heads of Government.

### 3.3. Conditioners

When, or under what conditions, do epistemic communities succeed in promoting ideas about cooperative security to intergovernmental structures at the regional level? The purpose of this section is to look for conditioners that have facilitated the influence attempts of the expert network on communicable disease control. The analysis will be carried out with the help of the previously presented model (Figure 1), which brings together three types of conditioners that are emphasized in the literature on epistemic communities and transnational relations respectively. The conditioners are related to the transnational actor (*consensus*, *density*, *resources*), to the target (*uncertainty*), and to the communication process (institutionalization of scientific advice, communication strategies).

Starting with the characteristics of the epistemic community, we find that the expert network has successfully promoted the idea about cooperative security despite a relatively low degree of density and a lack of resources. In fact the only actor-related factor that has worked in favor of the network is the existence of *consensus*, which on the other hand only applies at a general level. Thus, we find the scientific approach to be a common denominator for the experts on communicable disease control. Questions about causes and solutions to communicable diseases are approached systematically by making use of previous research and established methods. Of course, this should be a common denominator for all epistemic communities, but what is particularly interesting in this case is that the experts have taken one step further and also agreed upon a common model (the Logical Framework Approach) for planning, implementing and evaluating the projects. In preparing this model, the program groups carried out model-projects, defined the necessary variables, and arranged training seminars for project members (Task Force 2001a, 2002c, 2002d). The experts themselves appear to be quite aware about the value of this type of consensus. As one expert put it: "Now when we have established a network of well functioning expert groups within (the) Task Force we are convinced that all participating countries will benefit in (the) future. Both by better health care systems and by professionals speaking the same language, ..." (Kilkuts 2003: 11). On the other hand, to say that the members share a scientific approach should not be confused with saying that there is consensual knowledge about causes and solutions. As in any academic context, a critical perspective is a valuable fuel for developing explanations, predictions, and prescriptions. Therefore there is a general agreement that all projects should be evaluated, and be the object of peer reviews (Task Force 2001a, 2002c, 2003a: 9-10).

The other actor related factors, *density* and *resources*, appear to have little explanatory power. The *density* of the interactions between the members of the network is relatively low,

which is not unusual for transnational networks.<sup>11</sup> We find two types of regular interactions in the network. First, the most frequent interactions are to be found among the smaller group of some 60 experts who belong to the six working groups set up by the Task Force. These members, which on average meet 3-4 times a year (Task Force 2003a: 22-3), have leading and coordinating roles, and form somewhat of a center or a core of the network. Second, the larger network is upheld by regular interactions on a less frequent basis and consists typically of mutual exchanges of ideas and information on public health issues. To support this type of exchange, the Task Force has among other things created an e-mail list and a web page. As regards *resources*, there is very little indication that this should have been of any vital importance for the promotion of the idea about cooperative security. The network relies mainly on the aggregated resources of the individual members. As previously noted, a smaller group of Baltic Sea states are currently funding the projects, but this support is given to the project members rather than the network as such (Task Force 2000b: 30-1). Obviously the aggregated resources have been enough to uphold the network, but it seems equally clear that they have not enabled the members to engage in any extensive influence campaigns.

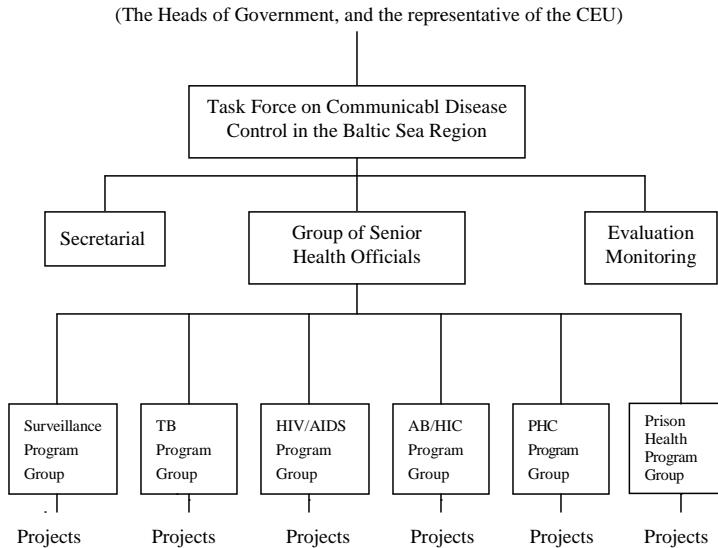
Moving on to the target, in this case the Task Force and the Heads of Government, it was assumed that *uncertainty* among policy-makers could open a window for transnational influence. This seems to apply to the case of communicable disease control. In fact, it was to a large extent uncertainty that made the Heads of Government to establish a Task Force on the subject in the first place. For example, in connection with the decision to establish the Task Force, the Norwegian Prime Minister Jens Stoltenberg gave a press briefing in which he stated: "We wish to see full presentation of trends and facts. We wish to see concrete recommendations on best practices as well as strategies for closer co-operation. In addition to drawing on national expertise, we suggest that the Task Force stays closely in touch with international organizations ..." (Stoltenberg 2000). By asking for a full presentation of trends and facts, the Prime Minister highlighted a lack of reliable information and knowledge about the spread of infectious diseases in the Baltic Sea region. Because expertise was expected to fill out this gap, it seems reasonable to conclude that uncertainty has been a favorable conditioner. In other words, uncertainty among policy-makers very much functions as a window of opportunity for experts to influence and for security ideas to flow.

Finally, we formulated two assumptions with respect to the communication process between experts and policy-makers. It was expected that it would be easier to communicate ideas about cooperative security if there was an institutionalization of scientific advice and if the experts used a broad repertoire of influence strategies. The empirical findings support the first assumption, but reject the second. As regards *institutionalization of scientific advice*, we find that the communication between the epistemic community and the Task Force takes place within a semi-institutionalized context of formal bodies and processes. The organization of the Task Force, which at large was established already during the first year of activity (2000-2001), comes closer to that of a network than that of a formal body. In other words, "It was clear from the outset that the establishment of a new international organization was out of the question. Instead, a loose structure, supported by a small secretariat, was adopted" (Task Force 2002a: 2). The main bodies of this structure, which is

<sup>11</sup> According to Thomas Risse (1995: 3), the term transnational relations refers to "regular interactions across national boundaries when at least one actor is a non-state agent or does not operate on behalf of a national government or an intergovernmental organization."

shown in figure 2, represent basically three types of actors. The highest level consists of mainly intergovernmental actors, (i.e. the Heads of Government). The middle level is dominated by transgovernmental actors, which are found at lower levels within the state apparatus (e.g. civil servants and experts employed at ministries or civil service departments). Finally, transnational actors make up the basic level (program groups and projects). This level includes the core of the epistemic community, i.e. experts and scientists at independent research institutes and universities.

**Figure 2.** Structure of the Task Force bodies



TB: Tuberculosis

AB/HIC: Antibiotic Resistance and Hospital Infection Control

PHC: Primary Health Care

Source: Task Force, 2003a: 2.

The main goal of the Task Force is project development and implementation. For this purpose, it has identified six program areas that are in need of special attention. The six areas are (1) surveillance of communicable diseases, (2) tuberculosis control, (3) HIV/AIDS

prevention, (4) antibiotic resistance and hospital infection control, (5) support to communicable disease control in primary health care (PHC), and (6) prison health. There are four types of bodies to support the Task Force. First, a small secretariat, which consists of three persons (2003), is located at the Norwegian Ministry of Health. Second, a Group of Senior Health Officials (GSHO) has been appointed to oversee the implementation of the six programs, and to act as a clearing-house for project funding. The GSHO has 13 members, including one representative of each Baltic Sea state, a representative of the Commission of the European Union, and the Head of the Secretariat. Third, two Norwegian assistants have been engaged for monitoring and evaluation of projects. Finally, the Task Force has appointed one working group for each program area. Five of these groups were set up at the beginning of 2001, while the Program Group for Prison Health was established in 2002. Each group has 9-12 members, or in all some 60 members (2002), which are rather evenly distributed among the Baltic Sea countries (Task Force 2003a: 15-7). The program groups "are charged with refining the model programs and sanctioning specific projects to be entered into the database" (Task Force 2002a: 3).

There are three types of input from the scientific community to the Task Force structure. First, the members of the program groups are all independent experts from the Baltic Sea countries. These experts were previously described as the core or the center of the epistemic community (cf. Table 1). The view of these experts is typically communicated through written reports and oral presentations at seminars and conferences. In addition to this, the Task Force has also appointed five International Technical Advisers (ITAs) to give support to the secretariat, the program groups, and the projects. These advisers are also members of the epistemic community, and at least four of them come from Nordic countries. Financially, the ITAs are sponsored by Denmark, Finland, Iceland, and the United States (which is financing the ITA for HIV prevention). Finally, there are various indirect inputs from the wider network of experts. These views are mainly communicated through project reports to the program groups, but the latter have also sought other ways for receiving input. For example, in May 2002 some program groups arranged meetings in parallel to the 5<sup>th</sup> Conference of the Nordic Baltic Society of Infectious Diseases as a way to facilitate communication (Task Force 2002c).

If the experts have been favored by an institutionalization of scientific advice, we cannot say the same about the last conditioner *communication strategies*. On the contrary, the evidence suggests that the network has successfully promoted the idea about cooperative security despite a narrow use of strategies. The only strategy that has been used is the power approach, i.e. the approach where the transnational actor chooses to target top decision makers. In this case the epistemic community has targeted the middle transgovernmental level (the Task Force) exclusively, while leaving the highest political levels (the governments and the Heads of Government) aside. In other words, the experts have focused on the level of preparation rather than the level of formal decision-making. Apart from this, the network has not been acting in a strategic. The experts have made no apparent use of the technocratic approach or employed the strategies of grass-roots mobilization and coalition building. On the contrary, minutes and reports from the program groups and the projects put all emphasis on substantial matters (e.g. numbers of infected people, changes in independent variables) and give no indications of other communication strategies. Because of this, we may say that the experts heavily rely on the strength of their own arguments when they interact with the Task Force. Certainly this narrow use of strategies can to some extent be accounted for by the lack of resources that was noted earlier. However, even if the experts

had considerable resources, it seems far from self-evident that other strategies would be used. At least two circumstances help to explain this. First, the need to employ other strategies is somewhat reduced because a channel for communication has already been established (i.e. the Task Force structure). Second, the relevance of the single strategies appears to be somewhat varied within this particular issue-area. The technocratic approach, i.e. when actors use knowledge of procedural mechanisms and the legal system, works best in issue-areas where international regimes prevail (cf. Mings 1995: 239). Considering that the experts on communicable diseases rarely make references to such regimes at all, suggests that this issue-area has a clear anarchic character. The remaining strategies, grass-roots mobilization and coalition building, appears to be somewhat pointless when it comes to communicable diseases. After all, this is clearly a less politically disputed issue than for example nuclear safety. Because of this, it should be difficult to find other interests to build coalitions with and to find a concerned public opinion to mobilize.

#### 4. CONCLUSION

The purpose of this study has been to analyze when, or under what conditions, epistemic communities succeed in promoting ideas about cooperative security to intergovernmental structures at the regional level. For this purpose we developed an analytical framework, which draws upon previous research on epistemic communities and transnational relations respectively, and tested it empirically on a preliminary case study of communicable disease control in the Baltic Sea region. Since the year 2000, a regional network of experts has been carrying out studies on the local situation with respect to infectious diseases (e.g. tuberculosis, HIV) and has been giving recommendations on how to control the spread. In relation to this work, the network has quite successfully promoted the idea about cooperative security to policy-makers within a regional framework for multilateral cooperation on health issues.

The empirical findings suggest that conditioners traditionally highlighted by specialists on epistemic communities apply to this case as well, while factors that have been borrowed from transnational relations research at large has a more varied relevance. In accordance with findings from other studies on epistemic communities, we find that the expert network on communicable disease control has been favored by consensus among the specialists, by uncertainty among policy-makers, and by an institutionalization of scientific advice. Apart from this, we find little support for other conditioners. This means that the epistemic community has been influential despite a low degree of density, a lack of resources, and a narrow use of communication strategies. The latter implies that the strength of the substantial arguments, in combination with the dramatic character of the issue, has made policy-makers susceptible to input from experts.

Finally, considering that the traditional assumptions come out this test quite well, we find reason to once more return to our analytical framework. If the former assumptions sufficiently explain the influence of the expert network, then there is reason to critically ask if it is not possible to simplify the model. Actually, what this case study seems to suggest is that the model would not really lose explanatory power if we removed the conditioners related to density, resources, and communication strategies. On the other hand, considering that we so far only have observations from one case, such a step would be to jump to conclusions. More comparative case studies are needed before we can recommend scholars

to either stick to the simplified version of the model or to include more conditioners to grasp the complexities of life.

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