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Durban (News Articles) [1]

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24/01/01

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BABY BOOM AT SPECSAVERS BLUFF.

"IMPORTANT NOTICE"

Mrs Louise Anderson (Visser) would like to let her loyal patients of the past 7 years know that she will be on maternity leave from 1 July until the end of October. She is expecting twins but intends to return to her normal working schedule from November. Mrs Carmin Hall who has worked for her for the past year is on maternity leave now and will return to work in September. We welcome Mr Grant Sapsford to our practice who will be working with us for the next 4 months. He is

Briefs

Hospice draw

RESULTS of Highway Hospice's '2000 Club' draw for May are:

First prize of R20 000, Robbie Howell, second prize of R2 000, Prof GJ Fleming, third prize of R1 000 Mr D Knowles.

Twenty consolation prize winners of R100 each, are: P Schoeman, FL Knott, Mr and Mrs Percival, Mrs DC Oosthuizen, Mr and Mrs TP Puttick, WJ Campbell, P Carnegie, G Lammers, 'Forty-fifth Gang', Mary Alexander, ME Gregory, M Shenton, Mr V Naidoo, RE Griffin, R McCann, Dr M Lane, L Grisdale, AG Rein, GB Bradfield and EC Barth.

For details on how to join the club, phone 208-6110

Witnesses wanted

A MONTCLAIR woman appeals to anyone who saw her red Nissan Sentra being scratched by a passing car on Saturday, June 3, to contact her.

Lillian Matthee's car was parked at Montclair Mall from 10am to noon.

When she returned, she noticed the front passenger door had been scratched by a white car. The car guards had not seen what happened and could not provide details of the vehicle.

Anyone who may have witnessed the incident can contact Mrs Matthee on 450-5010 or 083 438-3591.

PARK PATROL SECURITY SERVICES

- ★ Guarding Services (Armed & Unarmed)
- ★ Electronic Burglar Alarms
- ★ Access Control

Expo for budding scientists

DEADLINE for the University of Natal's 'Natal Expo for Young Scientists' is approaching, and school pupils are urged to get their entries in on time.

All school pupils can enter until July 21. Late entries will be charged a double fee.

The expo is one of the most important

celebrations of talent and innovation in the academic year. The aim is to provide an opportunity for budding scientists to display their work, interests and activities in science and technology. Exhibitors discuss their work with

judges, fellow participants and members of the public. The expo competitions are open to all pupils interested in any branch of science, including mathematics, biology, technology, geography and the human sciences.

The expo is held

over two days this year, on Tuesday and Wednesday, August 15 and 16. Venue is again the Old Mutual Sports Hall on the University of Natal's Durban campus.

Any school which has not received the expo prospectus, can contact chairman Jean Westermann on 039 682-2553 or fax 039 682-5002.

Road works

MOTORISTS can anticipate traffic disruptions while Brickfield Road is resurfaced.

Work will be completed by Friday, June 16. Traffic may be expected to travel contra flow in the existing carriageways and there could be restrictions and delays.

Rotary Anns help Shepherd's Keep

A SUBSTANTIAL donation of R2,000 from Durban Rotary Anns last week will go a long way towards helping Shepherd's Keep Home for Abandoned Babies on the Bluff.

According to Rotary Anns president Shirley Willett, they identified the 'special need' which exists at the home.

"We realised that these children of up to six months old are sur-

rounded by love, and this is our way of commending the Pratleys for the tireless work they do," Mrs Willett said. "The home is well run and managed and the children benefit from the loving atmosphere that surrounds them."

Colin, Cheryl and Michelle Pratley thanked the Rotary Anns, as well as all their other sponsors and donors, for their support.

HIGH TIDES

TUES 6	0618	1847
WED 7	0709	1942
THUR 8	0808	2050
FRI 9	0922	2213
SAT 10	1049	2325

Weekend weather

Saturday

Min: 11°C

Max: 25°C

Fine becoming cloudy

Sunday



angels of love

IN ORDER to truly cultivate an African renaissance, we need to begin at grassroots. Just as a tree only becomes strong and healthy after its seed

has been nurtured, so must South Africa's babies be loved and given opportunities to realise their potential. The African renaissance that President Thabo Mbeki envisages can only be accomplished if Africa gives priority to establishing a stable family structure."

This is the message that Durban's Mr Colin Pratley has for the President.

To say that Pratley and his wife, Cheryl, are angels of love and hope for abandoned babies is an understatement. The dynamic duo are founders of a flagship facility: Shepherd's Keep, on Durban's Bluff, which cares for abandoned babies before they are adopted.

Having started out as "crisis parents" for an abandoned baby, the Pratleys have converted

AT THIS TIME OF YEAR, WHEN WE ARE LOOKING FORWARD TO FESTIVE TIMES WITH OUR FAMILIES, GENERATION YDN REPORTERS **SEEMA DIAHMAN** AND **ASHMIKA MAHARAJ** VISITED A COUPLE WHO DEVOTE THEIR LIVES TO HELPING THE MOST NEEDY AND HELPLESS ABANDONED BABIES.

their house into a full-time care facility which currently shelters 15 babies.

We were initially apprehensive about visiting Shepherd's Keep because we knew that the home housed abandoned babies, some living with HIV and Aids. With hindsight, we realise that by overcoming our cowardice and visiting the home we are richer for the experience.

Nothing could prepare us for the warmth and love that radiates there. The Pratleys do not run a conventional "home", they instead provide a warm and loving temporary "family" for the babies.

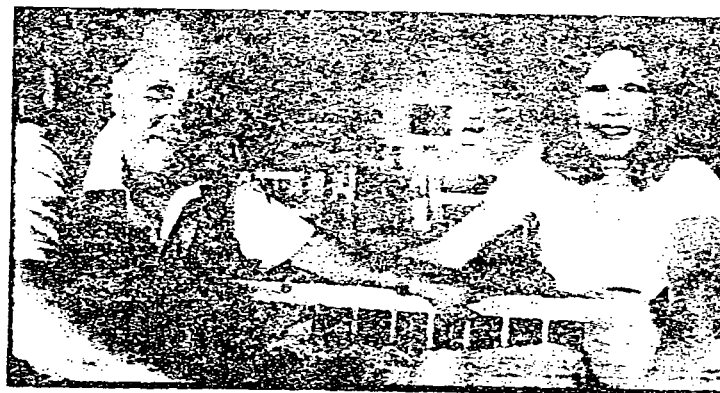
Shepherd's Keep is a recognised facility and therefore the Pratleys often liaise with the police. It is not

uncommon for them to be awakened at 3am by the police to accept another abandoned baby.

We expected to find sick and distressed babies, because we knew of their past trauma and medical history. We could not have been more wrong: the nursery is a haven of happy and gurgling tots.

After hearing about the individual babies' life stories, we were shocked at the contrast between what we heard and what we saw: Heaps of love, attention, good nutrition and expert medical care, courtesy of the Keep's founders, helpers and staff, all contribute to this.

Cheryl says each baby has its own diet and individual medical attention. Her voice is raw with emotion as she speaks about the



traumatised condition of the babies when they initially arrived. However, both Cheryl and Colin are happy as they speak of the joy they feel when a "Pratley baby" is adopted. Shepherd's Keep has a 100% adoption rate, including people from overseas. Colin jokingly remarks that there are many Pratley babies around the world.

The couple have overcome tremendous hurdles in order to realise their dream of providing a sound footing in life for abandoned infants. After

initial opposition from most quarters, including their local community, Shepherd's Keep is now a well-established facility.

One does not often associate a role-model with an "ordinary" person, yet the Pratleys are sterling examples of all that a role model should be.

So what is the couple's attitude towards parents who abandon their babies, considering that a few have been found in toilets and gutters? Amazingly, they bear no malice, especially for the mothers. With a sincerity that is

tangible, Cheryl explained to these two wide-eyed Generation YDN reporters that the mother must have been in an unbearable state of mind to resort to abandoning her baby.

The Pratleys restore one's faith in the goodness of humanity. To see Cheryl cooing into the ear of a baby living with Aids is enough to reduce the most stoic cynic to tears.

We sometimes cringe at the thought of helping younger siblings because we have to sacrifice our time. Listening to the Pratleys describe their 24-hour facility, one rethinks one's stance about those in need.

The message we took away from our experience is that if one is blessed with a gift, like the Pratley's gift of compassion, use it to benefit as many people as possible – like the abandoned babies of Shepherd's Keep.

Shepherd's Keep relies solely on fund-raising to keep afloat. You could help a Shepherd's Keep baby to have a happy Christmas by phoning (031) 466 6100.

Highway scene

09:40

WATFORD OBSERVER EDITORIAL

ID=

Observer Newspapers

Pienaar sends home a precious gift

THE future of a home for orphans in South Africa has been assured by the generosity of the Saracens rugby players.

The Shepherd's Keep Home for Abandoned Babies in Natal was struggling financially and was threatened with closure until it appealed to rugby star Francois Pienaar for support.

The former Springbok captain and Saracens player gave a talk to his team mates about the work of Shepherd's Keep and they came up with £1,500 for the orphanage.

Saracens' team administration manager, Mike Scott, said: "Francois told the others about Shepherd's Keep and they were only too happy to help out.

"The Keep was struggling but the cash we sent has helped out and they are in a sounder position now."

Mr Colin Peatey, one of the founders of Shepherd's Keep, said: "The Saracens Rugby Club saved the day for us here in Natal. The Saracens have met our heartfelt universal appeal."

The Watford Observer
Watford Free Observer
St Albans and Harpenden Observer
United Edition Magazine

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for the period

January 1997 to December 1997

Date: 21. 11. 97

Mrs. M. Majority

Team Manager

Mrs. D. Nielson

Senior Manager



"STRENGTH IS UNITY"



Off-duty cop assaulted at home

AN OFF-DUTY policeman was seriously injured after he was beaten up at home last Tuesday night.

Details about the attack are sketchy, as the victim, Chris Heine, is suffering from amnesia follow-

ing the assault.

Mr Heine, 32, a policeman at Jacobs SAPS garage, was allegedly assaulted by three men while at his Channel View Road flat. He had returned from a night out with friends.

The men's identity is unknown at this stage.

REVENGE

Police believe the motive may be revenge, as the men fled without taking any-

thing. Chris' wallet containing money, was found left at the scene.

Chris was taken to St Augustine's Hospital with serious injuries.

Neighbours heard a scuffle at about 9.30pm, coming from Chris' flat.

Anyone who saw any suspicious people or vehicles in the vicinity is asked to contact investigating officers, Sgt Lynette Greyling on 467-1051 or Insp Vic Starbuck at Brighton Beach SAPS on 083 555-0711.

Shepherds Keep on the right track

THE TIDE has turned for Shepherd's Keep, the Bluff home for abandoned babies.

The home, which is run by Colin and Cheryl Pratley from their Keston Place residence, has been running for some time now.

But initial resentment they felt at the hands of neighbours ignorant of their true purpose, has been replaced with much enthusiasm and support by locals.

"Initially people were ignorant of our purpose, of what we are doing," Colin said. "Now that people are aware of what our work entails, they're very support-

Since publishing an article on the home's work, the SUN has been inundated with calls from locals interested in supporting or donating baby items.

The future looks even rosier for the home, as the Pratleys

were recently notified that their town planning rezoning has application has been approved, with certain conditions applying.

- Colin Pratley

Pratleys thank everyone who has donated items for use for their kindness.

Donations are appreciated.

The home's contact number is 466-6106 or contact Cheryl or Colin on

THE RELEASE from prison of convicted paedophile, Darren Till, has sent shockwaves through the Montclair community.

Concerned parents have pasted posters around Till's Montclair home, venting their feelings about his release.

Parents phoned the SUN to complain about the 'gross injustice' made by the courts in his release. They also expressed doubts about their children's safety.

Till's sentence to an effective seven years on eight child abuse charges and one of kidnapping, was converted to house arrest, with community service and on condition that he agree to counselling by

Childline. A four-year imprisonment sentence has been suspended for five years.

Till is believed to be in his early 20s.

Child Protection Unit investigating officer, Insp Glen Smith, said Till had fetched children from school, telling them he had been sent by their parents.

MASSES

When arrested, masses of photographs of nude children were seized from his home. Till's activities involved children as young as six years. A hand-written book, in Till's writing, containing 'fantasies' was also seized.

Concern has been expressed about the message the sentence

sends to other paedophiles.

"This judgement damages the confidence of the public and discourages those working within the justice system," a policeman said.

Montclair SAPS station commissioner Supt. Carel Grobler told the SUN that Till was serving four hours of community service a week at the station.

For the next three years Till may not leave his home except to report for community service at the police station on Saturday mornings.

"Should these conditions not be adhered to, the full sentence including jail time may be imposed," Supt. Grobler explained.

Convicted paedophile's release sparks outrage

Armed robbers



Picture caption: Love Africa launch. From left to right, Fouletia Yusu, Whitfield, Jefferson and Joice Madhala. Seated, Trevor Nelson.

Radio 1 DJ and MTV presenter Trevor Nelson (who clearly knows a good publication when he sees one) launched the new Love Africa website at the University of North London's Rocket Complex on World AIDS Day.

Aided and abetted by comedy duo Jefferson and Whitfield and 100 metre and 200 metre champion athlete Joice Madhala a HIV question session followed with prizes being given out to those lucky enough to know the answers.

This was part of a national programme of work funded by the Department of Health and Communities by the Enfield and Haringey Health Authority to carry out HIV prevention with African communities.

Love Africa covers safer sex information, treatment and how to get help should you become infected and is designed for young Africans living in the UK, especially students who do not have contact with community groups here in the UK.

To access the well designed and user friendly website, log onto www.loveafrica.org

Turn to pages 22 and 23 to read how Enfield and Haringey Health Authority work with local African Community Groups. 

Drumming Up Support for Abandoned Children

For 23 years, Colin Pratley toured the world as a session drummer until the discovery of an abandoned child placed on his doorstep one night irrevocably changed his life.

With his wife Cheryl he cared for the child and in response to the growing problem of abandoned children in Kwa Zulu, Natal, South Africa, the couple set up 'Shepherd's Keep' a home for abandoned babies. Since June 1998 they have cared for 79 babies and, recognised by the Durban Child Protection Unit for the care they provide, are set to become fantastically busy caring for more and more children.

The 'Keep' needs £3,631 each month to provide staff, medicine, nappies, nutrition, water, lights and maintenance and the team have come up with the idea of producing traditional drums to raise the necessary income and keep the home going.

The Uvungu Shine Zulu drum has a distinctively South African sound and is individually handmade by local craftsmen. Now available in the UK, purchase of one of these drums will help ensure both the home and its children's survival.

The drums can be bought for £50 and cheques should be made out to Shepherd's Keep and sent to Shepherd's Keep c/o Wrasse Records, 76 Inglethorpe Street, Fulham SW6 6NX.



Please also include the address you would like the drum sent to. On receipt of your cheque, the drum will arrive at your chosen destination within three days. 

GENERATION YDN



PICTURES: PETER DUFFY

WE WANTED TO TAKE THEM HOME: Generation YDN reporters Seema Diahnan (above) and Ashmika Maharaj (above right) with two of the cherished babies at Shepherd's Keep. Below, Cheryl and Colin Pratley, founders of the Shepherd's Keep refuge for abandoned babies

angels of love

A Bluff couple have become the guardian angels of Durban's unwanted babies. **MEGAN POWER** reports.

The spring sunshine filters through the nursery's pale pink gingham curtains, lighting up a blue handmade cradle and five empty wooden cots. Cupboards are laden with hundreds of small folded jerseys, woollen bonnets and satin booties, while thousands of new nappies line the shelves.

Ten bright plastic rattles lie silently on the dresser while Peter Rabbit, Donald Duck and a host of furry friends stand guard around the room. The anticipation is almost tangible.

Any day now, the nursery will become home to some 20 abandoned babies with Colin and Cheryl Pratley becoming instant parents. And they're well prepared.

The welcoming nursery leads into a dressing room where cupboard doors swing open to reveal hundreds of brand-new hand knitted jerseys and jackets, and drawers overflow with matching bonnets, booties and bundles of tiny babygrows.

Then there's the adjoining bathroom where neat rows of yellow sponge ducks are ready for their little charges. Even the isolation room - where the Pratleys will temporarily confine a sick baby to avoid the spread of infection - is kitted out Disney-style.

A million children

"We want to touch the lives of a million children before our lives are over. God gave us a vision and we prayed to be given an opportunity to become more effective. This is our way," says 52-year-old grandmother Cheryl, a former nurse who has been a Durban Child Welfare "crisis parent" for several years. Crisis parents take brief - often just overnight - responsibility for babies before a court order is made sending them to a particular home.

"I had been taking one abandoned baby at a time and thought that I could be more effective if I could handle more babies and for longer. We had just moved into a small flat, so we had to find a bigger home." Six months later, the couple took occupation of a six-bedroomed, four-bathroomed house on the Bluff set on more than a hectare of land complete with pool, gazebo, three-bedroomed cottage, four garages and a magnificent view of the city. It will be known as Shepherd's Keep Home for Abandoned Babies.

The Pratleys will share their home - overseen by a six-member

Angels of the unwanted



LOVE KNITTED INTO EVERY STITCH: Cupboards are laden with hundreds of knitted jerseys, bonnets, receiving blankets and babygrows, ready for abandoned babies like the one above.

committee - with children under six months.

"I know it's going to be difficult letting go of these babies eventually but I've worked through this problem and I've come to terms with the fact that I'm just a facility, providing a link between the desperate circumstances under which children are abandoned and the normality of a foster home. Hopefully, we'll help to ease the burden of the foster parent who will take responsibility for a far less traumatised baby," says

Cheryl, who will move out of her bedroom and sleep in the nursery's single bed when the babies first arrive.

Once the registration of the home is complete, the courts will be able to place abandoned babies at Shepherd's Keep officially. And once there, the babies can be named.

"We'll probably give them biblical first names. But their surnames will be Pratley. There're going to be a lot of little Pratley babies around!" says Colin, a drummer who once

played with world-renowned group Ipi Tombi and is now raising money by exporting his handmade African drums to the United Kingdom.

"The response from the community has been overwhelming. Everything we've got ready for the babies, we've been given. One Bluff shopkeeper donated 2 000 nappies. Every time we go to church, we leave with bags of clothes knitted by the elderly churchgoers. And these people have knitted love into every stitch," Cheryl says.

This month alone, the mother of four cared for nine infants, all of whom have been taken to their home late at night by weary policemen.

"The babies arrived in a terrible state. Their little fists were tightly clenched which is a sure indicator of anxiety. They had been abandoned in dustbins and parks and were freezing, hungry and traumatised from being alone."

On each occasion, the Pratleys bathed, dressed and fed the child. Then Cheryl stayed up all night slowly rocking the distressed child to sleep. The next day, the child appeared in court and was placed elsewhere, never to be seen by the Pratleys again.

Change

All this will change when Shepherd's Keep is given the go-ahead. The children will be returned to the Pratleys after they've appeared in court, guaranteeing at least three months of constant love and affection from the couple before a suitable home is found.

"This home is the flagship for a much broader vision. We're going to open up homes like this throughout the country. We need to break the legacy of Africa," says Colin.

Head of Durban's Child Protection Unit, Superintendent Mahomed Dawood, is delighted. "We've been using the home as an emergency facility, especially after hours, and it's been wonderful not having to run around desperately looking for a suitable place of safety."

"I've visited the Pratley home and I know the children will be well taken care of."

A spokesman from the Child, Family and Community Care Centre of Durban, Oona Velen, also welcomed the new home.

"It's really wonderful that someone has finally decided to do something about sheltering abandoned babies. The state institutions are overcrowded and understaffed. Although the care is good, staff are often unable to provide the quality of care the children need, like lots of love, hugs and attention."

In the past six months, more than 60 babies have been found abandoned in Durban.



PENDING PARENTS: Colin and Cheryl Pratley will soon be filling their little cots with abandoned babies.

Pictures: THEMBA DWAYISA

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0779
with
MTN
Fair,
na Up
estival,
ndam.

name the achievers

Since 1998, Eskom, the national electricity supplier, has been sponsoring a programme that recognises disabled women achievers. The Eskom Disabled Woman Achiever Award (EDWAA) is designed to integrate disabled women into mainstream society, encourage disabled women to be in control of their lives and create role models for disabled girls. Here is your chance to nominate a worthy disabled woman who deserves recognition. For further information or to obtain nomination forms, please contact Dawn Terna, ☎ (011) 782-8430 or Fax: (011) 782-3517. Closing date for nomination is 21 February 2000.

add 10 to a plan

It takes only five minutes to create a floral display with...

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- plant pot
- fabric long enough to wrap around container and twice its depth
- masking tape
- pins
- scrap of chicken wire

1 Clean the plant pot and dry it thoroughly. Fold 3cm of fabric over to the wrong side along each edge and iron folds into place.



2 Place fabric face down on a flat surface. Position pot on its side at one end of the fabric.

meet a special person

100% human award

Cheryl Pratley is the founder of Shepherd's Keep, a home for abandoned babies situated on the Bluff in Durban.

Cheryl shares how she started Shepherd's Keep: 'I started off being a crisis parent, wanting to make a difference in the life of a baby who had nowhere to go. With the full and loving support of my wonderful

husband, Colin, my nursing experience and having had our own four children and grandchildren, I went through the screening process set up by the Department of Welfare and was successful. I received my first baby, Joshua, who was HIV

positive. After taking care of several crisis babies, I realised that I could be more effective if I had a home and could take more than one baby at a time.

'I could see the relief on the social workers' faces when they found someone who was willing to help. The rise of the HIV/AIDS epidemic has left desperate mothers who know they are dying and just don't know who to turn to with their babies.

'I was adamant that this home would not be like any other babies' home, but a home away from home.

'My staff would be trained to love the babies, not to let them cry but to assuage the feelings of rejection brought about by their abandonment. When we moved into our new home, everything came together with the loving help of our family.'



Nominate a special person for the 100% Human Award. Each month we will focus on someone who is making a difference in their community. Listen to the **Very Chocolate Box Show** presented by **Di Brophy** (right) weekdays between 9am and noon on East Coast Radio and nominate your choice, or write to 100% Human Award, Woman's Value, Box 1802, Cape Town 8000.

go sports

Triangular ODI Series

02 Feb (6th), SA vs Zimbabwe
04 Feb (7th), SA vs England in
09 Feb (9th), England vs Zimbabwe
12 Feb (Final), final vs final in

Standard Bank Cup

11 Feb, Boland vs Eastern Province
18 Feb, MTN WP vs Northern
23 Feb, Free State vs Western Province
23 Feb, North West vs KwaZulu
25 Feb, Griqualand West vs Eastern
25 Feb, Northern vs Boland at
27 Feb, Free State Vs North West

They're herding the young flock

DESPITE facing opposition from locals initially, 'Shepherd's Keep', a home for abandoned babies on the Bluff, is steadfast in its attempts to help children.

Run by Colin and Cheryl Pratley, the home caters for abandoned babies between birth and six months of age.

Situated in Keston Place, the home was initially thought to be a haven solely for HIV-infected babies. "Locals got all kinds of wrong ideas about the place. They thought people would be queueing outside

and objected to the town planning rezoning," Colin said.

He said they had to endure abusive comments and were shunned. "Fortunately people have come to

understand what it is we're doing and they've accepted us," he said. "Now we're concen-

trating on enriching the children's lives."

The home has had about 50 babies through its doors in the last six months. Some are placed with them by the courts, while others are through the Child Protection Unit (CPU).



Colin and Cheryl Pratley with one of their current charges, 'Oliver'.

CPU spokesman, Cpt Small, said the home is an asset to the unit, which makes use of its services at all hours. "It's often difficult to find a place at night or in the early hours of the morning especially,"

she said.

The home relies almost entirely on private funding and sponsorship. Colin was proud of his achievements when former Springbok rugby captain, Francois Pienaar, and his new

team, Saracens, praised their work.

"This kind of recognition, and knowing that we play an important role in the lives of these children, make it all worthwhile," Colin said.

Pienaar sends home a precious gift

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Northglen

NEWS

APRIL 2, 1999 P.O. BOX 16, Pinetown TEL/FAX:830244 (Editorial) FAX:70

Help and care for abandoned children

**Northglen News
Reporter**

SHEPERD'S Keep is a home for abandoned babies that is situated on the Bluff and is run by the husband and wife team of Colin and Cheryl Pratley.

The home has been up and running for near on three years now and has cared for 70 babies during this time and the home also has a staff of 13 people who care for the infants until such time as they are adopted or are fostered.

As the statistics for abandoned babies are dramatically on the increase so there is a demand for such a facility, which has been commended by the Department of Welfare and serves the greater Durban area.

The home is well known by all the public services such as the Child Protection Unit, the SAPS and emergency services and many babies found abandoned by these public servants are brought to the home. Many of the

babies that are discovered have simply been dumped in desolate areas. The Sheperd's Keep provides a much needed link between the desperate circumstances under which the child was abandoned and the normality of a foster home, helping to pave the way for the foster parents who will take responsibility for a far less traumatised baby.

At present the home can take five babies at any one time but Colin and Cheryl are in the process of increasing the size of the home and hope that the new facilities will accommodate up to 20 children. One of the rooms at the Sheperd's Keep requires a vinyl floor and a sponsor is sought to make this contribution.

At present there are a number of individuals and companies that have taken the cause of the abandoned babies to their hearts and have helped to provide for the infants.

One such company is Buxtons in Umhlanga who have a trolley at

their premises which can be filled with baby goods by the public and is then each week taken to the home on the Bluff.

At present the Sheperd's Keep is in need of nursery goods, disposable nappies, ster-

ilizers, bottles and teats and toiletries. If anyone in the Umhlanga or Durban North areas would like to donate goods but cannot get to the Bluff then they can drop the goods off at the residence of Janine Wood at 25 Wager Ave-

nue, Prestondale. Mrs Wood will be more than happy to transport the goods to the home.

Cheques can be made out to "Sheperd's Keep" and can be posted to 12 Keston Crescent, Marlborough Park, Bluff, 4052.



COLIN and Cheryl Pratley with two of the abandoned children that they have cared for.

East Coast Radio

94/95

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THE MERCURY

AND BUSINESS REPORT

MONDAY, OCTOBER 4, 1999

Baby saved after being abandoned on N3

JILLIAN GREEN

A TWO-WEEK-OLD baby girl was rescued from almost certain death when a stranger removed her from the fast lane of the N3 near Tollgate bridge in Durban on Friday.

The baby was placed in the road by her mother who reportedly told the woman that she "was getting

rid of some dagga that she no longer wanted".

According to the investigating officer, Sgt Mark Hardwick of the Durban Child Protection Unit, a woman noticed the mother putting a "parcel" down and queried what she was doing.

"That was when the mother responded that she was getting rid of some dagga," he said.

The woman went to investigate what was really in the parcel and found the baby.

Sgt Hardwick said she then contacted the police and the Child Protection Unit later took the baby to a place of safety on the Bluff.

Investigations led to the arrest of a 24-year-old woman in Brickfield Road. The woman, who was from central Durban, would appear in

court today on charges of attempted murder and child abandonment.

Sgt Hardwick said child abandonment was on the increase.

The child would be kept at the place of safety until the children's court had completed its inquiry.

The baby would then either be placed in a state institution or put up for adoption.

FOR ATTENTION: MR. TREVOR YOKO.



DOREEN MORRIS

Shepherds watch their flocks

By SALLY SCOTT

CHARITY begins at home, they say, and home is exactly where Colin and Cheryl Pratley have established their hugely-successful haven for abandoned babies.

Shepherd's Keep at 12 Reston Crescent on the Bluff is currently home to nine little souls, who did not exactly have a great start in life (imagine being a newborn and dumped head first into a toilet), but with plenty of TLC from the Pratleys and their dedicated staff, these babies are starting new lives of hope, even though the home depends entirely on donations.

Shepherd's Keep is just one of the KwaZulu-Natal charities which will be featured on M-Net's weekly programme, M-Net Cares, which has been on air for six years now and is devoted to promoting the valuable work of NGOs and charities across South Africa.

There are, of course, thousands of worthy charities all over SA, and

M-Net Cares is "inundated" with requests; in fact, they are already booked up three years in advance.

So, for 42 weeks a year



PICTURE: PURI DEVJEE

Cheryl Pratley, the co-owner of Shepherd's Keep with baby Joy, who was thrown out of a car travelling in the fast-lane under the Ridge Road Tollgate Bridge early last year

Babies' home appeal

By GRAEME HOSKEN

A HOME on Durban's Bluff for abandoned babies is making an urgent appeal for adoptive and foster parents to come forward and make a difference to a child's life.

Shepherd's Keep, which is a home for abandoned HIV-positive babies and those living with or orphaned by Aids, is appealing to the public for contributions.

Mrs Cheryl Pratley, who runs the home with her husband, Colin, said people were "very afraid to adopt" such babies.

"What people do not realise is that a lot of the babies who are born to mothers who have Aids are not necessarily HIV-positive."

Durban paediatrician Dr Graham Ducass said: "Babies go through a period where they are in constant contact with their mothers, making them highly susceptible to the HIV virus."

"If they are kept away from their mothers after they are born and given lots of love, nutrition and care, and provided they have their mothers' antibodies, most babies should shift from HIV-positive to negative."

Said Mrs Pratley: "This is a home away from home, and all the babies receive specialised attention."

Out of the 113 babies that have passed through their doors, only one has died from Aids so far.

"At the moment we have nine babies, six of whom are HIV-negative and are desperately waiting for a family to adopt or foster them."

"We rely on donations alone and are very desperate. We are appealing to the public for help."

Colin and Cheryl Pratley can be contacted on 083-778-7302 or (031) 466-6106.

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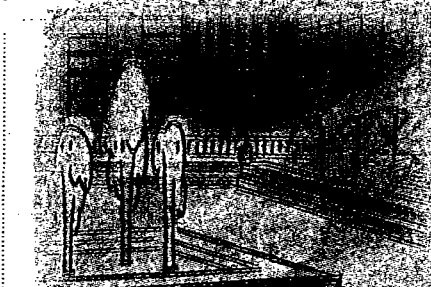
Towns in business

Tourism rejuvenates Knysna, the former 'timber town'
Page 2



Transnet

From stodgy utility to a new-economy conglomerate
Page 13



Property

R2bn Melrose Arch complex on track, developer claims
Page 14

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News

Pipeline explosion

AS MANY as 250 people may have been killed by an exploding pipeline in Nigeria. The British Broadcasting Corporation quoted villagers yesterday as saying the explosion had taken place on Monday while people were using buckets to collect petrol flowing from the pipeline after it had been punctured by thieves on Sunday night.

The BBC said the incident occurred at Adeje village in the oil-rich Niger Delta region. In a similar explosion in 1998, about 1 000 people died at the nearby village of Jesse.

Cutting city's losses

THE Johannesburg Metropolitan Council hopes that teaming up with a private water operator will help it cut its revenue losses from hundreds of thousands of consumers who are not paying for its services. **Page 3**

Chance for an upgrade

SA HAS a better-than-even chance of being put on review for a possible credit rating upgrade from international credit rating agency Moody's Investor's Service within the 12 to 18

Business

LIFE companies will start to avoid the low-premium government employee market as the recently announced termination of loan deductions from state payrolls will result in higher lapse rates, African Life said yesterday.

Like the major microlenders, AfLife's share has been seriously affected by government's recent announcement. Yesterday it lost 4% to R23, bringing its decline in the last month to 11% and in the last year to 50%. **Page 15**

GOLD Reef Casino Resorts has been awarded its second casino licence—a boon to future revenue if the gaming industry continues to be the fastest-growing component of the leisure industry. The group has also applied for licences in Richards Bay, Maritzburg, George and East London. **Page 16**

BECAUSE of inconsistent shipments, Japanese buyers are expected to reduce their dependence on Russian platinum group metals under long-term contract in 2000, say some buyer sources. **Page 16**

TOYOTA Motor Corporation of Japan has increased its

AIDS is likely to consume 7,5% of companies' payroll

Nirode Bramdaw

DURBAN — SA companies may have to set aside as much as 7,5% of their annual payroll to fund losses incurred by AIDS infection, a Harvard University survey has shown.

An HIV-positive employee will cost an employer five to eight times his or her annual salary, often over a seven-year term, by which time the disease is often fatal, the survey says.

The research findings, which were released at the 13th International AIDS conference in Durban yesterday, are based on the actual costs following an analysis of an SA company with 10 000 employees last year.

The impact HIV/AIDS is having on African business is unlike anything seen before, Donald Thea, an academic on the research team, said yesterday. He said that in contrast with malaria, diarrhoeal diseases and other common infectious diseases, which kill mainly infants, children, the elderly and infirm, AIDS kills primarily young and middle-aged adults.

Despite the potentially ruinous impact of HIV/AIDS on African business,

Cost of production will climb as labour cost escalates and productivity falls



Mbeki seeks backing for G-8 address

Business Day Reporter and Sapa-AFP

LOME — As he prepared to address a summit of the world's richest nations, President Thabo Mbeki sought yesterday to secure the backing of fellow African leaders for an integrated plan to help in shoring up the continent's economic revival.

Aides to the SA leader said Mbeki, who is also chairman of the Nonaligned Movement, made the input during the second day of the summit of the Organisation of African Unity (OAU) in Lomé, Togo's capital.

Mbeki has previously called for a plan to help encourage investments to Africa, to press for debt relief, secure greater market access for Africa's exports and help the fight the ill-health plaguing the continent. Other components of the initiative, which has the backing of the UK and US, include helping the continent promote stability.

Together with Nigerian leader Olusegun Obasanjo, Mbeki has been asked to represent the G-77 group of developing countries at next week's summit of the Group of Eight. His ideas on Africa's economic renaissance are expected to be discussed.

Mbeki, who has championed the cause of developing nations on world

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July 11, 2000

South Africa Faults Critics of Its President on AIDS Stance

By RACHEL L. SWARNS

D URBAN, South Africa, July 10 -- Striking a defiant and combative tone, the South African government today lashed out at its increasingly vocal critics at the 13th International AIDS Conference, saying there was no need for President Thabo Mbeki to affirm that the human immunodeficiency virus, H.I.V., causes AIDS.

In Today's Times

- [AIDS Conference Continues in South Africa](#)

Issue in Depth

- [Health: The AIDS Epidemic](#)

The government was responding to the chorus of criticism from prominent scientists, physicians and activists here who today expressed their disappointment with Mr. Mbeki. He opened this conference on Sunday night with a speech in which he described extreme poverty, rather than AIDS, as the biggest killer in this country.

In recent months, Mr. Mbeki has consulted with two American researchers who argue that poverty and malnutrition -- and not H.I.V. -- cause AIDS, an argument that most established scientists say was debunked years ago. Today, in panel sessions and interviews, several participants said the president had squandered an opportunity to clarify

his position and to take a leadership role in fighting the disease and preventing the spread of the virus, which has infected four million people here.

Health Minister Manto Tshabalala-Msimang dismissed the criticism and accused the news media of distorting Mr. Mbeki's message. "The president of this country has never denied either the existence of AIDS nor this causal connection between H.I.V. and AIDS," she said at a news conference today. "But we reiterate our view that it is inappropriate to blame everything around this epidemic on the H.I.V. virus."

She added that "clearly, the relationship between H.I.V. and other social ills afflicting our society such as poverty and disease" is complex.

But in the corridors and halls of the conference here, many participants remained perplexed and confused by the president's reluctance to say what so many people wanted to hear. Some wondered whether he was too proud to back down. Others wondered whether Mr. Mbeki, who is an economist and an intellectual, simply remains unconvinced of the links between H.I.V. and AIDS.

No one disputes the link between poverty and H.I.V. and AIDS. Prostitutes, migrant laborers, the uneducated and victims of sexual violence are more vulnerable to infection. And poor people typically lack access to drugs that might prolong their lives.

But scientists and researchers fear that Mr. Mbeki's heavy emphasis on poverty may confuse people and cause them to continue risky sexual behavior.

Mark Wainberg, the president of the International Aids Society, the co-organizer of this conference, described Mr. Mbeki's speech, which was broadcast live on national television, as a "lost opportunity." American officials said privately that they feared that Mr. Mbeki had raised broader questions about the quality of his leadership.

A South African judge, Edwin Cameron, received a standing ovation after he delivered the conference's opening speech today and condemned Mr. Mbeki for wasting time on discredited theories while people were dying.

"This has shaken almost everyone responsible for engaging the epidemic," Judge Cameron, who is infected with H.I.V., said of Mr. Mbeki's stance. "It has created an air of unbelief among scientists, confusion among those at risk of H.I.V., and consternation among AIDS workers."

The health minister emphasized today that Mr. Mbeki was committed to combating the disease vigorously by encouraging safe sex and by sponsoring research on drug therapies and a possible vaccine, which has been applauded by researchers here.

Dr. Awa Coll-Seck, the director of the United Nations' department of aids policy, said she was encouraged to hear Mr. Mbeki mention the program in his speech on Sunday night. But Dr. Coll-Seck, who is from Senegal, said she feared that the safe-sex message might get lost in the emphasis on poverty.

"I was discouraged," Dr. Coll-Seck said.

"We were expecting him to be a leader."

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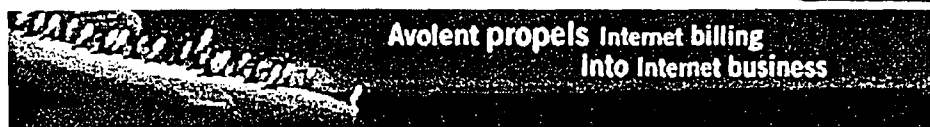
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July 11, 2000

Vaccine Targeting HIV in Africa Begins Human Tests This Summer

By MICHAEL WALDHOLZ

Staff Reporter of THE WALL STREET JOURNAL

DURBAN, South Africa -- Later this summer, researchers plan to begin the first human tests of an experimental vaccine developed to fight a strain of the AIDS virus that is spreading swiftly in Africa.

Scientists developing the new vaccine say they are cautiously hopeful about its prospects. It was specially designed to mimic the immune systems of a small number of women in Kenya who seem to carry a rare, inborn resistance to HIV, the AIDS virus. The women are prostitutes who have been repeatedly exposed to HIV by their clients but don't get infected with HIV or develop AIDS.

"If it winds up the vaccine is partially protective -- that is if it can protect 50% or so of the people vaccinated -- then we may have a vaccine that's useful in Africa, where the infection rates are so very high," says Andrew McMichael, an Oxford University immunologist who has spent the past few years trying to understand the biological reasons that the women appear to have a natural protection against HIV infection.

Dr. McMichael and his colleagues at the University of Nairobi in Kenya are expected to reveal details of the vaccine experiment Tuesday at the 13th International AIDS Conference here, which has drawn an estimated 10,000 people from all over the world.

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The first test, to begin in August in Britain in 18 healthy volunteers, is designed to see only if the newly created vaccine is safe and whether it can spark the kind of immune-system reaction the scientists believe is responsible for helping shield the Kenyan women.

Development of an effective AIDS vaccine is considered especially critical in Africa, where few experts believe preventive measures -- such as encouraging changes in high-risk behavior -- will do much to slow the spread of the deadly HIV virus. In addition, even if prices of powerful AIDS drugs come down, they will still be beyond the economic reach of most of the Africans expected to be stricken with the disease.

But even if initial tests prove successful, it is likely to be several years before researchers know how effective the new vaccine can be or whether it has the potential to be a useful tool against the virus in Africa.

While several other vaccines have been tested in people over the past few years, the one being developed by the Oxford and Nairobi scientists is expected to attract interest here because it is designed to thwart a strain of the virus that is common in many parts of Africa but not widely seen elsewhere. The most promising other attempt to develop a vaccine is being undertaken by [VaxGen Inc.](#), Brisbane, Calif., which now has vaccines for two different strains of HIV in late-stage human tests, one in North America and the other in Thailand. No other AIDS vaccines are this far along in development.

The new vaccine has been developed with unusual swiftness, thanks in part to funds provided by the International AIDS Vaccine Initiative, a small, New York-based nonprofit organization largely supported by about \$26 million from the Bill and Melinda Gates Foundation of Seattle.

The two universities and the British government's Medical Research Council, Britain's medical

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research funding agency, have sought to patent the vaccine's design, but IAVI owns the rights to market the vaccine -- if it ever proves successful -- in Africa and other parts of the developing world. IAVI's president, Seth Berkley, says the organization has supported the vaccine's development to date with \$5 million and has provided technical help to design the trials and gain regulatory approval, the kind of support "normally provided by the big pharmaceutical companies that normally develop new vaccines."

Dr. Berkley says if the vaccine proves useful, his organization would probably sublicense it to a vaccine maker that agreed to sell it at an affordable price in Africa and other developing countries. He says IAVI is talking to several large vaccine companies that have expressed interest in eventually acquiring development and marketing rights to the vaccine, as well as several other experimental vaccines IAVI is backing.

The new vaccine was designed by Dr. McMichael and his colleagues to trigger a robust army of the immune system's white blood cells. When examining the blood of the Kenyan prostitutes, the researchers found that the women carried an unusually large amount of the cells, often called killer T-cells. The scientists believe the cells seek out HIV when it has entered the bloodstream and are able to neutralize it and eliminate it from the body.

Dr. McMichael's research has been followed closely because AIDS scientists have become increasingly convinced that if a vaccine is ever to be protective against HIV, it will have to stimulate killer T-cells. Some earlier vaccines that have been tried in people didn't have this ability to spark HIV-killing blood cells.

The researchers say the new vaccine is composed of genetic material that sparked the desired T-cell response in tests involving mice and laboratory monkeys. The genetic material is stitched into a weakened version of an animal virus and includes a

gene removed from HIV that is also believed to be responsible for spurring a killer T-cell response.

In order to gain regulatory approval in Britain and Nairobi, the scientists will first test the safety of the part of the vaccine containing just the genetic material and then, soon afterward, the part containing the weakened animal virus. If tests in Britain and other tests expected to begin in Kenya later this year, prove safe, the researchers will begin human testing of the combined vaccine.

"The goal of this test is simply to see if the concept is safe and we have figured out how to elicit a strong killer T-cell response," Dr. McMichael says. "If we can't get the response we want, we may have to go back and work on the design some more."

But Dr. McMichael says that if the vaccine does unleash the HIV-targeting T-cells, results of the real test of the vaccine -- determining whether it can protect high-risk people against HIV infection -- won't come for several years.

IAVI, which has raised about \$100 million in donations to spur AIDS vaccine research, is also supporting the development of a vaccine being developed by closely held AlphaVax Human Vaccines Inc., Durham, N.C. Dr. Berkley says that vaccine, based on a different design than Dr. McMichael's, may be ready for a small human study beginning early next year.

Write to Michael Waldholz at
michael.waldholz@wsj.com

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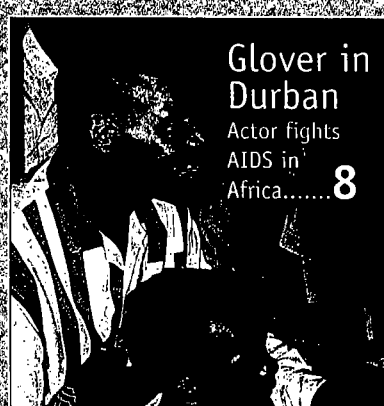
**SPECIAL
DURBAN
EDITION**

Kujisource, the Journal of the African American AIDS Policy and Training Institute, is taken from the second principle of Kwanzaa, Kujichagulia. It is the principle of self-determination. It means to define ourselves, name ourselves, create for ourselves and speak for ourselves instead of being defined, named, created for and spoken for by others.

IN THIS ISSUE

March for Treatment

Greg McNeal's photo essay on treatment march in Durban..... **10**



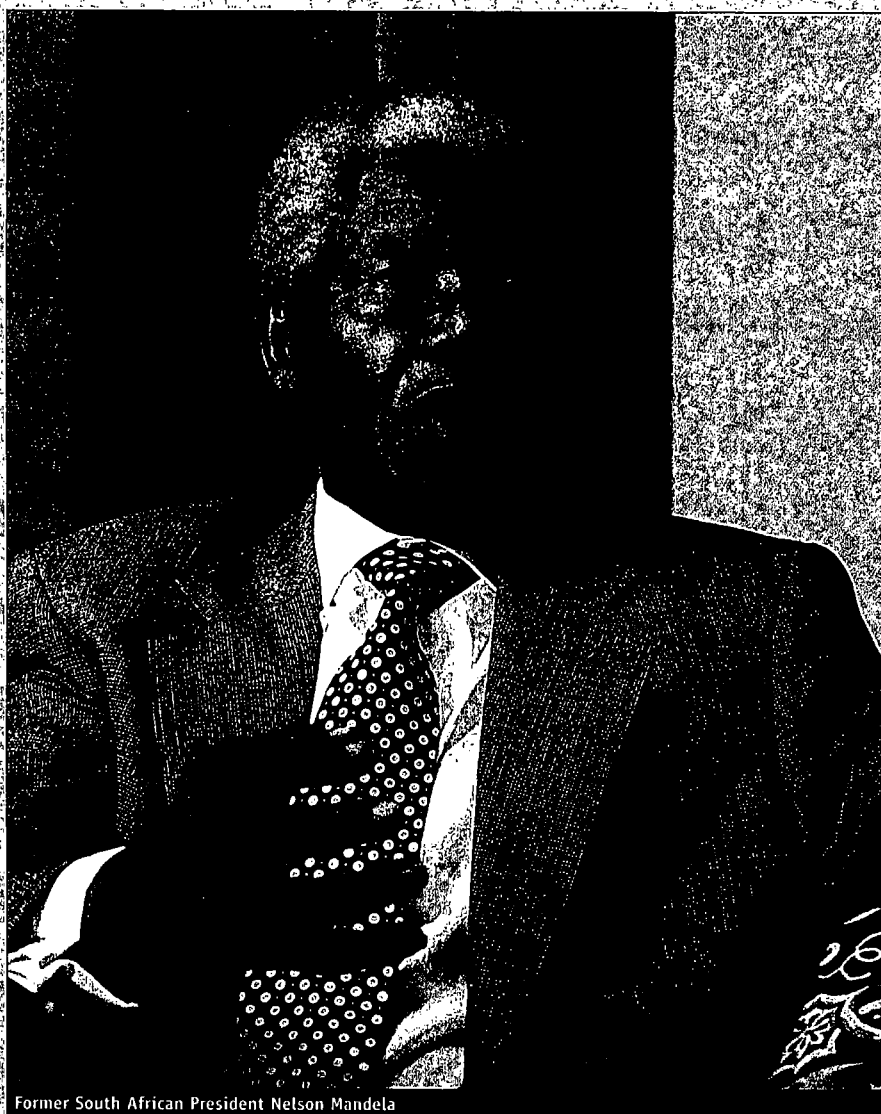
**Glover in
Durban**
Actor fights
AIDS in
Africa..... **8**

Voices from Durban

Reflections and testimonies on the AIDS Conference..... **18**

Fete Fallen Warrior

Activists and celebrities remember Gugu Dlamini..... **22**



Former South African President Nelson Mandela

AIDS SHADOWS BLACKS, LATINS

DURBAN—Black and Latino people in the United States continue to be the groups hit hardest by HIV and AIDS in the United States, based on data U.S. health officials released at the 13th International AIDS Conference.

The rate of AIDS cases in the U.S. is eight times higher among African Americans than among white residents, officials from the U.S. Centers for Disease

continued on page 14

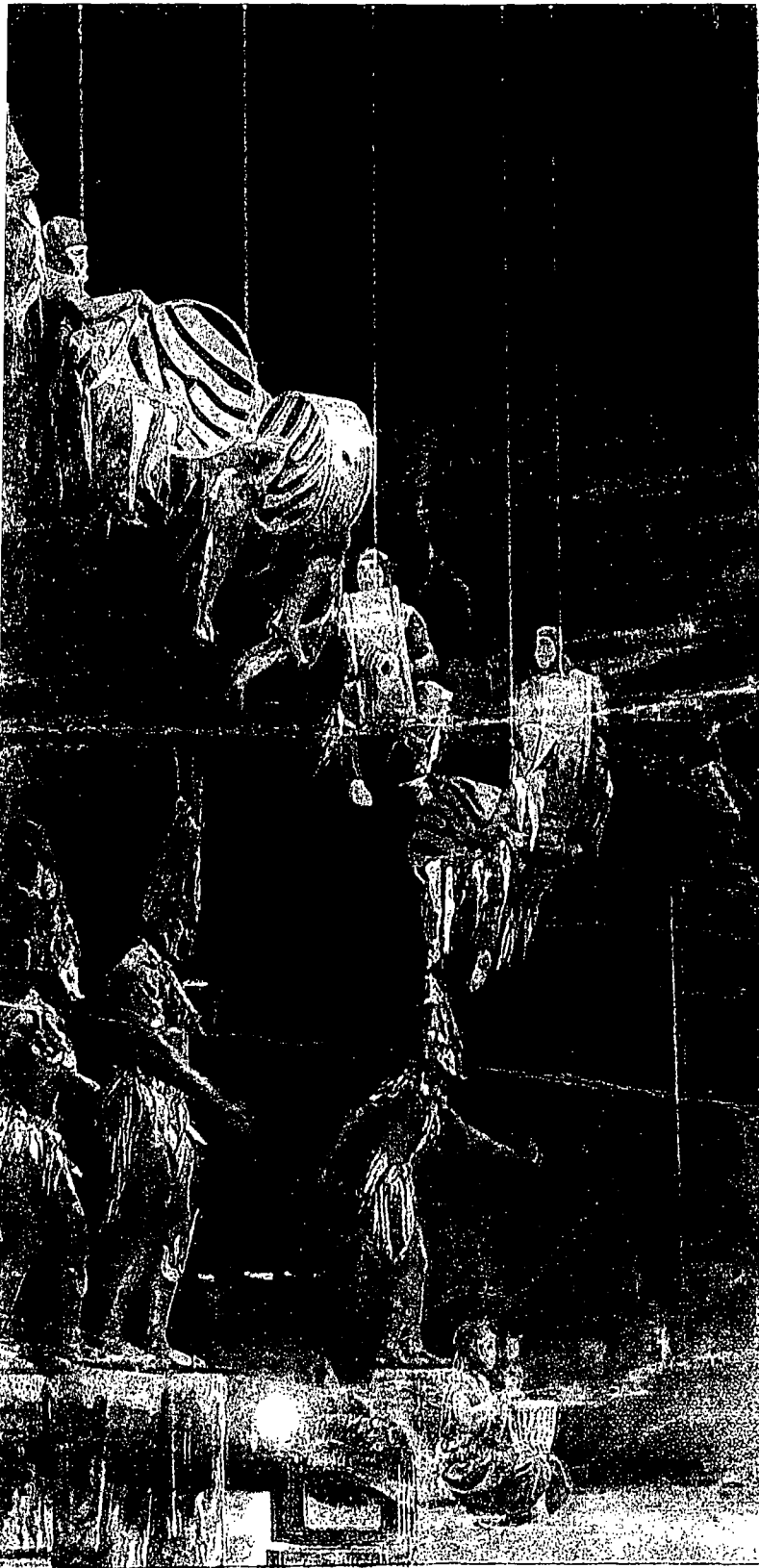
MANDELA SLAMS AIDS 'RHETORIC'

DURBAN—Former South African President Nelson Mandela urged a move away from rhetoric to practical action in the global war against HIV and AIDS in a speech at the closing ceremony of the 13th International AIDS Conference.

"I do not know nearly enough about science and its methodologies or about the politics of science and scientific prac-

continued on page 28

cial drug plea



E: Performers from the South African Drumming Ensemble wowed the crowds of the International Aids Conference at Kingsmead last night.



(Durban) Mercury, 7/10/00, p 2

US admits assistance to Africa is not enough

PHINDILE NGUBANE

ALTHOUGH the United States was committed to assist Africa in dealing with Aids, it realised that its efforts so far were not enough.

This was according to the director of the office of national Aids policy at the White House, Ms Sandra Thurman, speaking at a press conference discussing the impact of HIV/Aids on the US.

Ms Thurman said the White House was "very committed" to helping Africa, with President Bill Clinton having asked for an additional \$100 million (R685 million) for its assistance programme in the current financial year.

She said there was, however, a need for more countries and the international business sector to join in supporting the continent.

US Surgeon-General David Satcher, who hosted the press conference, said he was one of the people who was pushing for more support in Africa and developing countries.

The Washington Post was said to have recently carried a story critical of the level of the US's commitment to providing financial assistance to Africa for fighting Aids.

Ms Thurman said that when she visited HIV-infected children at King Edward VIII Hospital in Durban yesterday, "I was reminded we need to do more than talk - they need action, not talk".

She was optimistic that the international conference would come up with new information to assist



DR DAVID SATCHER
'Pushing for support'

in the fight against Aids.

Among the research findings in the US was that 46% of cases reported from July 1998 to June 1999 were among African Americans and 20% among Hispanics.

Young gay men still faced high rates of infection and between 4 million and 5 million Americans fell within the "high risk behaviour" group.

Meanwhile, a R250 000 Aids statue was unveiled at Central Park near the Workshop mall at the weekend. Deputy President Jacob Zuma, who unveiled the statue, said he had held a meeting with the presidential Aids advisory panel, which had given him "good news" that a vaccine could be found "within reasonable time".

Criminals warned of zero tolerance

THE police would adopt a zero tolerance stance towards any criminal behaviour as Durban played host to major events such as the Aids conference, police spokesman Vishnu Naidoo said yesterday.

Apart from the 12 000 delegates expected at the conference, a large

"The delegates attending the Aids conference should take precautionary measures in safeguarding their belongings like cell phones, cash and jewellery, especially neck chains," said Insp Naidoo.

"A safe and a secured environ-

MONDAY, JULY 10, 2000

PRESIDENT DEFENDS SPECIAL INVESTIGATION

Mbeki denies govt dithering

PHINDILE NGUBANE
& PATRICK LEEMAN

THERE was no substance to the allegation that there was any hesitation by the government to confront the challenge of HIV/Aids, President Mbeki said in Durban last night.

Opening the 13th World Aids Conference during a colourful ceremony watched by thousands at the Kingsmead cricket stadium, Mr Mbeki went to considerable lengths to justify his recent appointment of a special committee to probe the causes of Aids.

He said that as he pondered the subject, it seemed South Africa could not blame everything on a single virus.

One of the questions he had asked was whether safe sex, condoms and anti-retroviral drugs were a sufficient response to the health catastrophe which the country was facing?

He said he was looking forward to the results of the deliberations of the panel of experts, especially regarding the reliability of the information communicated by current HIV tests and the improvement of South Africa's disease surveillance system.

South Africa would continue its campaign against Aids, including promoting a sustained public awareness campaign encouraging safe sex and the use of condoms, a better-focused programme targeted at the reduction and elimination of poverty, and the improvement of the nutritional standards of South Africans.

The campaign would include a concerted fight against the so-called opportunistic diseases, including TB and all sexually transmitted diseases, a humane response to people living with HIV/Aids, as well as Aids orphans, contributing to the international effort to develop a vaccine, and further research on anti-retroviral drugs.

Mr Mbeki said the world's biggest killer,

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THABO MBEKI
Poverty is biggest killer

and the greatest cause of ill-health and suffering across the globe, was extreme poverty. "Is there more that all of us should do together, assuming that in a world driven by a value system based on financial profit and individual material rewards, the notion of human solidarity remains a valid precept governing human behaviour?" Mr Mbeki asked.

A media conference to launch the Durban Declaration was called off abruptly yesterday – apparently because of strong pressure from the government on the 16 South African members of the committee and the 120 South African scientists who signed the document.

A media release prepared for publication in tandem with the release of the declara-

tion stated that more than 5 000 scientists from around the world had united to prepare an assertion that HIV caused Aids.

The publication of the document follows a heated controversy in medical and political circles, with Mr Mbeki appearing to side publicly with several dissidents who reject the theory that HIV causes Aids.

According to several informed sources, who declined to be named for fear of victimisation, certain government officials had maintained that the holding of the media conference at that time could have been construed as "inflammatory".

A source close to the organisers denied this was the case. He said the tone of the media conference was intended to be "reconciliatory". He said there had been "intense government" pressure for those responsible for the declaration to cancel the media conference.

The source denied that there had been a "political agenda" at any stage on the part of those who had drawn up the declaration. Prof Salim Abdul Karim, the chairman of the scientific programme of the Aids conference, said the organisers of the media conference had not given him any reasons for the sudden cancellation.

He said that, to the best of his knowledge, there had been no government or other official interference with on those who were to have held the media launch.

Prof Karim said the organisers of the Aids conference had made it clear to the scientists that they were free to use the facilities of the International Convention Centre for their conference.

Meanwhile, ANC MP Winnie Madikizela-Mandela proclaimed that "HIV causes Aids" when she took part in a march of about 5 000 activists, organised by the Treatment Action Campaign. Observers saw this as a direct challenge to the president.

SPECIAL DRUG PLEA: PAGE 2

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INDEPENDENT NEWSPAPERS
KWAZULU-NATAL

We cannot rely on 'goodwill'

The manner in which Germany came to be selected to host the 2006 soccer World Cup is nothing short of a disgrace.

There must be grave doubts about the motivation of septuagenarian Charles Dempsey in abstaining — a move he knew would hand Germany the prize.

In doing so, Dempsey defied orders from the Oceania region he was representing and his own soccer association.

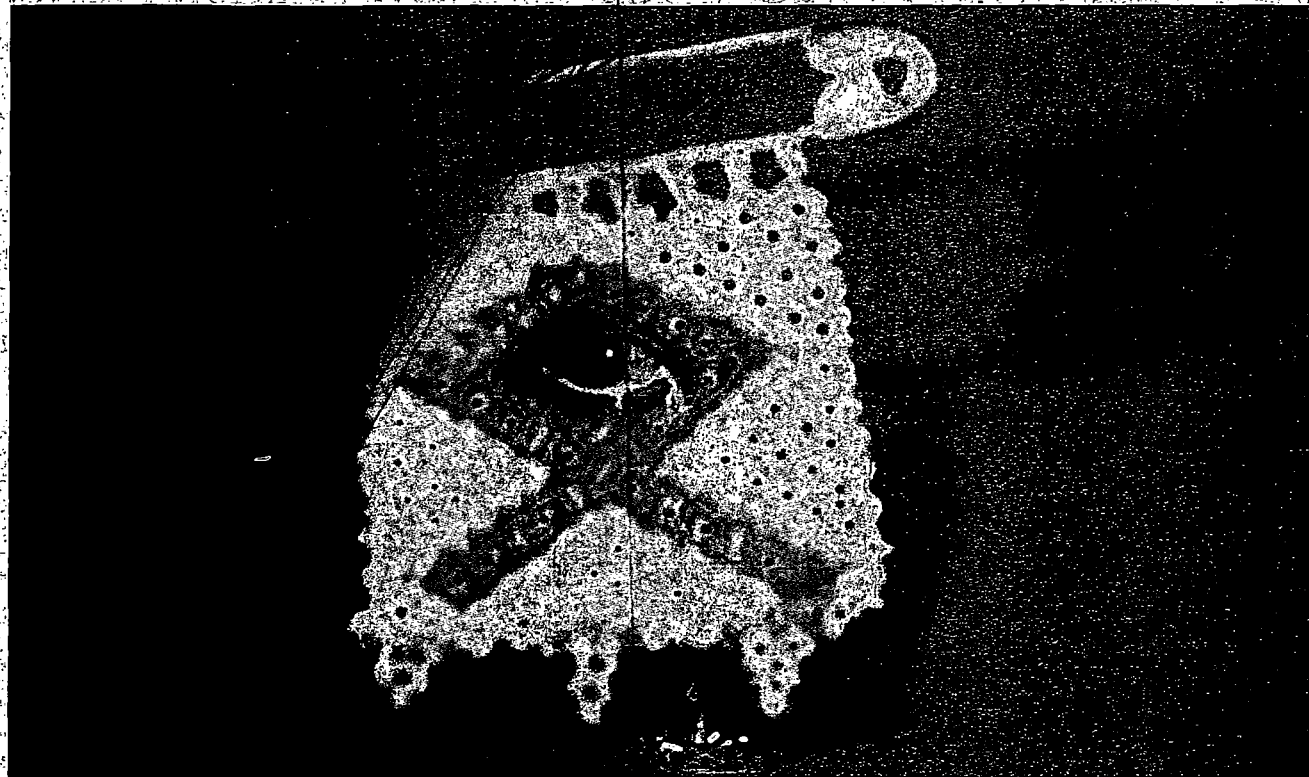
The situation demands a full investigation by Fifa, football's governing body, as do the allegations that offers of gifts were made to Fifa delegates by the German bid team.

But Dempsey should not shoulder the blame alone. The whole European soccer establishment missed the chance to give South Africa the opportunity for development, investment and tourism that the World Cup would have brought.

No one could deny that South Africa mounted a bid with all the necessary technical excellence — a tremendous effort from bid CEO Danny Jordaan and his team.

Yet the old men of the north opted to support their rich German cronies rather than do a simple and profound

CYBERVIEW: AIDS — NOT JUST A CONFERENCE TOPIC



Let's act now to stop this river of tears

Illustration: RODERICK EPHRAIM

SUNDAY ISSUE: ARGUING THE CASE

President Thabo Mbeki's approach to the Aids epidemic has been one of the most controversial features of South Africa's campaign against the disease. **SESHI CHONCO** argues that the president's stance has



Peter
Davis
THE EDITOR

Wake-up call for racing is overdue

Now that the excitement over the World Cup soccer bid is over and there's not much more to say about it (I hope the never shines again over abstaining New Zealand, the wimps), I'd like to go back to the Rothmans July, if you don't mind.

After the July last year, I wrote that it is about time we got rid of bookmakers who leech sport, particularly horse racing, without giving much back. And this before the Hansie saga of taking money from bookies for apparently influencing the outcome of cricket matches.

At his dinner last Monday after the July, the chairman of Gold Circle, Roy Eckstein, also took up the call to rid racing of bookmakers, which caused at least one bloke (a bookmaker I presume) to stomp out of the room, never to be seen again.

According to Eckstein, fr a turnover of close to R500 million,

FRIENDS OF POSITIVE LIVES

POSITIVE LIVES; Positive Responses to HIV – the international photographic exhibition that tells the stories of those living with or affected by HIV / AIDS has been praised highly by local community groups, international delegates and the media who have seen it at the Durban Art Gallery during the AIDS 2000 conference. The requests to utilise the show beyond Durban have been numerous.

Durban Art Gallery have offered to store the exhibition while funds are secured to tour the show and to create durable laminate versions of exhibition for use in schools and health care centres.

Become a friend of Positive Lives and help us raise the money to tour the exhibition throughout southern Africa and provide a lasting health and education tool for local groups. For more information please contact:

Kevin Ryan, Project Director kevinryansyd@msn.com

Alice Wynne Willson, Editorial Director aliceww@networkphotographers.com

[TAC Homepage]

A Call To March at the International AIDS Conference, Durban 2000

OFFICIAL CALL FROM THE TREATMENT ACTION CAMPAIGN (SOUTH AFRICA) AND THE
HEALTH GLOBAL ACCESS PROJECT (GAP) COALITION

GLOBAL MARCH FOR HIV/AIDS TREATMENT
TO THE INTERNATIONAL AIDS CONFERENCE--
9 JULY 2000 IN DURBAN SOUTH AFRICA-

WE ASK YOU TO ENDORSE THIS CALL AND TO MOBILISE FOR THE INTERNATIONAL MARCH
BECAUSE-

HIV has led to the premature death of more than 10 million people from AIDS worldwide.

Access to treatment is essential in order to save the lives of more than 35 million people with HIV worldwide.

Treatment will encourage people to come forward, live openly with HIV/AIDS and give real meaning to
prevention efforts.

TREATMENTS ARE AVAILABLE-THE PRICES ARE TOO HIGH!

Anti-retroviral drugs have been shown to extend the lives and improve the health of many people with AIDS
and advanced HIV disease. People in poor countries cannot gain access to life-saving medications because of
their price.

HIV infection and AIDS are not a death sentence. There are drugs that can successfully prevent, treat, and
cure the opportunistic infections and co-infections, such as tuberculosis, fungal infections, pneumonias,
cancers and malaria that kill most people with HIV and AIDS.

EVERYONE HAS THE RIGHT TO HEALTH, INCLUDING PEOPLE WITH HIV/AIDS!

All people with HIV/AIDS have a right to access to these treatments in addition to health care, employment,
education, clean water, adequate nutrition including vitamins and mineral supplements, and housing.

Denying people with HIV/AIDS access to affordable medicines in order to protect profits or intellectual
property rights, is tantamount to genocide.

Denying access to treatments or prevention intervention by any government body using the smokescreen of
questioning the cause of AIDS is unacceptable.

TREATMENT WILL SUSTAIN DEVELOPMENT

In the worst affected countries of the world AIDS will massively increase inequality and poverty, widening the
gap between rich nations and poor nations, men and women, as well as rich and poor - if people are not
allowed to live healthy and productive lives.

Access to treatment for people with HIV/AIDS is essential to promote social and economic development for
all.

CHILDREN HAVE A RIGHT TO TREATMENT AND FAMILY LIFE

All children with HIV/AIDS have the right to treatment, parental care and support.

Access to treatment for adults with children, can give children access to quality parenting support by prolonging that life and improving the quality of that life. This would reduce the devastating impact on children and poor households.

WOMEN WITH HIV/AIDS HAVE AN EQUAL RIGHT TO TREATMENT

Denial of treatment for HIV/AIDS affect women disproportionately because of social, political and economic inequality. All women with HIV/AIDS have an equal right to treatment, care and support.

All women have a right to anti-retroviral access to reduce HIV transmission during pregnancy.

All women and other rape survivors have the right to be informed that anti-retrovirals may reduce the risk of HIV infection if they are taken within 72 hours of being raped. All rape survivors have the right to anti-retroviral access within this time-frame.

HIV/AIDS RESEARCH MUST FOCUS ON POOR COUNTRIES AND COMMUNITIES

Most HIV/AIDS research has focussed on the industrialised rich countries. The medical needs of children and women across the world have largely been ignored. Treatment and care needs of gay men and men who have sex with men in Africa, the Middle East, Asia and the Pacific, Latin America and the Caribbean have been neglected.

Research priorities for prevention, treatment, care and support must reflect the profile of the disease and the needs of those who carry the heaviest burden. This is a challenge to the International AIDS Society and the conference.

All people, including people with HIV/AIDS, have a human right to health care, and we call on all individuals, organisations, and governments to ensure adequate medical infrastructure, care and treatments to save the lives of people living with HIV/AIDS.

The Treatment Action Campaign (TAC), Health Global Access Project (GAP) Coalition and the undersigned individuals and organisations will mobilise people throughout the world to support this call.

We invite the Deputy President of South Africa and chairperson of the South African National AIDS Council - Mr. Jacob Zuma and the national Minister of Health Dr. Manto Tshabalala-Msimang to receive this call at the march - as host nation on the continent that is the epicentre of the epidemic. We ask the South African government to unite and lead all people around this call.

We invite Dr. Nkosazana Dhlamini-Zuma the Minister of Foreign Affairs to receive this call and to carry it to governments around the world.

We invite Professor Jerry Coovadia - chairperson of the Conference to receive the call on behalf of the medical and scientific community.

We invite Dr. Stephano Vella of IACS to receive this call on behalf of the medical community to promote to the public the importance of global solidarity in facing the AIDS crisis.

We invite Mr. Harvey Bale from the International Pharmaceutical Manufacturers Association to receive this call to reduce the prices of life-saving drugs.

We invite Dr. Peter Piot head of UNAIDS and the ambassadors of every country in the world to receive this call and to translate it into the public policies of the governments they represent.

We invite the ambassadors of the European Union and the United States to receive this call against pressurising poor countries on behalf of drug companies.

We call on every person to join this march and this call to save the lives of millions throughout this world-and to build a global movement for HIV/AIDS treatment.

Endorsements:

Congress of South African Trade Unions (COSATU), South Africa
Federation of Unions of South Africa (FEDUSA), South Africa
Health Global Access Project (GAP) Coalition, United States
International Gay and Lesbian Human Rights Commission (IGLHRC), United States
National Confederation of Trade Unions (NACTU), South Africa
Treatment Action Campaign (TAC), South Africa

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International

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Home

Site Index

Site Search

Forums

Archives

Marketplace

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July 10, 2000

Amid Controversy, South Africa Opens World AIDS Forum

By RACHEL L. SWARNS and LAWRENCE K. ALTMAN

D URBAN, South Africa, July 9 -- Opening the first international conference on AIDS held in a developing country, President Thabo Mbeki today singled out extreme poverty, rather than the disease ravaging his country and continent, as the leading killer both here and across Africa.

South Africa is the country with the largest number of people infected with H.I.V., the virus that causes AIDS -- 4.2 million. And its president, who has become embroiled in an international dispute over the disease, pledged to intensify his response to the AIDS epidemic. But he dashed the hopes of thousands of participants, and noisy protesters, who wanted to hear him state clearly that H.I.V. causes AIDS.

Instead, President Mbeki skirted the discussion that has arisen because he has questioned the use of certain drugs in treating H.I.V. and has even questioned whether the virus causes AIDS.

Among the many researchers he has contacted in his quest to understand the epidemic are two American biochemists, Peter Duesberg and David Rasnick, who argue that poverty and



Agence France-Presse

South African dancers performing during the opening ceremony of the world AIDS conference in Durban.

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argue that poverty and malnutrition, not H.I.V., cause AIDS. When word of this consultation became public, international consternation arose.

Epidemic

As Mr. Mbeki described his attempts to understand how one of the worst epidemics in history had enveloped his country just as it had freed itself from apartheid, he reflected on AIDS and a long list of other diseases afflicting his country.

"As I listened and heard the whole story told about our own country, it seemed to me that we could not blame everything on a single virus," Mr. Mbeki said.

The 13th international conference on AIDS is being held here as United Nations officials have been intensifying the alarm about H.I.V., which infects 34.3 million people in the world, mostly in Africa.

Minutes after Mr. Mbeki finished, Dr. Peter Piot, the head of Unaid, a United Nations program that monitors the spread of AIDS, said it would require at least \$3 billion a year to take basic measures in Africa to deal with the disease and tens of billions of dollars more each year to provide in Africa the standard drugs used in developed countries.

The \$3 billion figure is 10 times what is now being spent in Africa, Dr. Piot said. Unaid estimates that 90 percent of people with H.I.V. do not know that they are infected.

"We need billions, not millions, to fight AIDS in the world," Dr. Piot said, and "we can't fight an epidemic of this magnitude with peanuts."

In news conferences and interviews, Dr. Piot said he welcomed a pledge of \$500 million from the World Bank this weekend as a positive step. The rest, he said, needs to come from the affected African countries and the developed countries.

He urged developed countries to cancel the \$15 billion in debt repayments that African countries owe each year, so the countries could use the money for health care and social services for AIDS and other diseases.

But political will is as important as money in stopping the AIDS epidemic, he said.

In the last six years, scientists and AIDS activists have repeatedly accused South African leaders of a lack of leadership in combating the AIDS epidemic. In 1993, H.I.V. infected 4 percent of South Africa's adult population. Now, the figure is 20 percent.

Tonight, as those taking part in the conference drifted out of the cricket grounds where Mr. Mbeki spoke, many left feeling disappointed.

"We, the majority of South African scientists, would have liked a clear, unequivocal statement about the relationship between H.I.V. and AIDS rather than the hints he made," said Alan Whiteside, who heads the AIDS research program at the University of Natal in Durban.

Mr. Whiteside and others said they were encouraged by Mr. Mbeki's pledge to intensify his recently announced program to encourage safer sex practices and to sponsor additional research into drug therapy and a possible vaccine.

Thousands of people held a protest rally at City Hall before the meeting opened, with Winnie Madikizela-Mandela and others in the crowd berating the government for failing to speak frankly about the link between H.I.V. and AIDS and lagging in its efforts to fight the epidemic.

"AIDS exists," said Mrs. Madikizela-Mandela, the ex-wife of former President Nelson Mandela and a political leader in her own right. "H.I.V. causes AIDS. We cannot proclaim this century the African century and then ignore the AIDS pandemic as some political leaders are."

Mr. Mbeki did speak about the heavy toll that H.I.V. and AIDS take on young people. He also spoke about the toll from malaria, cholera, syphilis and "other illnesses with complicated Latin names," along with vitamin A deficiency, which he said were among the diseases of poverty.

The text of Mr. Mbeki's remarks released in advance of his speech said: "The world's biggest killer and the greatest cause of ill health and suffering across the globe, including South Africa, is extreme poverty."

He omitted that passage when he spoke but cited a 1995 report by the World Health Organization that described poverty as the world's largest killer. "Five years later," he added, "the essential elements of this story have not changed."

A strong hint that Mr. Mbeki would disappoint most of those taking part in the AIDS conference in not saying that H.I.V. causes AIDS came earlier in the day when scientists canceled a news conference because of what they said was pressure from the South African government.

The news conference had been scheduled to discuss a statement signed by 5,000 scientists around the world, known as the Durban Declaration. It affirmed that scientific evidence supporting the link between H.I.V. and AIDS was "clear-cut, exhaustive and unambiguous" and was published in the July 6 issue of the scientific journal *Nature* after review by scientific peers.

But the news conference was unexpectedly canceled minutes before it was to have begun. The reason was that "the South African government put pressure on us" and threatened to dismiss any signer who worked for the government, said Dr. Charles van der Horst, a professor of medicine at the University of North Carolina who signed the declaration.

In an interview, Dr. van der Horst declined to name the government official who had made the call and said the South African scientist who had received it was a signer of the declaration. Dr. van der Horst said he had been told that the official had spoken on behalf of Mr. Mbeki.

Tasneem Carrima, a spokeswoman for Mr. Mbeki, denied knowledge of any such threat. "We certainly would not threaten

anybody," she said.

The declaration came in response to Mr. Mbeki's decision to appoint a panel to review the claims of dissidents who do not believe that H.I.V. causes AIDS, Dr. van der Horst said. The panel included such dissidents as well as signers of the declaration.

"We thought no one would give the denialists credence, and we were wrong," Dr. van der Horst said.

He criticized the scientific community for not having published a summary statement earlier of all of the scientific evidence that H.I.V. causes AIDS. Now, by giving a platform to a small group of dissidents, Mr. Mbeki has helped to divert efforts to fight AIDS, Dr. van der Horst said.

Several scientists say that becoming embroiled in new arguments over the causes of AIDS diverts attention and resources from finding a solution.

The declaration was intended as a scientific statement, Dr. van der Horst said. But he said the South African government viewed it as a political statement. After the declaration was released last week, a spokesman for the president, Parks Mankahlana, said it should be thrown in the dustbin.

This week, Mr. Mbeki's government tempered its stringent criticism of anti-H.I.V. drug therapy by announcing that it had reversed its view about AZT, a drug it had deemed unsafe for pregnant women.

In discussing his administration's plan to battle AIDS and responding to critics, Mr. Mbeki said that "there is no substance to the allegation that there is any hesitation on the part of our government to confront the challenge of H.I.V-AIDS."

Dr. Piot said developing countries, though poor, would have to spend more on AIDS, because "it is about the survival of the nation."

Mr. Mbeki and Dr. Piot are leaving the conference early to attend a meeting of the Organization of African Unity in Lomé, Togo, at which AIDS is to be discussed.



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DURBAN

July 9, 2000

Thousands Demand Help in Fighting AIDS

On Eve of International AIDS Conference

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Table of Contents

Headlines

Business Index

Search

News Search

Past Editions

Briefing Books

Quotes
- Resources:

Help

New Features

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Associated Press

DURBAN, South Africa -- Thousands of protesters gathered here on Sunday a few hours before the opening of the 13th International AIDS Conference to criticize pharmaceutical companies, high drug prices and government policies that have kept people with AIDS from getting medication that could prolong their lives.

The crowd marched toward the cricket stadium where South African President Thabo Mbeki was to open the conference. About 12,000 international scientists and journalists are in Durban for the conference.

Many of the demonstrators wore T-shirts reading "HIV Positive," and some carried placards with pictures of pharmaceutical executives, calling them "Drug Profiteers."

Mr. Mbeki's AIDS policies have come under severe international criticism. The government has refused to finance a program to treat pregnant mothers infected with AIDS with the medicine AZT. Mr. Mbeki has said there is significant evidence that the drug does more harm than good.

The government also has said it wouldn't make drug therapies available to AIDS sufferers because they remain too expensive, despite promised discounts from pharmaceutical companies.

Around 70% of the 34 million people infected with HIV or AIDS world-wide live in sub-Saharan Africa. About 10% of South Africans are HIV positive. More than two million people died of the disease last year.

On Saturday, Dr. Helene Gayle, AIDS chief at the U.S. Centers for Disease Control and Prevention, said that nearly five million Americans have sex and drug habits that put them at high risk of contracting AIDS.

While AIDS infections in the U.S. have fallen dramatically since their peak in the 1980s, public health officials worry that complacency about the disease could bring AIDS roaring back, Dr. Gayle said in an American Medical Association briefing on the eve of the conference.

"We have seen troubling signs over the past year that we fear could signal a resurgence of the epidemic among gay men," she said.

About 40,000 Americans contract the AIDS virus each year, down

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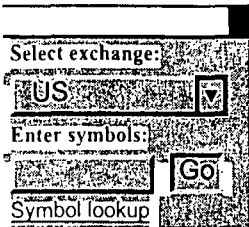
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About 40,000 Americans contract the AIDS virus each year, down from the 100,000 infections a year during the middle of the 1980s. The drop is attributed largely to safer sex habits and avoiding contaminated needles.

In an attempt to see how many Americans still act recklessly, the CDC analyzed findings from several large-scale surveys. It concluded that between 2% and 4% of the adult population, or four million to five million people, still put themselves at risk. This includes having six or more sexual partners annually, having sex with someone known to be infected with HIV, engaging in prostitution, having male homosexual contact, and using injecting drugs.

Dr. Gayle said the study didn't attempt to learn whether this level of risky behavior is increasing or decreasing, although there seems to be evidence on both sides. Condom use has increased substantially since the 1980s, although only 40% of unmarried people and 23% of drug users report using them.



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July 10, 2000

Levels of HIV Infection, AIDS Fail To Decline in the U.S., Data Show

By ANN CARRNS

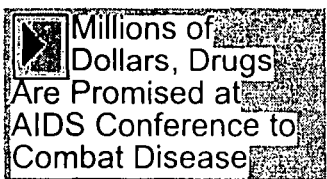
Staff Reporter of THE WALL STREET JOURNAL

Levels of both HIV infection and AIDS continue to remain stable in the U.S., rather than dropping, and roughly five million Americans remain at high risk for HIV infection because of their sexual behavior and drug use, according to the latest federal health data.

Researchers with the federal Centers for Disease Control and Prevention in Atlanta released the data over the weekend, prior to the opening Sunday of the 13th International Aids Conference in Durban, South Africa.

The meeting's setting is aimed at highlighting the devastating AIDS crisis in Africa. But the CDC also warned that the disease is far from beaten in the U.S., where advances in treating AIDS with drugs has resulted in some complacency about prevention. That has officials worried about a resurgence of AIDS here among high-risk groups, such as gay men.

"Prevention is more critical than ever," said Helene Gayle, head of AIDS prevention for the CDC.



If the U.S. is to meet a national goal by 2005 of cutting in half the number of new infections of the AIDS-causing HIV virus -- to 20,000 annually from 40,000 currently -- prevention efforts must be expanded, she said. She estimated that meeting that goal would cost government and private efforts an additional \$300 million more a year than current spending levels.

AIDS cases and deaths fell dramatically in the past decade through mid-1998, due to testing and prevention efforts and the advent of powerful drug therapies but have remained roughly stable since then. The latest CDC data, from the first two quarters of 1999, confirm that the numbers continue to remain stable, at about 4,000 AIDS deaths and 10,000 AIDS cases diagnosed each quarter.

Dr. Gayle cited treatment failure, a lack of early testing and treatment for some people, and difficulty following new treatment regimens as contributors to the failure to further reduce the numbers.

Therapy with antiretroviral drugs is allowing millions of people to live longer with HIV infection, but shortcomings are becoming apparent. New data suggest patients must switch drug regimens more

Article

Quote

Comment

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P

In this Section:

World-Wide

Asia

Europe

The Americas

Economy

Earnings Focus

Politics & Policy

Editorial Page

Leisure & Arts

Voices

Weekend Journal.

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Table of Contents

Headlines

Business Index

Search

News Search

Past Editions

Briefing Books

Quotes

Resources:

Help

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1 of 2

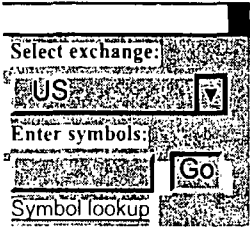
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apparent. New data suggest patients must switch drug regimens more frequently to maintain the treatment's effectiveness, and that each change is effective for shorter periods of time. The best option, Dr. Gayle said, remains "living without HIV in the first place."

A new CDC analysis of data from several national surveys shows that at least 2% to 4% of the U.S. population, or roughly four million to five million people, remain at high risk for HIV. Those at highest risk include men who have sex with other men, prostitutes, users of crack cocaine or injection drugs, people who have six or more sexual partners, and those who have sex with partners known to be HIV-infected. Condom use has increased since the 1980s, but only 40% of unmarried people and 23% of drug users report using them.

A CDC analysis shows that HIV infection rates remain high among some populations, especially gay men. After declining during the 1980s, infection rates among gay men remained stable for the past decade, with rates of new infection averaging 1% to 4% annually. Rates are much higher among certain groups -- for example, among young gay men, and among those visiting clinics for treatment of sexually transmitted diseases. For African-American gay men treated at STD clinics, infection rates are as high as 11% a year.

Data show increases in bellwether sexually transmitted diseases among gay men in several cities. San Francisco health officials disclosed that HIV infections rose significantly in 1997-1999.

Write to Ann Carrns at ann.carrns@wsj.com



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July 8, 2000

Report Dims Hope for AIDS Therapy

By LAWRENCE K. ALTMAN

DURBAN, South Africa, July 7 -- A United Nations-sponsored study of AIDS infection among infants has dashed the hopes of scientists who thought they had found a simple way to prevent mothers from giving their infants the AIDS virus during breast-feeding.

The results of the study, discussed during interviews here ahead of an international AIDS conference, confirmed earlier reports that a relatively simple drug regimen can stop many infected mothers from infecting their children during pregnancy and childbirth. But it also found that the protection does not last for as long as experts had hoped, and the therapy appears to leave children vulnerable to infection from breast milk.

Scientists had hoped that the treatment would be a powerful weapon in their broad effort to shield very young children from the AIDS epidemic in Africa, without the need to tackle the difficult issue of breast-feeding, which is a medical risk but a cultural, religious or economic necessity for millions of African women.

For about the last five years, doctors have been giving women in the United States and elsewhere infected with H.I.V., the virus that causes AIDS, one of two treatments during pregnancy to prevent the spread of the disease to their unborn children. The infants were treated in the first few days after birth, and an earlier study showed significant reductions in AIDS infections in the first six weeks of life. The success of that and similar studies had been hailed as one of the

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rare triumphs in the war against AIDS.

The new study, which involved 1,797 people and was the largest ever performed on the transmission of AIDS from mothers to children, followed children who were born to these mothers and found that by 18 months the initial benefit was completely lost as the infants who had been spared infection at birth later became infected through breast-feeding.

At week six in the study, 6.7 percent of the babies born to mothers who took the two-drug combination were infected or had died, compared with 16.4 percent in the group that received no drugs. But the infection and death rates after 18 months were 21.3 percent in the treatment group compared with 26.8 percent in the placebo group.

The findings are to be reported at the 13th International Conference on AIDS, which begins on Sunday. But the study's leaders disclosed the findings in extensive interviews in advance of the meeting because of their public health importance.

"It's bad news," said Dr. Joep M. A. Lange, of the Academic Medical Center in Amsterdam, the study's principal investigator. The study was conducted in South Africa, Tanzania and Uganda by researchers from the three African countries and his Dutch team.

In retrospect, said Prof. Hoosen M. Coovadia, the head of the department of pediatrics and child health at the University of Natal and the AIDS conference's chairman, who helped design the United Nations study, "it was naïve to believe that continued breast-feeding would not make an impact."

Nevertheless, said Dr. Glenda Gray, who heads the perinatal research unit at Baragwanath Hospital and the University of Witwatersrand in Johannesburg, "it's not all or nothing because we can still make a difference" by trying other approaches.

The new challenge for AIDS researchers and government officials is to preserve the benefit of drug therapy in pregnancy and find safe alternatives to breast-feeding. That is a formidable task in Africa where the overwhelming majority of women breast-feed their infants for long periods. Poverty limits the ability of women to buy formula and breast-milk substitutes. Widespread contamination of water supplies and poor sanitation make it dangerous to mix formula. Also, male domination leaves many women with little ability to choose an alternative to breast-feeding. And a woman who avoids breast-feeding her infant can be stigmatized as having AIDS.

Further, the findings seem certain to renew the often bitter controversy over breast-feeding, which pits the new public health emergency of AIDS against a fundamental, even ideological, pediatric practice. Proponents say "breast is best" for infant nutrition and that the dangers of contaminated water make the use of formula

too risky. But opponents contend that formula and other substitutes are needed in the face of a growing epidemic in which an estimated 570,000 children became H.I.V.-infected last year, mostly in Africa, where more than a third of pregnant women in some countries are infected.

Unaid, a joint United Nations program, has issued recommendations intended to discourage H.I.V.-infected women from breast-feeding, but it said the decision should be left to each mother, in part because the controversy cuts across cultural and religious beliefs.

The new findings could also have political ramifications.

The South African president, Thabo Mbeki, has caused an international furor in recent weeks over his questioning of the use of AZT in combating mother-to-child transmission of H.I.V.

And the findings could bring added pressure on governments in third world countries for wider testing among pregnant women to identify those who can breast-feed safely and to identify and counsel mothers who are infected but whose infants are not.

When the benefits of drug therapy during pregnancy were first reported, AIDS researchers were surprised that a relatively short course of drugs could have such an impact in preventing mother-to-child transmission of H.I.V. But there was no way to know in advance how long the benefit would last.

In the regimen found most effective in that study, a woman takes AZT and another drug, 3TC (lamivudine), for four weeks before her expected delivery date and again during labor. Then both mother and infant take the two drugs for one week after delivery.

The United Nations study was also pivotal in leading to apparent success with an even simpler, cheaper and seemingly more effective therapy -- a single pill of nevirapine given to a mother at the time of delivery and one dose in fluid form to the infant. That study was conducted in Uganda by Johns Hopkins University researchers with funding from the United States National Institutes of Health.

However, Dr. Lange said that "there is no reason to believe that this loss of effect is specific for" the combination of AZT and 3TC.

Indeed, a follow-up of the nevirapine study in Uganda shows the same negating effect in the breast-feeding period, said Francis Mmiro, a professor of obstetrics at Makerere University in Kampala.

In a separate development, Boehringer Ingelheim, which makes and sells nevirapine as Viramune, announced today that it would offer the drug at no charge for five years to prevent mother-to-child transmission in developing countries.

The company said the action was part of its commitment to the

collaborative effort of five companies, the United Nations, the World Bank and cooperating governments to explore practical collaborative efforts to make AIDS drugs more affordable and more widely available.

Leaders of the United Nations study said they would have to go back to the drawing board to find new ways to block mother-to-child transmission of H.I.V.

"No single intervention will control pediatric AIDS," said Dr. Coovadia. The challenge now is "to make breast-feeding safer just as we have made sex safer," he said.

Dr. Coovadia and Professor Mmiro of Uganda were among those who said they were concerned that government leaders might stop paying for public programs to prevent mother-to-child transmission on the grounds that breast-feeding reversed many of the early gains.

Geert Haverkamp, who coordinated the United Nations, said his Dutch team from the Academic Medical Center now plans to conduct at least one follow-up study to help identify new ways to prevent infection of newborns.

In the planned study involving 500 children, they will receive either nevirapine or 3TC during the entire period their mother breast-feeds.

In a possible second study, about 500 mothers will receive three anti-H.I.V. drugs (AZT, 3TC and a third to be chosen) for the entire period she breast-feeds.

Reflecting on the new findings, Mr. Haverkamp, a sociologist, said that "we know there are certain limitations to short-term therapy during pregnancy, but we have to fight for what we won."

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[The Mercury, Friday, 5 July,
2000]

If he's wrong we have a right to know

NEXT to being right in this world, the best of all things was to be clearly and definitely wrong, said J. H. Huxley. But he was wrong, of course. Nobody wants to be wrong, right?

Yesterday, The Mercury reported that a Rome shopkeeper named Giuseppe told a court he saw nothing wrong in "touching up" a female employee. The judges were unsympathetic to his bottom-line.

Closer to home, and more seriously, Prince Gideon Zulu defended himself against allegations of receiving payment for a tender via his daughter. "I see nothing wrong with her giving me money," he said.

And on Sunday, when President Mbeki opens the International Aids Conference in Durban, we will learn whether or not he is going to admit to being wrong in questioning the link between HIV and Aids.

My guess is that he won't, but it would be nice if he suggested his spokesman Parks Mankahlana was wrong in going over the top with his response to the declaration signed by 500 international scientists endorsing their conviction that HIV causes Aids.

That statement "belongs in the dustbin," said Pompous Parks. Yeah, right.

I suppose it is the deadly serious nature of Aids that makes it attract so much controversy. About 10 years ago, the British government came under fire when it sponsored adverts that said: "Every time you sleep with a boy, you sleep with all his old girlfriends."

In 1992, the London Sunday Times gave a double-page spread to the "sensational" theory of an American professor who said: "If HIV doesn't equal Aids, we will have witnessed the biggest medical and scientific blunder this century."

But by all accounts it does, and we haven't, though I don't expect Mr Mbeki will say so on Sunday.

I hope I'm wrong, though.

Oh, happy days!

IF PRESIDENT Mbeki is shown to be "clearly and definitely wrong," I suppose he can always say he was merely following a tradition in this continent's southern political climates.

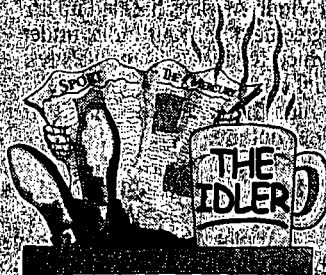
Rhodesia's Ian Smith will be forever loved by sneering historians for his assertion all those years ago that "there will never be black majority rule in Rhodesia; not in my lifetime, not in 1 000 years."

That went down as well as some of his other remarks in the Seventies, such as: "We have the happiest Africans in the world" and "I am determined to give the Africans a fair crack of the whip." Oops.

Jan Smuts spoke of the "Golden Age" in 1926 and assured the world: "We are all satisfied in South Africa now." Well, not quite all.

Politicians don't have a monopoly on immortal clangers, though.

Looking at the picture of Cliff Richard comforting Steffi Graf at Wimbledon the other day, I was reminded of how he tried to justify his tour of South Africa in the apartheid years of the Sixties, when we were the boycott whipping boys. "This coloured thing, you don't really notice it at all," he said. "Coloured servants out there, don't really mind. They get their food and their board, so why should they mind? Gosh, you get coloured servants all over the world. They don't mind at all."



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Don't forget the Aids orphans

[The Mercury -
Friday, July
7, 2000]

Young victims are being ignored at governments' peril, writes Albina du Boisrouvray

THE Aids crisis paradigm is finally beginning to shift. As more than 10 000 delegates flock this week to Durban for the first World Aids conference held in a non-Western location, an overdue discussion about the real global dangers of the HIV-Aids pandemic is slowly emerging.

It is far more urgent than the debate over drugs that President Mbeki bravely and perhaps misguidedly started as he stared down the barrel of a medical Bill that would easily bankrupt his country and its hopes for improving the lives of a people who had fought apartheid only to be devastated by a horrific plague.

On the agenda now are far more profound issues that are finally working their way into the mainstream media and the comments of responsible officials in the United Nations bureaucracies tasked with fighting Aids.

The New York Times fingered the more profound challenge when journalist Donald G McNeil pointed out that Aids in the developing world could not be contained the same way it had been in the West.

Put simply, it is not just a medical problem. "Overseas experts," he reports, "say that even seeing the epidemic that way is a luxury that reflects American thinking: any germ can be killed with a big enough wad of dollars."

He quotes experts who anchor their analysis in the underdevelopment, poverty and lack of a health infrastructure in

countries that are developing unevenly, if at all.

So far so good. Getting out of the myopia of Western thinking is a first step.

But this problem has a deeper dimension which is still missing in a media that often prefers to bash ineffective African leaders for not doing enough, when those same governments rarely have the infrastructures or capacities to deliver any services well, much less those that require a far more sophisticated public health system.

Ten years ago, I helped the late scholar Jonathan Mann produce the definitive two volume *Aids In The World* study for the Global Aids Policy Coalition and Harvard's FXB Centre for Health and Human Rights, which argued that Aids was a global public health emergency anchored in the deprivation of human rights worldwide.

IT REPORTED that Aids cases were being dangerously undercounted, and warned that the virus would spread and predicted its devastating effects.

Sadly, many of Dr Mann's prophetic warnings were dismissed, or branded apocalyptic. But now, finally, years after his own death, some of his insights are coming to the fore. Officials at UN agencies are realising that more has to be done to get at the roots of the problem.

For me, this argument is not an academic one.

I run a non-governmental organisation with child-centred projects, on the ground in 13 countries, in Africa, Asia and Latin America.

Our field workers, drawn mostly from local communities, are working with the victims of the epidemic every day.

What they are seeing daily is not being reported or understood adequately.

What we are doing – successful projects offering micro solutions with macro implications – is ignored as governments pour more money into many ineffective programmes.

If we are to reframe this issue, here's what we can do.

First, recognise that millions of those affected by the epidemic can be saved now.

They are children, many orphaned by the crisis. Their numbers are being undercounted by governments and agencies alike. These Aids orphans can be reeled back into society – and must be – before they are infected or drift into criminal gangs or armies recruiting child soldiers.

They are a time bomb destined to destabilise the future of Africa unless we act.

Next, the rights of these children must

be guaranteed by the prompt passage and implementation of the International Covenant on the Rights of the Child. (Somalia and the United States are the only two nations yet to ratify this bill of rights for children.)

THE plight of these Aids orphans cannot be sidelined or ignored by focusing only on treatment or prevention modalities. We need to help and empower infected communities to provide a safety net of love and assistance for these children. Economies that do not respect the rights of these children are de facto child abusers.

This is not a matter of charity. The economic survival and security needs of these countries are at risk if we don't act.

These children are future workers who will not be able to serve their nations if they are not educated but allowed to roam the streets and scavenge for survival.

They are our next global generation. A decade ago, the world ignored well-documented warnings about the trajectory of Aids. Will we do the same again by ignoring the cries of more than 100 million of the world's children who have no voice, vote or powerful delegation at the United Nations?

French Countess Albina du Boisrouvray is the president of the François-Xavier Bagnoud Association and Foundation (www.fxb.org) and a well-known world advocate for Aids



Vaccine

'only

way to

win war'

[Daily News,
Thursday,
July 13, 2000]

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AIDS TRIALS TO START SOON

Finding a vaccine to treat sufferers will take up today's Aids conference session. Medical Reporter Ishani Bechoo, Sapa, AFP and Reuters report.

SOUTH Africa will start human trials on a possible HIV/Aids vaccine within the next six months, but it could still take several years before such a vaccine becomes a reality.

A discussion on whether a vaccine for HIV/Aids can be developed will be one of the main topics on the agenda of the 13th International Aids Conference in Durban today.

In the first three days of the conference, delegates have repeatedly emphasised that a vaccine was the only way to win the war against HIV/Aids.

Twenty years after the disease was discovered, scientists have not managed to find a workable vaccine.

In six months' time, South Africa, in partnership with the US, will start human trials on such a vaccine – the first to be conducted in Africa.

Little research on a vaccine has been conducted in Africa, where two-thirds of the world's HIV/Aids infected population live.

Most of the research so far has been done in Europe and America.

Clinton

US President Bill Clinton has said he would like to see a vaccine on the market by the year 2007.

US-based scientist Ms Margaret Liu will lead a discussion today on whether it is likely that the world will have an Aids vaccine within seven years.

The pharmaceutical industry will also address its role in developing a vaccine.

Medical Research Council president Professor William Malekgapuru Makgoba will, with a number of other scientists, discuss an African strategy for HIV vaccines.

Today will be the last day of major discussions at the conference. Former president Mr Nelson Mandela will close it tomorrow.

However, it has not all been bad news at the conference as yesterday Aids research in South Africa received a boost when the Medical Research Council (MRC) was awarded grants of more than R100-million by the US National Institute for Health to establish two research units to study HIV prevention strategies and vaccines.

The two grants, which will be given to the MRC over five years, is the biggest contribution made to a research organisation in South Africa. More than \$12-million has been donated for an HIV vaccine trial and \$7-million for an HIV prevention trial unit.

Professor Slim Karim, director of the HIV Prevention and Vaccine Research at the MRC, said: "Both units will ensure that South Africa stays at the forefront of the global effort to devise and test HIV vaccines and preventive strategies."

Forefront

Meanwhile, Judge Edwin Cameron yesterday introduced the Aids Empowerment and Treatment International (AidsETI), a new organisation which is calling for those "who are now able to buy life itself, to help those without the resources to buy life".

Described as a new organisation of people living with Aids, AidsETI aims to mount a significant treatment programme in Africa by collecting donations and drugs and using them to treat people with Aids, to provide them with psycho-social support and advanced knowledge of HIV treatment.

Other developments at the conference yesterday were:

□ Aids activists from South Africa and the US and representatives of the United Nations paid tribute to Miss Gugu Dlamini, who was stoned to death in KwaMashu in 1998 two weeks after she divulged that she was HIV-positive.

□ South Africa tops a list indicating the number of primary schoolchildren who lost a teacher to Aids last year, in a new United Nations report. An estimated 100 000 South African schoolchildren lost a teacher to Aids.

□ Human Rights activist Professor Fatima Meer joined a group of Aids and debt relief activists to demand the scrapping of Third World debt so the money could be used to fight Aids.

□ The fear of falling pregnant and being considered "cool" was higher on the agendas of African teenage girls, especially those in urban centres, than the threat of contracting HIV, a panel of five young women agreed.

□ The Network for Sex Workers – a global organisation representing prostitutes – said the fight against Aids would be futile if the world continued to marginalise sex workers. Representatives said they wanted prostitutes to be accorded the same status as other professions.

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Safe sex message loud and clear as city hosts Aids conference

RED, yellow, pink and blue, orange and purple and white... male contraceptives of every shape, colour and flavour have invaded this city, as it hosts the 13th International Aids Conference.

"Put a condom on your willy before you get silly," enjoins a local radio, promoting the ubiquitous symbol of safe sex.

Behind the jokes, however, is the serious message of getting sex partners to use bar-

rier protection against human immunodeficiency virus (HIV), which causes Aids.

Global figures for condom production and use are sketchy, but all anecdotal evidence points to a fast-expanding international market, even in poorer countries.

"More and more people in China are using condoms, especially educated people," said Mr Xu Hua, secretary-general of China's Sexually Transmitted Diseases

and Aids Foundation. "Most of the condoms are imported from Japan, the United States or England, where they are of good quality," he said.

The average price was four yuan per condom, around 50 US cents (R3.50).

In Russia "condom use is growing, but it is taking off slowly," said Mr Robin Montgomery of Aids Infoshare Russia. Sapa-AFP

60% 40%

[Daily News - Thursday,
July 13, 2000]

Yes, I have Aids

By BARBARA COLE

IN THE Shangase Tribal Authority area of Ndwedwe – a one-hour drive from Durban – telling the community that you have Aids is just not done.

When Miss Sylvia Vezi (34) told her family members that she had Aids, they kicked her out. Then relatives refused to take her in.

A recent survey carried out in 600 homes in the area revealed that one third of the mothers canvassed would also be reluctant to care for a relative suffering from Aids. It confirmed there was widespread stigmatisation, despite the Zulu culture which believes in caring for sick relatives.

Stigmatised though she has been, the brave Vezi is now talking openly about her Aids status, thanks to the advice she got from staff at Durban's Addington Hospital and the support she is receiving from members of the local community health committee.

"I was told at the hospital that this does not need to be the end. There is still much to do. This gave me hope," said Vezi, the single mother of a six-year-old son, Sithembiso.

Vezi, the second woman in the area to go public about her Aids, told the community and a party of influential Americans, who have ploughed time, experience and money into the region's Aids programme, her story at the Thafamasi Clinic this week.

Another woman, who spoke about her Aids status to a group in January, has since died.

Vezi said she explained to people that "it was not a crime to have Aids".

While unafraid of the future, she said her big problem was her lack of money. She wanted to support herself by selling beadwork but, financially, things were difficult.

And her advice to other people? "Behave properly, use condoms and be faithful to your partner."



PICTURE: BARBARA COLE

BRAVE Sylvia Vezi, supported by community organiser Sibusiso Xaba, has broken her silence about Aids

Medical Care Development International (MCDI), a non-profit organisation dedicated to improving the quality of life, has received massive funding from the United States Agency for International Development (USAID) to improve community care of children affected by Aids in the Ndwedwe area.

In the three years that MCDI has been working there, the HIV-Aids epidemic has outstripped the initial expectation and the situation has reached "emergency status".

Now, in response, care-workers are being trained to teach about Aids prevention, to help families look after relatives with Aids and to care for orphans whose parents have died from Aids.

A gasp went up from the American guests when Miss Bongiwe Zungu said there were

137 orphans in the area. Not all were Aids orphans, however, she said later.

Ms Vivian Lowery Derryck, the associate administrator for USAID in Africa, told the community: "We want to be there to help you deal with this problem."

She announced that USAID would be signing an agreement with the Nelson Mandela Children's Fund tomorrow.

The agreement will involve a US\$5m (R35-million) partnership aimed at mobilising community support for children infected with and affected by HIV-Aids. Orphans and vulnerable children will receive help, strengthening family and community-based care, while parents will be helped to develop income-generating activities to keep their families together while coping with the illness.

The Star Wednesday July 5 2000

OPINION



HIV stance undermines Mbeki

His handling of Zimbabwe crisis was also worrying, says Kaizer Nyatumba

ONE IN YOUR EYE

Slightly over a year since he took office as a democratic South Africa's second Head of State, President Thabo Mbeki already faces a very real danger of not being taken seriously on some important issues, and in the process badly damaging himself.

While during the same period he has made tremendous strides, primarily managing to emerge from the shadow of Nelson Mandela, the giant whom he succeeded, and to carve his own independent identity and in the process made a major impact in some international affairs, Mbeki has also made some decisions and pronouncements which have taken many aback.

Even his less-jaundiced detractors will readily concede that Mbeki has taken a firmer hold on his government and has emerged as the main African leader to sound out on numerous issues to do with the continent, and a man who is certainly worth giving an audience. Most unfortunate is the fact that here at home he is fast

losing respect in certain predictable and not-so-predictable quarters.

While it would be understandable that a man who came to be known to stand uncompromisingly for transformation and the advancement of the African majority would not be the most popular among those threatened by the re-ordering of our society, it is very worrying that even some people who would normally agree with him and his transformation agenda are increasingly growing concerned about some of his positions.

It is indeed easy to understand that those who had previously made known their public support for Cyril Ramaphosa as Mandela's successor and had actively vilified Mbeki would be at the forefront of those generally lacking respect for the president and now routinely referring to him - in newspaper reports, on radio and in general conversation - by his first name only as though they were good personal friends with him.

While one remains very concerned even about this strange familiarity (after all, it does breed contempt!) with Mbeki,

one is concerned even more about the questions increasingly being asked in murmurs about the president's positions on some issues, notably on the Zimbabwe issue ahead of the recent elections in that country and on the HIV-Aids debate which ought to have passed the debate stage aeons ago.

While one certainly does not share the view which has taken root in predictable quarters that the quality of some of Mbeki's cabinet appointees is questionable, one does nevertheless wonder why those who surround the president and have such ready access to him would appear to have remained quiet and stood by to watch like spectators while Mbeki discredits himself on the above two issues.

For what African Renaissance can Mbeki talk of with any authority if he is seen to condone blatant thuggery and unconventional campaigning methods which have bordered on authoritarianism in Zimbabwe, and when his organisation, the ANC, proudly and piously

hails as free and fair an election during which an opposition party was allowed neither to campaign freely in many areas nor to buy advertising on State-controlled media, among other things?

As even his detractors concede, Mbeki is a considerable intellectual himself and a voracious reader on a wide range of issues.

While one accepts that part of being an intellectual is rigorously to question things and even challenge the perceived wisdom of the time, in the case of the HIV-Aids epidemic which has so ruthlessly assailed South Africa Mbeki appears to have gone way too far.

It is one thing for the Duesbergs of this world, who are themselves scientists of considerable repute, to differ with their counterparts on matters of this magnitude, but it is another thing altogether for a Head of State formally to endorse (or appear to be endorsing) such dissenting views and take on the international scientific community in the face of overwhelming scientific evidence to the contrary - especially at a time

when the virus is ravaging the country.

It is one thing for the government to plead poverty when it comes to acquiring the recommended medicines to give to those who need them, but it is another thing altogether to say a declaration on HIV-Aids by 5 000 scientists "belongs in the dustbin", as presidential spokesperson Parks Mankahlana is reported to have said.

Now, if that is correctly attributed (and it had not been denied at the time of writing this column), that is arrogance of the worst kind and does even more damage to Mbeki's office.

It is indeed commendable for the president to have an enquiring mind and listen to all sides of a debate but it is sheer arrogance to say a document signed by so many knowledgeable scientists will not even be given the courtesy of being closely read.

This reflects poorly on Mbeki's office. ■ Kaizer Nyatumba is the editor of the *Daily News in Durban*

DEAR friends. Never before has South Africa seen so great a concentration of authorities and experts on Aids than at this conference. Indeed, you are welcome in our country.

My purpose in writing this open letter to you is not to ply you with facts and scientific data about the horror of the HIV/Aids crisis in the world today. Rather, I would like to place before you two fundamental components in our joint fight to diminish and eradicate the problem. The first is commitment.

Every day we need to examine our commitment to the struggle against Aids. This is the challenge I lay before you also. How do we make our commitment meaningful?

Whether you are a cabinet minister, a professor of medicine, a bishop, a legal expert, a community leader, an educator, a psychologist – whatever you are – what does your commitment mean to you? Have you been tested for HIV? If not, how serious can you be in your commitment to this struggle?

WHAT BRINGS YOU TO this conference? Is it scientific curiosity or professional credibility? Or is it your concern for the suffering of people?

The need for academic information is indisputable. Our plea to you is that you share with us the responsibility for seeing that it is put to good use by governments, churches, schools, businesses and the many other institutions which can and do have the power to use it

Giving help to the sick and hope to the poor



*Unless we come up with answers, our efforts to combat the disease will be meaningless, argues **Danny Chetty** in this open letter to the delegates attending the International Aids Conference in Durban.*

to combat the problem.

Research papers may pile up and library shelves strain to hold the great volume of academic work on the subject of HIV/Aids, but what good is it if it has little effect on the rampant spread of the virus in the world – and particularly in Africa?

For those men and women cut down in the prime of life, for the wives and mothers infected by their partners, for the babies orphaned and the children infected as a result of rape, we weep. Genuine compassion is distinct from sentimentality.

Let us re-discover our ability to feel and express compassion. Nothing can match profound compassion for producing vital action.

The second component of our fight against Aids is priority. What, indeed, are our priorities in dealing with the problem?

I HAVE NO DOUBT at all that Aids education is top of the list. However,

our work in raising awareness has leaned heavily on scare-statistics.

An example: one in three people in KwaZulu-Natal is HIV-positive. Most people are alarmed. But so, too, are they ignorant. A young man I spoke to recently felt that to protect himself against Aids he should not have eight girlfriends at a time. "Would three then be OK?" I asked him. "No!" he said; "only one."

So far, so good. But when I asked him if he thought it necessary to

“
The challenge ... is
how we make our
commitment (to the
fight against Aids)
meaningful ... and what
are our priorities in
dealing with it...

use a condom with one girlfriend, he replied, "Of course not! You can't get Aids from one girlfriend".

Many people I have spoken to have refused to take the test because they think that once you know you are HIV-positive, you have no option but to "drop out" of society and community. Or they adopt the attitude: "There are so many ways to get Aids, you are likely to get it anyway. You might as well get it while enjoying sex."

SOME PEOPLE HAVE TOLD me frankly that they have slept around so much, they don't need testing to tell them they are HIV-positive.

"What difference will it make to me?" (No thought for their partners). Obviously ignorant of the role of STDs in aggravating the Aids syndrome, they believe they might as well carry on regardless.

Many other myths abound in local communities. One is that

sangomas (traditional healers) can supply HIV-resistant *muthi* (healing potions). Another is that well-dressed, educated and hygienically-living people can't infect others. Another is that sex with very young girls is safe. Or that bathing immediately after sex will protect you.

Perhaps the most serious misbelief of all is that ostracising HIV-positive people will keep the rest of society safe. There is a good deal more misinformation flooding our communities, but the point has been made.

So, how do we replace misinformation with accurate information?

I am confident that the conference will deal with the broad aspects of this question: the nature of the information, government policy and so on. But we need also to mobilise every appropriate agency to make policies practical – every church, every school, every non-governmental organisation, every business. This is the challenge facing Practical Ministries also.

I leave it to you to deal with the remaining priorities. However, I would like to appeal to you to address yourselves to the inter-relationship of state economic policy and Aids. Perhaps you can come up with some solutions to the problem of how the poor, the dispossessed and the undernourished can cope with living with the virus.

We wish you well in your deliberations.

Reverend Danny Chetty is the director of the Port Shepstone-based Practical Ministries.

WANDA
SOOBEN
2000

AIDS

CONFERENCE
DURBAN

IT'S POVERTY!
IDiotic!
IT'S HIV!
POVE IT!
Bull!
GET LOST!

IT'S GOING
TO BE A WHILE
BEFORE THEY TAKE
ME ON!



SOUTH Africa is frenzied over the Aids crisis: Is HIV linked to Aids? Should the Government be spending more money on the problem? Indeed, does the Government care about the poor? Are drug prices too high?

The truth is that in politics every interest-group promotes its own agenda, and the Aids problem is a case in point. It would not be so far fetched to say that, because of this, the issues are being clouded by emotion, leaving the essence out of focus. Perhaps it is time for a sober analysis of the situation.

Medical scientists view health, and in this instance Aids, as a priority. Accordingly, a government that cannot provide treatment for its people is surely failing in its duty to service their needs. After all, to see people suffering and to do nothing about it is morally repugnant.

Indeed, it borders on criminality. Moreover, for renowned scientists to be questioned about their scientific accuracy and rigour is outrageous. For them, it is as simple as that.

The Government feels that its hands are tied. It has not yet acquired the skill to address such complex problems. Dr Manto Tshabalala-Msimang recently exemplified this lack of competence when she retorted that she was the "Minister of Health, not the Minister of Aids", when being pressed for an explanation for the Government's approach to the Aids issue. But the Government does have financial constraints. Despite a concession by drug companies,

Aids: Let's start taking stock of our lives



Every sector in South Africa needs to be accountable in the fight against Aids. The solution to combating this pandemic does not rest with the Government alone. Trusha Reddy reports.

drug treatment is still unaffordable. For them, it is as simple as that.

Individual allegiances may differ according to personal experiences and attitudes. Regardless, we would all love to live in a country where health care was a right, not a privilege, and where people joined hands in the spirit of altruism. Unfortunately, we have to deal with reality.

SAYING THAT the Government wasted millions on the World Cup 2006 Soccer bid and a jet for President Thabo Mbeki when the money could very well have been spent on Aids drugs, is merely taking a pot shot at them. In fact, saying that we can lessen the crisis significantly by giving AZT to pregnant mothers is a superficial analysis and a band-aid remedy at best.

I am not trying to absolve our leadership from responsibility, or to pull "a Parks Mankahlana".

Admittedly, the Government,

though financially constrained, has put in a half-hearted effort in the struggle, especially considering the gravity of the problem in our country. Schemes to educate people on safe sex and abstinence were neither creative nor far-reaching.

However, the solution to the pandemic does not rest solely with the Government. Every sector of

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We would all love to live in a country where health care was a right, not a privilege, and where people joined in the spirit of altruism. Unfortunately we have to deal with reality

society needs to be held accountable in the fight against Aids: media for the public; businesses for their employees; schools for their kids; couples for their born and unborn children; clinics, hospitals and doctors for their patients.

This grassroots action needs to be facilitated and sponsored by the Government, not taken over by them. Through education, Aids "must" become a priority in the individual and national consciousness of citizens.

MAYBE at the extreme, we need to start fostering a society of prudes. After all, if we really dig deep enough, we may be able to attribute Aids to a symptom of the hedonistic trends in society. The media forges ahead with its glamorous portrayal of promiscuity, the emancipation of women is translated into free sex for all, and unwanted pregnancies are simply aborted.

Typically, we take our value systems from Western countries, which emphasise using condoms and sympathy for homosexuals – still seen as the carriers of Aids – amid a boom in consumerism and a breakdown of social cohesiveness.

The fact that we are faced with staggering illiteracy and the spread of Aids among primarily heterosexuals, has gone largely unnoticed.

In fact, we try so desperately to mimic the values of the West that we have missed the need to develop a culture of our own with unique solutions to problems such as Aids. No wonder South Africans are accused of not forming a national identity. We lazily make crime and Aids our only hallmarks.

When value-systems change in accordance with the unveiling of the human spirit, they are to be celebrated. However, when the deliberate choices we make begin to make us unproductive deviants, we need to take a closer look to examine and change those value-systems.

The bottom line is that we need to start taking stock of our lives. The Government should not be expected to mop up each and every citizen's irresponsibility.

Indeed, hosting an international Aids conference and portraying a sombre-looking Minister of Health on television does little to prove that we, as South Africans, are taking the Aids crisis seriously.

□ *Trusha Reddy is a freelance journalist and a Masters student in International Politics and Transition Theory at the University of Durban-Westville.*

[The Star - Dec 1990 - July 1991]

Team to examine accuracy of HIV test

By **LYNNE ALTENROXEL**
Health Reporter

After spending R2-million to organise two meetings between Aids dissident scientists and the orthodoxy, only one conclusion has been reached - to spend more money.

And the South African taxpayers are likely to foot the bill, Health Minister Manto Tshabalala-Msimang confirmed yesterday.

The money will be used to fund research into the accuracy of the Elisa test, which is used in South Africa to diagnose HIV infection, and which has been one of the central issues among Aids dissidents, who say it produces false positives.

American scientist Dr Helene Gayle, Medical Research Council head Professor Malekgapuru Makgoba and Mexican Aids dissident scientist Dr Harvey Bialy have been charged with carrying out

stringent testing to determine whether the Elisa test works.

Even then, they will be no closer to answering the question the presidential Aids panel was charged with solving: Does HIV cause Aids?

This was the crucial point which was supposed to be discussed at the two conferences, the first of which was held in Pretoria in May.

But the minister listed, as major advances, that:

- there was support for government efforts to alleviate poverty and improve access to health and sanitation;
- there was a need to treat diseases such as tuberculosis as "key interventions";
- it had been decided to scrutinise the Elisa test;
- there was a need to make all medicines available through cost reduction; and
- there had been recommendations for reducing mother-to-child transmission of HIV.

Aids declaration row heats up

Mankahlana's 'dustbin' comment slated by activists and political parties

By **PHINDILE NGUBANE**
AND **KHATHU MAMAILA**

Aids lobbyists and political parties have reacted with anger at a statement by presidential spokesperson Parks Mankahlana that a declaration signed by 5 000 scientists endorsing their conviction that HIV causes Aids "belongs in the dustbin".

The office of President Thabo Mbeki has distanced itself from the statement. Tasneem Carrim of the president's office said Mankahlana was "speaking of the cuff and not representing the presidency".

Carrim said media statements on the Aids conference had been assigned to the Gov-

ernment Communication and Information System.

Mankahlana's comments were made in response to the Durban Declaration signed by international scientists ahead of the 13th International Aids Conference this weekend.

Mbeki caused a global stir when he questioned the link between HIV and Aids. This culminated in the Presidential Aids Advisory Panel, comprising more than 30 international scientists - spilt evenly between those who believe HIV causes Aids, and the dissidents - to test assumptions about the disease and advise the government on the best way to fight it.

The Treatment Action Campaign (TAC), a body represent-

ing people living with Aids, yesterday said it was shocked by Mankahlana's comment.

"Mankahlana should not cause worry about the strength of our democracy," said TAC chairperson Zackie Achmat, "A democratic government should be able to handle criticism."

Various political parties condemned the remark as irresponsible, while the ANC declined to comment.

DP health spokesperson Sandy Kalyan said Mankahlana's comments further marginalised the epidemic's status in the president's office.

"This Durban Declaration was signed by ... scientists who have cumulatively amassed many thousands of years of re-

search into HIV/Aids and who have all developed sound reputations in their fields."

International Aids Conference chairperson, Professor Jerry Coovadia, said conference organisers had held a meeting with Health Minister Manto Tshabalala-Msimang and department officials. They were assured the declaration "states a number of facts without being offensive or making any criticism of the government".

Attempts to speak to Mankahlana last night were unsuccessful.

The presidential panel yesterday wrapped up its last meeting in Johannesburg and is expected to make its recommendations to Mbeki soon.

15

DAILY NEWS THURSDAY JULY 13 2000

Your Views

IT IS YOUR PAPER, TELL US WHAT YOU THINK: AT P.O. BOX 47549, GREYVILLE 4023 OR FAX (031) 308-2111*The Editor reserves the right to shorten and edit letters. Only letters with the full name, address and phone number of the writer will be published.*

Let us, for everyone's sake, think deeper about Aids

POLITICS, it has been said, is the art of the possible. The same may be said about medicine.

When the two integrate, as they must, in the approach to the management of HIV-Aids, the accent on the possible is even more pronounced, for neither discipline is willing to admit its powerlessness.

Medicine is unable to cure Aids, and the political attempts to halt its spread have been pathetically in-

effective.

It is small wonder, therefore, that both have embraced with indecent enthusiasm the fact that the transmission from mother to child can be prevented in up to 40% of cases by relatively simple and inexpensive treatment – particularly with the new drug, Nevirapine.

There are loud cries for its immediate use, and there will be equally loud protests if the Government fails to implement such a programme.

We are told (*Daily News*, July 11) that we should learn from the Western experience, and the president-elect of the Inter-national Aids Society quotes the Italian experience of maternal-child transmission being reduced from 295 in 1991 to three in 1999.

Such "experience" has little relevance to a country such as ours, with 150 to 200 such transmissions per day, and virtually no social structure to care for the inevitable orphans (for their mothers

are condemned to die), whether they be HIV-positive or not.

Our problems are totally different from those of the first world. To deliberately increase the Aids-orphan load would be not just folly, but, to my mind, immoral.

Our meagre resources should be directed towards protecting the as-yet uninfected, and the heartbreak will have to be endured.

It will, however, be less if we avoid burdening ourselves

with millions of orphans, largely reared by relatives, who cannot afford it, and with almost zero life-prospects, ending up as street-children, criminals or prostitutes, and almost certainly acquiring HIV at an early age.

This is what superficial humanitarianism promises us. Let us, for every one's sake, think deeper.

Mr BASIL EDGE
Glenwood

