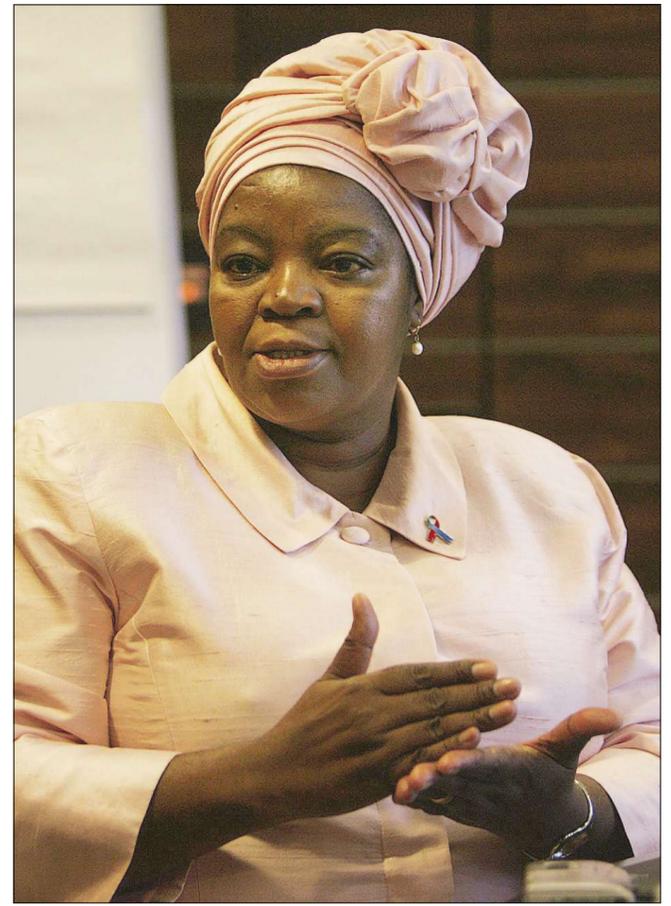


# WorldAidsDay2007

A SPECIAL REPORT



## Political will and commitment



**Botswana health minister Sheila Tlou's government is not about to rest on its laurels in the fight against Aids, she tells Mary Fitzgerald**

A decade ago Botswana made headlines because it had one of the highest HIV rates in the world. But in recent years the landlocked diamond-rich country in southern Africa has been quietly implementing programmes many believe could serve as a model for fighting the Aids epidemic throughout the continent.

Botswana's government was the first in Africa to provide free anti-retrovirals to all citizens living with HIV - as of July this year the programme had reached more than 90,000 people. It has made impressive progress in preventing mother-to-child HIV transmission and has also led the way in expanding voluntary testing and counselling - the offer of HIV testing has been routine in all health centres since 2004. Prof Sheila Tlou, Botswana's

health minister, says the prevalence of HIV is now 17 per cent, and mother-to-child transmission has been reduced significantly.

Several factors already weighed in its favour. Botswana's population of 1.7 million, its comparatively prosperous economy, stable government, and the fact that most people live within 10 kilometres of a health centre, meant it was perhaps better placed to become a pioneer in the battle against Aids than many other African countries.

Those factors notwithstanding, Tlou believes Botswana's ground-breaking approach stems from a realisation at government level that something had to be done.

"People in Botswana take Aids very seriously. We are one of the few countries

where around 50 per cent of the population know their HIV status. And it's all because we have real political will and commitment," she says, pointing out that at least 20 per cent of the country's budget is allocated to health and dealing with the HIV/Aids issue.

Botswana's Aids programme has also benefited from the largesse of others - the Bill and Melinda Gates Foundation has donated \$50 million (€34m) to improve health infrastructure and pharmaceutical company Merck is contributing \$50 million over five years to support care and treatment programmes.

"Because of that commitment we have been able to put a lot of programmes in place," says Tlou. "And it is working. In addition to a levelling-off in some areas, we have had a 6 per cent reduction in HIV prevalence in the 15-24 age group. We hope that if that continues we can reach our goal of a HIV-free generation."

But for all its celebrated success in establishing Africa's most advanced programmes for treatment and testing, Botswana still faces huge problems with HIV/Aids. The UN says life expectancy at birth has plummeted from 67 to 47 years as a result of the epidemic. It puts the HIV prevalence rate within the 15-49 age group

**Prof Sheila Tlou, minister for health in Botswana, says: 'In Botswana the issue [of tackling HIV/Aids] went beyond words to action that made a real difference. Political will and commitment is key.'**

Photograph: Aidan Crawley

at 38.5 per cent and estimates that there are approximately 85 new infections every day.

Nevertheless, Botswana aims to achieve a zero transmission rate by 2016, the year it celebrates 50 years as an independent republic.

The focus, minister Tlou says, has now shifted from treatment to implementing comprehensive prevention programmes for a sustainable, long-term response to HIV/Aids.

"At the beginning we felt we needed to focus a lot on treatment and preventing mother-to-child transmission. At that time, the prevention aspect of our programmes was probably around 10 per cent. Now that we are seeing a stabilisation, a decrease in the number of deaths and orphans, we are putting a lot more focus on prevention, especially among young people. We know that what we are doing now, in terms of treatment, care and support, is not sustainable if the level of infection does not go down."

It is a formidable task, she admits, and one that will require fundamental changes in social attitudes and gender relations in what remains a deeply patriarchal society. Education and media programmes have been introduced in a bid to raise aware-

ness of issues surrounding HIV/Aids, particularly among the younger generation.

The government is also very much aware of the need to target males, Tlou says. It has set up a special taskforce involving the army and police acting as role models. "They are telling me it is okay to care about Aids and have the test and also that it is macho not to transmit the virus. A lot of men have responded to that."

An extensive media campaign stressed similar messages. "The posters ran everywhere including on public transport," Tlou says. "It featured people men could identify with saying 'I care for my family, I'm a real man and I go for HIV testing'. That helped bring the number of men going for testing up to 25 per cent."

Another conundrum Botswana faced was how to erode stigma, denial and fear. "We live in communities where we all know each other so reducing the stigma was very important," says the minister. "In the Christian community, in particular, there was this idea that if you had Aids you had done something wrong."

"We had to make sure it was seen as a disease or a condition like any other, and that people living with it needed to be treated with respect."

Asked about worries that people in Botswana will no longer fear infection, as increased access to treatment prolongs the lives of those living with HIV, the minister admits it is a concern.

"Look at what happened elsewhere. Risky behaviour within the gay community in San Francisco actually went up after drugs were made available. So yes, there is a possibility that we could see that. We need to tell people this is not a cure, it's a treatment. They need to understand they are still very infectious."

Other African countries now turn to Botswana to learn how they can deal with the problem of HIV/Aids. Tlou says she would like to see other countries devote more resources to the issue. "In 2001, African leaders decided that in order to really fight HIV/Aids they must devote at least 15 per cent of the budget to it. So far, only four countries have done that."

"Our neighbour South Africa has an Aids programme but it is still far behind what we have. They have an interest but I don't know how much commitment they have."

"In Botswana the issue went beyond words to action that made a real difference. Political will and commitment is key."

## Information is the only vaccine

The Stamp Out Stigma campaign hopes to educate the public on what it means to live with HIV/Aids. Christine Bohan reports

James O'Connor's story is harrowing, but all too common. Having been diagnosed with the HIV virus in 1991 at the age of 27, his initial reaction was to worry about what other people would think. "The fear was not that I might die but the fear of, 'what if people found out?'," he says. "What if my family didn't want me to continue living with them? What if they ask me to move out of my childhood home on our tiny farm?"

Although his family's reaction was supportive, O'Connor found himself feeling increasingly isolated, overcome with fears about the stigma of his disease. "It became so difficult to go into the local town to pick up my disability allowance. Going to the HIV clinic in Dublin was even worse. I used to hide in the day ward until the doctor came to see me." At one stage he contemplated suicide.

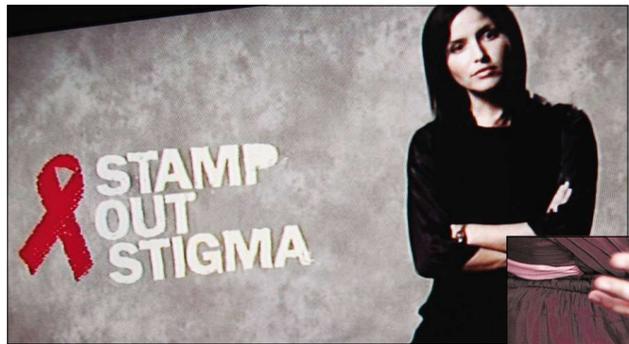
Over a decade and a half after his initial diagnosis, however, James's attitude has changed. "Today I am just James who happens to be HIV positive. I am living life to the full again and am part of a large supportive network of HIV-positive people and a network of great colleagues."

James's story is one of many included in a new book entitled *Personally Speaking: Breaking the Silence on HIV Related Stigma*, which documents the first-hand experiences of people with HIV both in Ireland and overseas. The book is one part of the Stamp Out

Stigma campaign, which is launching a series of initiatives to coincide with World Aids Day today. Other elements of the campaign include a TV advertisement featuring Irish celebrities voicing the experiences of people with HIV, a key study into attitudes towards people with HIV, and a series of workshops on the issue.

"There are so many issues that people with HIV face - rejection by people around them, difficulties in developing relationships, keeping a job and many others," says Mary O'Shea, director of the Dublin Aids Alliance and part of the Stamp Out Stigma campaign. "They don't want to be treated differently just because of their illness. A lot of the stigma comes from the fact that people just don't know enough about it."

The Stamp Out Stigma campaign came about following a declaration by Taoiseach Bertie Ahern in June 2006 that, "if we are to succeed in reversing this epidemic, we must also tackle the stigma and discrimination associated with it". Overseen by representatives from domestic and international development agencies, frontline workers, the HSE and HIV-positive people, and funded by the Department of Foreign Affairs and the Department of Health and Children, the campaign aims to highlight the irrationality of HIV-related stigma and challenge the discrimination faced by people living with HIV. "Negativity to people with HIV



Left, Andrea Corr is one of the people appearing in the Stamp Out Stigma television campaign. Below, the cover of *Personally Speaking*

is largely as a result of not having enough information," says Ciarán McKinney, director of the Gay and Lesbian Equality Network (Glen). "The consultation we carried out with people with HIV shows that they feel the greatest amount of stigma is caused by ignorance over how the disease is transmitted. This is especially true with regards to friends and family."

This would seem to be backed up by the results of the comprehensive survey carried out as part of the campaign. The research found that 84 per cent of those living with HIV who took part in the survey felt that they are viewed negatively by society, with the highest source of discrimination coming from either friends or from the local community. Some 50 per cent of the general public agreed that people with HIV are viewed negatively by society. Worryingly, the research also found that myths about HIV continue to perpetuate, with 23 per cent of the people surveyed agreeing that they would worry about eating a

meal prepared by someone with HIV.

Another part of the campaign is a series of TV advertisements aimed at highlighting the issue. Larry Mullen, Andrea Corr, Eamon Dunphy and John Rocha are all taking part in the ads, which are running from November 30th to December 9th. All of the scripts for the ads were taken from stories and experiences of people living with HIV.

Many of the experiences document the reaction of others to the person with HIV. "Disclosure is a major issue, especially when it comes to jobs," says O'Shea. "Should people tell? Will they be rejected or face discrimination? It's very difficult to judge."

Part of the aim of the campaign is to emphasise the links between people with HIV in Ireland and those in developing countries. "Their situations may be different but the stigma is the same," says McKinney. "In the future we hope to build on the successes of the year - stigma and discrimination won't just disappear after one campaign - but it's a start."

◆ [www.stampoutstigma.ie](http://www.stampoutstigma.ie)



### On the air Stamp Out Stigma's TV campaign

Each of the commercials for the Stamp Out Stigma TV campaign begins with the same striking approach. A well-known celebrity looks directly at the camera and says, "You don't know me, but . . ." before relating a real-life experience of stigma or discrimination faced by someone with HIV. The result is thought-provoking and, at times, harrowing.

"All of the scripts for the ads were taken from the actual experiences of people living with HIV," explains Mary O'Shea, director of the Dublin Aids Alliance and a member of the committee overseeing the Stamp Out Stigma campaign. "The testimonies come from Irish people as well as people living with HIV in other parts of the world to emphasise how stigma is a global issue."

The celebrities

involved are U2 drummer Larry Mullen, the lead singer with the Corrs Andrea Corr, football pundit and commentator Eamon Dunphy, and fashion designer John Rocha. The adverts were launched on Thursday by the Minister of State with responsibility for Equality issues at the Department of Justice, Equality and Law Reform, Seán Power.

"The consequences of HIV-related stigma can be catastrophic," says Noel Walsh, chairperson of the Stamp Out Stigma campaign. "Prejudice is one of the barriers that prevents people coming forward for HIV testing. With early testing people can access appropriate treatment and support and as a result live longer and have more productive lives."

"People living with HIV want to be treated equally - many of the prejudices towards people living with HIV are as a result of misinformation and ignorance."

While the Stamp Out Stigma campaign will bring the issue of HIV-related stigma to the forefront, it is up to each person to challenge their perceptions about how they view and behave towards people living with HIV and Aids. We are ensuring that the educational tools are available for people to take the first steps.

"The campaign plans to use different forms of media to reach different audiences and age-groups," says Ciarán McKinney, director of gay health strategies at the Gay and Lesbian Equality Network (Glen) and a member of the committee overseeing the Stamp Out Stigma campaign. "Each of the parts of the campaign has a vital role to play in bringing about a greater level of awareness among the public on both sides of the border."

The adverts will run until December 9th and can be seen on RTÉ1, RTÉ2, UTV and TV3.

### Vital statistics Attitudes towards Aids in Ireland

The research report into attitudes towards people with HIV in Ireland in 2007 is one of the most comprehensive of its kind and throws up some interesting results.

There is evidence of wide-spread misconceptions about the spread of the disease, with 23 per cent of people agreeing that they would be worried about eating a meal that was prepared by someone with HIV, despite the fact that there would be no risk of transmission.

When it comes to attitudes towards people with HIV, people living with HIV were more likely than the general public to agree with the perception that there is a negative perception of people living with the virus. Some 84 per cent of those living with HIV agree, compared to 54 per cent of the general public.

The research found clear evidence of stigma and discrimination towards people

living with HIV in Ireland, with varying degrees across different sections of society. The highest level of discrimination experienced by people living with HIV comes, somewhat surprisingly, from friends (49 per cent) followed by the local community (43 per cent). Some 28 per cent of people said that they had been discriminated against by their family.

The research also reveals considerable levels of discrimination from the medical profession. Of the respondents who were HIV positive, 37 per cent claimed to have been discriminated against by a doctor and 34 per cent by a dentist.

The lowest level of discrimination reported was from HIV treatment clinics (15 per cent).

Over one-third of respondents (37 per cent) agreed that if a family member were to contact the virus they would keep the HIV

status of the person a secret.

Alongside this, however, there is a notable level of sympathy and understanding among the general public towards those with HIV and Aids; 77 per cent agreed that people with HIV should not be ashamed of themselves, while 15 per cent agreed that people with HIV "only have themselves to blame".

The research revealed some concerns about employing people with HIV. It is highest for doctors and dentists, where 65 per cent of them claim to have concerns, followed by schools at 32 per cent and small businesses at 30 per cent.

The report combines the findings from three research studies, including a telephone survey of more than 1,000 people around the country on attitudes to HIV, a self-completed survey by people living with HIV and a survey on people in the workplace with HIV and AIDS.