

## **IS AFRICA DRIVING FORWARD IN REVERSE GEAR?**

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Ever since the first publicly known HIV/AIDS case in Africa, the pandemic today constitutes a global emergency and one of the most formidable challenges to human life and dignity. It has compromised the enjoyment of human rights, which undermines social and economic development throughout the world at – national, community, family and individual levels. The scourge has continued to greatly influence key government policy decisions at all levels of management and is now acknowledged as a development catalyst as much as it is a health issue.

A survey done by UNDP shows that seven sub-Sahara African countries namely – Angola, Central African Republic, Lesotho, Mozambique, Swaziland, Zambia and Zimbabwe have experienced a drastic reduction of life expectancy to less than 40 years. This had tremendous negative implication for the future sustainability of these countries. In addition, the countries with the lowest level of human development in this year's global rankings are Burundi, Mali, Burkina Faso, Niger and Sierra Leone. What does this mean? It means that all the effort put in previous decades to bring development, health and education opportunities to Africa is being reversed. People are supposed to be living longer, child mortality is supposed to be reduced, improved health care services are supposed to be available to all but – alas! The driver seems to be trying to move forward in a reverse gear.

AIDS is not just a global calamity, stealing world headlines and with a potential to destroy economies but embraces massive power that seems to annihilate the entire continent. Unfortunately, HIV/AIDS did not find Africa at her peak of political harmony and economic utopia. The reality of the matter is that HIV/AIDS found the continent cumbered with pre-existing problems i.e. poverty, poor governance, civil strife, famine, illiteracy, brain drain to developed countries and also deep rooted traditional/cultural practices some of which provide fertile ground for HIV/AIDS infection.

In spite of constant and emphatic call by HIV/AIDS advocates and activists for governments and donors to allocate sufficient funds/budgets for aggressive national and community intervention, the results are far from impressive. Of course we take cognisance of the fact that some governments in Africa i.e. Uganda and Senegal have achieved substantial positive results. However, looking at the number of states or countries that make up this continent, two countries' success is a drop in the ocean.

With such a grim picture, several cardinal questions leave one wondering : (a) To what extent is HIV/AIDS a governance issue? (b) Who, in the Government is responsible for ensuring the AIDS issue is addressed by all and sundry? (c) Why is it taking so long to show encouraging results yet donors continue to support government, NGOs, faith-based organizations and community programmes? There is a growing concern that besides the all too common hype, on the part of the government authorities over HIV/AIDS, not much has been implemented on the ground as proof of governments' total commitment towards effectively fighting the spread of Aids in Africa. Nonetheless, we recognize and laud South African HIV/AIDS activists who have tirelessly fought and agitated for affordable antiretroviral drugs (ARV) for some needy people. Their campaign has seen generic drugs and patent rights given to manufacturing companies in Africa. The unfortunate thing is that the accessibility and affordability of ARVs is not directly related to government initiatives where it all should have started. I'm afraid that contrary to a popular public

perception, African governments are yet to come out clearly in all of their activities to prove that anything tangible is being done to win the war against AIDS if the continent is to move forward.

The tragedy here, is that governments appear gravely afraid to give the scourge that is killing people by their thousands a ready human face. The disease apparently is rarely mentioned by name unless the ordinary citizen is involved. One would be forgiven to assume that nobody of importance in their respective Government apparently has ever succumbed to AIDS even when conventional wisdom suggests otherwise. In some countries, senior government personalities have declared publicly that they are HIV positive. This however is rare and is taken with speculations and judgemental attributes. In Kenya for example, the public is just mesmerised. Why does the government treat HIV/AIDS as a bloodstained secret even when some of its own politicians and senior government officials are dying or have died of AIDS? What scandalous conspiracy of silence, this is! The phrase used when a Kenyan senior person dies continues to be: "He/she died after a long illness bravely borne. Bravely borne? One wonders whether the person was all that brave if he/she could not disclose the nature of their illness. Nobody, not even our 'protector' the government has enough courage to call AIDS by name. It was just this month (July 2004) when some Members of Parliament in Kenya went to a Voluntary Counselling and Testing (VCT) centre and offered to be tested for HIV. This provoked the residents of the Western part of Kenya to scramble for testing since their leaders have taken a major step in knowing their status. But again, how many are willing to take that step leave alone disclosing the HIV status?

Faith-based organizations are also being challenged to take a bold step and fight stigma and discrimination. One Member of Parliament in Kenya reported that politicians would not want to declare their status because of fear of losing elections. Senior religious leaders are equally to blame because they have not shown a leadership role in declaring their HIV status even though it is common knowledge that some of them have died of AIDS or are HIV positive. Until both governments and FBOs embrace the issue of HIV/AIDS and foster an environment of compassion, acceptance and non-judgemental attitudes, more and more people will either hide their status or refrain from going for HIV test completely.

Like its bewildered and scared citizenry, the Kenya government is really in a state of self-denial and being caught up in a time warp, a suspicious and selfish indulgence of shame, which can only blow holes in its avowed national HIV/AIDS agenda. By officially denying its very existence in its higher echelons, the only message the government sends to the people is that it's a crime, shameful and a sin to discuss AIDS as a killer disease.

The sum effect of this is that those already diagnosed to be infected with the virus fail to publicly reveal their HIV status or even seek assistance from the government. One wonders! What would happen if our President, his ministers and every Member of Parliament undertook to publicly undergo HIV testing? Doubtlessly, many more Kenyans would follow suit. And the fight against AIDS indeed, would be half won.

A major lapse on government is that it has fundamentally failed to address how best to translate these 'forum talks' into actual envisaged results for the benefit of the people. It would not be far fetched to say, "If meetings and speeches were to cure AIDS, Kenya would have won the war on HIV/AIDS ". The home-grown AIDS Constituency Committees mooted in recent past specifically failed even after funds were disbursed, for lack of either political will on the part of the government or due to corruption. The latter is a vice that still is rampant among government ranks involved in the battle against AIDS. Clearly, political leadership can only create a positive impact on this front if the twin issues of poverty and food security are adequately addressed. One

wonders what was the aim of creating a Cabinet Aids Team chaired by the President. What major gains has the key body achieved or aims to achieve?

Food is a crucial weapon against Aids and in Kenya, AIDS has continued to impair food security and development prospects, especially among the rural poor. Records show that between 1999 and 2002, over 58 percent of all deaths recorded in the Ministry of Agriculture alone resulted from AIDS-related afflictions. But the government must act fast since adequate nutrition helps in controlling progression of being HIV positive to full-blown AIDS.

The church, too, is yet to rise to the challenge of AIDS. Despite the fact it boasts of the largest platform for addressing the scourge, with 80 percent of Kenyans being Christians, the official silence of both government and church can only aggravate the epidemic.

Although it is common knowledge that even church leaders have died of AIDS, none has ever gone public about the cause of death. Until the point when the AIDS scourge, much less sex, won't be viewed as a sin worthy of condemnation, the pandemic whose greatest impact is in reduction of Kenyans' life expectancy from 62 to 47 years, will sadly continue to take a huger toll than it already has.