# CO-CHAIRING THE ASEAN DEFENCE MINISTERS' MEETING-PLUS THE CASE OF THE ASEAN CENTER OF MILITARY MEDICINE (ACMM)

Policy Report
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### **Executive Summary**

This policy report examines the roles of co-chairs in shaping international cooperation under the ASEAN Defence Ministers' Meeting-Plus (ADMM-Plus) framework. It analyses the process leading to the establishment of the ASEAN Center of Military Medicine to demonstrate how co-chairs can influence collaboration to their advantage. The report also offers practical policy recommendations that could be useful to policymakers in the area of defence diplomacy and security governance in the Indo-Pacific and beyond.

### Introduction

The increasingly intertwined nature of the world has engendered the need for states to foster close cooperation among themselves to maintain international peace and stability. The Indo-Pacific is no exception: countries in the region have been enhancing ties in many issue areas, ranging from economic development to security. This policy report seeks to shed light on the question: How do chairs/co-chairs influence international cooperation? The conventional wisdom is that co-chairs operating under similar institutional constraints would be expected to possess equal influence in altering outcomes. However, certain co-chairs were in fact found to play greater roles in affecting international governance than their counterparts.

Against this backdrop, the report scrutinises the roles of co-chairs in altering the cooperation under the ASEAN Defence Ministers' Meeting-Plus (ADMM-Plus) mechanism, which can shed light on defence diplomacy in the Indo-Pacific region. It seeks to discover why some co-chairs are able wield greater influence than their counterparts over collaboration results. The establishment of the ASEAN Center of Military Medicine (ACMM), which is part of the collaboration on military medicine<sup>3</sup> under the ADMM-Plus, will be analysed to validate the argument.

This subject matter warrants examination for the following reasons. First, defence cooperation in the Indo-Pacific entails constant negotiation. Second, the practice of co-chairing is prevalent in this area as states take turns to serve the position. Third, ADMM-Plus is the most advanced multilateral platform fostering non-traditional security cooperation in the region, and hence plays an important part in setting the future directions of collaboration in the region. Fourth, military medicine is a key element under the ADMM-Plus because it is directly related to the framework's other areas, namely, counter-terrorism and disaster relief. Illustratively, counter-terrorism and disaster relief missions often involve casualties, necessitating the deployment of medical services

<sup>&</sup>lt;sup>1</sup> For further readings concerning the theory of functionalism in international cooperation, see, for example, Ernst Haas, *Beyond the Nation-State: Functionalism and International Organization* (Stanford, California: Stanford University Press), and Joseph Nye, "Patterns and Catalysts in Regional Integration", *International Organization* 19, no. 4, 1965: 870–884.

<sup>&</sup>lt;sup>2</sup> Kaewkamol Pitakdumrongkit, "Co-chairing International Negotiations: The Case of the Chiang Mai Initiative Multilateralization", *The Pacific Review* 28, no. 4 (2015): 577–605; J. Tallberg, "Bargaining Power in the European Council", *Journal of Common Market Studies*, 46, no. 3 (2008): 685–708.

Military medicine involves the management and distribution of required medical services, in both peace and war times, to areas in need of such support.

to treat them. Fifth, since the 1990s, military medicine has been part of the culture of confidence and security-building measures of regional defence diplomacy stemming from Track II activities.<sup>4</sup> Finally, the findings of this study can augment the existing research on how small states (e.g., Singapore), when acting as co-chairs, can shape the outcomes of any collaboration in their favour.<sup>5</sup> Therefore, the lessons learned are useful for policymakers in the area of defence diplomacy and security cooperation in the Indo-Pacific and beyond.

The report is organised as follows. The first section briefly discusses military medicine collaboration under ADMM-Plus. The second part analyses how Thailand was able to leverage its co-chair position to exert greater influence on the terms of the ACMM than its Russian counterpart, a more powerful state, was able to. The last section extrapolates from the finding of the study to suggest feasible recommendations for policymakers engaged in regional cooperation.

William Durch, Constructing Regional Security: The Role of Arms Transfers, Arms Control, and Reassurance (New York: Springer 2016), 202.

Alan Chong, "Singapore and the Soft Power Experience", in *Diplomacies of Small States: Between Vulnerabilities and Resilience*, ed., Andrew F. Cooper and Timothy M. Shaw, 65–80 (New York: Palgrave Macmillan, 2009). Alan Chong, "Small State Soft Power Strategies: Virtual Enlargement in the Cases of the Vatican City State and Singapore", *Cambridge Review of International Affairs* 23 no. 3 (2010): 383–405.

### 1. Military Medicine Cooperation under the ADMM-Plus Framework

In October 2010, 18 countries — 10 ASEAN member states and eight of ASEAN's Dialogue Partners (Australia, China, India, Japan, New Zealand, Russia, South Korea, and the United States) — established ADMM-Plus. The platform's main objective is to "strengthen security and defence cooperation for peace, stability, and development in the region". ADMM-Plus governance spans six areas: humanitarian and disaster relief (HADR), maritime security, peacekeeping operations, counter-terrorism, humanitarian mine action, and military medicine.

To push forward ADMM-Plus collaboration at the operational level, six Expert Working Groups (EWGs) were formed. Each EWG is co-chaired by two states — one an ASEAN member, and the other a Dialogue Partner — and co-chairs rotate on three-year cycles. States can propose themselves as co-chairs, but such nominations must be in accordance with the selection criteria outlined in the 2013 Concept Paper and endorsed by the other ADMM-Plus nations.

The EWG on military medicine was created in July 2011. Australia and Brunei are co-chairing the current, fourth cycle of the EWG from 2020 until 2022. One major accomplishment under the Thailand-Russia co-chairmanship (2014–2016) was the creation of the ACMM in Bangkok, Thailand, with the purpose of serving as a platform to enhance "practical, effective, and sustainable cooperation among military medical services of ASEAN Member States and Plus countries, both in normal and crisis situations".

The establishment of the ACMM began in November 2013 with the drafting of a three-year Workplan outlining the deliverables for the second cycle of the EWG's collaboration. The Working Group of ASEAN Defence Senior Officials' Meeting-Plus endorsed the Workplan at its April 2014 meeting. Following that, the Concept Paper on the Establishment of the ACMM discussing the entity's scope, responsibilities and functions was drafted. In March 2015, the 9th ASEAN Defence Ministers' Meeting (ADMM) adopted the text of the Concept Paper, marking a formal decision to create the ACMM in Bangkok.

<sup>&</sup>lt;sup>6</sup> ADMM-Plus, "About the ASEAN Defence Ministers' Meeting Plus", 6 February 2017, https://admm.asean.org/index.php/about-admm/about-admm-plus.html

ADMM, "Joint Declaration of the ASEAN Defence Ministers on Maintaining Regional Security and Stability for and by the People", 9th ASEAN Defence Ministers' Meeting, Malaysia, 16 March 2015. 3.

# 2. How Co-chairs Influence Military Medicine Governance

Before tackling the puzzle surrounding the Thai co-chair's ability to alter the outcomes of the negotiation, let us examine the goals that the Thai and Russian co-chairs each had for the negotiation. Bangkok's objectives were to: (i) co-chair the EWG on military medicine; and (ii) host the ACMM in its territory. In other words, Thailand believed that the co-chair position would allow it to influence certain details of the collaboration, including the terms of the ACMM. Moreover, Thailand believed that by hosting the centre on its soil, it would be able to draw in additional resources (e.g., technical know-how), bolstering its bargaining leverage in future talks on military medicine.<sup>8</sup>

Like Thailand, Russia aspired to co-chair the EWG on military medicine, but for different reasons. The first reason was tied to the country's economic-security nexus. Asia is not only rising as the epicentre of the world's economy but also is Moscow's main market for its energy exports. Seeing that economics and security are closely intertwined, the Kremlin has been striving to sustain regional peace and stability because doing so creates an environment which further fosters economic relations, bringing about joint development and prosperity. In the words of a Russian scholar:

Russia's own modernisation plans envisage progressively greater trade and investment cooperation with East Asia's economic "miracles." Stronger interactions and links in the military-political field are viewed in this context as having the potential to arrest the further growth of strategic uncertainty, if not fully then at least partially. This is one probable explanation for why, from the Russian perspective, the value of the ADMM-Plus as a strategic dialogue platform may be relatively high.<sup>10</sup>

The second reason was the Kremlin's assessment that military medicine is a less politicised subject than the other areas of collaboration under ADMM-Plus. As a result, Russia calculated that co-chairing the EWG was unlikely to trigger conflicts between itself and the other participants.<sup>11</sup> Furthermore, Russia

<sup>8</sup> Author's conversation with a Thai government officer, the Royal Thai Army, Bangkok, Thailand, 25 December 2013.

Matthew Sussex, "The Triumph of Russian National Security Policy? Russia's Rapid Rebound", Australian Journal of International Aairs 71, no. 5 (2017): 499–515.

Victor Sumsky, "A Russian Perspective on the Relevance and Challenges of the ADMM-Plus", Asia Policy 22, no. 1 (2016): 114–116, 115.

<sup>&</sup>lt;sup>11</sup> Author's conversation with Vassily Kashin, senior research fellow, Institute of Far Eastern Studies in the Russian Academy of Sciences, phone conversation, 7 October 2015.

believed that this co-chairing opportunity would increase its interactions with the other ADMM-Plus nations, paving the way for future arms sales to the latter.<sup>12</sup>

How was the Thai co-chair able to negotiate its way to accomplish the ACMM outcomes it wanted? Thailand's influence was explained by three factors: knowing other states' preferences; invoking the ASEAN centrality concept; and, exercising its expertise on military medicine.

### 2.1. Using other states' preferences: the selection of co-chairs

What explained the Thailand-Russia co-chairmanship? While both states aspired to co-chair the EWG on military medicine, nothing prevented them from pairing up with any of the other ADMM-Plus members. The realisation of the Thailand-Russia co-chairmanship was partially attributed to Bangkok's utilisation of its knowledge of the other countries' interests. By interacting with the Russian team in the first cycle of the EWG (2011–2013), Thailand was able to discern that the latter wanted to forge amicable relations with states in the region and preferred to participate in co-chairing the EWG on military medicine as the topic was neither likely to be politicised nor to result in disputes between itself and the other participants. Onsequently, a few months before the first cycle had concluded, Bangkok invited Moscow to be a co-chair of the next cycle, and the latter agreed.

Both countries then nominated themselves as co-chairs for the second cycle. According to the selection criteria in the 2013 Concept Paper on the Transition of the ADMM-Plus Experts' Working Group Co-Chairmanship, <sup>15</sup> the duo were granted priority over the other contestants because they had not co-chaired in the first cycle (2011–2013). As a result, the 2nd ADMM-Plus Meeting in August 2013 endorsed the co-chairmanship, commencing Bangkok's and Russia's co-chairing work.

### 2.2. Invoking ASEAN's centrality: The drafting of the ACMM Concept Paper

Under the rules of the ADMM-Plus, the co-chairs were responsible for drafting the ACMM Concept Paper comprising the details of the centre. Initially, the

<sup>&</sup>lt;sup>12</sup> Author's conversation with a Russian contact, Bangkok, Thailand, 11 April 2016.

<sup>&</sup>lt;sup>13</sup> Author's conversation with a Thai medical services staff member, the Royal Thai Army, Bangkok, Thailand,13 July 2015.

<sup>&</sup>lt;sup>14</sup> Matthew Sussex, "The Triumph of Russian National Security Policy?"

<sup>&</sup>lt;sup>15</sup> ADMM-Plus, "Concept Paper on the Transition of the ADMM-Plus Experts' Working Group Co-chairmanship", 7th ASEAN Defence Ministers' Meeting, Bandar Seri Begawan, Brunei Darussalam, 7 May 7 2013, 2.

Thai and Russian co-chairs bickered over the division of labour, especially on the question of who would lead the process. Ultimately, Bangkok was the one articulating the centre's scope, responsibilities, and roles. Moscow's tasks involved language-checking and legal-scrapping with a view to reducing the probability of misinterpretations and misunderstandings of the text arising later. <sup>16</sup>

Why did the Russian co-chair let its Thai counterpart have its way? This phenomenon was partly explained by the latter's invocation of the notion of ASEAN centrality, enabling it to tip the division of labour in its favour. Illustratively, Bangkok reminded the Kremlin that this idea had been well embedded in ADMM-Plus since the framework's inception. For example, the Concept Paper on ADMM-Plus posits that "ASEAN is at the centre of the ADMM-Plus. ASEAN shall be the primary driving force in the ADMM's interactions with ASEAN's friends and Dialogue Partners." In a similar vein, the Concept Paper on ADMM-Plus Configuration and Composition emphasises that "ASEAN centrality must be protected and preserved in the ADMM-Plus process to ensure that ASEAN Member States remain the driving force."

As for Russia, it did not protest when Thailand brought up the notion of ASEAN centrality. This stance on Russia's part was mainly because the country has acknowledged ASEAN's significant role in maintaining regional peace and stability and in serving as a linchpin of regional security governance.<sup>19</sup> Russia's prolonged interaction with ASEAN has inevitably socialised it, leading to its compliance with ASEAN's principles and norms, including the centrality concept.<sup>20</sup> Consequently, Moscow allowed Bangkok to be in charge of the drafting process while it played a supporting role.

<sup>&</sup>lt;sup>16</sup> Author's conversation with a Thai government officer, the Royal Thai Army, Bangkok, Thailand, 25 December 2013.

<sup>&</sup>lt;sup>17</sup> ADMM-Plus, "Concept Paper on ADMM-Plus", 2nd ASEAN Defence Ministers' Meeting, Singapore, 13–15 November 2007. 3.

<sup>&</sup>lt;sup>18</sup> ADMM-Plus, "The Concept Paper on ADMM-Plus Configuration and Composition", The 4th ASEAN Defence Ministers' Meeting, Ha Noi, Vietnam, 11 May 2010, 2.

<sup>&</sup>lt;sup>19</sup> Author's conversation with Gennady Chufrin, Russian Academy of Sciences, phone conversation, 19 April 2016.

<sup>&</sup>lt;sup>20</sup> Author's conversation with a Thai government officer, the Royal Thai Army, Bangkok, 25 Thailand December 2013.

### 2.3. Exercising military medicine expertise: The launch of the ACMM

One aspect concerning the ACMM was its location. According to one public official, ADMM-Plus members earlier agreed that the entity would be situated in one of the ASEAN countries, and thus left the matter to the latter to sort out.<sup>21</sup> However, the ASEAN governments clashed over which state would host the entity, as outlined in the draft Joint Statement of the 9th ADMM.

Adopt the concept paper on the *structure and mechanisms* of the ASEAN Center of Military Medicine (ACMM), which establishes practical, effective, and sustainable cooperation among military medical services of member states and task ADSOM [ASEAN Defence Senior Officials' Meeting] to work out the operational details and modalities and approved by ADMM before its implementation<sup>22</sup> 23

Some ASEAN governments were adamant about adopting this draft paragraph because they were not convinced that Thailand had sufficient bandwidth to operate the ACMM.<sup>24</sup> They felt that ADMM's prior approval was needed to ensure that a host possesses adequate capacities before launching the centre. On the contrary, Bangkok did not want the phrase "and approved by ADMM before its implementation" to appear in the final Joint Statement as it meant that the ADMM must approve all details concerning the ACMM (e.g., operating procedures and collaboration modalities) before the centre is established. In short, the terms above could scupper Thailand's objective of hosting the ACMM on its soil because seeking ADMM's endorsement could protract the matter indefinitely. In the end, the ASEAN countries amended the draft paragraph, resulting in the establishment of the centre in Thailand.

What accounted for this outcome was the Thai co-chair's exercise of its military medicine expertise. Striving to persuade the dissenting ASEAN voices to allow it to host the ACMM, Bangkok claimed that it was capable of serving as host by referring to: (i) its previous participation in international missions; (ii) its internationally acclaimed performance at the 2nd ADMM-Plus Joint HADR/Military Medicine (MM) Exercise; and (iii) its organisational and managerial skills.

<sup>&</sup>lt;sup>21</sup> Author's conversation with a former Australian military attaché to Thailand, phone conversation, 8 October 2015.

<sup>&</sup>lt;sup>22</sup> Author's conversation with Thai negotiators, Ministry of Defence, Thailand, Bangkok Thailand, 3 June 2016.

<sup>&</sup>lt;sup>23</sup> Italics added to highlight the differences between the draft and final Joint Statements.

<sup>&</sup>lt;sup>24</sup> Matthew Sussex, "The Triumph of Russian National Security Policy?"

Illustratively, Bangkok contended that its medical personnel had participated in various international peacekeeping missions (e.g., in Timor Leste, Afghanistan, and Iraq), and HADR operations (e.g., in Iran, and Nepal). Such experiences equipped its staff with the kind of military medicine know-how necessary to operate the ACMM.<sup>25</sup> Also, Thailand reminded the other ASEAN nations of its internationally acclaimed performance at the 2nd ADMM-Plus Joint HADR/MM Exercise in Brunei in June 2013. The exercise was aimed at evaluating the ADMM-Plus countries' military medicine cooperation via field scenarios. The Thai team was the only one that had accomplished the goals of all the scenarios within the time limit by transforming everyday tools such as fishing rods into rescue equipment. The execution was so remarkable that it was highly praised by the other ADMM-Plus nations, including the Sultan of Brunei, who presided over the event as an honorary observer.<sup>26</sup> In addition, Bangkok presented evidence attesting to its organisational and managerial competency by pointing out that it had successfully chaired and co-chaired major multilateral military medicine meetings, including the Asia-Pacific Military Medical Conference and the International Conference on Military Medicine. 27 28

Consequently, Bangkok was able to convince the dissenting ASEAN states to trust its expertise. All ASEAN members agreed to adjust the above phrases from "structure and mechanisms" to "establishment" and "and approved by ADMM before" to "for". Hence, the final Joint Declaration of the 9th ADMM reads:

Adopt the concept paper on the *establishment* of the ASEAN Center of Military Medicine (ACMM), which establishes practical, effective, and sustainable cooperation among military medical services of member states and task ADSOM to work out the operational details and modalities *for* its implementation.<sup>29 30</sup>

This amendment meant that the centre could be launched without the ADMM's prior consent to its operating procedures and modalities. It allowed the Thai co-chair to achieve its goal of founding the centre on its territory.

<sup>&</sup>lt;sup>25</sup> ADMM-Plus, "The Concept Paper on ADMM-Plus Configuration and Composition".

<sup>&</sup>lt;sup>26</sup> Author's conversation with a Thai government officer, the Royal Thai Army, Bangkok, 25 Thailand December 2013.

<sup>&</sup>lt;sup>27</sup> Author's conversation with Major General Daniel Tjen, Indonesian National Armed Forces, phone conversation, 13 October 2015.

<sup>&</sup>lt;sup>28</sup> The Asia-Pacific Military Medical Conference is a yearly platform convening military medical professionals in the Asia-Pacific to discuss scientific and military medical matters. The International Conference on Military Medicine is an international organisation striving to foster knowledge exchange among the medical staff of armed forces from across the world.

<sup>29</sup> See footnote 3.

<sup>30</sup> Italics added to highlight the differences between the draft and final Joint Statements.

### 3. Policy Recommendations

The above analysis has shown that countries can influence international collaboration through the position of chair/co-chair. The analysis also yields useful recommendations for policymakers whose countries are or will be the chairs/co-chairs of defence diplomacy negotiations in the Indo-Pacific and beyond. The recommendations are:

### 3.1. Understanding and using other players' preferences

As noted, Bangkok was able to obtain information regarding Russia's interests and use it to its own advantage, affecting the governance process. Therefore, policymakers should spend time gathering information about other parties' preferences and exploiting them to gain an upper hand in negotiations. Such insights can enable co-chairing states to function as policy entrepreneurs and in turn shape international regimes.<sup>31</sup>

### 3.2. Capitalise on centrality in a grouping

That the Thai co-chair's activation of the notion of ASEAN centrality enabled it to exert influence over its Russian counterpart was because ADMM-Plus is an explicitly ASEAN-centric forum. This finding can be applied to other ASEAN and non-ASEAN groupings. In other words, when there is a clear or a widely accepted central node in a grouping, co-chairing states from that central node can utilise their centrality to their advantage in negotiations, wielding greater clout over cooperation outcomes.

### 3.3. Exercise expertise in niche areas which matter to the negotiation

Bangkok was able to capitalise on its military medicine expertise to gain credibility in the eyes of the other participants, resulting in the latter allowing it to host the ACMM. Hence, policymakers should identify the areas where their countries possess competitive expertise and use it to shape negotiation outcomes.

<sup>&</sup>lt;sup>31</sup> Robert Keohane, "The Demand for International Regimes", International Organization 36, no. 2 (1982): 325–355.

### **About the Author**

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