

FOCUS South Africa



Change in the South African AIDS-policy

Panic action or long-term commitment?

Approximately two million people have died since the outbreak of HIV/AIDS in South Africa. The country is the most hidden by the pandemic worldwide. Between two and six million South Africans are HIV-positive, every day around 1000 new infections occur. And the number of people dying of AIDS is still raising.

Critics blame the South African government's hesitation for the dramatic crisis. First, President Thabo Mbeki denied the connection between HIV and AIDS, then his Health Minister Manto Tshabalala-Msimang propagated a healthy nutrition instead of a treatment with life-saving, anti-retroviral medication (ARVs).

"We actually see a clear re-orientation in the government's AIDS-policy. And if that is not the final turn-around, it will really be time for civil disobedience."

Gordon Mthembu, Treatment Action Campaign (TAC)

At the World AIDS Summit in Toronto last August the South African government was heavily criticised by the *Special Commissioner of the United Nations for HIV/AIDS in Africa* and the exposition stand was raided by several activists of non-governmental organisations. In the weeks following the conference President Thabo Mbeki finally declared the fight against HIV/AIDS as an inter-ministerial task of his government and transferred the responsibility of the *Inter Ministerial Committee on HIV and AIDS* to Deputy President Phumzile Mlambo-Ngcuka. In the meanwhile the Health Minister had to step back because of a lung infection. The dialogue with civil society, active in the field of HIV/AIDS, was re-established by Mlambo-Ngcuka and Deputy Health Minister Nozizwe Madlala-Routledge. They drafted a new strategy for the treatment of HIV/AIDS in the next five years. Does this finally signal the long desired change in the South African AIDS-policy?

In the Drakensberg mountains in the eastern KwaZulu-Natal province: a ten-year-old boy Musa loses first his mother, then his father to AIDS. Only his grandmother, a younger cousin and his cow are left for the boy. But the day Musa finally gets completely orphaned, the local sangoma wants to slaughter his cow to remove the spell on the family. And, nothing left, Musa decides to go to Johannesburg to find help at his uncle's and to make some money.

The catastrophic situation in South Africa

South Africa is one of the countries most severely affected by HIV/AIDS. One of nine people is infected with the deadly virus, at a population of 48 million people in total. The number is rising. At least 240.000 children carry the HI-virus. And the number of people dying of AIDS is increasing dramatically. While the

epidemic caused 316.505 deaths in 1997, in 2004 more than 567.488 died – a rise of 79 per cent. In the provinces KwaZulu-Natal, Free State and Eastern Cape the average life expectancy dropped to under 50 years and South Africa is falling back in the *Human Development Index* (HDI). Today the country takes a place between Equatorial-Guinea and Tadjikistan, at place 121 of 177 countries.



Official movie poster „Beat the drum“

The *South African Health Ministry* currently lists 273 distribution places for anti-retroviral medication. Following government statistics 213.282 people currently receive the life-saving treatment while 31.255 people are on waiting-lists. A combination of at least three ARVs can treat the HIV-infection and hamper the outbreak of AIDS. They cause a drop in the viral load in the blood (CD-4). Currently HIV and AIDS cannot be cured, but life-expectancy rises significantly with ARV-treatment and the risk of transmitting the virus from mother to child can be reduced significantly.

The biggest and most famous non-governmental organisation in the area of HIV/AIDS is the *Treatment Action Campaign* (TAC), which estimates that between 500.000 and 800.000 people are currently in need of anti-retroviral treatment to survive. Government and TAC are fighting about the exact number of people in need and the immediate treatment. “Only 20 per cent of those in need in fact receive the necessary therapy,” says Gordon Mthembu from TAC, “the rest the government lets die like flies.”

Health Minister Manto Tshabalala-Msimang, who has been in office since 1999, has repeatedly stressed out that the most important requirement is good nutrition and has widely advertised garlic, beetroot and African potatoes. She did not mention anti-retrovirals. After her statement at the Toronto Conference members

of TAC raided her stand and denounced publicly the hesitant position of government towards ARVs - in front of the international media. They blame Tshabalala-Msimang for underestimating the pandemic and exaggerating the risks and side effects of anti-retrovirals while giving controversial vitamin-therapies, such as those of the German Dr. Rath, a forum.

The South African government has questioned the efficiency of life-extending medication for a long time. It provoked a harsh storm of criticism and the *Special Commissioner of the United Nations for HIV/AIDS in Africa*, Stephen Lewis, accused the South African government of expounding theories „more worthy of a lunatic fringe than a concerned and compassionate state” and said: „the government has a lot to atone for, and I am of the opinion they will never achieve redemption.”

Independent Democrats (ID) chairperson, Patricia de Lille, agreed with the *Treatment Action Campaign* and asked for the resignation of the Health Minister after the scandal in Toronto. Tony Leon, chairperson of the biggest opposition party *Democratic Alliance* (DA), which has the biggest electorate of white South Africans, agreed to that outcry. The chairman of the *Inkatha Freedom Party* (IFP), Mangosuthu Buthelezi, who himself lost a son and a daughter to AIDS, blamed the government for the failed policy: “We asked the ANC government to declare war on HIV and Aids. The fact is that the war is lost. The ANC has lost the war for all of us.” The IFP has its support base largely in the province KwaZulu-Natal, the most affected by HIV/AIDS.

Change of course

After the scandal in Toronto the wave of criticism reached its climax. Foreign media and leading HIV/AIDS-scientists called on the government for a change. Finally President Mbeki declared the fight against HIV/AIDS as a cabinet focus and transferred the post of chairwoman of the *Inter Ministerial Committee on HIV and AIDS* to Deputy President Phumzile Mlambo-Ngcuka. The Deputy Minister of Health, Nozizwe Madlala-Routledge, who had been silenced under Thabalala-Msimang because of her different stance, could finally raise her voice again. Both declared that they wanted to re-structure the inefficient *South African National AIDS*

Council (SANAC), whose task is to implement, monitor and evaluate the national AIDS-policy. The Council will get more decision-making powers and be a forum of the highest representatives from government and non-governmental organisations.

Due to a lung infection the Health Minister had to step aside in October and her Deputy Minister assumed her duties. Together with Mlambo-Ngcuka she admitted to the precarious situation and made a step towards the non-governmental community. After months of silence, where NGOs had called for the resignation of the Health Minister, this was new step forward. “Both politicians sent out signals that they are ready to listen to us,” says Gordon Mthembu (TAC), “so we have a new basis for a restart, for more transparency and accountability.” On October 17th and 28th both politicians spoke at a conference of non-governmental organisations that are active in the area of HIV/AIDS and acknowledged certain deficits in the government’s policy. They asked the *Treatment Action Campaign* for a common proceeding, renouncing to rumours that Manto Tshabalala-Msimang may be sidelined: “The Minister of Health is sick at the present moment, and the Deputy Minister continues to do the work that all Deputy Ministers do, and I don’t think you should try and make this so dramatic.”

A new plan of action

On World AIDS Day, the 1st of December, the government proposed a draft for a “*New Strategic Plan to fight HIV/AIDS and other sexually transmitted diseases in the years 2007 to 2011.*” The Health Minister did not participate in the event. The ambitious five-year plan aims at raising the use of condoms, reducing the number of new HIV-infections and wants to provide more people with anti-retroviral medication. For the first time the government issued concrete results and included evaluation mechanisms.

On his way to Johannesburg little Musa meets the trucker Nobe, who firstly falls to the seduction of a prostitute at a truckstop – without condom. Arriving in the economic centre of South Africa, Musa tries to work as window cleaner in the streets. Nobe returns to his wife, who is already aware of the escapades of her husband and asks him to use condoms. But Nobe rejects the idea,

because they never used condoms and will not need them now. Especially not because the father of three girls still wants a boy."

Under the bridges of Johannesburg Musa gets to know Letti, who is only some years older and has lived in the street since her mother died. The girl explains everything about HIV and AIDS and dispels his thoughts about spells. Before Letti's mother died, she gave her a white-and-red bracelet: white for chastity and red for love. But living in the streets is a huge challenge – especially when it gets dark and alcohol flows.

Approximately 12 million children have been orphaned by HIV/AIDS in Sub-Sahara Africa, in South Africa approximately 1,2 million, of whom only 200.000 are taken care of. "And already that is a big problem," says Tracey Webster, spokesperson of the *Starfish Greathearts Foundation*, "one million children are excluded from basic education and the health system and have no roof over their head." Indeed the street children survive, but they often fall victim to alcohol, drugs and adults, who and exploit and abuse them. The risk of being infected with HIV/AIDS is several times higher than with children who have families. "The South African government will never have enough money to build orphanages for all the affected children," says Webster, "so we try to co-operate with the communities to allow the children to return and have a normal life."

Ambitious aims

The draft of the new government plan to reduce HIV/AIDS for the first time acknowledges that half a million people need treatment with anti-retrovirals. It aims to provide between 650.000 and 750.000 people with the life-saving medicine until 2011, in cooperation with civil society. The number of new infections of adolescents should be halved by 2011. Young people between the ages of 15 and 24 years are the focus of the new strategy. Campaigns will urge them to use condoms more often and to start their sexual relationships at a later age. The 30 aims include the active support of HIV-infected people, the intensification of research programmes, the implementation of a framework programme for the monitoring and evaluation of the five year plan and the support of the 1,2 million AIDS or



Photo: www.heartedrunthemovie.com

Movie scene: Musa and Letti with a red-and-white bracelet as a symbol for love and chastity

phans. Actually the Minister of Finance is calculating costs. Worldwide South Africa spends the most money on fighting the pandemic. In March the *National AIDS Council* will host a conference where all players in the field will be invited and the draft programme is completed and will be put into action. Until then, government, non-governmental organisations and forums of doctors will hold separate preparatory meetings.

Stigmatisation

Government and civil society will have to intensify their fight against the stigmatisation of HIV-infected people. The disease is still completely taboo in most rural areas of the country. Despite high death rates, AIDS is still not accepted as a cause of death and many South Africans claim not to know anybody who may have died from AIDS or its consequences. Only the Vice-Minister of Health Noziziwe Madlala-Routledge confesses to have lost two cousins to the disease. She is still the only member of cabinet who has had an HIV test also.

Traditional healers, especially in the rural areas, often reject AIDS as a cause of death. In the context of local communities, more often „spells“ are identified and natural medicine is prescribed. Treatment with anti-retrovirals is often rejected. Many people also think HIV-infection can be healed by having sex with a virgin; next to the high incidence of domestic violence this is another reason for the high violation rate of minors in South Africa.

A first report of the *John Hopkins University*, the *Centre for Aids Development* and the *Soul Institute* found that the level of awareness of HIV/AIDS has been raised by the media in the last years. So TV programmes, media campaigns and radio shows have contributed to a higher use of condoms and encouraged people to check their HIV-status. Soap operas have also touched the problem of stigmatisation so that HIV/AIDS is discussed in public more and more. However, the media could not achieve a decline in new infections.

Beat the Drum

The South African movie “Beat the Drum” tells the story of Musa and finally comes to a happy end.

Nube gets his HIV-status tested and stops his unprotected visits to brothels, his community has identified the “murderer AIDS.” Little Musa finds a place in an orphanage together with Letti and stays a close friend of Nube’s.

The film premiered in South African cinemas in December and was highly acclaimed. The producer-team W. David McBrayer and Richard Shaw came to the subject as they produced a TV series in Kenya and were confronted with the problem of street children on a daily basis. Both had a meeting with then President Daniel arap Moi and asked him what they could do to help the problem of so many AIDS orphans, to which arap Moi replied: “Make a movie that scares them to death.”

Whether there will be a happy end in the South African reality – remains to be seen. The *Treatment Action Campaign* considers the change in government’s policy as irreversible. “We see a clear change of paradigm in the handling of the AIDS issue,” says Mark Heywood, TAC treasurer, “not all in government have yet understood, but we are still optimistic.” The Minister of Health has declared herself still “in charge,” but did not participate in the presentation of the draft strategic plan. On World AIDS Day she said, that she is looking forward to implementing the new strategic plan and transforming the *National AIDS Council*. President Mbeki is still silent on her future. ■

Editorial

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