

Has the 2014-2015 Ebola Epidemic in West Africa Been Securitized?

Written by Simon Allcock

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SIMON ALLCOCK, AUG 30 2016

In very general terms, securitization considers how certain issues become understood intersubjectively as threats and matters of security.[1] Securitization is a process in which an actor invests a 'referent subject with such an aura of unprecedented threatening complexion' that prompts an audience to believe 'a customized policy must be undertaken to block its development'.[2] Securitization describes how actors indicate to an audience that something is under severe threat, thereby justifying or calling for an emergency response. Notwithstanding some scholars' objections to integrating non-military issues into Security Studies[3], 'global health security' has become an established policy mantra, and is consequently of considerable interest to securitization scholars.[4] The 2014-15 West African Ebola outbreak certainly had substantial potential to be considered 'threatening'.[5] First reported in March 2014, by January 2016 the outbreak had killed 11,315 people, most of whom were nationals from Liberia, Sierra Leone and Guinea.[6]

The essay investigates whether the governments of Sierra Leone and Liberia were able to securitize Ebola to multiple audiences. While they were successful in securitizing the issue at the international level (in that they gained audience assent) they were far less so when their own domestic public was the audience. The 'sociological' approach to securitization, which pays considerable attention to audience agency and the social context within which securitization moves are made, illuminates many of the dynamics behind this process and outcome.[7] It helps explain the distinct ways the governments tried to securitize the issue with different audiences, and also why the securitizing move was accepted internationally but not domestically. These divergent processes and outcomes appear to have been shaped by the unique social contexts within which each securitization move was made. This argument is developed as follows. The essay firstly expands on its use of securitization theory, describing the general sociological approach, the features of securitization, and the criteria that constitutes successful securitization. It then examines how the governments of Sierra Leone and Liberia tried to securitize the issue on the international stage, showing they could only do so when Ebola came to be considered a threat to Northern interests (underlining the audience's agency and importance of contextual factors). It next considers how the governments attempted to securitize Ebola with their domestic audiences, and demonstrates that various social, historical, and cultural factors constrained the audience's acceptance of the move and thus its success. It concludes by considering the essay's limitations, and highlights fruitful areas for future research. The essay's theoretical insights are also outlined; one particular insight is a need for securitization theory to fully conceptualise 'audience acceptance', and develop ways to measure it.

Securitization Theory

Because 'securitization' encompasses a diverse research framework, and thus not one unified theory, it is important to specify this essay's approach.[8] Broadly, securitization occurs when an actor signals something is under severe threat, thereby making it an issue of 'security', and justifying an emergency response. Prominently associated with Waever and Buzan's work in the 1990s, the Copenhagen School's initial framework studied how actors' discourse created security threats.[9] Waever's work utilised Austin's theory of language performativity.[10] By naming something a security issue ('a speech act') an actor effectively creates a security issue, justifying an extraordinary response to an audience.[11] In this 'internalist' framework particularly associated with Waever's early work, the

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speech act constructs and reshapes external reality in the eyes of the audience, and has an indeterminate force of its own not related to external context.[12]

This internalist framework is theoretically problematic (indeed the Copenhagen School has moved away from many of its tenets.)[13] It portrays the audience as passive accepters of securitization moves, which undermines the theory's key assumption that threats are developed intersubjectively between actors and audience. Securitization theory needs to put more emphasis on the audience's agency, and examine how the external context (which the speech act does not wholly determine but only shapes audience perceptions of), the psycho-cultural orientation of the audience, and differential power relations between actors and audience shape how a securitizing move is made and received. The extent to which an audience accepts a securitization move is impacted by how well the move corresponds with their feelings, needs and interests (position).[14] Following this externalist, 'sociological' approach, the essay pays attention to the 'social, political, and historical contexts'[15] (henceforth referred to as 'social-contextual factors', which exist independently from the speech act) the securitization of Ebola was made and received in.[16] It also stresses that the audience has considerable agency – they could accept or reject the move based partly on their own assessment of external reality.[17] The essay generally orients towards the sociological approach, not one theorist's framework.[18] Instead of showing how a specific social-contextual factor(s) 'caused' a certain aspect of securitization or identifying every such factor, this essay aims to show the general importance of social-contextual factors for securitizing Ebola.

This essay understands securitization to encompass other features which build on Waever's original framework. Instead of being immediately constructed by the speech act, the securitization process develops over time.[19] While Waever argued actors place issues in either the realm of politics (politicization) or security (securitization), the difference between politics and security is better conceived of as a spectrum, with securitizing actors putting an issue somewhere between these categories.[20] This is especially applicable in non-liberal democracies (like Liberia and Sierra Leone) where clear distinctions between political and security issues may not exist.[21] As non-democracies require legitimacy, they still engage in securitization.[22] Securitizing actors often have multiple audiences, and how they securitize an issue reflects their social relations with the specific audience.[23] Finally, as the 'Paris School' contends, actors securitize issues through both discourse and practices. Either through dealing with an issue in a militarized fashion, or in a way 'extra-ordinary' to the cultural context, actors can present a referent object as under severe threat.[24]

There is surprisingly little agreement about what constitutes successful securitization.[25] This essay considers securitization to have occurred when the 'enabling audience' (which empowers the securitizing actor to take action) accepts the securitizing actor's claims.[26] Yet identifying when an audience has fully accepted a claim poses a challenge to researchers using the theory.[27] While this empirical study attempts to find the level of audience acceptance, the difficulty of measuring and quantifying the results, particularly at a domestic level, indicates the need to more fully conceptualise audience acceptance and develop a formal method for its measurement.[28] Although success is not reliant on the actual implementation of extraordinary measures, this will likely be a strong indication of whether securitization occurred.[29]

This essay analyses the discourse of state leaders in Liberia and Sierra Leone, and the practices each government employed in response to the Ebola outbreak, an approach unlikely to capture the entire securitization process. It does not consider the use of images[30] or include study of other actors' role in securitizing Ebola (non-state actors may be especially prominent in non-Western societies).[31] These limitations can be justified in two ways. Firstly, the inclusion of images and more actors into this essay would have been detrimental to its analytical depth. Secondly, this essay's purpose is not wholly empirical but also serves to assess the utility of a sociological approach to securitization, and highlight areas for its future theoretical development.

In summary, a securitizing move occurs when an actor, either through discourse or practice, attempts to demonstrate an object is under severe threat, which justifies an emergency response beyond 'normal' politics. The success of securitization is signified by this representation being accepted by the audience. This essay's sociological approach pays strong attention to audience agency, and the effect of social-contextual factors on the process and outcome of securitization.

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Securitizing to the International Community

Both the Liberian and Sierra Leonean governments attempted to securitize Ebola to the international community audience. Using Vuori's taxonomy of securitization moves, they were 'raising the issue on the agenda', highlighting the outbreak's severity and encouraging an extraordinary response from the international community.[32] They were successful because the international community apparently accepted that Ebola represented a severe threat and launched unprecedented measures to mitigate it. The sociological approach is illuminating for explaining this process and outcome. The states' success in securitizing Ebola was likely facilitated by a context in which the international community widely understands health and disease to be global security matters.[33] But that the governments decided to frame Ebola as a global threat beyond their own borders, and that the international community only significantly responded when individuals from the US and Spain became exposed to the disease is also important. It shows how the governments had to frame their securitizing moves in a way that attended to audience position and the social context. Despite its pretences of universally protecting all individuals, 'global health security' largely remains a programme in which Northern states try to protect themselves from the global South.[34] In order to account for the audience position, this context likely forced the governments to specifically frame the issue as a threat to the North. That the international community only intervened when they themselves were affected highlights the audience's agency, and suggests the speech acts did not wholly construct how the audience viewed external reality. The audience's acceptance of the securitizing move was also based on their own assessment of an external reality existing independently from the speech act. An internalist securitization approach would likely overlook these important dynamics.

In their securitization moves, the governments of Liberia and Sierra Leone consistently portrayed Ebola as a threat to the international community. This was likely because of a recognition that global health security orients around the North's desire to protect itself from Southern problems. They argued the virus could cause their own states' collapse (with deleterious consequences for regional and international security) and highlighted its potential for international spread. Appealing to the international community, on 25 March 2014 the Economic Community of West African States (of which Sierra Leone and Liberia are members) declared Ebola represented a 'serious threat to regional security'. Although this appeal garnered little international reaction, the governments continued to frame the threat internationally.[35] In September, Liberia's defence minister warned the outbreak was 'devouring everything in its path', implying the disease's capacity to spread internationally.[36] The same month, the governments informed the United Nations Security Council (UNSC) the day before a resolution on the outbreak that the world is a 'global village', again strongly intimating the outbreak would detrimentally impact the international community.[37] In October, Sierra Leone's President Ernest Bai Koroma told the World Bank Ebola 'compromised the security of people everywhere' thus requiring a more urgent response.[38] In December, the Liberian President Ellen Johnson Sirleaf reminded a US Congressional Committee Ebola was 'a global threat we all must continue to confront.'[39]

However, the success of this securitization was mediated through social-contextual factors. Only when individuals from Northern states (Spain and the United States) became infected by the disease did the international community accept the securitization move and respond with emergency measures.[40] Two Americans catching Ebola in late July 2014, and the first diagnosis on US soil in October, were particularly key events that spurred the international community into action.[41] As former UN General Secretary Kofi Annan accurately summarised, 'the international community really woke up when the disease got to America and Europe.'[42] This highlights the agency of the audience, showing that their acceptance of the speech acts (that Ebola posed a global threat) was not passive, but shaped by their own assessment of the claims with reference to external reality. Widespread acceptance of the securitizing claim was likely facilitated by capturing the recognition of the world's hegemon the US, showing the importance of power relations to its success.[43]

Reinforcing the understanding of securitization as a process, the international community's acceptance of Ebola's securitization grew over time. The World Health Organisation's warning on 8 August 2014 that the outbreak was a 'public health emergency of international concern' fostered little response.[44] But by mid-September, there appeared growing acceptance of the governments' arguments that Ebola endangered the international community. On 18 September, UN General Secretary Ban-Ki Moon argued that because 'Ebola matters to us all' states needed to take 'unprecedented steps to save lives and safeguard peace and security.'[45] The UNSC passed Resolution

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2177 the same day, which declared Ebola constituted 'a threat to international peace and security.' [46] The success of this securitization was demonstrated by the UNSC's emergency actions. These included establishing the UN Mission for Emergency Ebola Response, the first UN mission to respond to a health emergency.[47] The UNSC's acceptance of the securitizing move was driven by an understanding of the international consequences emphasised by the Sierra Leonean and Liberian governments; specifically, both governments highlighted Ebola's potential to cause state collapse and to spread internationally.[48] The governments had therefore successfully framed Ebola to correspond with the audience's position.

As global hegemon, the US was a particularly important international audience member. Indeed, President Sirleaf sent President Obama a personal plea for assistance.[49] Only when American citizens were affected in July 2014 did the US appear to accept these securitizing claims. On 8 September, Obama labelled Ebola a 'national security priority'.[50] Tackling the outbreak consequently required an extraordinary, 'all-hands-on-deck-approach'.[51] In September, his administration committed 3,000 military personnel and \$750m (later increased to \$5.4bn) in order to address the outbreak.[52] This strong response is a convincing indicator the Sierra Leonean and Liberian governments had securitized Ebola. But the acceptance appeared contingent upon the US believing the disease threatened its own safety, as shown by the fact that the US response only gained impetus when American citizens were affected. The self-interest was also identifiable from the US government's justifications for its measures. Obama emphasised 'this is an issue about our safety'[53] and that protecting 'America from Ebola here at home' meant 'we have to end it over there.'[54] One prominent health official similarly informed Congress that US intervention primarily sought to 'protect Americans'.[55] This again underlines the audience's agency. The US did not immediately accept the Sierra Leonean and Liberian government's speech acts, but its assent was instead contingent upon its own assessment of the threat by reflecting on external reality.

The Sierra Leonean and Liberian governments successfully securitized Ebola to the international audience. The international community appeared to accept their framing of Ebola as a threat with international repercussions, as demonstrated by the extraordinary response it engendered from the UN and the US. The sociological approach to securitization helps uncover some of the complexity behind this process. The ultimate success of securitizing Ebola was probably facilitated by today's international context which sees health as an important security issue. Actors' need to use discourse congruent with the audience's position helps explain why both governments consistently warned that the disease would cause international harm because global health security is centred upon the North protecting itself from Southern threats. Additionally, that the acceptance of the securitizing claims seemed contingent upon individuals from Northern states catching the disease demonstrated that the audience was not immediately persuaded by the governments' speech acts, or that such acts wholly constructed external reality. It instead underlined the audience's agency in choosing whether to accept the securitizing move, and signified their decision to do so was shaped by their own assessment of external reality, not just that constructed by the speech act.

Securitizing to the Domestic Audience

The Liberian and Sierra Leonean governments also attempted to securitize Ebola to their domestic audiences. By claiming Ebola posed a threat to their country's existence and required an urgent response, the governments were, in Vuori's taxonomy, 'legitimizing future acts'.[56] But this securitization move did not appear wholly successful because the government measures were met with considerable domestic resistance. The sociological approach is useful for analysing the course of this securitization and its result. That each governments' speech acts emphasised the very reality of the disease seemed driven by a need to account for the audience's position, because various contextual factors created considerable domestic scepticism towards Ebola's existence. A number of social-contextual factors also help explain the public's ostensible rejection of the securitizing moves.

Addressing their domestic audiences, both governments argued Ebola posed an existential threat to their respective states, which required an urgent response. Announcing a state of emergency in August 2014, President Sirleaf claimed the government must implement 'extraordinary measures for the very survival of our state'.[57] President Koroma similarly argued that Ebola threatened the 'survival of the country'[58] thus requiring 'extraordinary measures'.[59] Both governments' speech acts reaffirmed the virus's reality. President Sirleaf informed Liberians 'that the disease is *real* and is in our country killing people' [emphasis in original].[60] President Koroma similarly

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highlighted that 'Ebola is real, and we must stop its transmission'.^[61] This emphasis was a reaction to the audience's position. There was widespread suspicion towards Ebola's existence.^[62] A July 2014 survey found 92% of Monrovia's believed Ebola was a hoax^[63], a view echoed by a prominent Liberian Senator.^[64] The causes of this scepticism were multiple, including a general suspicion toward the government and a belief it was a 'White Man' conspiracy that benefited local elites.^[65] Such views are partly historical legacies from colonialism, civil wars, and Structural Adjustment Policies which built the perception of the political elites' unaccountability.^[66] That both governments simultaneously presented the issue as an existential threat and underlined its very existence demonstrates how they framed their securitizing moves in a way congruent with the audience position.

Particularly between July and September 2014 both governments introduced a range of extraordinary security measures.^[67] On 30 July, Liberia announced a state of emergency, suspending a range of (unspecified) legal rights.^[68] The government closed schools and markets, limited public gatherings and effected a series of border restrictions.^[69] It also postponed national elections and censored local media outlets, temporarily closing the National Chronicle newspaper.^[70] The government quarantined many areas in the country (which prominently included the capital Monrovia's West Point district) and implemented a curfew in Monrovia, which like other measures, was enforced by Liberia's army and police.^[71] Sierra Leone announced a state of emergency on 6 August, and also restricted public gatherings, overseas travel, and quarantined disease-affected areas, again enforcing these policies militarily.^[72] On 18 September the government ordered a nationwide lockdown. All citizens were required to stay inside, while 7,000 health teams went house-to-house providing information about the disease.^[73] Similar measures were undertaken in March 2015.^[74] The government also used emergency powers to arrest various critics of its handling of the crisis.^[75] Thus both governments did implement measures beyond the normal political rulebook that their speech acts had attempted to justify.

Many of the practices each government used were securitizing tools because they signalled to the audience Ebola's grave threat level. This was evident in the military-style response to the disease. Liberia's armed forces were deployed on the country's border with Sierra Leone and had orders to shoot anyone illegally attempting to cross. External reports indicate these security forces used excessive violence.^[76] In August 2014, Liberian troops fired live rounds to enforce the West Point quarantine, killing a fifteen-year-old boy.^[77] Sierra Leone adopted an equivalently militarized attitude. In November, declaring a 'military approach', President Koroma appointed a former defence minister as head of the National Ebola Response Centre.^[78] The government built country-wide roadblocks, many of which were purely military constructions with little medical utility, and enforced quarantines with armed forces.^[79] Practices outside the cultural context also signalled the issue's severity. Sierra Leone's lockdown was a particularly prominent example; President Koroma himself admitted the policy was implemented with no national or international precedent.^[80] Through both the discourse and practices they employed, the Liberian and Sierra Leonean governments attempted to securitize Ebola for a domestic audience.

However, a significant section of public opinion in Liberia and Sierra Leone did not accept these securitizing moves. Though this essay does not attempt to quantify this level of acceptance, the resistance indicates the governments were unable to fully securitize Ebola. A large proportion of public opinion in Liberia and Sierra Leone did not believe Ebola existed, a necessary condition for their acceptance of the disease's securitization. These doubts, and the nature of the government measures created substantial resistance to the governments' response to the crisis. In some cases, this was displayed by local communities ostracizing health workers or blocking individuals' medical treatment.^[81] But the resistance was sometimes more violent. In July 2014, residents of Monrovia threw stones at Redemption Hospital, disrupting the construction of an isolation ward.^[82] The same month, a man protesting against the government's handling of the crisis set Liberia's health ministry offices alight.^[83] In August protesters in West Point attacked a quarantine centre, causing thirty patients to escape.^[84] Similar incidents occurred in Sierra Leone. In July thousands of Kenema's residents protested against a local Ebola clinic, threatening to burn down the hospital and remove its patients.^[85] During September's country-wide lockdown, health workers in Matakay were violently attacked while burying five Ebola victims' bodies.^[86] Reports of violence against health workers continued to appear until at least March 2015.^[87]

It is important not to exaggerate this public resistance; for instance, the vast majority of citizens adhered to Sierra Leone's lockdown.^[88] Bright's findings in a separate securitization study indicate the possibility that the audience

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accepted particular aspects of the securitizing moves, though ascertaining which parts requires more detailed study.[89] Because of the censorship of local media, and the international media's tendency to focus on episodes of resistance, determining its exact magnitude is very difficult.[90] In addition, securitization theory provides no formal method for measuring audience acceptance. Nonetheless, it can be tentatively concluded that both governments' attempts to securitize Ebola were met with significant levels of domestic resistance, suggesting they were unable to fully securitize the issue. This enquiry does however indicate the need to develop a more comprehensive conceptualisation of audience approval and method for measuring it.

A sociological approach to securitization is useful for understanding this absence of widespread acceptance. Firstly, the resistance underlines the audience's agency. Secondly, various social-contextual factors (which this essay provides a snapshot of) seem relevant to understanding this outcome. The widespread distrust of government claims and actions in both countries had various socio-historical roots, including colonialism, civil wars and Structural Adjustment Policies. A 2011 poll found 63% of Liberians believed government corruption had caused the country's recent civil wars, signifying an attitude towards government surely relevant to grasping why its securitization claims were not accepted.[91] Each country's socio-economic situation also likely contributed; low literacy levels constrained effective government communication.[92] In more specific cases, resistance to health workers appeared driven by their burial techniques' infringement on cultural burial practices, and also more broadly on local medical beliefs.[93] West Point's 75,000 residents had long felt neglected and marginalised by the government, and persistent rumours within the district claimed the government wanted to clear its slum housing.[94] The exact form of resistance these contextual factors brought about varied, but they appear important to understanding the low level of audience acceptance.

The Liberian and Sierra Leonean governments attempted to securitize Ebola to a domestic audience through discourse and practices, and consequently implemented various emergency measures. The governments' emphasis on the virus' existence demonstrated their attempts to account for the audience's position. Although ascertaining the exact level of audience acceptance is very difficult, there does appear significant evidence of resistance to the securitization attempts. A sociological approach helped uncover some of the possible social-contextual factors behind this securitization failure. Furthermore, there are a number of potential explanations for why, despite failing to persuade the audience, the governments nonetheless implemented extraordinary measures. As only 'partly free' states, both may have felt they required minimal public support.[95] Alternatively, the 'enabling audience' may not have been the general public but various national or international elites for example.[96] This would be a rewarding empirical question for future research.

Conclusions

This essay assessed the Liberian and Sierra Leonean governments' attempts to securitize the 2014-15 Ebola outbreak. Having first outlined the theoretical approach, the analysis of their securitization move to an international audience demonstrated the governments were only successful when the outbreak directly affected the international community. The essay then assessed the governments' securitization moves towards a domestic audience and thereby showing the emphasis of the disease's existence. There was evidence of significant domestic resistance to this securitization. That the governments nonetheless introduced extraordinary measures raised interesting questions for future study.

The essay's limitations also indicate potential future research areas. It is unlikely the Sierra Leonean and Liberian governments were the only actors involved in the securitization of Ebola. The focus on these actors could be supplemented with studying other actors' contribution to securitizing or desecuritizing Ebola and their use of images in this process. Like a large amount of the health securitization literature, future studies could also reflect on the normative consequences of securitizing Ebola.[97]

This essay's purpose was not wholly empirical. It sought to provide a number of insights into the evolving theory of securitization theory.[98] The sociological approach to the securitization of Ebola, which affords the audience substantial agency and pays attention to social-contextual factors, was useful for understanding both its process and outcome. For instance, it aided understanding of why the governments framed the issue as a problem for Northern

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states, and the general populace's scepticism towards Ebola's existence. The essay also reaffirmed certain advancements made upon Waever's early framework: in particular, the multiple audiences of securitization, its nature as a process and the importance of studying practices.

The essay also showed how factoring in the social context made securitization research more complex, because there are almost infinite factors and ways this context could have affected the securitization of Ebola, of which only the most prominent could be highlighted. Two implications follow. Firstly, trying to map exactly how social context affects securitization can only provide a partial picture of the 'network of causality'.^[99] Secondly, determining the necessary conditions for successful securitization will always be uncertain, meaning the theory mostly provides post-facto analytical tools rather than predictive ones.^[100] Analysing the Liberian and Sierra Leonean public's reaction to the securitization further highlighted the theory's difficulty of fully conceptualising and measuring audience acceptance.^[101] Given the centrality of audience acceptance to securitization theory, this is a significant deficiency. Future research would benefit from more fully theorising what audience acceptance looks like, and developing ways to measure it. The recent introduction of quantitative methods to securitization research may be particularly insightful.^[102] Securitization theory offers useful analytical tools for studying the Ebola crisis, but over twenty years after its initial formulation, it requires continued self-reflection and refinement.

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[18] For instance, while the essay's approach shares many similarities with Balzacq's framework, its criteria for successful securitization – gaining the assent of the audience – differs with his own. Balzacq, 'A Theory of Securitization', 8 – 9. As Balzacq himself points out, the distinctions between the philosophical and sociological approaches are ideal types, and much work falls somewhere between.

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[34] For various arguments on this general argument about global health security, see Andrew Lakoff, 'Two Regimes of Global Health', *Humanity: An International Journal of Human Rights, Humanitarianism, and Development* 1, no. 1 (2010): 59 – 79; Simon Rushton, 'Global Health Security: Security for Whom? Security From What?', *Political Studies* 59, no. 4 (November 2011): 779 – 796; Jacob Levich, 'The Gates Foundation, Ebola, and Global Health Imperialism', *American Journal of Economics and Sociology* 74, no. 4 (September 2015): 714 – 715; Eric A.

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Written at: University of Exeter

Written for: Dr. Stephane Baele

Date written: April 2016

```
// // b?1:0};var p;a:{var q=h.navigator;if(q){var r=q.userAgent;if(r){p=r;break a}}p=""var
u=function(){this.a="";this.b=t;u.prototype.s=!0;u.prototype.o=function(){return this.a};var
ba=/^(?:(?:https?|mailto|ftp):[^\&:/?#]*(?:[/?#]|$))/i,t={}, v=function(a){var b=new u;b.a=a;return b};v("about:blank");var
w=function(){this.a="";this.c=ca;this.b=null;w.prototype.s=!0;w.prototype.o=function(){return this.a};var
ca={},x=function(a,b,c){a.a=b;a.b=c;return a};x(new w,"\x3c!DOCTYPE html\x3e",0);x(new w,"",0);x(new
w,"\x3cbr\x3e",0);var da=function(a,b,c,d){d=d?d(b):b;return
Object.prototype.hasOwnProperty.call(a,d)?a[d]:a[d]=c(b)};var
y=l(p,"Opera"),z=l(p,"Trident")||l(p,"MSIE"),A=l(p,"Edge"),B=l(p,"Gecko")&&!l(p.toLowerCase(),"webkit")&&!l(p,
"Edge")&&!l(p,"Trident")||l(p,"MSIE")&&!l(p,"Edge"),C=l(p.toLowerCase(),"webkit")&&!l(p,"Edge"),D;a:{var
E="",F=function(){var
a=p;if(B)return rv:(["^"]);+)(\)|;)/.exec(a);if(A)return EdgeV([\d\.]|+))/exec(a);if(z)return /\b(?:MSIE|rv):[
]([^\);]+)(\)|;)/.exec(a);if(C)return WebKitV([\S+])/exec(a);if(y)return /(?:Version)[
V]?([\S+])/exec(a)};F&&(E=F?F[1]:"");if(z){var G,H=h.document;G=H?H.documentMode:void
0;if(null!=G&&G>parseFloat(E)){D=String(G);break a}}D=E}var ea=D,fa={},l=function(a){return da(fa,
a,function(){for(var
b=0,c=k(String(ea)).split("."),d=k(String(a)).split("."),e=Math.max(c.length,d.length),f=0;0==b&&f>=1)c+=c;return
d;ha!=ga&&null!=ha&&aa(ba,fa,{configurable:!0,writable:!0,value:ha});_ia=_ia||{};_m=this;_n=function(a){return
void 0!==(a)};_q=function(a,c){for(var d=a.split("."),e=c|_m,f=f-d.shift();if(null!=e[f])e=e[f];else return null;return
e};_ja=function(){_ka=function(a){a.M=function(){return a.ye?a.ye:a.ye=new a}};_la=function(a){var c=typeof
a;if("object"==c)if(a){if(a instanceof Array)return"array";if(a instanceof Object)return c;var
d=Object.prototype.toString.call(a);if("[object Window]"==d)return"object";if("[object Array]"==d||"number"==typeof
a.length&&"undefined"!=typeof a.splice&&"undefined"!=typeof
```

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```
a.propertyIsEnumerable&&!a.propertyIsEnumerable("splice"))return"array";if(["object
Function"]===d||"undefined"!==typeof a.call&&"undefined"!==typeof
a.propertyIsEnumerable&&!a.propertyIsEnumerable("call"))return"function"}else return"null"; else
if("function"===c&&"undefined"===typeof a.call)return"object";return
c};_ma=function(a){return"array"===_la(a)};_na=function(a){var
c=_la(a);return"array"===c||"object"===c&&"number"===typeof a.length};_t=function(a){return"string"===typeof
a};_oa=function(a){return"number"===typeof a};_pa=function(a){return"function"===_la(a)};_qa=function(a){var
c=typeof a;return"object"===c&&null!=a||"function"===c};_ra="closure_uid_"+(1E9*Math.random())>>>0;sa=function(a
,c,d){return a.call.apply(a.bind,arguments)}; ta=function(a,c,d){if(!a)throw Error();if(2
```