

# Deaths from AIDS dwarf war casualties in Africa

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Carol Bellamy, executive director of UNICEF, gave a sharp warning to the International Conference on AIDS and Sexually Transmitted Diseases in Africa held in Lusaka, Zambia this week. She described the devastating effects of the AIDS pandemic as “the world’s most terrible undeclared war”.

She explained that in 1998, some 200,000 people, most of them women and children, had died in armed conflicts on the continent but that 2 million Africans had died of AIDS in that same year. Explaining the devastating added impact of poverty on the AIDS pandemic she called on the world to “eliminate the staggering inequities and inequalities that are contributing to the spread of the pandemic—along with many other consequences of global poverty”.

The comparative figures for spending on HIV/AIDS in America and Africa sharply illustrate the inequality. America, with 40,000 new cases a year, spends around \$900 million, whilst Africa, with 4 million new cases a year, spends only around \$150 million a year.

The conference is the eleventh to be held. Three thousand participants, including African politicians, representatives of UN agencies and charities, scientists and medical practitioners attended it. It was opened by F. Chiluba, the president of Zambia, who said that “the HIV/AIDS epidemic on the African continent is not only severe it is also still spreading rapidly. Indeed, sub-Saharan Africa, especially Southern Africa, still has the fastest growing epidemic in the world”.

The organising chair of the conference, Professor Nkandu Luo, said in her opening report, “The HIV/AIDS epidemic on the African continent and in many parts of the developing world is extremely serious and is depriving us of the opportunity to advance our socio-economic, political and cultural development. It is arresting and even reversing some of the significant gains made in health and in other social and economic spheres.”

United Nations research into the spread of AIDS in Africa was released at the conference. This showed differences in the spread of the infection in four selected cities. The research revealed that the rates of infection related to the sexual customs and practices, but that a common theme was the lack of knowledge and denial by the authorities of the scale of the problem. Dr. Michel Carael of the UN AIDS office (UNAIDS) in Geneva led the research. He explained to the conference that the study did not attempt to determine why some people engaged in risky sex, but added, “If you want to change sexual behaviour you have to tackle poverty, migration and the broad picture.”

Dr. Peter Piot, the executive director of UNAID, addressed the conference, condemning governments in Africa for not responding quickly and effectively to the crisis. At the opening ceremony a declaration was made by governments to address the problem of AIDS/HIV in their development programmes, and yet no African head of state was at the ceremony. Dr. Piot also attacked Western governments for not responding to the crisis sufficiently: “As long as fighting AIDS is taken as business as usual, with little commitment, we shall fail.”

Callisto Madavo, vice president of the World Bank for Africa, spoke to the conference saying that the slogan must be “Intensifying Action against HIV/AIDS in Africa: responding to a development crisis”. With spectacular arrogance—given the impact which the World Bank/IMF structural adjustment programmes have had in creating widespread poverty in Africa—he declared: “The World Bank’s support to AIDS programmes declined in the past years. We all have not focused on the epidemic as much as we should.” World Bank officials are now promising a bigger proportion of loans granted to African countries would be specifically for dealing with AIDS/HIV.

Earlier in the week, Nigerian scientist Olikoye Ransome-

Kuti had criticised the World Bank. Funds were diverted to the political elite for their own enrichment, he said: "The World Bank estimates that due to inefficiencies, waste in supply of drugs, only 12 dollars worth of drugs eventually get to the patient out of every 100 dollars." Another delegate also attacked the World Bank and explained that its lending for the AIDS programme had fallen from \$67 million in 1994 to \$1.7 in 1997.

The scale of the disease in Africa continues to shock. But some UNAIDS experts think some of the figures on AIDS/HIV for Africa even may be an underestimation of the true position. In some countries it is very difficult to get accurate, up to date information, and they cite Nigeria and Ethiopia as examples. Nigeria is the most populous country in Africa, yet it has not published data for the last three years. UNAIDS calculates figures for current levels of AIDS/HIV infection using the old data and adjusting them to population increase, which probably underestimates the true levels of infection.

Recent UNAIDS published figures spell out the scale of the disaster. Of all the people in the world suffering from AIDS/HIV, 80 percent of them live in Africa. A fifth of all deaths in Africa are as a result of AIDS, accounting for 2 million deaths in 1998, and AIDS is now the leading cause of death on the continent. The rates of infection are concentrated in the south and east. Whilst there may be under-reporting in some areas, there are objective factors associated with the concentration in the south and east of Africa. Kenya, Tanzania, Zimbabwe and Uganda have borne the brunt, and South Africa is catching up fast. Zimbabwe and Botswana have the highest incidence of the disease. In Zimbabwe, life expectancy will have fallen from 61 to 39 by 2010 because of the AIDS epidemic. The south and east have more developed road systems, along with patterns of migratory work, which tend to increase the spread of the infection.

BBC reporter Greg Barrow made a journey to the Lusaka conference travelling through the areas that have been devastated, and showed the social, economic and personal effects of the AIDS epidemic. He recorded his journey on the BBC News web site. He started in Johannesburg, South Africa, then travelled through Botswana and Zimbabwe and on to Lusaka in Zambia. He explained that South Africa currently has the fastest rate of HIV infection, with 1,500 people becoming infected with the disease each day.

In Botswana Barrow went to its second largest city. Francistown is a stopover for lorry drivers who work the route from Zambia to South Africa. High levels of

prostitution in the city contribute to the spread of the disease. Pregnant mothers tested at maternity clinics show an alarming 43 percent with the disease. Botswanian society is very conservative, and there is little discussion of sex and how to combat the disease. AIDS is hitting the middle class as well, meaning professional and skilled workers are also dying.

In Zimbabwe, the disease is having an effect on the demographic structure of the population. The old and very young are becoming the majority. The disease is cutting down economically active young adults. The rate of infection is expected to rise to 30 percent in the next 20 years. The disease has been responsible for leaving around 13 percent of children as orphans. Barrow reported that the disease is also hitting the economy hard. He explained that at the Vitaform mattress and furniture factory in Bulawayo more than one worker is trained for each job. This is because of the high rate of loss of workers to the disease. Training more than one worker means they are able to maintain production in spite of the high casualty rate wrought by the disease.

It is a Zimbabwean custom for a business to meet the cost of a coffin and transport of the body if a worker dies. The impact of the high death rate from AIDS means many firms are under severe strain. He explained that at the UNICEF office in Lusaka, Zambia staff are given free condoms and receive sex education. Management have had to limit the days taken off by staff to attend funerals of friends and family dying from the disease.

Professor Nkandu Luo, who is also Minister of Health in Zambia, expressed thanks for the "empathetic overtures of support, like those recently proposed by the US, in the areas of AIDS education and treatment for Africa". This presumably referred to the recent White House meeting convened by Hillary Clinton with top international health officials, corporate CEOs, as well as leaders from the World Bank and UNAIDS.

Apart from such "empathy" and pious appeals at the conference for more action against AIDS from governments, aid agencies and religious leaders, there was no indication of any serious measures or finance being brought in to deal with the catastrophe.



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