Choosing Dependency? AIDS and International Aid in Tanzania

Moritz Hunsmann¹

¹·EHESS Paris / Albert-Ludwigs-Universität Freiburg, France / Germany

moritz.hunsmann@ehess.fr

In Tanzania, external support for the struggle against AIDS represents over ten percent of the country's budget and one third of all aid. AIDS funding has increased twentyfold between 1997 and 2007, which resulted in 95 % of AIDS Tanzanian expenditures being donor-financed. The roll-out ARV therapy puts Tanzania in a situation where an ever-increasing share of its population directly depends on foreign assistance for survival. Notwithstanding its obvious benefits, the long-term financial implications of this medicalized response to HIV thus raise the issue of dependency with unprecedented acuteness.

In the health sector, when analyzing "aid as a means of power for developing states", the power in question is essentially the ability to set programmatic priorities and to endogenously formulate disease control strategies. In Tanzania, the state has very limited influence over the nature of the response to HIV/AIDS and the trade-off between HIV and other health policies. The profound change of the donor landscape over the last decade due to the surge of Global Health Initiatives and the draw-out of many bilateral donors from HIV-related activities seems to have little positive effect on so-called "country ownership". By adopting an authoritatively vertical approach (PEPFAR) or by creating ad-hoc committees (Global Fund), the main donors bypass existing democratic institutions, distort accountability and thereby contribute to the perpetuation of anti-emancipatory structures of domination. The international players of this oligopolistic policy arena are, however, increasingly aware of the irreversible nature of their commitment to fund ARV treatment, a moral obligation they refer to as the "treatment mortgage". The ensuing political impossibility to draw out puts into question the relevance of aid conditionalities and lets dependency appear as a strategic choice by African governments.

Being unanimously considered as a health emergency calling for forceful international action, the African HIV epidemics pose a serious challenge to approaches that radically question the concept and realities of "development aid". Given the severity and urgency of the situation, how can one critically analyze the international response to HIV/AIDS without advocating inaction in the face of misery? Based on ninety in-depth interviews with donor representatives and officials from Tanzanian health and AIDS administrations, as well as on a series of observational studies, this contribution attempts to theoretically grasp the debate between those who see AIDS as an opportunity "to seriously and deeply rethink hegemonic development practices" (Liza Briggs) and those who, explicitly or not, consider that the urgency of the situation makes it inappropriate or untimely to rethink these practices right now.

1