

A Challenge to all Canadians

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The science of HIV/AIDS

Anybody interested in understanding the science and nature of HIV/AIDS, the effect of HIV on the human immune system, and the styles of an immune response in a human body, can access the huge body of literature that now exists and is readily available, including visiting relevant websites. Suffice it however, to note that AIDS (Acquired Immune-Deficiency Syndrome) is caused by HIV (the Human Immunodeficiency Virus). Unlike other viruses ever known to humankind, HIV directly attacks and hijacks the most important defensive cells of the human immune system, the CD4 or the 7 Helper cells. It then demobilizes and undermines the human immune system's capacity to defend itself against any other attacks from opportunistic diseases.

AIDS: A socio-cultural complex in Africa

Although there are four different modes of transmission of HIV/AIDS—the use of unsterilized syringes contaminated by the virus (a major factor in HIV/AIDS transmission in the U.S., especially amongst the intravenous drug users), mother-to-child transmission, blood transfusion, and unprotected sexual intercourse—it should be borne in mind that in Africa, especially in the sub-Saharan region, *the major mode of transmission is through sexual intercourse*, accounting for over 90 per cent of cases of infection.

And here begins the complexity of the spread and control of the disease, as a socio-cultural and psychological phenomenon, because sex is such a sensitive issue, such a private, secretive, emotional affair, that most people and communities shy away from discussing it openly.

Considering that many myths and cultural beliefs concerning human sexuality still exist and shape social behaviours in African societies, the pre-marital, extra-marital, polygamous, promiscuous and heterogeneous sexual behaviours and patterns amongst sexual partners, condoned or ignored by many communities, all conspire to complicate and undermine the efforts to fight AIDS in Africa.

Of the 42 million persons infected globally, 29.5 million persons living with the virus are found in sub-Saharan Africa, representing over 70 per cent of the total.

Unfortunately, we might get the impression that Canada and Canadians are getting fatigued and overwhelmed by the enormity and horror of the AIDS pandemic in Africa

and that perhaps they are considering giving up altogether their collective involvement in the fight against HIV/AIDS in Africa, probably on the grounds that the situation is desperately beyond hope.

The Canadian response

It is of note, however, that the most eminent personality and highly celebrated leading international voice on HIV/AIDS, and indeed, the UN Special Envoy for HIV/AIDS in Africa, Stephen Lewis, is a Canadian. Mr. Lewis has been truly a gift of hope and compassion to the multitudes of people infected and affected by AIDS around the world.

I know of no other person in our time who has so passionately, so emotionally, so tirelessly and so eloquently talked about the horrific suffering and death brought about by AIDS and what the affected communities and their national governments, together with the international community, should do.

If Canadians have not been aroused enough to heed the call-for-action appeals by Stephen Lewis; if his graphic presentation of the crushing effects of the HIV/AIDS pandemic in Africa has not moved Canadians enough to a point of feeling a sense of moral obligation to take appropriate actions, or even a sense of guilt for not doing enough at the horror of senseless deaths, it is a major challenge to try to do so.

On the other hand, I have the strong feeling that Canadians, well-known internationally for their compassion, generosity and charity; and usually well-considered in Africa and other parts of the developing world as the human face of the West, would probably be the last people to require prodding and encouragement to participate in a global challenge of rescuing the millions of Africans who are both infected by the deadly virus and are at the same time trapped in poverty.

I would have thought that any international gesture of compassion and care to support the millions of AIDS orphans left behind in Africa would be pouring from the passionate hearts and generous hands of Canadians, owing to the perception of Canada's international personality around the world as a humanitarian and caring nation.

I therefore reckoned that nearly two decades of the ravaging HIV/AIDS pandemic in Africa, hitting disastrous proportions, was a long enough period of time for a country best known for her generosity to be touched in a decisive manner likely to invoke a sympathetic and empathic response.

But surely Canada and Canadians have responded, and they have done so in many important different ways. And perhaps before I venture into the business of calling for greater Canadian involvement in the fight against AIDS in Africa, it would be fair to acknowledge and appreciate what Canada and Canadians have done with regards to HIV/AIDS in Africa.

As a government and its relevant agencies, through Canadian civil society organizations and charitable institutions, as private individuals of good will, Canada has been deeply involved and effectively engaged in the fight against HIV/AIDS in Africa. Canada was the first industrialized country to bring forth groundbreaking legislative changes, Bill C-9, to allow Canadian companies to provide generic anti-HIV/AIDS drugs

to African countries at low cost. It is our sincere hope that this piece of legislation becomes law and takes effect sooner rather than later.

For the record and by way of recognition and appreciation, the Canadian International Development Agency (CIDA) has been supportive in the fight against AIDS in the sub-Saharan region. In the 2005 budget, Canada pledged to double her development aid to Africa over the next five years, marking a further contribution of an additional \$140 million to the Global Fund to Fight AIDS, Tuberculosis and Malaria. CARE Canada, which incidentally is the lead agency amongst the international family of CARE in Kenya, has also been at the forefront of the anti-AIDS initiative, care and support for orphans in the sub-Saharan region.

The Stephen Lewis Foundation is another Canadian entity working with front-line groups and CBOs on the ground in responding to the urgent needs of those infected and affected by the pandemic, and by providing relief support.

A Canada-based International Council of AIDS Service Organizations, (ICASO), with regional secretariats based on all continents, works to strengthen the community-based response to HIV/AIDS by connecting and representing NGOs throughout the world.

And there are hundreds of groups of ordinary Canadians of good will who empathize with the AIDS situation in Africa and make various contributions to the wide array of requirements in the brave fight against AIDS and its consequences.

The Growing Concern

So why is there a growing concern for greater Canadian participation in the anti-AIDS war in Africa? Where are the gaps in the various Canadian responses to the AIDS crisis in Africa? And why Canada?

AIDS is still a humanitarian disaster: a collective challenge for mankind

AIDS is still a humanitarian disaster and remains a nightmare for the world, especially for the people of sub-Saharan Africa.

To date, more than 60 million people around the world have been infected with HIV. Twenty million people have died while more than 14,000 people are infected with HIV every single day. And every day, AIDS kills 8,000 people, leaving behind orphans, hopelessness and despondency amongst the affected communities.

During the closing ceremony of the International AIDS Conference in Bangkok in July 2004, the former President of South Africa, Nelson Mandela, an African icon, and a leading anti-AIDS champion, made the following sombre observation:

“The fight against AIDS is one of the greatest challenges the world faces at the start of the 21st century. I cannot rest until I am certain that the global response is sufficient to turn the tide of the epidemic... The importance of tackling this issue should not be undermined by the many other problems that

confront global society today. In the course of human history, there has never been a greater threat than the HIV/AIDS epidemic. Our attention to this issue cannot be distracted or diverted by problems that are apparently more pressing. History will surely judge us harshly if we do not respond with all the energy and resources that we can bring to bear in the fight against HIV/AIDS.”

In the developing countries of Africa, entire economies, already weak due to a combination of both historical and Cold War factors, are constrained because HIV/AIDS is killing millions of members of the labour force.

Moreover, the sub-Saharan region has been a theatre of political instability, resulting in intra-and inter-state wars and internecine conflicts, which in turn lead to massive flows of refugees. In some of these conflicts, colonial legacies, weak state institutions and vested interests of military, industrial, corporate and media complexes in western countries have been at play.

The immediate effects of the AIDS pandemic in Africa, manifested in the ever-increasing chilling statistics of AIDS-related deaths, the sheer numbers of orphaned children left behind, and pathetic images of orphan children taking care of their siblings and the rising number of child-headed households have continued to stare us in the face, while the overall long-term impact on the development of Africa cannot be fathomed as yet.

As Stephen Lewis puts it, “The situation of people living with AIDS and dying of AIDS in parts of Africa is so desperate that even the most basic help will bring solace and hope.”

In the words of another compassionate Canadian, John Watson, President and Chief Executive Officer of CARE Canada, “the misery of the AIDS pandemic continues its slow burn through sub-Saharan Africa. The numbers are staggering. One would have to go back many centuries in history to find similar death rates caused by the Black Death in Europe. Even this comparison does not do justice to the challenges thrown up by AIDS which kills people in the prime of their productive years leaving the very young and very old to cope with the aftermath.” Individual and national efforts towards development will continue to be drawn in and siphoned up by the AIDS pandemic.

As a humanitarian disaster, AIDS poses a collective challenge to mankind and it therefore behooves all of us to declare total war against AIDS, and design well-coordinated international responses, such as the kind of concerted response the world witnessed during the tsunami disaster, to save those already languishing under its brutal clutches.

Most Africans cannot imagine Canadians, well-known for their large hearts, to bear the horrendous and unsightly pictures of the atrocious blow of AIDS in Africa on television without feeling a sense of moral compunction, and the desire to make a difference in those devastated lives. They therefore stand challenged alongside the rest of the international community to become more fully engaged in the fight against AIDS in Africa.

In this regard however, most people in Africa are looking toward Canada, to show the way and lead the international community in a deliberate humanitarian manner to

mitigate the untold sufferings of the people living with, and dying of AIDS and the ever-increasing number of AIDS orphans on the African continent.

The call to action therefore entails an urgent need to support those dying of AIDS with human dignity; to extend a hand of care and compassion to support AIDS orphans; and to render assistance and back-stopping support to People Living With AIDS (PLWAs) and their associations in whatever way we can, bearing in mind that it is a moral obligation and responsibility of humanity to save mankind. We all therefore face a collective challenge, as mankind, even at a personal level, to make a contribution towards salvaging the African continent so mercilessly ravaged by this deadly scourge.

Changing attitudes in Africa: an historic opportunity for Canada

Secondly, suffice it to say without any fear of contradiction, that ever since the first cases of HIV/AIDS were diagnosed and reported in Africa in the early and mid-80s, there has never been such a formidable amount of good will, and a high-level visibility as well as active involvement of African governments, civil society institutions and eminent personalities in the fight against AIDS in Africa, as there is today.

Regrettably, one major drawback in the fight against HIV/AIDS in Africa at the beginning was that most governments in Africa, along with many religious institutions and cultural leadership, took a long time even to accept that HIV/AIDS was a reality. They delayed to respond in meaningful, systematic and sustainable ways to the disease because of the fallacious belief that HIV/AIDS was a disease of personal choice; that it was a result of irresponsible sexual behaviour; that only people with certain sexual behaviours and orientations could contract the virus, and that it was a form of a curse or natural retribution. And so for a long time, AIDS was only seen as a disease of specific deviant categories of people in society, not at all as a long-term disastrous threat to the very mainstay and survival of society.

The exception was Uganda, where President Museveni adopted a policy of openness in discussing HIV/AIDS-related matters, including public declarations of HIV/AIDS-related deaths, while effectively playing an early leadership role in rallying together a formidable national crusade against HIV/AIDS. He personally championed a well-coordinated, multi-sectoral approach using the strategy of ABC, or D.

However, most African countries at the beginning were still gripped by the conspiracy of silence and tendencies of inertia by their national leaderships. The culture of fear and denial by those infected persons, and the terrible sin of stigmatizing, marginalizing and ostracizing people infected and living with HIV by members of the community and wider society, was prevalent.

In Kenya, for instance, the first response to the HIV/AIDS epidemic in 1985 was a very low-key arms-length approach. Because of the conspiracy of silence, the disease enjoyed a whole 15-year grace period, spreading unfettered, mercilessly harvesting and devouring its innocent and helpless victims, killing indiscriminately.

It was not until 1999 that the government of the day succumbed to both local and international pressure to declare AIDS a national disaster. It then developed a national framework for intervention and mitigation, but the national prevalence rate had already

shot up to an average of 17 per cent, while over 1.5 million AIDS-related deaths were registered, with 2 million people infected, and over 200,000 children left behind as AIDS orphans.

However, today, throughout the length and breadth of the continent, the echoes of the clarion call by Nelson Mandela of South Africa, Kenneth Kaunda of Zambia, President Museveni of Uganda, President Kibaki of Kenya, Obasanjo of Nigeria, Wade of Senegal, and Zenawi of Ethiopia in the Horn of Africa, among others, reverberate relentlessly, rallying governments, civil society institutions and communities to stand up and bravely fight against the AIDS pandemic.

African leaders are now recognizing that AIDS is a major threat to human life and national development, and they are declaring that it is a priority concern. They, together with the plethora of African grassroots initiatives that have sprouted in response to the AIDS pandemic and the increasing number of orphans, are appealing to the international community, crying out for help and assistance. With these fast-changing and encouraging attitudes, Canada has an historic chance to demonstrate what she is best at, and for which she enjoys respect abroad: celebrating humanity in its diversity.

It should therefore be good news for Canada, and an encouragement for front-line Canadians who are already involved in one way or another in the brave war against AIDS in Africa, that with this appreciable measure of good will and commitment on the part of African governments and local communities to deal with AIDS with the seriousness it deserves, a new opportunity to play a more active leadership role in the campaign against HIV/AIDS in Africa now presents itself for Canada.

Appropriate Infrastructure—Besides the good will, there now exists, in almost all African countries, definitive policy frameworks, national structures for AIDS control programs, with clear intervention and mitigation guidelines, as well as reasonable public health infrastructure for anti-AIDS crusades and interventions.

Never before has there been such an incredibly encouraging sense of commitment and unanimity of purpose, by national governments, the health departments and agencies, the political, religious and cultural leadership in Africa, as in this urgency to mount a multi-sectoral response against the HIV/AIDS scourge.

Divided world, divergent priorities: Africa risks further marginalization

Thirdly, our world is still divided between the rich developed countries in the North and the poverty-stricken developing countries of the South, with divergent priority interests. We are confronted with many unprecedented global challenges and flash points, such as the recent tsunami disaster, escalating global terrorism, the volatile Middle-East situation, the conflict in Iraq, the humanitarian crisis in the Darfur region of Sudan, the deplorable conditions of abject poverty in other parts of the developing world, all competing for equal attention and resource allocation. The HIV/AIDS disaster in Africa could easily be relegated to the periphery and finally into oblivion.

Indeed, the gravity and urgency of the December 26th tsunami disaster in southeast Asia and parts of eastern Africa not only evoked an unparalleled global humanitarian response, but has also caused genuine fear that it might consume all the attention and international focus for a long time, at the expense of other equally ravaging disasters such as HIV/AIDS in Africa.

It was no wonder therefore, that the international aid agencies working in Africa raised concern in the wake of the outpouring of compassion, aid support and financial commitments for the tsunami victims and survivors, that people around the developed world do not appreciate the magnitude of HIV/AIDS, which continues to claim lives daily more than the deadly tsunami.

Perhaps it was a rare combination of the effective way by which the media covered the tragedy, the deaths of citizens of many western countries, and the fact that the tsunami was simply a natural disaster clearly beyond human control, that contributed to the stunning outpouring of humanitarian passion and generosity.

However, whatever the reason and cause for such a rapid response to the tsunami, the AIDS situation in Africa has not been able to attract such a monumental response despite its enormity and devastation in Africa.

Most of the developing world looks to Canada as a humanitarian nation able to undertake the honourable task of leading the international cause against AIDS in Africa.

Treatment and the search for an HIV/AIDS vaccine

Beyond the bill: the three "A"s of ARVs. It is undoubtedly a great step in the fight against HIV/AIDS for Canada to legislate the provision of generic anti-HIV/AIDS drugs to African countries at low cost. However, when Bill C-9 is finally passed into law, ARV therapy must be available, accessible and affordable for the majority of infected people. Treatment of people living with AIDS must today be part of the anti-AIDS business, especially considering that over 20 million deaths have been caused by AIDS, while 99 per cent of those infected have no access to treatment.

Developing an HIV vaccine. In a world where people are infected every day, the majority of whom live in sub-Saharan Africa, the need to find and develop effective methods to prevent HIV/AIDS remains an urgent priority. An HIV/AIDS vaccine is the best long-term hope for this disaster and as we are told by the International AIDS Vaccine Initiative (IAVI), "An AIDS vaccine is possible; overcoming the challenges will take a sustained focused effort. Developing an AIDS vaccine to save lives and economies will be one of the world's greatest achievements. Not to do so would be one of its greatest failures" (IAVI website, www.iavi.org).

Quest for leadership for a global anti-AIDS movement

The gap for anti-AIDS global leadership and coalition is evidently yawning; the quest for an international champion to coordinate all the brave and heroic anti-AIDS

efforts in Africa and other badly affected parts of the world could not be more urgent than now. Ever since its onslaught, the war against AIDS in Africa has been left in the hands of community-based organizations, civil society institutions, international charitable organizations, multilateral agencies, such as UNICEF and UNAIDS, and relatively much later, the departments of health of various national governments, without any clear global champion, either as a single state, or an alliance of states, or international lobby grouping of individuals or organizations, providing the requisite leadership.

Canada not only has a greater potential of providing that global leadership in the war against AIDS, but has already shown such abilities in the past, as an international peace and security keeper; as the crusader for the debt-relief and favourable trade regimes for the heavily indebted developing countries; and recently with the G-8 summit in Kananaskis in 2002, where Canada exemplified her global capacities by taking the lead in raising Africa's profile on the world's agenda.

There is little doubt that Canadians of good will, in concert with the Canadian government, the vibrant and pro-active civil society and charitable organizations in Canada, together with the support of the corporate sector, are capable of successfully rallying Canadians and the rest of the world around the anti-AIDS cause—to raise awareness and motivate action against the deplorable plight and needless deaths of millions of Africans.

What needs to be done is to lobby, garner and marshal the collective political good will and commit the leadership to spearhead a global movement, involving all the broad segments of society, and one would expect that Canadians would characteristically oblige. It would be an interesting flow in history that Canadians and their diverse leadership would once more take upon themselves to spearhead the anti-AIDS crusade around the globe, and lead the world towards *a world without AIDS!*

His Excellency Peter Ogego is the High Commissioner to Canada for Kenya.