

HIV/AIDS AND AFRICA'S FUTURE

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In December 2002 UNAIDS and Shell International announced a joint research project worth US\$2.7 million to learn more about the purported impact of the AIDS pandemic on the African continent. Over the next year, Shell's substantial experience in scenario-building will be combined with UNAIDS's experience on the ground in order to produce three or four likely scenarios for our continent. It is significant that one of the world's largest multinational corporations combines efforts with the United Nations' agency that deals exclusively with the pandemic and its impacts. What are some of the variables that the research team will need to take cognizance of?

In Africa, people are already dying; whole villages have been wiped out; economies and important economic sectors are already under threat, the morbidity and mortality levels among economically active populations are already so high that national GDP levels have been dropping significantly, and any talk of an 'African renaissance' is met with looks of disbelief. And despite the reality of this, even Africa's messianic NEPAD document only mentions HIV four times in 57 pages.

But the UNAIDS/Shell study is not about the present – the research team is most concerned with the future of what *The Economist* calls 'The Lost Continent'. However, 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.

The African continent is the worse affected and most infected area of the planet. Infection levels of 15 to 49-year olds – in Southern Africa Development Countries (SADC) specifically – are edging above 20 per cent, and are around 40 per cent in Swaziland, Lesotho and Botswana. The continent is also home to the most infected country in terms of absolute numbers: five million South Africans are already HIV-positive.

The impacts of the status quo will be felt not only in the immediate future – in terms of governance, macro-economic planning, public and private policy interventions, foreign direct investment, and so on – but will reverberate throughout the continent for decades to come.

The extra-continental level

At the extra-continental level, the African state of affairs will lead to low (if any) levels of foreign direct investment from its current 'Northern' trade partners, which will have a negative impact on the continent's ability to build indigenous capacity for industrialisation. Science and technological developments in Africa will lag, and the continent might run the risk of forever being reliant on the production and export of primary products. Africa is already the recipient of less than 2 per cent of global equity and fixed capital flows – which is even less than the share of global FDI it received during the 1970s.

Given the levels of indigence already present and the impact that HIV currently has on morbidity levels in (rural, but increasingly urban) households, the very lifeblood of African economies – primary agricultural products – will come under threat. With less food security at the household level, families will be forced to abandon commercial farming for the sake of subsistence. This might be exacerbated by an international donor community that is already prone to 'Afro-pessimism' – why assist one's cousins on the Dark Continent who have no promise of meaningful survival if one could do more visible work (with better promise of return on investments) with one's brothers in Eastern Europe and other, better-developed regions?

The continental level

Trans-continentally, Africa is exiting an era of military strife. Conflicts in North Africa, the Democratic Republic of the Congo (DRC), Uganda, the Sudan, Eritrea, Burundi and so on are coming to an end. Although these developments have been met with great optimism on the continent, HIV/AIDS holds the ominous promise of countering peace efforts and even re-igniting old conflicts. With individual states incapable of accommodating refugees, providing food and water security to their own populace and

with an external environment ostensibly unwilling to do much to remedy the situation, military inter-state conflicts could flare up once more.

The horrible irony is that HIV/AIDS has been spreading on the African continent due to exactly these kinds of conflicts, with sexually active young men uprooted from home communities fighting across the continent, feeding the sex work networks and providing rich breeding grounds for increased infections. The American Central Intelligence Agency (CIA) warned the early 1990s that high levels of HIV-infection could well 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.

The national level

Nationally, African states are faced with the reality of significantly lowered levels of economically active populations. GDP levels will drop and those commercial sectors that are particularly 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 shown away from hospitals in Swaziland, over the last few years more teachers have died in SADC than are being produced by teacher colleges and South Africa's neighbours are increasingly bearing the brunt of South African economic xenophobia and concomitant trade mercantilism.

Also, the capacity of governments to respond to the impact of the disease will be negatively affected: national departments of health and public health care facilities are unable to cope with the demand for even the most basic care; high morbidity levels in the justice, police and military services (for example, between 60 and 80 per cent of Zimbabwean police and military personnel have been found to be HIV-positive) may well lead to pockets of anarchy, increased property crime; the presence of 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.

The household level

At the household level, children will be taken from schools to look after sick or dying parents, the elderly and the very young. Girl children in particular are vulnerable to being sold to older men for the sake of familial subsistence, whilst widows with land will bear the brunt of 'property grabbing' by their husbands' relatives in countries like Zambia, Gabon and Nigeria. Social theory has been savagely silent on a proper intellectual and developmental response to the impact of HIV/AIDS at the household level. This has meant that cultural practices fanning the disease and entrenching its impact have been left unaddressed by public policy-makers.

Where does this leave us?

The impacts of the HIV/AIDS epidemic in Africa's future will be significant, and almost unfathomably negative. The disease has the capacity to lead to another 'lost generation' across the continent, impacting on all levels – international, regional, national and household. Clearly, the issue needs to be addressed. But how? Logically, African governments should be at the forefront of responding to it, but political correctness, denial and intellectual prevarication has led to a situation that at times seems beyond the grasp of any intervention.

It is clear, however, that intervention should happen at all levels: the international community should do what they can to assist and facilitate Africa's response to the disease (particularly with regards to access to anti-retroviral drugs), providing the multilateral context within which an appropriate and nationally applicable response might be phrased. Regional organisations should build on their carefully contrived but essentially impotent health charters and focus on the implementation of public and private policy responses. National governments should cease their denial of the reality begat by HIV/AIDS, and act accordingly – and 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, the African continent will forever remain the 'lost one'.

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