

# Example of the aids crisis in africa term paper

[Sociology](#), [Violence](#)



## 1. 0 Introduction

Acquired Immune Deficiency Syndrome (AIDS) is an incurable human disease condition that is characterized by the developed inability of the human body to fight against infections and attacking diseases. It results from the destruction the cells (lymphocytes) of the body that confer protection against diseases. This destruction occurs when a virus known as Human Immunodeficiency Virus (HIV) enters and invades a person's immune system. HIV/ AIDS is one of the greatest killers that the world has ever known. In Africa, the disease condition is a major pandemic resulting in more deaths in a year (between 1999 and 2000) than those caused by all the wars ever fought in the continent. The political climate, particularly bad governance, of has contributed to the escalation of the AIDS crisis in in some parts Africa while good governance has led to lower prevalence rates in other parts of Africa. This Paper will mainly examine the intricate political issues related to the AIDS crisis in Africa; beginning with the HIV history in Africa, the reasons for the wild spread and the mitigation strategies.

According to the latest World Health Organization (WHO) progress report on HIV/AIDS, Africa still bears the greatest brunt of the epidemic in the world. With 22. 9 million people (accounting for 68% of all global HIV/AIDS cases) living with HIV and 1. 9 million new infections in a year (2010), the HIV/AIDS statistics for the continent are still grim. At 5. 6 million people, South Africa alone had more HIV infections than the entire Asian region as at 2009 .

Taking note of the devastating damage of the AIDS pandemic on Africa's population, the continent's political leaders must take deliberate actions to step up measures that are aimed at fighting the scourge. A discussion of

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HIV/AIDS transmission and a look at the reasons for its widespread prevalence in the continent is of significant importance. These would provide a basis for looking at the impacts of the scourge in the continent and the strategies being employed to mitigate its spread and impact. Because of their leadership responsibilities, the political class in Africa has played significant role in the fight against the scourge with notable successes and failures that are worth looking at.

## 2. 0 HIV/ AIDS History and transmission in Africa

Some long-term studies have established that HIV/ AIDs originated from Africa. The study established great similarity between the HIV virus and the Simian Immunodeficiency Virus (SIV) found in some chimpanzees in Cameroon; hence concluded that the disease was actually spread to man from the said chimps. The disease is reported to have been found in stored blood (from a malaria research project) dating back to 1959 with the first epidemic being reported in Kinshasa, Congo's, capital in the 70s. The disease spread to east Africa and became a pandemic in the 80s. These early days of the disease were marked with a lot of confusion, rumors and political propaganda. However with time the transmission, pathophysiology and the contributing factors to the spread of the disease has become clearer.

The ability of the AIDS causing virus, HIV, to be transferred from one person to another is what defines the transmission of the disease condition and is the reason for the spread of the pandemic around the world. Once the HIV virus infects an individual, it lives in such body fluids as blood, semen, vaginal fluids and breast milk. The transfer of any infected body fluid from one person to another would result in the transmission of the virus. The

leading route for HIV transmission in Africa is heterosexual contact. Mother to child transmissions are common as well as transmission resulting from cultural practices like circumcision and skin piercing due to the sharing of contaminated sharp objects. In some countries, unsafe medical practices (due to medical negligence and lack of proper facilities) have played a major role in spreading HIV. Of critical importance to this paper are the factors that have contributed to the wide spread of the disease, particularly in Africa.

### 3. 0 Reasons for the widespread prevalence of HIV/AIDS in Africa

Various social and economic factors have fueled the AIDS pandemic in Africa. Chief amongst these is poverty that has deprived the continent effective systems of health information, health education and care. Certain behavior patterns like widespread multiple sexual relations between young women and older men for financial and social security is also known to fuel the spread of the pandemic in Africa. This is because older men are more affected by the scourge due to their increased chance of having overlapping sexual partners.

There are cultural practices in the African context that have been identified to promote the spread of AIDS. Polygamy that ensures that sexual partners overlap is chief amongst these practices. Traditional circumcision practices where initiates share unsterilized knives have for a long time been known to fuel the spread of AIDS. Ironically circumcision has recently been found to reduce the chances of HIV infection through sexual intercourse. The stigma that is associated with AIDS significantly reduces openness and limits management strategies that would help in combating the pandemic.

Social disruptions such as conflicts and wars as well as famine which result in migrations literally lead to the transportation of HIV/AIDS across regions in the continent. In many African societies, the role of women has been unequal to that of men often leading to their economic dependence on husbands or men who pay them for sex. These women unfortunately have little control over sex in such societies where masculinity is linked to (condom-less) sex and multiple partners thus compounding the HIV/AIDS problem. The wide spread epidemic as a result of the mentioned factors has had a devastating impact on the continent.

HIV/AIDS is causing devastating social and economic impacts in Africa. The disease condition has reduced life expectancy dramatically and is expected to kill up to a quarter of the African population over time. This is expected to further impoverish the poor and produce a huge orphan base that is vulnerable to exploitation because of their inability to cope.

The scourge is reducing economic and democratic development in the continent as it results in reduced populations as well as national productivity and earnings. The benefits of education are being lost as labor productivity steadily drops due to loss of human capital. Saving and investment rates are declining as available household resources are channeled towards health care, orphan care and funerals. Government spending on health care is constantly overstretched in an attempt to mitigate against HIV/AIDS in the continent.

#### 4. 0 HIV/AIDS mitigation strategies

The efforts to reduce HIV/AIDS prevalence in Africa are targeted at preventing the transmission of the virus, medical treatment of infected

persons as well as provision of support and care of those infected. The first line of defense against HIV/AIDS is conducting an HIV test that enables one to know whether they are infected by the virus or not. This is usually done through voluntary counseling and testing.

Since the HIV virus can majorly be transmitted from one person to another through sexual activities, blood contact and mother to child transmissions, various strategies have been developed to prevent the transmission.

Promotion of safe sex practices such as absolute abstinence or condom use during sexual encounters is therefore one of the war fronts in fighting AIDS.

Promoting positive sexual behavior change such as being faithful to one sexual partner has gone a long way to fight the pandemic.

The use of new and sterile sharp objects such as needles and scalpels in hospitals coupled with transfusion of screened blood has reduced transmission through blood. Sensitization initiatives to prevent the sharing of needles to administer injection shots amongst drug users also contributed to reduce transmission through blood contact.

The provision of pre-natal care to pregnant mothers who are HIV positive has played a significant role in preventing mother to child transmission of the virus. Antiretroviral therapy and feeding of the baby with alternative food other than the infected mother's breast milk are some of the interventions that prevent this transmission.

Once an individual is already infected, access to medical care and antiretroviral therapy ensures that they live a full life despite their condition. Provision of care and support for these individuals removes the stigma

associated with AIDS and prolongs their lives.

## 5. 0 Political response to HIV/AIDS in Africa

Following the visible advent of AIDS in Africa up to the 1990s, the political leadership in the continent had a pervasive silence surrounding the epidemic. This was mainly because cultural and religious taboos prohibited open discussions on the epidemic that mainly spread through sexual contact. The response of the political class to the spread of HIV in the 1990s was rather slow and inadequate due to the political crisis and more pressing economic matters of the time. In fact the politicians of the time did not publicly address the AIDS crisis for fear of losing on tourism as well as public panic. As a consequence, HIV/AIDS ravaged African communities unabated until African governments realized the need to formulate a national resolve to use all available resources and develop policies to address the epidemic.

Pressed with many immediate and daunting problems and lacking in broad national mitigation strategies, the African governments were however slow to respond to the crisis. This has brought dire consequences that are still being felt today through deaths, high prevalence and a large orphan base. There has however been a dramatic surge towards a more favorable political environment in the fight against AIDS in the recent years. This has been attributed to global international support coupled with increased knowledge on HIV leading to the development of medical treatments for the disease condition. Countries like Senegal and Uganda have had impressive reduction in the prevalence rates due to prompt and effective political response. The existence of sound prevention and management strategies without the

development of institutional processes to deliver them to the African populations would still make intervention efforts ineffective. The African governments have therefore initiated both local and international private and public sector partnerships to ensure that the HIV/AIDS interventions effectively reach the populace. It is noteworthy that the HIV/AIDS political landscape in Africa has rapidly changed from apathy to active engagement over a short period of time. This is in part due to the significant contributions of the political class in the fight against the scourge.

#### 6. 0 Significant contributions of the political class in the fight against AIDS in Africa.

In the period leading to and from 1999, there has been a marked heightening of the environment for national African governments to respond to the AIDS epidemic. A series of international meetings have squarely placed HIV/AIDS mitigation at the center of the continent's development agenda moving it from the periphery of health issues. This has necessitated direct political interventions in the fight against the disease condition through a number of initiatives that include: legislative support for the fight against AIDS, creation of institutional mandates to fight Aids in individual countries, promotion of supportive and enabling environments to fight the scourge and resource mobilization for the fight against AIDS.

Many African legislators have voted on acts of parliament that pass legislation to protect the human rights of persons infected by HIV and AIDS as well as those that advance effective prevention and care programs. In Namibia, special legislative committees were formed to provide nonpartisan



forum for members of parliament to deepen their understanding of HIV/AIDS issues and build consensus.

In creating institutional mandates and processes in the fight against AIDS, the African political class has integrated the private sector and civil societies in developing appropriate responses to the epidemic. By instituting multi-sectorial advisory bodies with professional and community representation, African states have established effective national framework for their response to HIV/AIDS. The Malawi National AIDS Committee which is an interdisciplinary body that is chaired by the minister of justice exemplifies such effort. Further efforts have also been made to mobilize funds from within the continent as well as from foreign donors by political leaders. Access to the global fund has helped in making HIV/AIDS medicines available to otherwise unable African poor.

#### 7. 0 Failures of the political leadership in fighting HIV/AIDS in Africa

Despite the tremendous efforts that the African political class has made towards fighting AIDS, there are several areas that they have notably failed. A prominent case is the action of former South Africa's president called Thabo Mbeki to fail to deliver antiretroviral drugs public use. His argument that the drugs caused AIDS was met with dismay as much as his insistent that HIV did not cause AIDS in contrast to the established scientific fact that it did. This example of bad leadership misled the nation and put the lives of millions of the citizens at a high AIDS risk without the antiretroviral medicines.

Cases of corruption and poor governance have led to the loss of financial and material resources that are earmarked for the fight against AIDS. A case in

point is when it was discovered that large quantities of antiretroviral drugs that were destined for Africa were being sold in the European Union in 2002. In Kenya, the Efficiency Monitoring Unit and the government's anti-corruption unit uncovered that the head of the National AIDS Control Council (working under the office of the president) had been receiving a salary that was seven times higher than what she should have. Such kind of resource misappropriation greatly cripples the fight against AIDS where they occur. Inadequate budgetary allocation of national financial resources to tackle HIV/AIDS in African countries greatly impairs implementation of strategies to fight the pandemic. Many these governments have failed to meet the targets of allocating 15% of their annual national budgets to the improvement of the health sector where AIDS is tackled was stated in the Abuja declaration of 2001.

## 8. 0 Conclusion

The HIV/AIDS pandemic has certainly ravaged the African continent and is projected to cause even much more damage if mitigation strategies are not speedily stepped up to reach the tens of millions of the people who need it. Breaking the circles of poverty within African households and developing health infrastructure that ensures the delivery of prevention and treatment tools in the hands of the populace is what presents a real hope of reducing AIDS prevalence in the continent.

There has been a consistent effort by the political class in the continent to roll back the devastating effects so far wrought by the scourge. Though plagued by challenges such as limited financial resources and cultural barriers, the efforts to support AIDS prevention and treatment must

continue. The global focus on the pandemic in Africa provides a unique window of opportunity to further engage the international community in mounting a concerted war against the pandemic.

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