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Facing HIV/AIDS in Tanzania – The Political Aspects of an Epidemic

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Despite the enormous publicity the HIV epidemic has achieved, and the endless array of findings on various topics related to the epidemic, the global society has not agreed over the approach to be taken to contain the spread of the virus. Although the disease is potentially preventable by relatively simple measures, the rates of new infections constantly rise in the fact of low behavioral change. In Sub-Saharan Africa, one of the regions severely affected by HIV/AIDS, political leaders are often blamed of inactivity and lack of dedication to use their public influence to advocate for prevention and treatment of the disease.

This thesis identifies reasons for this presumed inactivity, looking at the political class in Tanzania at the onset of the epidemic within the country. Along an analysis of newspaper articles of the local English speaking print media between 1985 and 1988, reasons to explain their behavior are identified and resulting consequences for further programs targeting this group of society are drawn.

The analysis is based on a specific definition of health and illness, which sees disease as a biological phenomenon that, upon its appearance within society, is interpreted in the context of the socio-historical setting and predominant health belief models. The image of the disease, subcategorized into a medical and a social image, that is created through this process of interpretation then drives the specific response to the epidemic.

The thesis shows, that this process contains problematic factors that lead to a diversification of images of the disease that contribute to an uncoordinated social response to HIV/AIDS and in consequence to a detachment of the image of the disease, which drives behavior, from the actual biological phenomenon. Those factors can be identified in the following:

On the level of the ‘biological phenomenon’, the indirect pathogenesis of the viral infection is identified as hampering recognition of the syndrome as such. It is then shown, that medical recognition of this syndrome as a clinical entity can only be achieved through the acceptance of the western biomedical medical model of disease. This model nevertheless is constrained in an African context, where it has to compete with various other health belief models and is hampered by structural and financial shortages and in consequence changes from an evidence based to a faith based healing tradition. Further, emphasis is placed on the problematic of the generation of epidemiological data in resource limited settings and resulting consequences in the visibility of the disease. Those factors result in ‘facelessness’ of the medical image of the disease and deprive social discourse a basis considered as objective by all stakeholders upon which social claims concerning the epidemic can be measured.

The origin, aims and driving sentiments of the socio-cultural image are than further outlined, identifying characteristic parallels among the social images of different diseases and different cultures. It is described how the social image enables society to counteract the metaphorical threat of a disease that arises out of the symbolism of the human body as body of society. Within this perception, a human infected with a deadly, sexually transmitted disease embodies a diseased society and hence presents a threat on the status quo. On this

level, the previously “amoral” disease acquires moral connotation, and prevention of a disease is connected to protection of power within society. The social model hence aims at containing the metaphorical threat on the status quo rather than the biological epidemic.

It is argued that while the social model has a strong influence on the perception of HIV/AIDS throughout the world, it becomes the most important factor influencing political as much as individual behavior in respect to the epidemic in Tanzania. Due to the biological “facelessness” of HIV/AIDS, the social model gains importance as it presents the only common definition of the disease upon which the epidemic can be approached on a national level. As a consequence, the focus is shifted from containing the viral spread and its effect on the biological body to the control of its metaphorical threat and its effect on power relations within society.

Following the analysis of the relationships between medical and social models of disease in Africa, the focus is set on the position of politicians in Tanzanian society. It is outlined that their specific relationships with different indigenous groups on one side and the international community on the other side as much as their historical roots and origin of power lead to a very unstable political legitimization of the ruling party at the time when HIV/AIDS appeared in Tanzania. While the effects of social change undermined their ideological foundation and growing urbanization created new groups within society that were detached from both traditional and socialist value systems and hence a potential threat for ruling fractions, changes in donor policies threatened the patron/client relationships upon which political stability relied. In such a situation, political status quo was under threat, creating an anxiety that can be seen as funneling the political reaction to the emerging epidemic.

This theory is exemplified looking at articles in the English speaking print media of Tanzania, focusing on the discussion surrounding MM-I, a drug developed in Africa and supposed to cure AIDS. The reaction of the population in general and the politicians in particular is described, and the resulting social image of the disease is outlined. The analysis accentuates that politicians in Tanzania have little incentive to actively influence public discourse with the aim to promote disease control. While such activities would inevitably make them vulnerable to either critic from national opposition groups or the international community and hence endanger their legitimacy to rule, they instead try to use the social image of HIV/AIDS to reconfirm their claim for political power. Political contribution to public discourse is shown to be both restrained by certain aspects of the social image of the disease and at the same time using other aspects for the purpose of preservation of political power.

The thesis concludes that any measures aiming at containing further spread of the virus through strengthening of “good leadership” in Tanzania need to take the specific image of HIV/AIDS within the nation into account. While calling for a strengthening of biomedicine and science within the African health sector as much as the consideration of international aid politics it suggests ways which might assign positive value to political activities in the field of HIV/AIDS and hence antagonize the negative effects political advocacy of HIV/AIDS may have upon political legitimization.