

The rise of Aids and how we failed to stem it

By Hein Marais

Side effects

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With almost one in five adults infected with HIV, South Africa manifestly has not dealt with its HIV epidemic, now the largest in the world. Perhaps a virus that propagates along the ruts and fault lines of a society as broken as ours was never going to spawn a cogent, unified response. But did that response have to turn into such a life-robbing shambles?

Side Effects is a carefully researched and crisply-told chronicle of how the epidemic erupted in South Africa and how we failed to stem its advance. As told by journalist Lesley Lawson, it's a story of false starts, good intentions and poor judgment, of earnest blunders compounded by inexperience and distrust, of unadulterated cynicism and of inspiring heroism, much of it unsung.

Lawson starts by tracing the discrete routes along which HIV initially entered South Africa. This is the least sure-footed section of the book and it could have benefited from more thorough analysis of the political-economic undertow of the epidemic.

But the book soon finds its legs, as Lawson tracks the evolution of the Aids response - from the crazed, Calvinist reflexes of the National Party government in the 1980s, to the painstaking consultations that yielded the first national Aids strategy in 1994 and beyond.

Lawson's decision to anchor the book on the battles waged around the South African Medicines Act proves to be inspired. It's her contention that if we're to make sense of the shambles of the Aids response, we have to appreciate the ways in which collective ideology and politics intersect with the realm of idealism and memory, feeding a mix of self-righteousness, paranoia and miscalculation.

Although clumsily crafted, the act's main intent seemed unimpeachable. Among other things, it sought to restructure the procurement, distribution, selection and pricing of medicines. Alarmed that this might cramp their operations and profit margins, international pharmaceutical companies ganged up against the government, deploying legal and other muscle to block the act's passage.

The line separating villain from hero seemed clear. And so, early on already, the Aids response became entangled in a nationalist morality tale, in which neither equivocation nor criticism would be brooked.

This closeted self-righteousness would generate blunders of shocking proportions. The Virodene scandal was one. A "cure developed in Africa, for Africans", according to one of its inventors, and above-all cheap (though also ineffectual), the concoction seemed heaven-sent to a government embarking on a fiscal austerity programme while broadcasting the advent of an African renaissance. It threw its weight behind the research. But Lawson documents how basic rules of scientific research and medical ethics were breached - ironically, the sort of transgressions big pharma stands accused of.

As the HIV infection rate rocketed - and the scandals multiplied - the public outcry grew. Opposition parties relished the frenzy. But much of the media reporting, as Lawson shows, was crass and neglectful of important detail and context. Government circled its wagons. At times, reason seemed to prevail. Too often it yielded to bewilderment.

Then President Thabo Mbeki strode forth with some sensible questions, but hapless and misinformed propositions about the possible association between Aids and poverty. His timing was spectacularly ill-judged: Durban was hosting the biennial international Aids conference and national adult HIV prevalence had reached almost 20 percent.

An international uproar ensued, compounded by the increasingly outlandish claims emanating from the president's office. Manto Tshabalala-Msimang, the health minister, dug in her heels at his side; so did much of the ANC leadership. Nourished from the highest political office in the land, denialism surged. The South African National Aids Council, under the nominal stewardship of Jacob Zuma, mustered not a whimper in protest. The Aids response steadily collapsed under the weight of bombast, bitterness and sophistry.

A sinuous thread of conspiracy was being detected everywhere. At one point, Mbeki was said to have informed a closed meeting of some 200 ANC members and cabinet ministers that the CIA and United States pharma corporations were trying to discredit him because his stance threatened their profits and that the Treatment Action Campaign (TAC) was part of the campaign. The Aids saga came to resemble the Keystone Kops penned by Dante.

As thousands of HIV-infected South Africans fell ill and died, Mbeki denied knowing anyone with Aids. The farcical President's Advisory Panel on Aids ("not a scientific discussion or debate [but] just a shouting match", according to virologist Barry Shoub) came and went. Screeds claiming that HIV had been

developed to reduce the global population were distributed to key officials by Tshabalala-Msimang's office. Witch hunts were mounted against health officials who tried to provide Aids drugs to patients and rape survivors. Scientific evidence was rubbished the one day, cherry-picked the next for snippets to prop up arguments.

Shamed and out-manoeuvred - chiefly by the TAC - the pharma companies eventually dropped their legal challenge against the Medicines Act. Aids and health activists celebrated in the belief that the path had been cleared for sanctioning generic production of Aids drugs and for levering the response to a new level. They cheered too soon. The government's intention, as Lawson shows, "had never been to use the [Medicines Act] to get cheap Aids drugs, and they had consistently rejected demands for antiretrovirals to be made available in the public health system".

Indeed, by mid-2001 already, the government's menu of arguments for not introducing a full-scale prevention of mother-to-child transmission (PMTCT) programme was obsolete. Drug prices were at a new low, clinical trials had confirmed the safety and effectiveness of nevirapine, and the Medicines Control Council had licensed it. Still government balked, and turned its guns on the TAC. More years - and deaths - would pass before the government, backed into a corner by international ridicule and by the clout, connections and tactical savvy of the TAC, would grudgingly relent.

Eventually, by 2004, the PMTCT and anti-retroviral treatment programmes were being rolled out nationally, and most of the antiretrovirals dispensed in the state programme were generic versions made by a local company - feats engineered largely by the activism of the TAC and other health workers. For all its bluster about sovereignty and "African solutions", the government had succeeded only in delaying those outcomes by years.

Told in clear-headed fashion, this is a deeply distressing, yet bracing story. An impassioned account, the book nonetheless resists caricatures.

It invites condemnation of the culprits - of whom there are many - but also enables a clearer appreciation of how a failure can metastasise in the full glare of democracy.

Published on the web by Sunday Independent on June 8, 2008.

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