

## **“Is there still denialism about HIV/AIDS in South Africa?”**

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Harold Wolpe Memorial Trust open dialogue

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### **SUMMARY NOTES**

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**Graham Falken:** What is your view on the “why” question?

**Rob** (Surname not audible): Tell us more about the political environment. We say we have a good political structure in this country. How can the President and the Minister get away with this?

**US medical student:** My question is the same as the previous one. Is there an element of ignorance, or is there political logic to these elements that I don't understand?

**Khayelitsha resident:** Why? Are we generalising things? I am not speaking in defence of men. I am just asking the question openly.

**Fatima Hassan:** The “why” question is one we ask ourselves everyday because it doesn't make sense. Reasons advanced by some elements suggest it was all the fault of the Internet. Anthony Brink of the Rath Foundation introduced President Mbeki to known AIDS dissidents, all currently working for the Rath Foundation. The President is taking this approach and was agreeable to meeting Brink. Whether this is true is arguable, but I personally think the kingpin of denialism is Anthony Brink, who rages about ARVs being toxic. His relationship with the President is first-class and also with Suresh Roberts.

We can't answer anything because why would the President not say anything to promote ARVs and say it is the best we have available now? I grapple with that question every day. ANC MPs will tell you they don't understand it either. The official party line of the ANC is that AIDS exists and poverty is a contributing factor. Pre-'94 documents of the ANC talk about drugs for people living with AIDS. Whether or not it is because of ignorance I think it is a deliberate rejection of Western orthodoxy. When you listen to the Director-General for Health they are in favour of traditional medicines and they see us as Western-oriented and that we are holding this country back in terms of its development – so I think it is deliberate.

I hope I don't sound like a conspiracy theorist, but the easiest way to dispute things is to say that your TB data is wrong and to say that the way you dispute about AIDS is slowing our GDP and to dispute the stats saying people are exaggerating and that the baseline data is wrong. It's a classical Stalinist way of undermining arguments by saying the data is imperfect.

With regard to political structures, the irony is that on any issue except HIV/AIDS every committee in Parliament will welcome you. Our democracy does work on issues except on AIDS, where it is only the party line which is different from the official ANC party line and that happens in Parliament.

We have asked the parliamentary committee on health why there has been no report since 2003. They report on other issues but not on AIDS. There are other political dynamics at play. This is why the Minister can get away with so much.

Since 2003 the operational plan has never received a report from the Minister despite all sorts of sectors asking her to put ARVs on the agenda. (Former deputy president Jacob Zuma was the head of this programme.)

The Minister can get away with it because she is the president's appointment. She will get away with it as long as he believes in particular denialist views. There would be no need for a Minister who exclusively promotes vitamins.

**Comment:** The president's denial is wider than that. It doesn't extend to Zimbabwe and unemployment. He recently said he doesn't believe in unemployment. It's a much wider problem.

**Questioner:** How does the denialism of the apartheid era compare with the denialism we are facing now?

**Terry Crawford-Browne:** In 1959 it was estimated that by 2010 it (HIV/AIDS sufferers) would amount to six million people. Two weeks ago Charlene Smith said that in KwaZulu-Natal it is 67% compared with 1% in 1990. Some time ago the TAC asked about charging the Minister and the president with genocide. I wonder if that has come up again.

**Parliamentary staff member:** It would be nice to hear from the perspective to touch on a comprehensive plan. We cannot force people to live openly and disclose their status. A month ago we had a day in parliament where people were encouraged to be tested. I am very concerned because we might be facing a crisis. The TAC, the government and the unions are said to be pushing their own interests. You need to give us the benefit of the doubt.

**Fatima Hassan:** Apartheid had a lack of response because we saw HIV/Aids as a black disease in the '80s and '90s. They only entered the debate late, so ante-natal clinics nationally averaged 27% of pregnant women now living with HIV. In KwaZulu-Natal it is much higher. You are looking at a massive increase in deaths and new infections. It would be unfair to compare them (the two eras of official involvement). For me as an ANC member and AIDS activist this is wise because these are our elected leaders and they are responsible. It is not a government of white people only. We have asked to meet with the minister and the president on many occasions and to increase the ARV programme and have been refused, but Brink and known dissidents get an audience with the president, and we don't.

HIV/AIDS has become a political football. The Democratic Alliance copies and pastes from our website and de-legitimise our demands. They are undermining the struggle against HIV/Aids.

With regard to the issue around genocide: one day when we retire and are based in Europe we will pursue charges. We did lay a formal charge and that forced a

turnaround in government's policies because international pressure and Jacob Zuma asked us to suspend our civil disobedience programme.

Parliament does some good work but it could do better on AIDS. In the three years since the operational plan was announced we have asked to make representations and we have not been given the opportunity. But when it comes to HIV everybody gets scared and you can't make any critical analyses because you are denounced as being unpatriotic. It is important for elected leaders if you hear these people coming out and saying they are using ARVs, you can imagine how convinced people will be if they have to decide between using ARVs and garlic. I would like to see MPs who stood up to greater state repression but can't do the same about Aids.

The operational plan for HIV is now treating 112 000 people. That is the full extent of what the minister tells parliament and journalists.

**Leslie Dundas:** In the original treatment plan there was a commitment to human rights and about discrimination. It never said anything about access to treatment as a right. When government is challenged it doesn't approach it as a rights issue. Do you think that is part of the problem? If the government had to accept a public rights obligation it couldn't get away with it.

**Questioner:** I am sympathetic to proportional representation but do you think what is happening, namely the reluctance of members of parliament, to stand up and speak about their own convictions, is linked to the fact that parliament is entirely based on proportional representation?

**Tamara Fredow:** What would be in it for you, for the TAC?

**Fatima Hassan:** The reason I do this work is because of a commitment to social justice and because you can make a difference. Thousands of pregnant women would not have got treatment without the court case and the 18 pilot clinics that were set up.

The treatment plan has expired and a new one has not been made available. We don't have a strategic plan for the next five years or a prevention plan. We need a proper prevention plan. People have admitted to not using condoms. We have a big zero on our prevention plan. The ABC campaign is not working.

We have framed the ARVs as a human rights issue and Nevirapine was an infringement of this. We are up against a government that is so caught up in the liberation style of leadership it has failed to understand what socio-economic rights mean.

If you look at government's response in the Grootboom case about it's obligation in regard to housing, the government doesn't understand the importance of what the constitution says. Our next case will be on food and water. For example, we heard government had set up a multi cluster committee from water, education and health to ask what the court cases mean. It has taken them some time to understand what it really means.

With regard to proportional representation, no, I think the reluctance is driven by fear and if you know how party political structures work you have to toe the party line. You can lose your privileges and that's what ANC MPs are not speaking out. You feel their fear of losing something. Dissent has to be contained.

Asmal is being sued by Rath because the Cape Times published a letter he wrote to Rath. Not one ANC member has come to his defence and they have not provided a legal team to defend the case. If you speak out you have to fight your own battles. It's the way in which everybody has been groomed.

**Annemarie Wolpe:** The DG has spoken about western medicines vs traditional cures. To what extent do you think this is an element in the denial? There is also the aspect of sexuality. It is such a vexed question in this country. There is the way in which it relates to power relations between men and women and the way in which women are set up for being HIV positive.

**Fatima Hassan:** I don't think it was meant to be an important element in the debate. Certain officials in the department can use it to discredit anyone who criticises a traditional product. It's a nice way of shifting the debate away from the real issues. The fact is that the people promoting these alternative cures are not African and not from South Africa. They are all Europeans and are promoting vitamins.

The TAC is marginalised as being a pharmaceutical front. "If you believe in indigenous knowledge you will support our view" is the argument. We say, bring the evidence and we say that to everybody, including the drug companies. I don't think it is an important element. What we always wanted in this country was a complementary approach to western and traditional medicines.

As regards sexuality, the (former deputy president Jacob) Zuma trial has brought to the surface the issues that women in this country face daily: rape and trauma. Until we empower women and give them water and housing you are not going to get to a situation where men and women are equals in a relationship.

We have many women in the TAC who have been raped several times. They are afraid of the criminal justice system because of what we see happening in the Johannesburg High Court right now. Until we address the gender imbalances and the fact that our gender, culture and religion are barriers to empowerment we won't get anywhere. We have to tell that head-on to our religious scholars.

(Prolonged applause).

**Annemarie Wolpe:** That was the longest applause anyone has received in our sessions.