BBC Talking Point Programme

Transcript of H.E. the President Festus Mogae's interactive interview

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(BBC Opening): President Festus Mogae is leader of Botswana, one of the countries hit hardest by the Aids epidemic. Thirty-five percent - more than one in three - of the country's adult population are infected with the HIV virus, according to government figures. HIV and Aids have also left up to 80,000 children orphaned in Botswana and dramatically reduced life expectancy in the country to 49 years. President Mogae has pledged to invest much of the country's annual budget in tackling the crisis. His ground-breaking antiretroviral drugs programme has made Botswana the first country in sub-Saharan Africa to provide universal, free access to the medicines. How does President Mogae intend to stop the spread of Aids in Botswana? What does the future hold for one of the countries hit hardest by HIV and Aids?

Roger Hearing (BBC anchor): Welcome to Talking Point and I'm Roger Hearing broadcasting on BBC World on television, BBC World Service on radio and BBC News Online on the internet. Today we're in Gaborone, capital of Botswana and our guest is the president of Botswana - Festus Mogae. Welcome to the programme Mr President. Today our subject is HIV/Aids. This is a disease that has devastated Botswana. Botswana is in many ways a very fortunate country - it has enormous mineral wealth and a stable democracy, up until recently it had the highest income and the highest life expectancies in the region. Now unfortunately it has another distinction - it's got the highest incidence of HIV/Aids in the world. Up to a third of the population are believed to be HIV positive. We'll go to our first caller in a moment but first of all, Mr President, can I ask you why is it that Botswana has such a high incidence of HIV/Aids? It's a country that's actually, as I said, very fortunate, it should have all the advantages, why would it have got to this situation?

President Festus Mogae: Well disease is disease - we have an open society, people come and go, I don't think HIV originated in Botswana. It came here and it has stayed.

Roger Hearing: Do you think that the way the government is tackling it is actually likely to make much of a difference or is there something here that makes it a much more difficult country to rid of the disease?

President Festus Mogae: Whilst we believe in what we are doing, we think that ultimately it should make a difference. Maybe not as fast as we would like but we think it is already making a difference.

Roger Hearing: Thank you very much indeed for the moment Mr President. Let's take our first caller now: Dinah Bogale is on the line from here in Botswana. Dinah what's your question to President Mogae?

Dinah Bogate: What I see is that HIV and Aids is prevalent among the youth in my country and it escalates every minute of every day. And I think this is primarily due to the lack of youth empowerment. There are so many school dropouts, some are graduates who are out on the streets without any job. So what I see happening is these people they get involved in use of alcohol and drugs and they end up having unprotected sex. So my question is: as much as

the government is tackling the HIV and Aids infected people why doesn't it use the same strength to tackle youth employment because through youth employment I believe that the youth would have something else to do rather than indulge in drugs and alcohol and as a result have unprotected sex?

Roger Hearing: Dinah thanks very much for that. I hope you were able to hear that question Mr President, what's your answer to that?

President Festus Mogae: She's saying why are we not empowering the youth these days, that people are infected because they are out of work. That's not true - it's obvious to everybody. We are losing university students, we are losing high school students, we are losing young professionals in good employment. Yes of course the level of unemployment is unacceptably high at between 16 and 18% but it's much better than in most African countries.

Roger Hearing: You don't think poverty is an issue then?

President Festus Mogae: Poverty has always been an issue. But in Botswana there is no correlation between income level and HIV/Aids. I'm saying to you that we are losing young professionals. The most affected population group is 15 to 49. Now the people between 15 and 18 and even 20 and up to 22, most of them are still in secondary and tertiary institutions at government expense, free without any cost.

Roger Hearing: Let me just read out an e-mail that we've received Mr President from Rob in the United States. Rob says: Having been to Botswana and seen the rather casual way married men and women co-mingle with ample supplies alcohol readily available, what lifestyle changes are you proposing for your population? I think that's in a way what Dinah was saying - there is a matter of what people do, what young people do in particular, when alcohol is around and the kind of lifestyle they live, how do you answer that?

President Festus Mogae: Well we are giving serious thought to alcohol and substance abuse. Obviously alcohol is a contributory factor, not only in the case of HIV but also to road accidents. Contrary to what the young lady was saying, a lot of young people here own cars and they drive them fast and they die like flies on the roads. Yes, that is associated with alcohol. We are thinking about it, in fact we have a liquor law in draft to maybe reduce the opening hours for liquor outlets and various other measures. But that doesn't explain why we are the most seriously affected country in the world.

Roger Hearing: So there's something beyond that?

President Festus Mogae: I freely acknowledge that alcohol is a contributory factor.

Roger Hearing: Thanks very much. Let's take another call now from Ngassa Elvis in Brescia in Italy. Ngassa what's your question to President Festus Mogae?

Ngassa Elvis: Thank you. Good afternoon Mr President. I would like to make a comment. I would like to call your attention to the fact that there are thousands of African doctors and medical students all over Europe and many of them are eager to go back home if jobs are guaranteed and working conditions are good. I, as an African medical student, I'm of Cameroonian origin, I think that we must be the ones to spearhead the fight against Aids in Africa, Botswana included. I believe it is quite unfair that European expats should be the

main protagonists in the fight. Meanwhile thousands of African doctors are working here. I think the best way Europe can help Africa is to help Africa help itself.

Roger Hearing: What's your response to that? Should it be African doctors really, perhaps African doctors currently working in Europe or abroad who are brought back to help?

President Festus Mogae: I think it should be everybody including and especially African doctors. Here in Botswana we are actually dependent on many African doctors from Tanzania, Uganda, Zimbabwe, Zambia and of course doctors from elsewhere. We would like to hire more doctors and especially African doctors abroad but we don't think we can afford it. African doctors working in the United States or in Europe are working there partly because the remuneration is very attractive.

Roger Hearing: But you're quite a rich country, surely you could pay them enough to get them to come back?

President Festus Mogae: We are a poor country. Our per capita income is \$3,000 compared to your \$40,000 in the United Kingdom, so we cannot be reasonably expected to afford the level of remuneration that these people command as professionals - as medical professionals. But we are, by African standards, we are paid better than most African countries and that's why we have African doctors here. We are in fact dependent on African doctors.

Roger Hearing: Let's take up that point with a medical student from Botswana who's on the line. Maxwell Nhlatho is on the line in fact from Melbourne in Australia. Maxwell would you come back and help Botswana do you think?

Maxwell Nhlatho: Yes, yes I'd be looking forward to working Botswana.

Roger Hearing: What question would you like to put to President Mogae?

Maxwell Nhlatho: My concern is from the cultural differences that we have in Botswana with the rest of the world. It is totally unacceptable in Botswana as a youngster bringing your girlfriend or your boyfriend home. I think the people of Botswana should accept the fact that as youngsters we do grow up and our parents need to be aware of that and they need to protect us. I think this kind of behaviour of not accepting us to bring our girlfriends or partners or our parents to know our girlfriends - it's not protecting the youth of Botswana. It's rather increasing the chances that we end up with many different partners and I think it's really dangerous for us. I don't fully understand why Aids in Botswana is still on the rise. I mean as everyone in Botswana knows about Aids. They know the seriousness of AIDS, they know its consequences but still it is still on the rise, I don't understand that. In Melbourne university, other medical students from Botswana, we set up a group we decided to call it BAM, which stands for Botswana Aids Melbourne. This was sort of an initiative to set up a youth to youth HIV education programmes in Botswana with the help of the University of Melbourne as a way to develop some education programmes that could help Botswana. And we are looking forward to really working in Botswana.

Roger Hearing: Well Maxwell let me put that question to the President. President Mogae what do you respond to that?

President Festus Mogae: It is interesting that he's saying that traditional values, where the young people are not bringing their girlfriends and boyfriends home, is responsible. A great

many people here think that the breakdown of our traditional habits and norms is the one that has resulted in the breakdown of family relationships because the young people now can kiss in public and walk hand in hand in front of adults and in front of their parents. But that's what people are saying.

Roger Hearing: So it's too much liberalisation rather than too much conservatism?

President Festus Mogae: There's too much liberalisation rather than too much conservatism. And I'm inclined to agree with the too much liberalisation.

Roger Hearing: So you think that's at root part of the problem?

President Festus Mogae: I think that it must be a contributory factor. I am not willing to say any one single factor is responsible but I think it's one of them. I myself have made statements both in general public meetings and in parliament that we should have more discipline, especially in senior secondary schools.

Roger Hearing: Let me read you out an e-mail we've received from Thomas O'Brien in the United States. Thomas says: Should you not be pressing changes in certain aspects of African culture. I believe a campaign should be underway to iterate the need to wear condoms as protection from the deadly disease. Do you not think in the culture we're talking about there is a resistance to that perhaps in the traditional culture which may be part of the problem?

President Festus Mogae: There may well be. But some people are accusing us of introducing too much liberalism - even churchmen have accused the government of being responsible and encouraging the youth to participate early in sex because we not only preach the use of condoms, we supply them free in all public institutions.

Roger Hearing: Well in fact the Catholic Church opposes the use of condoms.

President Festus Mogae: And the Catholic church, in particular, but some of the other churches and also some of the other traditionalists. They say we understand that message that people should abstain, especially young people should postpone their active participation in sex and postpone sexual activity until marriage.

Roger Hearing: Do you think that's a practical way forward, do you think it's right to do that?

President Festus Mogae: Well we think it's a valid message and I think that the young people could do that. I mean after all they're not yet used to sexual activity and if they then do, then they should stick to one partner. And in any case if they indulge in sexual activity they should use condoms. So that's why it's called ABC - if you go around Gaborone you will see this message. The message is abstain, stick to one partner or condomise.

Roger Hearing: So you abstain, be faithful and condoms - ABC.

President Festus Mogae: Yes various formulations of the same thing.

Roger Hearing: Let's go now to another caller. Gustav Colliander is on the line from Scotland. Gustav what's your question to President Mogae?

Gustav Colliander: I'd like to congratulate you on having the most democratic and stable government in Africa. I'd like to say that I've recently travelled all around Southern Africa, I spent a few months travelling around, and I spoke to quite a few locals there and it seems to be a very common practice in that area of that world that a man will openly have a wife and have girlfriends and mistresses and so on and that because of this - I mean having condoms is not really the whole issue, so to speak, as far as I'm concerned. People must change their behaviour and obviously use condoms where applicable but condoms fail from time to time, so it's changing how society behaves and what is accepted society norms. What is the President and his government doing to try and change what is an acceptable part of society to try and prevent this from happening?

Roger Hearing: Alright Gustav well let's hear from the President. Are you undertaking measures to change the way that society lives?

President Festus Mogae: I was explaining to the caller just before him, that our prevention campaign is that people should abstain from sex. They should be faithful or stick to one partner and then of course we say they should use condoms because the condom - and the reason why it's ABC and C is condom is that a condom is a fallback position. The ideal is to abstain especially for young people and for the rest is that they should stick to one partner. That's the behaviour change we are looking for. We have asked the churches to help us in this message - to preach it in their own churches. We have asked them - we do not expect them to preach the use of condoms - we expect them to preach abstinence, we expect them to preach being faithful or sticking to one partner. But that hopefully - even if they don't like us advocating the use of condoms they should at least not speak against them.

Roger Hearing: Okay let me put that back to Gustav. The President is saying in effect that he's already doing that, they're doing their best to encourage this behaviour but it perhaps isn't practical unless you have the C of the ABC which is condoms as well, what do you think?

Gustav Colliander: Obviously I'm not saying don't use condoms but obviously you have to. But what I'm saying is that when I was talking to people there, especially the men, it's an open society norm that they would have multiple girlfriends and so on at the same time as having a wife. It is like an accepted part of being an Southern African in that sort of area of the world, it's what they seem to accept. You've got to try and create the situation where people are shameful to say they've got lots of girlfriends at the same time. It should be that they shouldn't want to brag about it.

President Festus Mogae: I agree entirely with Gustav but social change or change of attitude, behaviour change, doesn't come overnight but that's what we have been trying to preach. And in fact we are saying that you can see the consequences and therefore the only thing we should do is to change our behaviour.

Roger Hearing: Okay, let's go to another caller now. Taylor Ahlgren is on the line also from Botswana. Taylor, what question would you like to put to President Mogae?

Taylor Ahlgren: Yes hello President Mogae. I've been here for approximately five months now, I'm living in Gaborone and I've really enjoyed getting to interact with the local culture and have been making some friends already and really enjoying living here. One thing that I have noticed is a great fear, especially amongst 18 to 30 year old range that I've been interacting and spending some time with, a great fear about discussing HIV/Aids, just on a casual level. It seems like there's a strong stigma here against those that do have HIV/Aids

and those that do have done wrong. It seems like many in Botswana here are even afraid to get tested because of this strong fear. I was really impressed that you announced your negative HIV status to the public and I was wondering what else is being focused on from your government in order to increase discussion within the public about HIV? Because I think - going back to your last question about changing behaviour, increasing discussion about HIV/AIDS on just a friendly peer level can greatly lead to behavioural change. So that's my question - what else is being pursued?

Roger Hearing: Let's put that to President Mogae, what else do you have to try and change the stigma that's attached to all this?

President Festus Mogae: It's the most difficult part - there is stigma and has been for some time and for a long time - for the last couple of years people are not willing to talk about it - first about sexual matters and secondly about the HIV/Aids pandemic. But I should have thought that that has changed very substantially because now whenever I make a public statement or address meetings - whenever ministers and members of parliament address public meetings they speak about HIV/Aids. We never make address public meetings without talking about HIV/Aids and I think the public officials, not only health officials, as was the case at the beginning. But I must acknowledge that stigma persists, stigma persists and I agree and that is part of the reason why many people are reluctant to know their HIV status because of the social stigma attached to the disease.

Roger Hearing: But you yourself had a test and was clear.

President Festus Mogae: Yes I had a test but it's only part of the effort to try and encourage people to know their status especially as antiretroviral therapy is available. One tries to say look it's very important to know your status, your HIV status, so that if you are negative then you try to remain negative and if you are positive you can get be assisted. Being positive is no longer the death sentence that it used to be and that HIV is just a disease like any other. But you know stigma is very difficult. Even some of the people who want to help - take the church people - to start with churches used to say that Aids is a punishment from God because we have sinned and therefore it follows therefore that those who were HIV positive were the sinners. We have convinced the churches that that is the wrong interpretation. But the stigma persists. But some people say well know your status and come out, please come out. There are people there who are HIV positive, and are hiding - that's stigmatising. You may have syphilis, it's sexually transmitted, if it's untreated it also can be terminal. But nobody says you may have syphilis come out and get tested. Or you may have hepatitis B, which is also sexually transmitted. But they say you may have Aids, that's sexually transmitted, come out - that's stigmatisation.

Roger Hearing: You had an HIV test - would you encourage all your ministers to do it, would that help perhaps?

President Festus Mogae: Many of them have.

Roger Hearing: Would you ask them all to do it perhaps - would that be a way forward?

President Festus Mogae: Well I will, I have asked them and they are testing - even members of parliament. Just this week three members of parliament were tested and announced it. What we are doing is that with the effect from the 1st January, anybody who goes to a

government medical facility and needs to be tested unless they refuse they will be tested for HIV/Aids.

Roger Hearing: Let me read you out an e-mail we've received from Freddy Munyololo Muganza in South Africa. Freddy says: Do you think that investing a lot of money in drug delivery will actually jeopardise necessary behaviour change? In effect will all this money you're putting in to antiretrovirals mean people think well it doesn't really matter what I do?

President Festus Mogae: No I don't think so because people are still dying, because many people are not coming forward. If they took that attitude that after all there are drugs then presumably they would be coming forward and then they would then be treated and that would be alright. But if they are not coming forward. We have voluntary counselling and testing centres and we are complaining that they are not used to the extent that we would like. That means that a lot of people are still not coming forward. If they were, if they thought that because there are drugs then they would test and even if they are positive they'd be treated anyway, they would be coming forward. Therefore their present behaviour is not consistent with their believing that there is no punishment. In any case the death toll is maybe not increasing I've no evidence that it's increasing - it may be stabilising but it's still very high. Then as I say this is not ignorant people. It's as I said, the most severely affected population is the 15 to 49 year-old and within that cohort it's 18 to 24. Those people are not ignorant and they understand very well that these antiretrovirals are palliatives, they can prolong your life but there is no cure. In fact in Setswana, the literal translation means a palliative.

Roger Hearing: Let's go now to another caller, Michael Jordan is on the line from Sao Paolo, Brazil. Michael what's your question to President Mogae?

Michael Jordan: Well firstly I'd like to thank President Mogae for speaking with us today, I think his leadership has been exemplary in the area of HIV and Aids so I appreciate this very much. President Mogae I would like to know what is the root cause of the behavioural patterns that seem to persist despite wide awareness of the dangers of unprotected sex? These patterns seem to be deeply entrenched and not just within Botswana but basically within a number of countries in Southern Africa and Eastern Africa. How do we attack not so much the social interaction that's open from the churches and the media but when two people get behind closed doors? How do we influence the decision making at that level?

Roger Hearing: The line was bad to Sao Paolo. Let me repeat what I think Michael was talking about. He was talking about the root cause of the short-term decision making that people have - a kind of blindness in terms of sexual behaviour despite the obvious risks that that entails. What can one do to change people's minds on this? To widen their eyes, I suppose you could say to the risks.

President Festus Mogae: I would have thought that Michael would offer me advice as to what else I should be doing because the adverts are exactly what I've been preaching - that it's very dangerous. Somebody in the United States in Washington said that President Museveni says that they overcame the pandemic because they said abstain or have sex and die. So I said well it may not be the style of our language but we are virtually saying that.

Roger Hearing: But you don't think that particular style would work in Botswana?

President Festus Mogae: Not necessarily.

Roger Hearing: Because it's too scary, because its too frightening, because its too explicit?

President Festus Mogae: No because people are aware that if you contact Aids you die. If they didn't think so there would be no stigma.

Roger Hearing: So are people just ignoring the dangers then? Are they saying I don't want to think about it?

President Festus Mogae: It seems to be the case. I am telling you what we are doing so tell me what you think what else we ought to be doing because if I thought something would work I would be trying it already. If you think I am not doing it, it is because I haven't thought of it.

Roger Hearing: Let's go now to another caller - Grace A Owuor, is on the line from Washington, USA. Grace what's your question to President Mogae?

Grace Owuor: Thank you so much for your ground breaking decision. I'm originally from Kenya and I grew up here in the United States and most of my young days I spent in Kenya. I have an aunt who died of Aids about six or seven years ago and I completely agree with the stigma being the key issue that it's keeping a lot of the progress needed against the Aids pandemic. My question is more geared towards the children. I was of course reading about Botswana's 35% Aids infection rate and that of course hit me that the numbers of children who are being orphaned is very huge. You mentioned 80% in the article that I saw in the BBC. I just want to know what is being done to incubate these children? Because as we've seen throughout Africa, Liberia and different parts of our continent, a lot of these rebels are children and often some of them may be victims of parents who've passed away as a result of Aids. In Kenya we have what are called small community based organisations called Grandmothers for Orphans. Because as you know when children's parents pass away it's left to either their grandmothers, uncles and aunts to support them. I'm just wondering if you have those types of organisations and if you thought about having some sort of a social system to support those organisations if they exist? That was my first question.

Roger Hearing: Let's put that to President Mogae and then we'll come back to your other question. President Mogae what is the situation with Aids orphans here in Botswana?

President Festus Mogae: All orphans are registered. Of course to start with we're seeing Aids orphans, we changed that because in any case 30% of the orphans are orphaned because of road accidents. Also we thought that calling them Aids orphans is stigmatising in the children. So we have registered 41,000 orphans to date. They are entitled to support from government - food rations, clothing, everything that they need. Those of them who are HIV positive are entitled to antiretrovirals free. But beyond that, we have the prevention of mother to child transmission, so that expectant mothers who attend the antenatal clinics are tested. And if they agree, they are then put on a programme so that they are given antiretrovirals for a few weeks before delivery and a few weeks after and then the child is also given AZT and nevirapine. So that in fact 60% of the children now born of HIV positive mothers don't have the virus - government support starts there. We provide infant formula and we now encourage the mothers - depending how advanced their situation is - not to breastfeed, which is a reversal of our policy. We have been encouraging breastfeeding - now we are saying it's better if you don't breastfeed.

Roger Hearing: It's too dangerous to breastfeed.

President Festus Mogae: Too dangerous.

Roger Hearing: Let me go quickly back to Grace and Grace had one more question I believe, Grace what was your second question?

Grace Owuor: Yes sir, this is a little bit off but it's kind of relevant to the subject. My question was you know in most countries and throughout the world there are deaf people. I'm wondering how communities are communicating with deaf people about - especially in the rural areas - about those who are dying around them and if they are aware of the Aids virus and if there's a way in which the government communicates to people who have illnesses that prevent them from communicating well and may be actually infected?

Roger Hearing: Thanks for that Grace. President?

President Festus Mogae: Well we use our best endeavours to communicate but obviously in the more remote areas one can't guarantee that the communication is as effective as it is around town. Because in the towns there are schools - there are two institutions for deaf people and therefore we're able to communicate with them through sign language and others, there are social workers, not enough of them of course, who are trained in sign language. But in a country, in a developing country about the size of Kenya and a population of 1.7 million people there are lot of remote areas where some of the things that are happening in the bigger settlements will probably not be reaching these communities as well as they should.

Roger Hearing: Let's widen the discussion out a little bit. We've received an e-mail from Jason Jeffery in Zimbabwe, a neighbouring country to yours. Jason says: Is the fight against HIV in your country threatened by the continuing rise of illegal immigrants from Zimbabwe due to the growing political crisis there? Is this one of the justifications for the increased levels of security along the border? How would you answer that?

President Festus Mogae: That's a difficult one because it's likely to be misunderstood, I mean to the extent that there are illegal immigrants. We hire a lot of Zimbabwean professionals. I said earlier to somebody that we are dependent on African professionals and we hire a great many people from Zimbabwe with skills. But there are of course in addition there are a lots of skilled and unskilled workers who come into the country illegally. We send about a thousand back every week but they come right back. Well to the extent that these people are living uncertain lives and so on, I don't think they're helping the situation.

Roger Hearing: Do you think they're actually bringing HIV into the country?

President Festus Mogae: Well no we find HIV here. There's HIV in Zimbabwe, in Zambia and in Botswana, so how can I say they are bringing HIV here when there is HIV here and in South Africa? It's in the region as a whole. The only difference is that - the only reason why we are different is that we were the first to explain to the rest of the world that we are more seriously affected. So it's not the Zimbabweans. He asked about security measures. Well there are a lot of social problems and whenever there is a rural urban migration, as happens in all developing countries, all African countries, and other developing countries, that tends to breed crime in the urban areas and to the extent that there are illegal immigrants, they would tend to exacerbate, not cause, exacerbate a problem that already is there. And so I hope that the people of Zimbabwe and everybody will understand and yes, illegal immigration tends to exacerbate already existing problems - whether it's crime or whether it's HIV/Aids or STDs in general.

Roger Hearing: Mr President you mentioned earlier the efforts in Uganda. We actually have a caller on line Job from Kampala in Uganda. Job what's your question to President Mogae?

Job: I want to welcome the President to the programme and I want to thank him for appearing on the programme to address this particular issue of Aids. We know it has been around for quite some time, I don't know at what rate it has been multiplying, I don't have these statistics at hand because it has been around - at least it was here in the 80s when I was a teenager and now I'm in my thirties. In the late '90s that's when it exploded so much in Uganda and apparently in Kenya. And then currently in Uganda apparently they are reporting on seeing that the rate at which it is multiplying has gone down and in Kenya it seems to have exploded much more. I don't know what's happening in other nations that are not African. But according to the little I hear about like China it's not doing so well in that area of Aids. So one thing I wanted his Excellency maybe to talk about is by politicians coming into this, do they really help the spread to go down or they just try and maybe publicise it so that the nation knows that it is there? The input I wanted to put in was that the solution to AIDS to me I feel like it doesn't lay with the politicians at all, politicians just take credit like our president in Uganda takes credit. Like he throws in the Aids infection has gone down but I doubt whether that is the case. Politicians don't take any credit in this one particular thing at all, maybe people just got to know about it because the presidents are talking about it. Do they lead the population? Are they also showing the population that this is how I am living and I'm living in a moral way so that Aids is not spreading? Do they give a moral leadership in that that particular issue?

Roger Hearing: Alright, let me put that then to the President. Also let me put to you another e-mail we've received, in fact from Michael in Uganda who says: How can his Excellency explain the fact that Botswana with its high GDP has not been able to set up a front in the field of research on Aids vaccine in Africa? Questions really there about political leadership. Let's deal first then with Job's question - do you think politicians can really make a difference?

President Festus Mogae: Well I think they should endeavour to make a contribution. Certainly one contribution they can make, they can use the state machinery and make their own effort to let the population know the situation in which the particular country is in. The majority of people in the world feel that we African leaders have not done enough. They also said we have been silent about the pandemic etc. etc. and may be it is true but that was partly because of our invasion by the virus was by stealth given its very nature. So that by the time we became aware the predicament in which we were it was perhaps too late.

Roger Hearing: Well the warnings came from a long time ago - even the late 1980s, mid 1980s, it was apparent that some countries in Africa were suffering very badly.

President Festus Mogae: Well beginning with Uganda itself but that's what happens. So he was saying that he thinks that politicians are irrelevant - no I don't think they are irrelevant. I think everybody has a role to play, even if it's only to warn the nation of the problem. Church people have a role to play and thus other people also have roles to play.

Roger Hearing: What about the science question? What about the setting up the search for a vaccine, which is what Michael was asking about?

President Festus Mogae: We have one of the leading laboratories here which we built and it's being operated by the Harvard Aids Institute. You could go and have a look at it - a lot of

people know about it. There is a great deal of research now - there are at least half a dozen institutes who are doing research here in the country. We're being helped in our fight against HIV/Aids by a lot of the international community - UNAIDS, the Gates Foundation, the Merck Campaign Foundation and information is being exchanged freely left and right. But we are small country with a very small pool of scientists. But a great many scientists from abroad are working on the problem here. In fact right now tests of a vaccine are taking place.

Roger Hearing: On this issue of leadership then, let me read you out an e-mail we've received from Yahya Mohamed in the United States. Yahya says: What has motivated you in the fight against Aids as your neighbour, Mr Mbeki, president of South Africa, denies the veracity of Aids? Clearly there is an issue in South Africa about it but do you take any notice of that, do you take any influence from that?

President Festus Mogae: No, the President of South Africa has his views and has his advisors. It's a much bigger country with a much larger pool of professionals and he has a great deal of professional advice at his disposal, which I don't have. And here the evidence of the existence of Aids is apparent for all to see and therefore I would be stating the obvious.

Roger Hearing: Do you think he's wrong?

President Festus Mogae: No I don't know.

Roger Hearing: Okay let's take another call then from Reginal Mpolokeng in Accra, Ghana. Reginal, what's your question to President Mogae?

Reginal Mpolokeng: Mr President, I really want to applaud you for the great work that you are doing to combat the Aids scourge in Botswana. My question is focussed on pregnant women.

Roger Hearing: I think the line is breaking up from Accra. But I think the point he was making was about ARVs - antiretrovirals - being available for pregnant women, and also the issue of compulsory testing - is it compulsory for pregnant women in this country to be tested?

President Festus Mogae: No it's not. We have an organisation, a multi-sectoral committee, called the National Aids Council which I chair and it has sub-committees. One sub-committee is on men - the men sub-committee - because of the feeling, as somebody alleged earlier on, is that the men are responsible for the spread of the disease. So we have a sub-committee of men on Aids. What they should be doing as fathers and as husbands and brothers and just as free agents. That's one. Now we also have a law and ethics committee - everything we do has to be subjected to a debate by the law and ethics committee. We have decided that to make the testing for HIV routine in medical facilities. But we can't make it compulsory because the advice of the law and ethics committee is that that would be a violation of the constitution and a violation of people's human rights.

Roger Hearing: But some people might say that in the instance of a pregnant woman, there's another individual whose human rights are at stake which is the unborn child. Do they not have the right to see if the mother is HIV positive and then get the necessary treatment that might stop them perhaps having HIV?

President Festus Mogae: Yes but they will say that the woman who is expecting is the person with whom we can communicate and it will be she we will be forcing either to test or to undergo ARV therapy. So the testing is going to be routine from the 1st of January, unless the person opts out but it is not compulsory.

Roger Hearing: Let me read you out an e-mail we've received from Gunnar Zachrisen in Norway. Gunnar says: Do you consider the UNAIDS estimates to be exaggerated because from national samples the pregnant women, for example, seem to give a lower level of HIV infection compared to the UN estimates? Do you think that there is a discrepancy?

President Festus Mogae: Yes there is consistently a discrepancy. The UN give a higher figure. We don't want to argue about the levels because supposing it's 50, it's too high, it's 25, it's too high, they said 35, it's too high, it's 45, it's too high. Therefore, we think the debate about statistics will be sterile. The problem is that HIV/Aids cuts across everything that we are trying to do as a nation, as a small nation. Before the advent of the epidemic we had attained human development indices that were quite impressive. Things like social indicators, like life expectancy, like the infant mortality, the mortality of under fives, mortality and morbidity. All of these indicators were very favourable, they were going down, now they are being reversed by HIV/Aids and therefore whatever - whether it's 25 or 30 it doesn't matter. But the research is there. We have surveys on which we rely. The women are attending antenatal clinics. We persuade them to test and we take these surveys and they indicate the percentages. But if somebody else, some other - as I said there are various groups here doing research - if somebody else receives a different figure really what you gain by arguing that's not right, it's 22% not 33 or not 30? Do you have the order of magnitude?

Roger Hearing: Let's take another call now from Umaru Fofana in Sierra Leone. Umaru what's your question for President Mogae?

Umaru Fofan: Hi, good afternoon Roger, good afternoon Your Excellency. One thing that we have come to know lately is the fact that politicians most often are accused of making promises or just paying lip services to issues that are affecting various people of various countries. In this regard several governments, or some governments, have actually come forward in this fight against HIV/Aids and one thing which has been known to be a fine way of tackling the disease is by knowing each other's HIV status. Would it be a good idea, Mr President, do you think, if government officials, particularly the president and ministers, come out publicly and undergo an HIV/Aids test, thereby encouraging their people to come forward and carry out the test themselves?

President Festus Mogae: That has been happening. For instance here it has been happening recently but whether it will have the impact we don't know. But I think it's a good thing for people to test.

Roger Hearing: Do you think it will actually make a difference if public figures do that?

President Festus Mogae: I don't know whether it will or not.

Roger Hearing: Okay, Umaru why do you think it would make such a big difference, we've been talking about the importance of leadership, do you really think it would make a big difference?

Umaru Fofan: Absolutely, I think it would make a big difference and I think one reason for the success in the fight against HIV/Aids in Uganda is the fact that President Museveni underwent a public HIV/Aids test. He instilled confidence in his people to know the need for them to undergo the test. I feel when somebody knows their HIV status it certainly puts them on a better footing to be able to fight against the virus. But if the public figures themselves come out and undergo the test it's kind of like instils confidence in the people who will not come forward and undergo the test themselves. But if leaders keep telling people that knowing your HIV status is good for our fight against the virus without they themselves undergoing the test it makes the whole thing absurd. And I certainly for one - I'm a journalist myself, involved with public programmes in Sierra Leone, and I happen to know that senior medical doctors have never undergone the HIV/Aids test themselves.

Roger Hearing: Umaru let's bring the President back in.

President Festus Mogae: Okay maybe the doctors have not but I have undergone the test and announced the result and so presumably everybody's going to test now that I have tested and announced.

Roger Hearing: We will see, thanks very much indeed Umaru for that call. Let's go now to Joe Ntenwi in Salt Lake City in the United States. Joe what's your question to President Mogae?

Joe Ntenwi: Mr President I'm so honoured to speak with you. I salute your mission and your leadership in the nation and history of Botswana. To know as well as I do sir that when you, as President, George W. Bush delivered his State of the Nation address to the nation and Congress here on Tuesday January 29th 2003 he amongst things said: "I ask Congress to commit \$15 billion over the next five years. Ten billion dollars in new money to turn the tide against Aids in most nations in Africa and the Caribbean." I guess my question to you is that is very a year on what on, what part of this money has your government received from the Bush administration to help prevent new Aids infections and provide human care for people suffering from the disease? Is this presumptuous of me sir to think that the Bush administration's pledge is nothing but superpower cynicism and wickedly unfunny rhetoric?

Roger Hearing: Ok Joe, let's put that to President Mogae. What money have you seen?

President Festus Mogae: Well two things. I think we must be familiar with the United States system. What has happened is that the President with the consent of the Congress has announced his intention to allocate \$10 billion in additional money over the next five years. What has now to happen is that he's going to have to seek to appropriate that money and then Congress is going to debate and want to know how it's going to be used, how much will go to what country and so on. And it's still going to be a big fight. That is what happens as we know in the United States. But in any case with any government there is the first the announcement or the intention of the administration to do something, and then there has to be parliamentary appropriation. But regarding Botswana, well he says that the \$10 billion will be new money. I am told that the \$5 billion is part of the billions that has gone to the Global Fund already. And in return we are already in receipt of some money in the sense that, not out of that money, the new money, but out of old money. We have been helped to establish 16 voluntary testing and counselling centres they provided us. We built them or we bought houses with that money and they provided the kits and they trained our people, they provided the kits - the testing kits - and the alternative methods and so on and they provided two doctors who are supervising that whole programme.

Roger Hearing: But in terms of the American money which we were speaking about?

President Festus Mogae: That's the American money I'm talking about.

Roger Hearing: But the money that was pledged by President Bush hasn't arrived, do you expect it to arrive any time soon?

President Festus Mogae: No I know the procedure in the United States is going to take a long time for it to be appropriated. Assuming Congress then approves it.

Roger Hearing: So you're not completely sure that it will actually arrive in the end at all?

President Festus Mogae: Yes it might not because there are other priorities for the American nation. But I think the President intended to do it and he will.

Roger Hearing: You think it should be a priority?

President Festus Mogae: Well how can I determine other nations priorities? But I am just grateful for the assistance, the assistance to us has been generous.

Roger Hearing: Mr President let's take one more call now. Tazz Kajila is on the line from South Africa, Tazz what's your question to President Mogae?

Tazz Kajila: Good afternoon. Well mine is not really a question. I really want to say I appreciate President Mogae for what his government is doing to fight Aids and also all the governments in Southern Africa. What I wanted to say is that governments can only do that much. People's attitudes towards Aids needs to change because what I see here in South Africa and Zambia, which is my home country, that people are not scared of Aids. They see adverts and they read papers and everything but their behaviour towards sex and it's just not right and it's like they're not afraid of Aids or anything. So I'm saying all the government fighting Aids and everything, they're doing their best and people also need to really show that they're also doing their part. But what we've seen here in Africa is a different story, thank you.

Roger Hearing: Let me get a response to that from President Mogae, how do you respond to that? Obviously a different situation in South Africa but similar in many ways.

President Festus Mogae: Well I think the government can use its best endeavours to help, to inform and to the extent that it is able to provide assistance, certainly with orphans and certainly with antiretroviral therapy to the extent that the budgetary situation permits. But also preach change, even if people don't change at least they can't say they don't know. Roger Hearing: President Mogae thank you very much indeed for that. That's all we have time for today from Botswana. So my thanks to our guest President Festus Mogae, President of Botswana and of course to all of you who've taken part in this programme. If you want to contribute to the debate and to the ongoing debate at the moment about Aids you can go to our website: bbbnews.com/aids. But that's all from us at Talking Point, from all of us here on the team goodbye.