Regional and interregional integrative dynamics of ASEAN and EU in response to the avian influenza

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Abstract The article explores the European Union’s and the Association of Southeast Asian Nation’s regional and interregional integrative dynamics in response to the avian influenza outbreak in East Asia of 7 years ago. It sketches the collaborative efforts from an institutionalist perspective and outlines the variables influencing the behaviour of regional organisations. To explain and predict behavioural patterns, the article takes into account the following moderating variables: the kind of affectedness, mode of regional and interregional cooperation, the degree of institutionalisation and the role of international actors. The independent variable is the crisis itself. It replaces goal formulation for action and interaction during periods of normalcy. The succeeding paragraphs argue that a transnational crisis may trigger integrative dynamics and institutional change, but, that the mode of regional and interregional cooperation and the degree of institutionalisation matter in the long run and are the essential factors in differentiating the cooperative dynamics. These two variables are vital elements contributing to the institutional design of a regional organisation. In the end, the article views the institutional design to be the central and constant determinant of integrative behaviour both in times of and in absence of crises.

Introduction

The many crises within Southeast Asia over the last two decades have put the region on the map of various state and non-state international actors. The outbreak of the avian influenza (AI) in the winter of 2003 had a devastating and contagious impact in East Asia and became a pandemic of global scale. This crisis was a threat to the people, economy and the states of the region, and it seemed that the previous severe acute respiratory syndrome (SARS) outbreak did not provide a learning experience.
The associated regional integrative measures developed in response to the SARS crisis (e.g. based on the Association of Southeast Asian Nations (ASEAN) Plus Three Action Plan on Prevention and Control of SARS and other Infectious Diseases) were not immediately drawn on. Furthermore, the international community was informed about the outbreak months after the crisis started, when Southeast Asian states realised that they could not manage the impact of the virus (Thomas 2006: 923). World Health Organisation (WHO) officials have argued that some Southeast Asian states were slow to call on international assistance, because they lacked trust in the international and external actors (e.g. with regard to virus-sharing) and for reasons of political face-saving (Butler 2005a, c).

In addition, beyond speculation, the majority of affected Southeast Asian states did not possess the necessary resources to create capacities to contain and eradicate the virus. They heavily relied on the assistance of the WHO and a number of other international actors (e.g. Butler 2005b, in the case of American assistance for Indonesia). Seven years onwards, ASEAN states are still cooperating with external partners to increase the level of pandemic preparedness in the region. The latest example was the multi-levelled pandemic preparedness and response exercise co-hosted by the United Nations (UN) and the United States Agency for International Development (USAID) in Phnom Penh from 16–20 August 2010.

The article is interested in shedding light on the European Union’s (EU) assistance and the regional and interregional integrative dynamics that this crisis has triggered, given that both regions were affected by AI. It posits that a transnational crisis replaces goals and purposes that pre-define action and interaction in times of normalcy short of immediate threats and crises (Doidge 2008: 39). A transnational crisis acts as an independent variable generating either deeper or new integration in an issue-area. That is, it leads to both qualitative (depth of integration) and quantitative (diversification of issues) differentiation of regional integration. Thereby, regional organisations with shallow institutionalisation and an adherence to intergovernmentalism and state-centrism will advance minimally with regard to the qualitative regional and interregional dimension.

The succeeding paragraphs seek to establish a regional and interregional institutionalist understanding of these responses, whereby national and bilateral responses are also taken into account. They will attempt to trace behavioural patterns of regional organisations when facing a transnational and unconventional security threat and define the characteristics with reference to the kind of affectedness, mode of regional and interregional cooperation, the degree of institutionalisation and the role of international actors. The article will argue that these moderating variables are decisive in understanding, explaining and predicting the impact of crises on the integrative behaviour of regional organisations. It further understands that the resource–capacity expectations gap is a common problem of developing countries who cannot implement the necessary levels of preparedness because of their lack of resources. This shortcoming is intertwined with the moderating variables. For comparative purposes of the regional integrative dynamics, the article will first take a look at ASEAN’s intra-mural cooperation and then at the EU’s deep and supranationally coordinated regionalism on AI and allude to the mentioned variables. Following
the regional perspective, the article will examine what kind of external, interregional as well as bilateral actorness the EU displayed.

The Southeast Asian response

In the mid-1990s, cases of the highly pathogenic AI (HPAI) or hemagglutinin-5 neuroaminidase-1 have been reported in China. Since these reports were merely individual cases, Southeast Asian authorities were not alarmed about a potential pandemic disease that could spread into their region. By the end of 2003, the situation had changed rapidly and a large-scale outbreak had set in amongst poultry. Southeast Asia responded to the contagion on the national and regional level, of which the efforts on the regional and wider regional level were within the multilateral frameworks of ASEAN, ASEAN Plus Three (APT) and East Asia Summit (EAS).

At the tenth ASEAN Summit in Vientiane from 29–30 November 2004, ASEAN member states ranked AI on top of their threat perception and committed to establishing ASEAN Outbreak Response Teams and collaborating in combating AI. In the following years, cooperation commitments were substantiated. In 2005, at the 11th ASEAN Summit in Kuala Lumpur from 12–14 December 2005, AI was the dominant issue. The creation of the HPAI Task Force, an ASEAN Expert Group on Communicable Diseases, a Regional Framework for Control and Eradication of HPAI and an ASEAN Animal Health Trust Fund were welcomed by the ASEAN leaders. Malaysia expressed its intention to establish a Regional Avian Influenza Research and Reference Centre. ASEAN member states committed to regional coordination, information-sharing and collaboration that was to be pursued within the ASEAN Health Ministers Meeting (AHMM) and the ASEAN Ministers Meeting on Agriculture and Forestry (AMMAF). In the ASEAN Secretariat’s report, ASEAN Response to Combat Avian Influenza, a work plan was designed, synergies with international agencies envisaged and tasks distributed to individual state and ASEAN intergovernmental authorities to improve prevention, control and eradication of the virus over a three-year period (ASEAN Secretariat 2006: para. 6–9).

The APT and the first ever EAS also convened in Kuala Lumpur. The start of the EAS at the peak of the AI crisis was the litmus test for the future direction of this forum and provided an additional integrationist impetus. The Declaration on Avian Influenza Prevention, Control and Response adopted at the Summit, spelled out the pre-eminence of the national responsibility to solving the problem and it additionally illustrated the role of the ASEAN Secretariat to liaise with partners and stay in close consultation with these. One of the objectives was to embark on a “well-coordinated multi-sectoral/multi-disciplinary approach at the national and regional level...in support of regional and global efforts towards pandemic preparedness and response planning” (East Asian Summit Participating States 2005: no. 4). This rationale was

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1 The article presupposes that the EU is an international actor and borrows from Jürgen Rüland’s definition in his conference summary of the conference on Interregionalism in International Relations in Freiburg in 2002. The article understands actorness as the quality of an actor being identifiable and able to aggregate interests, formulate goals and make and implement decisions.
also reflected in the ASEAN Summit Chairman’s Statement (ASEAN Member States 2005: para. 17–18).

The APT meeting took place along the same lines and launched the APT Health Ministers Meeting starting from 2006 onwards. Already in 2004, the APT had endorsed the Emerging Infectious Disease Programme. By 2007, the threat was still not under control and necessitated more initiatives. At the APT in 2007, China proposed to set up a Regional Monitoring Centre on Infectious Diseases and Japan made a new pledge of US$ 67 million to fight AI and other pandemic diseases. In president Arroyo’s Chairperson Statement at the 12th ASEAN Summit on 13 January 2007 in Cebu, AI still ranked as a major regional security threat and remained a securitised form of influenza.

We agreed to continue our cooperation to maintain security, stability and peace in our region. Towards this end, we will continue collective action to address the challenges posed by such serious threats as terrorism and transnational crime, avian influenza and other major infectious diseases, environmental degradation, natural disasters, destabilising increases in oil prices, and the negative impact of rapid globalisation and growth. (Macapagal-Arroyo 2007: para. 27)

ASEAN member states have been very active in creating institutional structures to assist the needs of the affected member states. This jambalaya of East Asian institutions provided the political references to address the issue, but, these frameworks lacked the political will of the member states to develop to meaningful and effective regional mechanisms for cooperation. This reminds us of the commonly used image of East Asian regionalism as being a noodle bowl with overlapping and entangled soft institutions. The aim of these regional cooperative initiatives was to secure both animal and human health in the region and mitigate the negative impact on the poultry industry. Despite the efforts, bilateral cooperation with external partners outweighed regional cooperation in achieving the goals.

AI had weakened the poultry industry and to some extent tourism and governments. The people questioned the political leaders in their efficiency and, thus, AI posed a threat to state stability and political survival. With regard to human suffering, Rizal Sukma argued that the “growing number of avian flu casualties has raised a number of questions regarding the seriousness and ability of Indonesia’s government to tackle the issue and prevent the outbreak in the future” (Sukma 2007: 4–5). The AI crisis raised power concerns among many Southeast Asian central decision-makers. For some Southeast Asian governments, AI had become a matter of political survival and national efforts were pushed to secure this. Regional measures could not directly support this end, and, therefore, they were relegated and regarded to be strengthening the primary efforts on the national level. In addition, the affectedness of AI was temporally and spatially uneven throughout the region.

Listing the individual national responsive and pre-emptive measures of the affected ASEAN member states would extend the scope of this article and can be read in detail elsewhere (Do 2009; Junadi 2009; Panelo 2009; Phoolcharoen 2009). Noteworthy is that there were different types of national instruments. Some were concerned with

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2 This metaphor has been mainly used to describe East Asian trade regionalism, for instance, in Richard Baldwin’s paper Managing the Noodle Bowl: The Fragility of East Asian Regionalism in 2006.
prevention such as the ones of the insular Philippines that has been unaffected from the virus. Others revolved around fire-fighting, that is, for instance, the immediate termination of livestock. Within the national poultry control and human epidemic plans the governments emphasised the long-term dimension and, for example, with regard to the animal dimension, introduced new regulations within the poultry industry. Both the short- and long-term projects received the support of external partners. The WHO, Food and Agriculture Organisation (FAO) and Organisation for Animal Health (OIE) were central international organisations assisting Southeast Asia. In 2006, the WHO established a Regional Pandemic Preparedness Plan to complement the national efforts. In spite of the national, regional and international efforts, as of early 2010, Indonesia and Myanmar still listed cases of AI, and it seems that the disease has become endemic to some Southeast Asian countries as suggested by a report from the FAO 6 years ago (McLeod et al. 2004).

The main feature of the declarations of the regional fora is the emphasis on state centrality. The inclusion of civil society actors is patchy and remains relatively neglected, although their engagement is vital in bridging the gap between the national authorities and the local level. In spite of governmental attempts to conduct surveillance, report and investigate cases of AI on the provincial levels, their lack of financial means compelled non-governmental organisations (NGOs) to step in and facilitate information flow to the micro-level. However, these NGOs also face resource shortage. In the case of Cambodia, for instance, NGOs concerned with health provided AI specific information and were dependent on outside funding for AI projects. The problem is that NGOs generally lack the resources and their external funding is short-lived and inconsistent (Keovathanak 2009: 109–110).

Given that the persistence and spread of AI is linked to the lifestyle of the many Southeast Asian peoples, who traditionally live with their livestock under one roof, disseminating information and educating the community grassroots-level is a vital part of combating the virus. In particular, faith-based NGOs play an important role in this context (Keovathanak 2009). Solutions to this cultural factor cannot be achieved through policies from the central government and be imposed top-down. First, in the majority of Southeast Asian states central governments are physically and politically far away from the rural communities, which are still strongly dependent on traditional kin and patronage relationships. Local and religious authorities enjoy higher influence than the government. The issue of remoteness leads to another problematic aspect; since villagers lack an incentive to report in view of the financial burden, they do not report (Balen and Caballero Anthony 2009: 5). Second, you cannot just tell people how to change a lifestyle they and their ancestors have lived over hundreds of years. The problems of remoteness and culture are the main obstacles that have to be overcome if Southeast Asian states are determined to exterminate AI.

Learning from SARS?

The spread of SARS in East Asia the year before the outbreak of AI did not seem to have provided an additional regional learning experience to ASEAN and the APT, since it evoked the same type of regional integrative dynamic. Similar to the case of SARS, AI echoed the same multiple institutional ambition. However, core concern
of ASEAN states is national sovereignty and regime consolidation and, hence, unweakened adherence to the principle of non-interference is essential in upholding the governments’ primary interests. Southeast Asian states seem to lack the political will to make avail resources and to comply to and implement the regional commitments in an in-depth and multi-levelled manner, unless these efforts clearly benefit the national level. As mentioned above, the affected states preferred to act nationally in cooperation with extra-regional actors.

Second, the majority of ASEAN states are developing countries lacking sufficient resources. This suggests that both the political and material realm provide explanations for the faint-hearted regionalist behaviour of Southeast Asian states. It implies that regional dynamics are affected by resource shortage and rely on influx of development or crisis-specific aid. This suggests that the issue of resources may explain the preference for bilateral cooperation with extra-regional actors since it offers an actual profit to individual ASEAN states. Whereas pooling limited national resources on the regional level does not necessarily equate to a more profitable situation for the individual state and the region.

Although SARS affected some Southeast Asian countries like Singapore severely, the bird flu threat had negative implications across a broader range of Southeast Asian countries and sectors. It posed a real threat to human lives, the economy, food safety, the tourism industry, the agricultural industry and the stability of the regimes in Southeast Asia. For instance, from 2003–2004, some countries such as Vietnam and Thailand (the latter is also a significant poultry exporter to the EU) had the following losses: 17.5% of the poultry population in Vietnam, 14.5% of the poultry population in Thailand (McLeod et al. 2004: 1), which worsened in the years to come.

On the people level, the SARS experience taught the national authorities “that an effective means of prevention is to ensure our peoples are better informed on the causes of the disease, its main modes of transmission and preventive steps to take” (ASEAN Secretariat 2006: para. 20). Despite the rhetorical commitment to increase the people-orientation, the regional responses are still short of the people and local dimension and rely on the goodwill of NGOs as indicated above. The ASEAN Secretariat may have realised the necessity to include this dimension into the solution, but, many Southeast Asian states are still hesitant to share the task of security and human security provision with civil society and other non-state actors.

State centrality remains, but this does not signify that central decision-makers do not acknowledge the people dimension as an integral part of the solution (Interview with ASEAN member state official 31 May 2010). As previously mentioned, combating AI is not only a matter of killing poultry and providing vaccination but changing lifestyles and mindsets of farmers and backyard-chicken-owners (Roy 2009: 131). That is, addressing the cultural and long-term level of the crisis and the existing vulnerabilities. Transferring this into practice, which is feasible to be implemented, represents the major challenge and unavoidably includes non-state actors.

The European response and preparedness

Pursuant to the outbreak in East Asia in 2003, the migration of wild birds made AI a real threat to the EU. The eventuation on European soil was only a matter of time. The EU
response to the AI outbreaks in Southeast Asia was multi-faceted and based on a comprehensive approach. From the domestic viewpoint, which is concerned with the protection of Europe -a responsibility of the Directorate General (DG) for Health and Consumers-, the trade on poultry from Southeast Asia was restricted and the EU revamped the Council Directive (92/40/EEC) on AI in 2005. The directive provided the guidelines for the member states to implement national plans. Beyond the national dimension the European Commission adopted a Community Influenza Preparedness Plan on 26 March 2004. This plan differentiated the supranational and intergovernmental competences on AI. With regard to the external dimension, Directorate General (DG) External Relations in coordination with other DGs including DG Health, DG Development and DG Research was one of the main driving forces behind the global response to AI. The EU co-organised the international ministerial conferences on animal and pandemic influenza, provided an important amount of additional funds for development and research, using the response to the crisis as a vehicle for regional integration and sustainable development (Interview with EU official 4 November 2009). Hence, an array of AI actions was pursued under various DGs -including DG Enlargement to secure and buffer beyond the EU borders-.

In 2005, the European Centre of Disease Prevention and Control (ECDC) was established providing regionally consolidated epidemiological information and additional scientific advice to the European Commission and EU member states. Regional comparative studies on pandemic influenza preparedness suggest that the ECDC data collection and analysis model can be exemplary for other regions.

Among others, the WHO has been recommending the EU model on issues like legislation, contingency planning, approaches to surveillance and veterinary services, for the Asia-Pacific region (Coker and Mounier-Jack 2006). The WHO and others believe that the Asia-Pacific and other regions can learn from the European model and experience. This model is not flawless and vice versa the EU and its member states can learn from the activities of the other regions. The EU model contrasts ASEAN’s institutional plethora and highlights the lack of national–regional coordination on the ASEAN side. In the light of the institutional and cooperative differences, the question is to what extent both sides can learn from each other or stimulate a cooperative interregional dynamic with effects on the national, regional and global level.

ASEAN–EU initiatives

With regard to the ASEAN–EU dimension, direct European Commission activities with Southeast Asian partners have been sporadic and sparse. However, this limited scope of activities needs to relate to the bigger picture of the ASEAN–EU interaction, where cooperation on AI is only a small issue-area within the overall relationship. Direct European Commission assistance was limited to technical and financial assistance to the most severely affected ASEAN members (e.g. the study on gender aspects of the AI crisis in Laos, Vietnam and Thailand; an EU experts' delegation and financial support to Vietnam, etc.).

Furthermore, the main financial support to Southeast Asia was channelled through the Avian and Human Influenza Facility of the World Bank. The European
Commission collaborates with various international partners on AI and regularly acts as the primary donor, but it is less involved in the implementation. Therefore, it is less visible as an actor on site and its financial contribution does not match its actorness appreciation within the process. On the one hand, the EU’s actorness visibility is impeded while, on the other, the collaboration with implementing agencies alleviates the EU’s administrative burden. International organisations such as WHO, OIE and FAO are specialised to carry out AI-specific tasks and appear to be an effective option for the EU. The EU does not have to deal with the conditions of implementation of the funds and possibly quarrel over the terms. Having an international institution with a set of issue-specific international standards handle the matter relieves the EU’s workload and guarantees effectiveness of EU funds to some extent. Furthermore, the EU follows the subsidiarity principle from within, which has transpired to its international mode of action. It is by definition multilateralist and does not seek to undermine international organisations in their responsibility. A global crisis requires a global solution.

On the bilateral level, there have been a number of EU member state-ASEAN member state AI development assistance projects. For instance, Germany has given €86 million for development assistance in Indonesia in October 2007 (German Development Cooperation with Indonesia 2010). Some of the money went into projects concerned with combating AI. In this context, European Commission officials have expressed concerns about the coordination and communication with EU member states and believed that there is room for improvement to avoid duplication of efforts (Maier-Knapp 2011).

Aside from these cooperative efforts, there has been verbal interaction between the two regions within various dialogue fora. Within the interregional dialogue frameworks, direct EU commitments to affected Southeast Asian countries fell short. Interaction remained predominantly on the declaratory level and guided by the UN provisions. In the framework of the ASEAN–EU Ministerial Meeting and ASEAN–EU Joint Cooperation Committee, AI was missing from the agenda until 2007. Even then, it was merely referred to be one of many infectious diseases that require continuous cooperation between the ASEAN and EU member states and, in that context, the importance of the regional EAS level of cooperation was acknowledged (ASEAN–EU Member States 2007: para. 15).

The Asia Europe Meeting (ASEM) being the main dialogue forum for ASEAN and EU in a wider EU–Asia interregional context was mandated to deal with such global issues over the ASEAN–EU dialogue and provides more evidence for cooperative efforts. At the sixth ASEM Foreign Ministers Meeting from 17–18 April 2004, the ministers decided on an ASEM Seminar on the Management of Public Health Emergencies, “and tasked ASEM SOM [senior officials meeting] and coordinators to define concrete initiatives in this regard, including an expert meeting on controlling international epidemics” (ASEM Foreign Ministers 2004: 5–6). From 12–14 November 2007, China hosted the Workshop on Avian Influenza Control and at the seventh ASEM in Beijing from 24–25 October 2008 Japan committed to finance an issue-based leadership initiative of Japan, the UK and China on the Rapid Containment of Pandemic Influenza. It was launched on the occasion of the ninth ASEM Foreign Ministers Meeting in Hanoi from 25–26 May 2009 with Japan sponsoring a stockpile of 500,000 Tamiflu doses in cooperation with WHO.
Summary

The AI threat acted as a trigger for regional and interregional integrative dynamics. The article has argued that, within the two regional organisations, the national level supported by external partners was the most important level of responsive action. The regional and interregional responses catered to strengthening this level, thereby, ASEAN regional integrative efforts were skin-deep and lacked the compliance of the member states. It appears that the lack of resources for capacity-building and the normative foundation have been the main underlying causes for ASEAN’s soft and light institutionalisation.

Furthermore, the article displayed that institution-building within a regional and interregional arrangement is highly dependent on the opportunity–cost balance. Member states of a region will base their institutional preference on this rationality and prioritise the option of low-risk and low-cost, that is, soft institutionalisation (Rüland 2002: 4–5). This minimises the risk of high costs when the benefits from the regional or interregional frameworks are relatively low in comparison to their governance costs.

The national level directly benefitted from the international efforts. It seems that when resources are scarce, states concentrate their available resources on the national level and look towards the international community instead of referring to their self-sponsored regional cooperative potential; in particular, when they are a grouping of predominantly developing countries. Nonetheless, despite international assistance, numerous responsive failures evinced on the national level within the affected ASEAN states. An important issue was the inability of national authorities to develop effective decentralised and bottom-up strategies with impact on multi-sectoral responsive coordination. By contrast, the regional integrative dynamics of the EU exhibited greater multi-levelled and multi-sectoral coordination and crystalised the importance of supranationalism.

In contrast to the EU, regional responses were not limited to one regional organisation, but also took place on a wider level within the EAS and APT. In view of the ASEAN and East Asian inclination to intergovernmentalism and non-interference, the ASEAN Secretariat was given a subordinate role across the three regional fora. The EAS may have acknowledged the ASEAN Secretariat’s role in liaising and the recent years suggest a greater multi-sectoral coordinating status of the Secretariat on AI. However, generally speaking, the Secretariat is under-staffed and under-funded. Carrying out these tasks is already placing its capacities on the verge of overstretch. Even if the role of the ASEAN Secretariat is strengthened in the years to come, it will need more resources.

ASEAN’s mode of cooperation inhibits deeper integration and institutions, it renders effective regional solutions impossible. Within Southeast Asia soft institutions substantiated by national and intergovernmental action provide the basic reference for future cooperation in the field. In contrast to the deep and supranational institutions of the EU, they lack an enhanced capacity to lock the regional organisation in a certain irreversible path of development. Generally, scholars of historical institutionalism have suggested that “once actors have ventured far down a particular path, however, they are likely to find it very difficult to reverse course”, because of the costs involved in the reversal process (Pierson and Skocpol 2002: 699). Political
alternatives are narrowed down and lost on this path. However, soft institutionalism leaves a higher flexibility to reverse or ignore and circumvent institutions. Hence, ASEAN’s opportunities of reversal or circumvention are higher than those of the EU. Whereupon, the EU’s internal competence division has decoupled the supranational and intergovernmental sphere from each other to a great extent, so that, path dependency is not necessarily frowned upon as long as the supranational bodies do not encroach on the intergovernmental process of integration.

During the crisis, the EU, as an advanced regional organisation consisting of mainly industrialised countries was less dependent on the WHO, OIE and FAO. These international organisations still provided the overall guidelines of action. By contrast, Southeast Asian states needed the assistance of the external actors and pursued this generally on a bilateral level. International organisations also supported regional initiatives. In comparison to the funds channelled for bilateral support, the amount allocated to the regional level was a drop in the bucket.

In the case of AI, external assistance from international organisations was well-received whereas during the Asian financial crisis the help given by the IMF was perceived negatively. This negative experience provided stimulus for greater national and regional dynamics. This indicates that a crisis does not only entail a causal relationship triggering integrative behaviour, but that it can also change the norms and culture determining the behaviour of an institution or its member state sub-units.

The case of the AI outbreak in Southeast Asia has shown that the EU possessed issue-specific expertise, financial capacity and the goodwill to project its level of preparedness to another region. Despite its interregional and bilateral state-to-state actorness potential, the EU did not take full advantage of it. This is linked to many reasons. For instance, the patchy nature of the crisis itself which affected the ASEAN member states unevenly. In addition to this, the lack of a strong ASEAN Secretariat eligible to act on behalf of the states and regional cohesion in the counterpart region played an inhibiting role for interregionalism to be the viable option. Furthermore, we have to consider that the outbreak in Southeast Asia could have led to a global pandemic but that the EU had geography in its favour. Given the distance between both regions, the spread of AI from East Asia to Western Europe took months and gave the European Commission and the EU member states enough time to prepare for an outbreak in their own region. Thus, threat perceptions between ASEAN and the EU were dissimilar and, hence, EU assistance to Southeast Asia was also seen as precautionary or pre-emptive action for safeguarding the EU. However, to ASEAN, AI was a real and immediate security threat.

Despite divergence in threat perceptions, the EU was involved in both the fire-fighting and long-term responses (associated to technical and development assistance both on a supranational and bilateral country-to-country level). International initiatives including the European sponsored and staffed projects addressed the various levels of the AI problem. Some of these initiatives addressed the norms and practices of farmers and the agricultural industry such as the study on gender in the light of AI. Some EU-funded projects indirectly addressed the cultural dimension through sanitary concerns. Some success may be accounted for within the reformulation of regulatory standards in the poultry industry, although market and governmental pressure on the industry to reform may have been the main stimulus for the changes.

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Such initiatives comprising of local and foreign staff sharing their expertise in accordance to Western standards has definitely influenced change on the macro-level (policy-making and industry), but, on the micro-level, there has been insignificant behavioural and normative impact to suggest a cultural change of rural famers living in the same house as their livestock (Interview with ASEAN member state official 31 May 2010). In Southeast Asia, this traditional way of life presents the core problem for a complete eradication of the virus. The EU cannot change cultures unless the counterpart is open to change and unless local grassroots groups are involved in the implementation of change. However, it has indirectly become a top-down promoter of behavioural standards and an important element in the chain of norm diffusion in third countries (Laïdi 2008; Manners 2006). It is imperative that EU AI external assistance places greater emphasis on dual-levelled and complementary strategies: from bottom-up and top-down and is tied in ongoing decentralisation projects of European implementing agencies. In particular, in Southeast Asia such an approach may prove to be fruitful and more credible in the eyes of the European and Southeast Asian public.

Conclusions

The study showed that the regional response of the regional organisations was subject to the mode of cooperation, the role of the supranational coordinating body within the organisation, the degree of institutionalisation and the role of international actors and that the availability of financial resources was the single most important element of responsive action, inaction and interaction. WHO, OIE and FAO played major roles in establishing integrative guidelines and to some extent were detrimental to ASEAN’s regional dynamic. Despite supporting some regional programmes, the international organisations’ main channel of assistance was bilateral strengthening national plans and country-specific regulatory developments. The degree of affectedness and threat perception did not impact on the regional level, given that international organisations had claimed AI a global pandemic. However, the difference in threat perception, proximity, negative impact, preparedness and vulnerability—in summary, the degree of affectedness—moderated cooperative dynamics on the interregional level. The EU’s interregional support was minimal and complemented by bilateral assistance of the European Commission or member states, which, however, could have been better coordinated. Despite the small scope of EU actorness, the European approach was comprehensive and targeted the long-term (pre-emptive), short-term (responsive), practical and cultural dimension.

Finally, with regard to the institutional dimension, there were some implications traceable. The institutional asymmetry of the counterparts and the shallow institutionalisation of the ASEAN–EU dialogue provided an unfavourable setting from the outset. Moreover, the role of international actors and their distribution of responsibility, endowing WHO, OIE, World Bank and FAO with the primary responsibility of managing this global crisis implied a natural neglect of the interregional level. The EU being multilateralist and disinterested in an additional administrative burden, predominantly channelled its assistance through these organisations.
The implications of the variables indicate their moderating impact on the behaviour of the regional organisations. Based on the empirical evidence, the article suggests a certain predictability of regional and interregional integrative dynamics. In conclusion, the article argues that the case study of AI has affirmed the moderating impact of the variables for the purpose of explaining and predicting behaviour, but, it also understands that crises always bear a degree of uncertainty and inconsistency. That is, they can lead to the contestation of traditional behaviour and norms and their eventual transformation or substitution as has been the case during the Asian financial crisis. This implies that some of the moderating variables may be subject to change in such a case. The financial crisis of 1997 has demonstrated that crises can only produce change of institutions and cooperative culture when the degree of affectedness is severe and the role of international aides is perceived to be detrimental. This gives impetus to meaningful regional integrative dynamics. When regional organisations and their nation-state sub-units are compelled to look into themselves and reflect, only then, institutions and their institutional culture may alter and also become the dependent variable in the causality chain.

This example highlights the importance of the moderating variables. In fact, the case of AI suggests that, when viewing the transnational crisis as the independent variable, one may causally explain the responsive integrative dynamic qualitatively and quantitatively only if the mentioned moderating variables are considered. It appears that exchanging two specific moderating variables (mode of regional and interregional cooperation and the degree of institutionalisation = in short, encompassed in the overall concept of institutional design⁴) with the current independent variable may provide a more accurate causality and deeper explanation of the regional and interregional integrative dynamics, in particular, with regard to shallow and intergovernmentally institutionalised regional organisations like ASEAN.

Behavioural explanatory and predictability value is more consistent and possibly higher in reference to the institutional design as the independent variable. However, behavioural patterns are subject to higher variability in the context of crises. Hence, while an institution-based approach allows us to draw on cost–benefit calculations of the nation-state as well as on the notion of institutional path dependency, it will neglect behavioural and normative change. Nevertheless, the article suggests that crises as catalysts for meaningful institutional change are dependent on the severity of the crisis, the level of resource availability for response and increasing the level of preparedness and the role of external actors. It showed that this has rarely happened in Southeast Asia. Despite the creation of a variety of institutions post-SARS, when the AI crisis occurred these existing responsive regional mechanisms were not immediately drawn on. Thus, it seems that the type of institution is more important in shaping the typology of the response than the transnational crisis itself.

A crisis explains why there has been a response within a sector or across sectors, but it cannot explain by itself why there has been a certain type of response; for instance, explaining the similar institutional response to SARS and AI in Southeast Asia in view of the apparent learning deficiency and the low variability in the crisis-

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⁴ By institutional design, I understand the norms and concepts underlying institutions and their dynamics.
responsive behaviour. To explore and explain the regional and interregional integrative dynamics in a more differentiated typological manner, the underlying factor of resource availability and the previously sketched independent variable of institutional design offer an alternative causality equation. In general, it appears that, in current times of interdependence where the state is still the central player, a neoliberal–institutionalist argument may provide a deeper and more stable foundation for an outlook of regional as well as interregional integrative dynamics both in times of and in absence of crises.

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