

## **Mail & Guardian (SA) The lost continent?**

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Pieter Fourie: Comment | South Africa

The United Nations has embarked on a research project to determine how the Aids pandemic will affect Africa's future.

In December UNAids and Shell International announced the \$2,7-million (about R21,9-million) project to learn more about the effects of the pandemic on the continent. Over the next year the oil company's experience in scenario-building will be combined with UNAids's experience on the ground to produce three or four likely scenarios for Africa.

And the factors the researchers must consider are dire indeed. Whole villages have already been wiped out; economies and important economic sectors are under threat; morbidity and mortality levels among economically active populations are so high that national gross domestic product (GDP) levels have been dropping significantly; and any talk of an African renaissance is met by looks of disbelief overseas. Despite this reality, even Africa's messianic New Partnership for Africa's Development document only mentions HIV four times in 57 pages.

But the study is not about the present. The research team is most concerned with the future of what The Economist calls The Lost Continent.

Any analysis of Africa's possible future is necessarily rooted in the present — we can only work from what we know. And what we know is shocking. Infection levels of people aged between 15 and 49 in Southern Africa Development Community (SADC) countries are edging above 20%, and are about 40% in Swaziland, Lesotho and Botswana. Five million South Africans are HIV-positive, more citizens than in any other country.

Low levels of foreign direct investment can be expected from northern trade partners, which will harm the continent's ability to build indigenous capacity for industrialisation. Science and technological developments in Africa will lag and the continent risks being reliant on the production and export of primary products. Africa receives less than 2% of global equity and fixed capital flows — less than in the 1970s.

Given the levels of poverty and the effect HIV has on morbidity levels in rural households, primary agricultural products will come under threat. With less food security, families will be forced to abandon commercial farming for the sake of subsistence.

Conflicts in the Democratic Republic of the Congo, Uganda, Sudan, Eritrea, Burundi and elsewhere on the continent are coming to an end. But HIV/Aids threatens peace efforts and may even re-ignite old conflicts. With states incapable of accommodating refugees, or providing food and water security to their populace, and with an external environment unwilling to do much to remedy the situation, interstate conflicts could flare up once more.

The irony is that HIV/Aids has been spreading in Africa because of these conflicts. Sexually active young men are uprooted from home communities to fight across the continent and provide rich breeding grounds for increased infections.

The CIA warned in the early 1990s that high levels of HIV infection could lead to state decay in Africa. Given the fact that good governance is already under threat, this does not bode well for the future of young democracies.

African states are faced with significantly lowered levels of economically active populations.

GDP levels will drop and those commercial sectors that are seminal to the development of African economies — labour-intensive primary product production and export-directed manufacturing industries — are increasingly left without a productive work force. Copper mines in Zambia and gold mines in South Africa will be threatened.

Desperately ill people are already being turned away from hospitals in Swaziland and over the past few years more teachers have died in the SADC countries than are being produced by teacher colleges.

Governments will have less capacity to respond to the disease. Departments of health and public healthcare facilities are already unable to cope with the demand for even the most basic care.

High morbidity levels in the justice, police and military services — between 60% and 80% of Zimbabwean police and military personnel are HIV-positive — may lead to pockets of anarchy and increased crime.

Millions of Aids orphans will drain the monetary reserves of countries that can least afford it. The implications for democratic consolidation, a functional justice system, civil unrest and broader economic development are dire.

Children will be taken out of schools to look after sick parents, the elderly and the very young. Girls are vulnerable to being sold to older men for the sake of familial subsistence, and widows with land will risk having their property taken by their husbands' relatives in countries such as Zambia, Gabon and Nigeria.

Social theory has been silent on a proper intellectual and developmental response to the effects of HIV/Aids at the household level. This has meant that cultural practices fanning the disease have been ignored by makers of public policy.

African governments should be at the forefront of responding to the crisis, but political correctness, denial and intellectual prevarication have led to a situation that seems beyond the grasp of any intervention.

Interventions should be made at all levels. The international community should do what it can to help — particularly with the provision of anti-retroviral drugs. Regional organisations should build on their carefully contrived, but essentially impotent health charters and focus on the implementation of public and private policy responses. Governments should cease their denial of the reality begat by HIV/Aids and act accordingly — as soon as possible.

Without such a pan-African, realistic and urgent intervention that has been informed by the most frank and recent information available, Africa will forever remain the lost continent.

Pieter Fourie is a lecturer at RAU University's department of politics and governance. His doctoral thesis deals with the public policy implications of HIV/Aids in South Africa. He recently attended a workshop on UNAids and Shell's scenario-building project on HIV/Aids in Africa