

HIV/AIDS, Africa and 2003: Urgent Strategic Issues

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This year, 2003, will be an epoch year in the fight against the Human Immunodeficiency Virus (HIV) and the Acquired Immune Deficiency Syndrome (AIDS) in Africa for many reasons.

First, the international community has moved beyond whether to intervene to how to intervene in Africa. The Global Fund for HIV/AIDS, Tuberculosis (TB) and Malaria is a concrete example of the global resolve to fight HIV/AIDS in every part of the world, especially in Africa. Second, the multifaceted

struggle to provide lifesaving medicines to nearly 30 million Africans living with HIV/AIDS has changed from theoretical discussions to the logistics of providing care. Third, African nations are increasingly demonstrating their readiness to fight this deadly epidemic. Fourth, the pendulum of the epidemic is gradually but steadily shifting to Asia and former Soviet states, with the real possibility that scarce resources will be shifted to checkmate a nascent epidemic in these areas.

African nations have a unique

opportunity to seize the momentum in 2003 in the fight against HIV/AIDS. To seize the momentum, Africa will have to deal with key strategic issues in the fight against HIV/AIDS in the continent. I briefly review the following strategic issues:

HIV/AIDS Commission for Africa

I have written repeatedly in the past that Africa will have to establish a strong, efficient and effective central body to manage the epidemic. This central body could be one of the organs of the African Union or a new, nimble-footed organization that will assist Africa develop, deploy and evaluate its priorities in the fight against HIV/AIDS. Africans must have a vehicle for making their own decisions regarding what is best for the continent in the fight against this epidemic.

Mainstreaming HIV/AIDS priorities in New Partnership for Africa's Development (NEPAD)

HIV/AIDS is at the nexus of all development scenarios in Africa, and should be quickly streamlined into the NEPAD initiative. NEPAD may remain a mirage until HIV/AIDS

takes its rightful place in its scale of priorities. I hope that the streamlining is completed before the next meeting between NEPAD leaders and G-8 nations.

Take a firm stand and action on access to lifesaving medicines

The breakdown of post Doha, Qatar talks on access to cheap medicines for HIV/AIDS is discouraging. However, Africa, the continent at the receiving end of this epidemic, has maintained a deafening silence. This cannot suffice in 2003. The African Union meetings for this year should quickly take a stand and initiate action on access to lifesaving medicines for the nearly 30 million people living with HIV/AIDS in the continent.

Linking HIV/AIDS remedial efforts to debt relief and good governance

African nations need to aggressively push for accelerated debt relief linked with good governance. According to a United Nations HIV/AIDS relief project (UNAIDS), 16 African countries in 2001 spent more money servicing debts than on the health needs of their citizens. The President of Zambia, Levy Mwanawasa, recently declared his country's debt burden as intolerable. This is a country under the vice grip of HIV/AIDS and famine. Africa needs to make a strategic move on debt relief through accelerated or complete debt relief in return for verifiable accomplishments in good

governance. The peer review program of NEPAD could become a useful starting point.

The specter of uneducated homeless children roaming the streets of Africa during the next two decades may become the gravest threat of the HIV/AIDS epidemic.

Absolute commitment to free and fair elections

This is closely tied to the linkage of debt relief and good governance. The 2002 Kenya elections provided a road map on how African countries should organize free and fair elec-

tions. All eyes will now be on Nigeria, scheduled to hold its own elections in April 2003. Africa should end forever, the foreclosure of political choices for its citizens, since political leadership is one of the most important weapons in the fight against HIV/AIDS.

Begin to deal with AIDS orphans

Millions of African children are now AIDS orphans, and I am not aware of any credible continental plan to deal with this problem. The specter of uneducated homeless children roaming the streets of Africa during the next two decades may become the gravest threat of the HIV/AIDS epidemic.

Deal with the security implications of HIV/AIDS

According to the UNAIDS, a United Nations program, HIV/AIDS thrives in emergency situations and wars. AIDS among uniformed services in Africa range from 20-40% in some African countries, and as high as 50-60% in countries with more than a decade of high levels of infection, according to the UNAIDS. The situation is troubling since wars are still ongoing in many parts of Africa and the military is a stabilizing influence in many African countries.

Harmonize and increase the participation of major foundations

Africa needs to have a common strategy on how to engage major foundations that are interested in AIDS

remedial efforts in the continent. For example, a continental or even a regional plan on AIDS orphans could be the subject of a serious discussion/negotiation between NEPAD and major foundations such as the Gates and Wellcome Trust foundations. Foundations with deep pockets and talented program staff are likely to partner with proactive entities that promise economies of scale and multiplier effects of program activities.

Focus on the growing gender inequities of HIV/AIDS

As more African women become infected or affected by HIV/AIDS, it is critical that continental leaders should initiate a program of action that shields women from the economic, social and cultural mores that put them at risk. The AIDS orphan phenomenon and gender inequities are two major issues that have major repercussions for household and community coping mechanisms in the fight against the epidemic in Africa.

Stronger links with Africans in the West and Africans in the Diaspora

African immigrants in the West have to play a major role in the fight against HIV/AIDS. The key question is how to make this possible. The African Union is a major player on how to tap the resources for Africans in the Diaspora in the fight against the epidemic. This link is important if global attention moves toward Asia and the former Soviet Block states.



Focus on remedial efforts at grassroots level

For the past few years, a lot of HIV/AIDS activities in Africa focused on national plans, strategic plans, policy development and program analysis. Now is the time to move to the target communities and assist individuals and families struggling with the devastating effects of the epidemic. African leaders need to signal their collective desire to focus on potential, internationally funded but community-based HIV/AIDS remedial programs. Donors, bilateral agencies, multilateral agencies and civil society groups will take notice, and adjust accordingly.

Conclusion

Africa is currently the epicenter of the HIV/AIDS pandemic. This may change soon, especially the perception of where the global community may need to put its resources. This year, 2003, could become a watershed in global efforts to stop HIV/AIDS in Africa. African leaders and institutions should seize the opportunity to present clear priorities to the outside world and to back these priorities with renewed resolve and action.