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**The Sowetan (Johannesburg)****19 September 2001****AIDS Arithmetic Won't Help Mbeki**

By Timothy Trengrove-Jones

**ANALYSIS**

In recent times our public discourse about HIV-AIDS has been characterised by a willingness to be distracted by red herrings. This was as true of the "debates" over whether HIV did indeed cause Aids as it was of speculation as to whether the late Parks Mankahlana did indeed die of AIDS or whether Peter Mokaba was indeed HIV-positive.

Now, we seem about to plunge into yet another useless debate, sadly, initiated yet again by President Thabo Mbeki.

Citing World Health Organisation (WHO) statistics from 1995, the president requested that Minister of Health Manto Tshabalala-Msimang act on "the proposal made by the presidential Aids panel that ... an investigation be made of the HIV and AIDS statistics that are regularly peddled as a true representation of what is happening in our country". According to WHO figures of 1995, "HIV disease" was placed as number 12 on a list of the top 29 causes of death.

In response to the "howl of displeasure" that, as the president had predicted, greeted the publication of this letter, the health minister has moved quickly to deny that the president's intervention implied cuts in Aids spending. Supporting her view, she points to a R90 million contract awarded recently to "strengthen the prevention component of our campaign".

However, in the same parliamentary briefing last week the minister announced the Government's intention to oppose the action brought against it by the Treatment Action Campaign (TAC) and others who are demanding that the Government make Nevirapine available in the public health service to pregnant HIV-positive mothers as well as draw up a treatment programme for country as a whole.

"I am telling you. I have calculated and I can't afford it. For me it is not affordable," the minister said referring to the matter of anti-retroviral therapy for South Africa's almost five million people living with HIV-Aids.

The president's letter refers to obviously outdated statistics and does so in a way that seems designed to dilute the urgency other branches of the Government, NGOs and UNAids are trying to bring to the debate. Furthermore, his remarks are made very possibly in the light of new statistics from the Medical Research Council (MRC), headed by his one-time friend, Professor Malegapuru Makgoba.

The MRC report stated that by the year 2000 Aids had become "the biggest single cause of death". The president's letter was written on August 6, but the MRC report has been ready

since May. If the president's office is ignorant of the latest findings, heads should roll. If the president is aware of the figures but chooses to ignore them, it is scandalous evidence of denial.

TAC spokesman Nathan Geffen has branded the president's use of 1995 statistics as "unscientific and irresponsible". Geffen states that "there is a wealth of evidence produced by respected researchers which indicate that HIV is the single biggest cause of death in South Africa".

The current dispute over statistics must not be allowed to become yet another red herring with consequent catastrophic consequences for the struggle against HIV in this country.

The Government's own statistics tell us that around 250 babies are born HIV-positive every day.

Last week Tshabalala-Msimang again asserted the costs argument when she announced her intention to oppose the TAC action. The TAC is calling for Nevirapine to be made available in the public health sector. Studies by noted economists have shown such treatment is both cost-effective and affordable. Making Nevirapine available to pregnant mothers is envisaged as part of a wider treatment plan.

The fact that the Government cannot afford to give anti-retroviral therapy to all in the country who need it, does not justify withholding Nevirapine from pregnant mothers.

Characteristically, the minister's response invokes an obstructive "all or nothing" paradigm. Section 27 of the Constitution provides that "everyone has the right to have access to health care services, including reproductive health care".

But Section 27 as a whole is a clear indication of how the Constitution links civil and political rights with socio-economic rights. At this moment in the debate, rather than getting sidetracked by arguments over whether Aids is not the country's biggest cause of death, we should note that the argument between the TAC and the Government over Nevirapine hinges on the key question of resources in any attempt to enforce a socio-economic right.

In this debate it will not be enough to simply assert that it "is not affordable". The state cannot quibble over a hierarchy of causes of death. It will need to show convincingly that it has used its resources in such a way as to adequately meet its obligation to provide the progressive realisation of the right of access to health care and reproductive health.

It should also be remembered that the TAC has always acknowledged the problem of scarcity of resources. What is at issue is whether the Government is utilising its resources in the most effective ways and whether, beyond that, it is pursuing economic policies compatible with economic growth.

There are any number of reasons the Government might wish to downplay Aids statistics. Chief among these is the fact, as the president has insisted, that HIV-Aids is an index of poverty.

As Mark Heywood of the Aids Law Project puts it, "economics - not solely but largely - determines vulnerability to HIV". Black people are both poor and vulnerable. Such people are, very largely, the president's constituency. In the new South Africa, the majority has been liberated into citizenship. But there is evidence - the recent Cosatu strike, for instance - of growing dissatisfaction with social conditions. Given the widespread suffering caused by HIV-Aids here, it is likely that the illness will fuel this dissatisfaction. No wonder some in the Government wish to dispute figures that point inexorably to a crisis.

Our citizens cannot afford to be once more distracted by red herrings or to engage in denial. Whether HIV-Aids is the single biggest cause of death is largely irrelevant. The absence of a treatment plan means that those with the illness will suffer preventable death. To say anything that denies or diminishes this reality is to be guilty of gross discrimination.

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