

THE ROLE OF UNICEF IN ADDRESSING THE HIV/AIDS EPIDEMIC IN TANZANIA FROM 2019-2022

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ABSTRACT

The transmission of the HIV/AIDS virus in Tanzania to mothers, babies, and children has become a global problem that has attracted world attention. These threats must be a primary focus to ensure the well-being and security of the next generation. This study uses literature studies with the theory of securitization and international organizations in answering research questions about the phenomena studied. As a securitization actor, UNICEF made a statement through the Children and AIDS program to tackle the spread of HIV/AIDS in Tanzania. Seeing that the Tanzanian government was unable to overcome the spread of this virus, the government chose to work with UNICEF in the hope that the collaborative program created would be able to overcome the spread of HIV and AIDS. The results of the study show that the implementation of the program indicates progress toward public awareness in Tanzania, especially among those living with HIV/AIDS themselves. Not only that, UNICEF has aided in every field and aspect of Tanzania. But of course, there are challenges in implementing a program in a country, one of which is discrimination which can hinder the planned program.

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1. INTRODUCTION

The spread of the HIV virus and AIDS is a global health issue that has been a challenge since 1981. The Human Immunodeficiency Virus (HIV) and Acquired Immunodeficiency System (AIDS) have infected more than 84.2 million people and caused the deaths of approximately 40.1 million people since the beginning of the epidemic. The death toll from HIV infection has affected various layers of society, especially women and children as a vulnerable group. Every week, around 4,900 teenage girls aged 15-24 are infected with HIV. Even in 2021, of the 75-97% of people with HIV who know their HIV status, only around 66-85% of people have access to HIV prevention, treatment, and medical care.

Among the regions affected by HIV, sub-Saharan Africa is the region that contributes about 70% of people living with HIV globally and is the region most severely affected by HIV with an adult HIV prevalence of 4.4%. According to the 2010 UNAIDS Global Report, an estimated 1.3 million people died of HIV-related illness in sub-Saharan Africa in 2009, and the total deaths accounted for 72% of the global total of 1.8 million deaths caused by the HIV epidemic. The rapid spread of HIV transmission in Africa is due to a lack of sexual education and traditional liberal attitudes that are largely adopted by the people of the region. Among several countries in sub-Saharan Africa, Tanzania is one of the global priorities in HIV prevention and treatment. This is because Tanzania's population is the youngest population on the African continent. The adult HIV prevalence among individuals aged 15 to 64 in Tanzania is 5.0% (6.5% among women and 3.5%

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among men). Additionally, the prevalence of HIV in women in Tanzania is higher than in men (6.2% versus 3.7%). About 1.4 million people living with HIV (PLHIV) aged 15 to 64 in Tanzania, and there were 6.5 thousand children under 15 years newly infected with HIV.

Several factors are known to affect the rapid spread of HIV in Tanzania, one of which is poverty. Poverty is the biggest factor contributing to the high rate of HIV/AIDS cases in Tanzania. The lack of education, access to healthcare, and quality employment makes Tanzanian society more vulnerable to HIV/AIDS.

Moreover, stigma and discrimination against people living with HIV/AIDS in Tanzania create negative impacts and patterns. This hinders the treatment and prevention of HIV/AIDS, and individuals become reluctant to seek help or just get tested. Additionally, the responsibility and commitment of the Tanzanian government to control HIV transmission are challenging to implement due to complicated, difficult, and expensive control measures that require strong determination and practical interventions. As one of the poor countries, Tanzania requires assistance from stakeholders to achieve national goals in preventing HIV transmission and treating people affected by HIV/AIDS.

Research Question: What is the effectiveness of UNICEF's Children and AIDS program as a speech act in reducing the HIV/AIDS epidemic among women and children in Tanzania?

To answer this research question, a comprehensive evaluation of the Children and AIDS program is needed to assess its effectiveness in reducing the HIV/AIDS epidemic among women and children in Tanzania. The evaluation can be conducted using various methods such as surveys, interviews, and data analysis.

One of the key indicators of the program's effectiveness is the reduction of mother-to-child transmission of HIV. The program's success in achieving this objective can be measured by monitoring the number of HIV-positive births, the number of pregnant women receiving HIV testing and counseling, and the number of HIV-positive mothers receiving antiretroviral therapy.

Another indicator of the program's effectiveness is the level of awareness and knowledge of HIV/AIDS among women and children in Tanzania. The program's success in promoting sexual education and HIV prevention measures can be assessed by conducting surveys and interviews to measure changes in knowledge, attitudes, and behavior related to HIV prevention.

Furthermore, the program's impact on the overall health and well-being of women and children affected by HIV/AIDS can be evaluated by monitoring the number of children receiving HIV testing and counseling, the number of children and adolescents receiving antiretroviral therapy, and the number of children receiving care and support services.

In conclusion, the effectiveness of the UNICEF Children and AIDS program in reducing the HIV/AIDS epidemic among women and children in Tanzania can be assessed by evaluating its impact on the reduction of mother-to-child transmission, the promotion of sexual education, and the overall health and well-being of women and children affected by HIV/AIDS.

2. LITERATURE REVIEW

Securitization Theory

In the development of security studies, the dynamics of global strategy have led to a shift in the epistemology of security from traditional (state-centric or military) to non-traditional (non-state-centric). This has caused a change in the security agenda. Security is no longer limited to narrow boundaries such as military threats only, but non-traditional issues such as the

environment, food, energy, migration, and so on are labeled as 'security' issues, especially those that can threaten human life and territory.

Securitization is a political process that frames an issue or phenomenon as a security issue and is seen as an existential threat requiring emergency action to protect the territory or society from the threat through political procedures. This was proposed by Barry Buzan, Ole Waever, and Jaap de Wilde, or the group known as the Copenhagen School, who stated that securitization is "...the move that takes... beyond the established rules of the game and frames the issue as either a special kind of politics or as above politics."

An issue can be securitized when the public agrees on the nature of the threat and supports the actions of the securitizing actor to prevent the threat. If the public rejects the speech act of the securitizing actor, then securitization has failed. In the security agenda, health issues have emerged as a national security issue with several problems, such as influenza pandemic, HIV/AIDS, COVID19, and so on. The lack of treatment for HIV/AIDS until now has caused fear in the community, thus framing HIV as a security threat by the global community.

The classification of HIV/AIDS as an international security threat can be seen through the securitization efforts of HIV/AIDS through UN Security Council Resolution 1308 in 2000, which contains not only implicit handling of health problems but also explicitly links the spread of HIV/AIDS to the maintenance of world peace.

"The HIV/AIDS pandemic is exacerbated by conditions of violence and instability, which increase the risk of exposure to the disease through large movements of people, widespread uncertainty over conditions, and reduced access to medical care... If unchecked, the HIV/AIDS pandemic may pose a risk to stability and security." UN Security Council Resolution 1308 (17 July 2000).

"The UN also plans for the global goal of SDG No.3 and the 95-95-95 targets, which include aspirations to ensure health and well-being for all, including a commitment to end communicable diseases, including the AIDS epidemic, by 2030. The transmission of HIV/AIDS is becoming increasingly complex in developing countries due to the heavy burden they bear, as in Tanzania. This is due to social and economic factors that influence control measures. Through this UN speech act, every international actor needs to cooperate to end the HIV/AIDS epidemic."

International Organization Theory

According to K.J. Holsti, an International Organization is an international body built by an agreement between several countries for a specific common purpose in an organized way. International Organizations must have a common goal consisting of countries that share the same vision and are willing to make agreements. The role of international organizations in the world includes acting as an actor in cooperation instruments, both between international organizations and between countries and international organizations, with the aim of achieving shared aspirations.

The International Organization theory focuses on assumptions, concepts, and approaches used to analyze and understand International Organizations. The purpose of International Organizations can vary, such as addressing security issues, climate issues, economic improvement, and others. Just as International Organizations were established to protect Human Rights, International Organizations can help people with HIV/AIDS through various programs they create in Tanzania. UNICEF (United Nations Children's Fund) is one of the International Organizations that

pays attention to people with HIV/AIDS. UNICEF focuses on sexual education, increasing public awareness, improving access to health services, and preventing HIV/AIDS and other sexually transmitted diseases in children and adolescents. UNICEF conducts various campaigns to increase awareness and knowledge of HIV/AIDS and other sexually transmitted diseases. With many programs created, UNICEF contributes to global efforts to address the HIV/AIDS pandemic.

3. RESULT AND DISCUSSION

HIV/AIDS in mothers and children in Tanzania reviewed from the Securitization Theory.

Tanzania reported its first 3 cases of HIV/AIDS in 1983. The infection has since spread to both urban and rural areas. Since then, the spread of HIV/AIDS in Tanzania has continued to grow, although not as severe as in the first year of HIV/AIDS infection cases that gradually decreased. In December 2000, the President of Tanzania, Benjamin William Mkapa, announced the establishment of the Tanzania Commission for Aids (TACAIDS). Based on the TACAIDS report for the year 2017-2018, it identified the vulnerable populations at risk of HIV/AIDS transmission, including men who have sex with men, people who use drugs, sex workers, and their clients. However, the report on vulnerable populations to HIV/AIDS only accounted for 15.5% of transmission. Identification data is difficult to obtain due to the stigma and discrimination that comes with being part of the vulnerable population sample in Tanzania.

In 2016, UNAIDS estimated the prevalence of HIV among adults in Tanzania to be around 4.7%. In 2018, Unicef estimated the prevalence of HIV among children to be around 0.4%. This prevalence was also reported by the Tanzania HIV Impact Survey (THIS) in 2016-2017. UNAIDS predicts that in 2018, there will be 92,000 (72,000-110,000) children living with HIV, 8600 (6500-13,000) children who will become infected with HIV, and 5400 (3200-8900) children who will die from AIDS in Tanzania.

Vertical transmission can also occur, where HIV is transmitted from mother to child. Other factors that make children vulnerable to HIV transmission include orphans who lack care, lack of education and awareness, and inability to defend their rights, which can lead to sexual abuse or rape that can cause HIV transmission. After reviewing several related journal reports, women, especially pregnant women, babies, and children, are identified as vulnerable populations for the spread of HIV/AIDS. This is a threat to future generations that must be addressed and the chain of transmission must be broken by constructing this issue as a priority issue and turning it into a security issue that must be immediately addressed in Tanzania itself.

To construct the issue of HIV/AIDS in mothers and children in Tanzania as a non-traditional security issue that must be prioritized, the issue will be reviewed through the securitization theory proposed by Barry Buzan, Jaap de Wilde, and Ole Waever. Starting with the Speech Act proposed by the Securitizing Actor, who is the actor who performs securitization. In the phenomenon under study, Unicef will act as the actor who will securitize the issue of HIV/AIDS in mothers and children in Tanzania. The statement or Speech Act given is in the form of the Children and AIDS program to support Tanzania's national goal of preventing the spread of HIV/AIDS to mothers and children. The real threat posed by the spread of HIV/AIDS can threaten lives and cause disasters for future generations, as previously explained.

"Existential Threat" is evidence that the issue at hand poses a threat to human life and must be a priority. The threat that has emerged has caused something unusual that has never happened before or is also referred to as an extraordinary measure. In this case, the country of Tanzania is

working with international organizations such as UNICEF to prevent mother-to-child transmission of HIV, starting from pregnancy until breastfeeding, under the Tanzanian government's own program called the Prevention of Mother-to-Child HIV Transmission (PMTCT).

The Referent Object as the actor that is referenced in the securitization where the actor is threatened, in the issue at hand, this research focuses on the threat of the spread of HIV/AIDS to mothers and children living in Tanzania. In constructing the issue, an audience is needed to build intersubjectivity. The audience targeted in this research is the Tanzanian society itself. The construction of the issue is expected to influence norms and stigmas ingrained in society regarding how HIV/AIDS is a very serious issue and can threaten future generations.

Implementation of UNICEF in Tanzania based on International Organization Theory

The United Nations International Children's Emergency Fund (UNICEF) is an international organization established on December 11, 1946. The goal of UNICEF is to provide various assistance to children during armed conflicts, natural disasters, humanitarian crises, and short-term or long-term survival programs. UNICEF's programs include helping to address specific diseases, providing vital public services for children, building healthy environmental efforts, and focusing on children's education.

The high number of HIV/AIDS cases in Tanzania is certainly a concern for international organizations. UNICEF is involved in HIV/AIDS management in Tanzania with the Children and AIDS program that focuses on two decades. The first decade focuses on infants, young children, pregnant and breastfeeding women. During this decade, UNICEF supports the national goal to eliminate new HIV infections in children and keep mothers living with HIV healthy through better health care for mothers, newborns, and better child health by strengthening the country's PMTCT program analysis, improving HIV treatment, and the quality of care provided to children living with HIV.

The second decade focuses on teenagers and families. During this decade, UNICEF focuses on advocacy, resource mobilization and coordination, supporting effective HIV programs for teenagers, providing health and social services to teenagers living with HIV, and supporting high-impact multisectoral HIV programs. In carrying out its programs, UNICEF collaborates with the Ministry of Health, Community Development, Gender, Elderly, and Children (MoHCDGEC), the Tanzania Commission for AIDS (TACAIDS), the President's Office of Regional Administration and Local Government (PORALG), the US President's Emergency Plan for AIDS Relief (REPRAF), the Global Fund, and other UN agencies.

UNICEF seeks to analyze and strengthen the PMTCT program in Tanzania because many mothers are not compliant with Option B+ so UNICEF considers it important to analyze the performance of the PMTCT program. The majority of mothers in Tanzania give birth at the age of 23, so by the time they are adults or 25 years old, they have received reproductive health services and are accustomed to PMTCT services, so they understand the importance of compliance with PMTCT services. However, mothers who are newly diagnosed with HIV and less experienced with PMTCT services tend to come for confirmatory HIV testing at 18 months after delivery compared to mothers who knew their HIV status before registering for antenatal care.

The Effectiveness of UNICEF's Children and AIDS Program in Tanzania

One of the largest populations of HIV/AIDS patients in Africa is in Tanzania. UNICEF, an international organization that plays a role in protecting and improving the quality of life for every child and woman in developing countries, has a special program focused on combating HIV/AIDS called Children and AIDS. Through this program, UNICEF provides health and social services, particularly to adolescents and pregnant women who are at high risk of HIV/AIDS transmission.

Stigma towards HIV/AIDS patients is worsening, especially in Tanzania, East Africa. According to research conducted by a journal titled "Gender, HIV Related Stigma, and Health-Related Quality of Life Among Adults Enrolling in HIV Care in Tanzania" by Angela M. Parcesepe, Denis Nash, Olga Tymejzyck, William Reidy, Sarah Gorrel Kulkarni, and Batya Elul, "internalized stigma" with social support, especially from peers, could potentially reduce the prevalence and impact of HIV/AIDS-related stigma. It is also said that the stigma that arises among the community has more negative impacts, especially on women compared to men.

Not only does negative stigma arise, but discrimination also often occurs towards HIV/AIDS positive patients. Therefore, UNICEF's Children and AIDS program is a form of commitment by an international organization to handle and help reduce the transmission rate of the HIV/AIDS virus. It focuses on all age groups, including infants, young children, pregnant women, breastfeeding mothers, adolescents, and their families. In this regard, UNICEF engages in advocacy, and local government involvement as well as non-governmental organizations is needed to combat HIV/AIDS in Tanzanian society.

The Tanzanian government, with the help of UNICEF, has made progress in improving interventions to address HIV/AIDS, with Tanzania receiving significant external funding, including loans from the World Bank and grants from the Global Fund to Fight AIDS (GFATM). UNICEF also collaborates with the President's Emergency Plan for AIDS Relief (PEPFAR) in implementing the Children and AIDS program. UNICEF also collaborates with the Joint United Nations Programme on HIV/AIDS (UNAIDS) and the World Health Organization (WHO) in Africa by holding meetings in 2019 to increase partnerships to stop the spread of HIV/AIDS, particularly for adolescents and children.

The Children and AIDS program provides special care to mothers and children by expanding early diagnosis of infants through innovative Point-of-Care technology (POC), which can help produce faster test results and make baby care easier once diagnosed with HIV/AIDS. For the treatment of patients, UNICEF provides the best therapy available. Additionally, Children and AIDS help address the needs of adolescents, invest in strengthening health systems, including sustained advocacy, and global investment to reduce AIDS-related deaths among children and adolescents.

Those strategies are the basic framework of UNICEF's new service for infants, children, and adolescents living with HIV, aimed at ensuring that pediatric HIV programs are on track to achieve the "super-fast-track" target. This target is a joint outcome of UNICEF's implementation in collaboration with stakeholders, global experts, national program managers, including adolescents living with HIV/AIDS, and reviewing evidence published on which services work best in improving outcomes for infants, children, and adolescents living with HIV across the care continuum, from testing and placement to linkage, treatment, and retention.

This framework is also intended to complement existing WHO recommendations and policies, which include strategic frameworks and guidelines related to adolescent and child HIV, such as the Start Free, Stay Free, AIDS Free Framework, the Global Accelerated Action for the

Health of Adolescents (AA-HAI) framework, and WHO and UNAIDS Global Standards for quality health services for adolescents. The effectiveness of the Children and AIDS program in Tanzania can be said to have made progress in raising awareness among Tanzanian communities and people living with HIV/AIDS. It has helped in many aspects of the country. However, to make faster progress, consistency in the program and wise and thorough considerations, as well as cooperation and assistance from various parties, such as the Tanzanian government, stakeholders, International Governmental Organizations, Non-Governmental Organizations, and the Tanzanian community itself, are needed.

UNICEF's Challenges in Addressing the HIV/AIDS Epidemic in Tanzania

Despite UNICEF's achievements in implementing its program to help address the HIV/AIDS epidemic in Tanzania, several obstacles or challenges need to be overcome in its implementation, namely:

1. Stigma against HIV/AIDS sufferers

Stigma against HIV/AIDS sufferers is often associated with promiscuity. This results in an individual being suspected of buying drugs freely and without a prescription to avoid the stigma they face. This tendency arises due to a lack of knowledge about the transmission of HIV/AIDS. Therefore, stigmatized and discriminated people are denied their rights to education, work, and even health services. One of the causes of this stigma is by associating HIV/AIDS as "bad behavior," such as promiscuous sex, same-sex sex, and injection drug use. Stigma against HIV/AIDS is one of the biggest challenges in triggering the HIV virus, which causes fear in disclosing that they are HIV positive.

2. Limited Medical Personnel and Health Facilities

The gap between the quantity and quality of healthcare workers and medical personnel, especially in rural areas. Although medical personnel are still responsible for caring for HIV/AIDS patients, inadequate health facilities, especially personal protective equipment and limited disinfectants, are reasons why they are often afraid to implement it. And even due to a lack of medical personnel, in some areas of Tanzania, many patients are left behind in hospitals. On the other hand, healthcare workers and medical personnel complain about the lack of personal protective equipment, which is a primary factor in providing health services.

3. Tanzania as a Poor Country

Although it has managed to obtain external funding and has experienced macroeconomic progress, Tanzania is still one of the poorest countries in the world. Its HIV/AIDS programs continue to depend on external financing. This raises concerns that Tanzania cannot independently address the HIV/AIDS epidemic. Not only that, but the institutional infrastructure in Tanzania is very limited in dealing with HIV/AIDS. These obstacles, such as the knowledge gap among providers, human resources, and poor management, also make UNICEF's program implementation uneven and slow. The limitation of personnel/human resources is a response to the increasing HIV/AIDS epidemic in Tanzania. Therefore, funding is needed to build sustainability and alignment between the health system and more appropriate commodities such as facilities and environments that allow access free from stigma and discrimination. Nevertheless, UNICEF has implemented its program to address and reduce HIV/AIDS transmission as best as possible, and provided funding.

4. CONCLUSION

The spread of HIV/AIDS in Tanzania poses a significant threat to the society, especially vulnerable populations such as mothers, infants, and children. The threat to these groups can affect what future generations will be like, therefore, the threat of HIV/AIDS transmission must be a security priority. Securitization is a theory used to transform non-security issues into security issues. The process starts with the emergence of UNICEF as a securitizing actor, which will make a statement through the Children and AIDS program to address the threat of HIV/AIDS transmission. The threat of HIV/AIDS transmission in Tanzania is evident through reports of its impact on future generations and high mortality rates among vulnerable populations. The Tanzanian government is deemed unable to handle the virus and chooses to collaborate with UNICEF. The collaboration between the Tanzanian government and the UNICEF program is expected to address the threat of HIV/AIDS transmission, particularly among mothers, infants, and children. Through securitization, society is expected to construct norms regarding the dangers of HIV/AIDS and help implement the programs of both the Tanzanian government and UNICEF.

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