

SCALING UP EFFORTS TO COMBAT HIV AND AIDS IN AFRICA

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In this very brief presentation, I want to address many the discussion points 1, 4 and 7.

Point 1 of course gets to the very heart of the quality of health care across the continent. There are many good examples of universal access but there are almost as many stories of where access has not worked. I think the central dilemma here is whether the provision of the drugs should fall under the budget of the health department or through donor funding or through a combination. In many cases this is combination funding – but the reality is that donor funding is fickle and always comes with many strings attached. Access can only be guaranteed with a firm supply of drugs.

The South African experience shows that women out number men quite significantly when attending clinics and seeking health solutions. This of course has all kinds of unintended consequences with women having to first know their own status and then dealing with the question of the source of infection, disclosure, fertility choices and privacy for treatments. Increased domestic violence has been one of the side effects if you like of an expanded treatment programme. But getting more people onto treatments also requires that people have far better access to nutrition and food security. HIV drugs are complex to take and need to be managed well and good nutrition is essential for their success.

Point 4 raises for me the question of the neglect of men. While it's acknowledged that we failed to address men in the early campaigns we are still failing to engage sufficiently with men and the patterns of patriarchy and paternalism. From question of concurrency, to issues of circumcision and testing we have seldom engaged with men and the construction of **masculinities** and the social pressures that they have to face – politically, culturally and economically.

We can't as the recent issues in Malawi have shown deal with masculine sexual preferences and indeed in SA, lesbian women have been abused and murdered. All of the gender issues touch on the questions of human rights and individual protection. We can keep on with programmes to support women and to promote equality, develop quotas for representation and aim for economic and social empowerment but unless we find ways in which men both wish to and see the need to change social relations, we will struggle – we need to find ways to develop gender work to create **social and sexual integrity - gender capital** if you like where the population understands gender beyond the easy clichés of women's oppression and men's rights.

Point 7 poses huge challenges. Do we expect the schooling systems to do this? Schools are increasingly asked to act as social welfare agencies and teachers are seldom equipped to do so – where do the church, cultural associations and community based organisations really fit in here. How do we work with young people given that they live in a world of technology fueled by the sense of instant gratification and a notion of entitlement along with the culture of bravado of drugs alcohol and the related issues of depression and fatalism? How do we create in young people a sense of pride (despite the way the international media always seems to wish to portray Africa) and how do we create a sense of a vibrant future surrounded by poverty and disadvantage.

Young people are unlikely to seek responsible health behaviour as a natural good of itself – we need to get them to see how this can develop their social identities. We also are battling with the clash of values and with the old vs. the new! As far as HIV and AIDS are concerned I think it lies in the education of desire. In the ways we have of working with young people to recognise themselves as sexual beings with needs, wants and desires and to find ways to get them to understand their behaviour and how to channel these needs.

For too long, we have couched what we want to say to young people through prohibition and denial. We don't find ways to give them exploratory language and the ease to talk about their needs and desires. We have alienated them through such programmes as the ABC campaigns with all its prevarications and indeed to be frank I think that we have literally bored them to death. How have we tried to engage with them? Do we give them a sense of leadership and citizenship? How do we engage with them to be critical thinkers who are able to challenge important things?

Finally how do we deal with the on going issues of globalisation and new forms of religious and economic imperialism along with the donor forms of post colonialism that are so difficult to challenge. The solution does not lie in calls for greater "Africanisation" or return to the strength of traditions of culture that cannot operate as they did in the new world order.

What Africa is facing is a New Scramble for Africa – through donor influence, through the ways various programmes and policies are supported or funded and the ways in which the East seems to be more neutral than the West. The ways in which China talks about Africa differs very little actually from the 1800's – what we need to do is to refine very carefully the strategic path that best serves the health and social need of all populations without compromising through calls for tradition, new colonialism or isolation.

Finally, it seems that all too often we are too ambitious – the MDG were incredibly ambitious – ambition often leads to failure and we need to be far more strategic and modest in what we aim to achieve in any given time frame.