

AIDS: Silence = Death

The Social, Demographic and Development Impact of AIDS - Commonwealth Universities Respond

8-9 November 1999

Durban, South Africa

34 million people are infected with HIV/AIDS

22 million of them live in sub-Saharan Africa

The numbers seem too huge to grasp, the implications too terrifying to contemplate. The devastation of human life on such a scale is nothing less than a holocaust. Yet there is much that can be done to stem the tide of horror caused by the "big disease with the little name".

In a two-day Symposium co-hosted by the ACU and the University of Natal, senior university staff, civil servants and others gathered to address the issues surrounding the threat posed by HIV/AIDS to Commonwealth people, their institutions and their countries. And it is very much a Commonwealth issue. Some 29 per cent of the world's population live within the Commonwealth, yet 60.5 per cent of the world's HIV/AIDS cases are within that population. Among the hardest-hit are the sub-Saharan African Commonwealth nations - in South Africa alone there are an estimated 1,600 new infections every day. The epidemic is heterogeneous both within and between sub-Saharan African nations, yet one pattern is clear - the poorer the country, the worse the HIV/AIDS problem. The Symposium was held in Durban to coincide with the Commonwealth Heads of Government meeting. Focusing on 'globalization' as its theme, and perhaps preoccupied by the empty chair of Pakistan, the CHOGM, it is to be hoped, will lend some of its considerable influence to the battle against HIV/AIDS.

It is no accident, therefore, that the Symposium was opened by Dame Veronica Sutherland, Deputy Secretary General of the Commonwealth, nor that she quoted South African President Thabo Mbeki, who has taken up the fight against HIV/AIDS after years of indifference and uncertainty amongst South Africa's leaders. If the scourge of HIV/AIDS is left unchecked, said the President, "our dreams as a people will be shattered". Dame Veronica highlighted the Commonwealth's leadership role in the promotion of HIV/AIDS awareness, from the 1991 CHOGM call for a multisectoral approach, through to the hope that the 1999 CHOGM will issue a declaration of a global state of crisis. She emphasised the vital importance of understanding the gender dynamics within HIV/AIDS. Women are now dying in greater numbers than men; yet men are the "vectors of transmission" of the disease. Wherever women are economically and socially oppressed, wherever they cannot negotiate safe sex and are exposed to non-consensual and even violent sex, there the disease is at its worst, and the effects are most horrific. Whatever the outcome of this CHOGM, the Commonwealth Secretariat is committed to developing its programmes and policies in the fight against HIV/AIDS. ACU Secretary General Professor Michael Gibbons then outlined the expected outcomes of the Symposium:

- The drafting of a Communique to be presented to the CHOGM

- The drafting of a Policy Paper on HIV/AIDS for Commonwealth universities
- The establishment of a Commonwealth Knowledge Network, through which the considerable intellectual resources of the ACU's member institutions can be harnessed and coordinated in the development of policies and strategies to combat HIV/AIDS.

Professor Roy Anderson of Oxford University presented an overview of the key epidemiological factors, revealing a little of the nature of the HIV virus in particular, and how its demographic profile is based on characteristics quite different from those of other 'problem' diseases (e.g. malaria, dengue fever and TB). This is not the place to go into the biomolecular details; suffice it to say that the epidemic is still developing; that there is no near-term prospect of a vaccine; that the existing drug therapies, whilst relatively effective, are too expensive for most poorer countries; that interventions - of which more later - can be effective, but proper measurement is needed to assess efficacy; and that there is a tremendous need to start educating people at a younger age, and across a broader section of the population.

Professor Alan Whiteside, of the University of Natal's Health Economics and HIV/AIDS Research Division pointed out that the impact of HIV/AIDS will be Adverse, Long term, Complex and Surprising. Key elements are the high mortality rates (people are DYING), the negative impact on crucial development indicators such as life expectancy, and the horrifying rise in the numbers of children orphaned by HIV/AIDS. The implications of this last point are only just being realized. The World Bank, Professor Whiteside noted, invented the term 'immiserization' to describe the process by which people's lives are made miserable by poverty, disease and disadvantage. For these so-called AIDS orphans, immiserization is off the scale. Apart from having to deal with the trauma of seeing their parents become sick and die, these children are more vulnerable to other poverty-related diseases, less likely to receive any education, and less likely to be socialized effectively. What kind of future beckons for them? And what kind of future beckons for those who must cope with their needs?

The impact on universities is also frightening. Staff and students are becoming sick and dying, and this combines reductions in income and productivity with rising costs. How will universities already facing severe budgetary problems deal with this? Yet deal with it they must, because their role as opinion-formers within society, their pivotal position in the creation and dissemination of knowledge (research), and their contribution to their nations' human resource capacity marks them out as an essential site for the establishment of national, regional and global responses to the scourge of HIV/AIDS. A panel of experts from Botswana, Zambia, Uganda, Tanzania and South Africa gave 'snapshot' pictures of their own experiences, which was followed by a lively debate which picked up some of the many controversial issues, particularly those relating to cultural and religious factors, the threat to established sexual and moral norms and the need for openness in approaching sensitive and difficult subjects.

Mary Crewe, Director of the Centre for the Study of AIDS at the University of Pretoria spoke about 'activism' and explained how a "culture of critique" was necessary to urge transparency and accountability on the numerous NGOs, and government activist and voluntary bodies engaged in the struggle against HIV/AIDS. She spoke of the need to acknowledge private and public aspects of disease, as well as the political nature of certain institutions' attitudes - and, indeed, certain public attitudes - to the problem.

A student panel injected some energy and passion into the proceedings, presenting most eloquently the ways in which students are taking on the front-line tasks of caring for the sick and dying, supporting peers who are living with HIV/AIDS and taking the public health messages to the whole student population and through localised projects to the community at large. The substantive work was done in group sessions that followed the keynote presentations. Delegates identified, and then fleshed out the key issues, developing a framework for tackling these issues that flows from policy decisions through implementable strategies to key areas of direct intervention. Details of this framework, and other background documents, will be available from the ACU in the near future. In the meantime, the Communique was presented, through the appropriate channels, to the CHOGM, and the Commonwealth Knowledge Network on the Social, Demographic and Development Impact of HIV/AIDS was launched. A Policy Paper will follow, as some further work is necessary to complete it.

Professor Michael Adler of University College London summarised the Symposium's work succinctly and The Symposium ended with a passionate and eloquent speech by South African Health Minister Manto Shabalala-Msimang, delivered in her absence by an aide. She made the crisis very real with moving accounts of the impact of HIV/AIDS on ordinary people's lives, and ended with a plea to for a united front against the disease. "We need, truly and sincerely, with actions as well as words, to become a Commonwealth of nations in the fight against a common enemy". The overwhelming urgency of the need to confront this epidemic cannot be overstated. As delegates heard a number of times at the Symposium, effective interventions must be identified and put in place without delay. We cannot afford to wait - we must START NOW.