

Africa lacks will to fight AIDS

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OVER the next decade, the UN warns, AIDS will kill more people in sub-Saharan Africa than all the wars of the 20th century. But political urgency to combat the disease remains missing from much of Africa.

According to a just released World Disasters Report by the International Federation of Red Cross and Red Crescent Societies, political will may be growing to some extent. "Africa has progressed but the will is often equivocal." Health budgets still play second fiddle to defence spending.

An international AIDS conference in Lusaka, Zambia, held in September last year, saw Zimbabwe join Burkina Faso, Lesotho, Malawi, Mozambique, the Republic of Congo, Swaziland, Tanzania and Zambia in declaring HIV/AIDS an official disaster requiring emergency response.

But, regrets the report, the domestic position, however, remains a confused one. "If there was a change of status, most AIDS organisations were unaware of it and some people viewed Lusaka (conference) as a stance for international consumption only."

The disaster declaration from the Lusaka AIDS conference had raised hopes of more government responses. But, noted a Zimbabwean official; "How many African presidents were there? You should look at the status of the people making the speeches. How much influence do they have back home?"

Not a single African leader attended the five-day meeting, including the host president, Fredrick Chiluba.

Peter Piot, UNAIDS Executive Director, and Ebrahim Samba, Director of the World Health Organisation (WHO) Africa Region, and almost all the 5,000 delegates who attended the meeting, publicly expressed their anger over the leaders' indifference.

Another case, cited as depicting African leaders lethargic response to the HIV/AIDS epidemic, is the manner in which they treated the disease at last November's Commonwealth Heads of Government Meeting (CHOGM), held in the port city of Durban, South Africa.

million African men, aged 15 to 49, are living with HIV. Disparity is greater among the young. African girls aged 15 to 19 years are six times more likely to be HIV-positive than boys. Girls are more vulnerable, says UNAIDS, because of greater ease of male-to-female sexual transmission and because girls often have sex with older, infected men.

The UN's analysis suggests that, because of AIDS, by 2005 the gross domestic product (GDP) of most southern African countries will have shrunk by at least 14 per cent. Per capita income will drop by 10 percent. Labour costs are rising due to morbidity and absenteeism, and training new workers brings an added burden.

"It's easy to despair because of the magnitude of the problem," says Alvaro Bermejo, director of health at the International Federation of Red Cross.

Barmejo argues that the best approach to tackling HIV/AIDS is to scale up strategies already proven to work best, such as peer-education aimed at the 12-24 year olds, through youth groups, schools and churches.

Health education targeted at "mobile men" such as soldiers, truck-drivers and businessmen who spread HIV while travelling. Barmejo also calls for better treatment of opportunistic infections, such as TB and pneumonia, which cause unnecessary and premature death.

But this change will only occur if resources are diverted from wars in Africa to ensuring that people are guaranteed basic human rights, like the right to health.

Spending on health has been drastically reduced at a time when HIV/AIDS is at its peak. In South Africa, for example, it is estimated that the costs of treating HIV/AIDS will consume between 18 and 40 percent of total health expenditures.

Annually, every HIV infected person would need to pay about 12,000 US dollars every year on medicines alone, at a time when the health budgets of most African countries can only allocate no more than 10 US dollars to be spent on the health of each person.

Meanwhile, the Indian government has again joined issue with international AIDS agencies, disputing what it says are

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But HIV/AIDS is wrecking havoc. Less than 20 years since AIDS was first recognised, the United Nations describes it as the worst infectious disease catastrophe since the bubonic plague.

HIV infects more than 14,000 people in sub-Saharan Africa everyday. But the world has still not faced up to the crisis and adequately fund the response, according to the report.

The World Bank says that between one billion US dollars and 2.3 billion dollars is needed annually for prevention alone in Africa, but official assistance for AIDS is something in the region of 160 million US dollars. "African nations too must get their acts together. Controversy over drugs and condoms only underlines the absence of direction in the war against AIDS," says the report.

Uganda has come far. Elsewhere in Africa, its model is used as a base for comparison. From the unenviable record of having the highest infection rate in the world in the 1980s, Uganda now has one of the least infection rates. And, thanks to the openness regarding the disease, there is now little stigma attached to HIV/AIDS.

Uganda was the first African country to confront AIDS. President Yoweri Museveni, who came to power in 1986, soon adopted a policy of frankness, speaking wherever and whenever he could. President Museveni was the first to show the importance of high-level political involvement and, according to UNAIDS, this is the common denominator in effective programmes.

But Uganda's own tragedy, says the World Disasters report, is far from over. While much can be learned from Uganda's success story, there are also lessons in its shortcomings. Nearly two million people are said to be infected, 500,000 have died, Uganda has more than a million AIDS orphans and the average HIV prevalence rate is still around seven percent.

But the situation is more horrific in other countries. More than 23 million Africans are estimated to be infected with HIV. Since the pandemic began in the early '80s, approximately 50 million people worldwide have been infected, of whom 16 million people have died. In Sub-Saharan Africa, 55 percent of infected adults are female.

UNAIDS estimates that 12.2 million African women and 10.1

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"exaggerated" figures of HIV-infected people in the country.

Stung by criticism from opposition lawmakers in Parliament, who cited HIV statistics for India put out by UNAIDS, Health Minister C.P. Thakur has accused U.N. agencies of misreporting facts and creating confusion. "I am at a loss to understand how there can be so many different estimates by different U.N. agencies," an anguished Thakur told reporters.

He said he would "appeal to the U.N. agencies to realise the importance of these figures, which are about human subjects." Thakur said the National AIDS Control Organisation (NACO), which is supervised by his ministry, generates epidemiological data from field studies and it would be "advisable" for U.N. agencies to use these figures.

The government's main objection is on figures in the latest UNAIDS report on the global HIV/AIDS epidemic, which show that 310,000 Indians died of AIDS in India in 1999. However, the report did not explain how the figure was obtained.

Six years ago, NACO officially questioned the basis on which UNAIDS calculated that India then had 1.75 million people infected with the AIDS virus. The Indian AIDS agency also objected to the latest UNAIDS finding. "We arrived at the number of 3.1 million using an internationally accepted model based on experience in various parts of the world," said Gordon Alexander, a senior UNAIDS official in India.

According to Alexander, while there was room for discussion on the figures, the idea was to "emphasise the need for prevention and support and a care system for HIV patients."—
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