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THOMPSON COMMUNICATIONS

001

NATIONAL**TenPointLeadershipFoundation**

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President William Jefferson Clinton
The White House
1600 Pennsylvania Avenue, NW.
Washington, D.C. 20500

January 21, 2000

Dear Mr. President:

I write to applaud your administration for efforts thus far in combating the AIDS crisis within the United States. It is the Clinton Administration that will be noted in history for courageously recognizing the need for mass public education and advocacy to prevent the further proliferation of HIV/AIDS within the United States. These efforts have significantly curbed the further spread of this fatal disease within our borders.

With respect to AIDS in Africa, I commend, in particular, UN Ambassador Richard Holbrooke for being outspoken on the AIDS holocaust on the African continent so early in his term. I give ovation to Vice President Al Gore for chairing the United Nations Security Council discussion on this very topic, raising the specter of this issue, and finally making it a national and global priority. Regardless of where and how this wretched disease originated, the numbers of individuals infected, minute by minute, is beyond belief. AIDS has now gripped the entire human race and will not reverse itself by turning a neglectful blind eye.

Following the Vice President's historic address before the UN Security Council, I was afforded the opportunity to have dinner with the Vice President and Ambassador Holbrooke. It was suggested that I prepare a set of faith-based policy proposals for your consideration on this issue. While the gathering of the UN Security Council in New York is the ideal place for Vice President Gore to introduce these themes to the leaders of the world, you, Mr. President, will have one more unique opportunity to introduce the administration's position on AIDS in Africa to the American public. As you prepare your final state of the union address, I strongly encourage you to include the African AIDS crisis in your deliberation of foreign policy priorities.

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Rev. Eugene Rivers
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The National Ten-Point Leadership Foundation, which I founded and head, is an African American national coalition of churches, borne out of the need for the faith-based community to take greater responsibility for the deteriorating socio-political climate developing in the US and abroad. We embrace the rich African American Christian tradition and the recommendations that we propose below reflect that leaning. Mr. President, with these recommendations we appeal to your moral fortitude. Please review these policy recommendations for incorporation in your upcoming State of the Union address and for action to be taken throughout the close of your term.

Enclosed with this letter is the set of faith-based policy proposals.

In Christ,



Rev. Eugene F. Rivers 3rd.

Founder,

National Ten-Point Leadership Foundation

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Seymour Institute
for Advanced Christian Studies

Policy Memorandum

*Recommendations for Addressing the
AIDS Holocaust in Sub-Saharan Africa*

Eva T. Thorne
*Visiting Assistant Professor of Political Science
and Research Fellow
at the Institute on Race and Social Division
Boston University
Boston, Massachusetts USA*

January 2000

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Policy Recommendations For Addressing the AIDS Holocaust in Sub-Saharan Africa

Eva T. Thorne,

*Visiting Assistant Professor of Political Science
and Research Fellow*

*at the Institute on Race and Social Division
Boston University
Boston, Massachusetts USA*

January 2000

I. Introduction

The Impact of HIV/AIDS

The AIDS pandemic in Africa rivals in seriousness the trans-Atlantic slave trade. AIDS will define the direction of significant segments of the continent in the areas of development, economics, and politics, among others. The economies of severely affected countries will suffer as the economically active sector of the population is hardest hit. The implications for domestic economic development as well as insertion in the global economy are serious and profound. Political leadership will be affected, as the educated, cosmopolitan urban dwellers that constitute this class will die in large numbers.

AIDS is not only a symptom of poverty but of mobility. Because AIDS is driven by mobility it affects the rich as well as the poor. The ramifications for the rising African middle-class are deadly. It is from this class that the rising political class in Africa will emerge. Unless action is taken quickly, there will be no emerging middle- or political class.

Consider the following statistics. AIDS is the leading cause of death in sub-Saharan Africa. Of the 5.6 million new HIV infections in 1999 (according to UN-AIDS), 4 million were in Africa. Half the infections occurred among young people, ages 15-24, with females representing more than half of the victims. 25% of adults in Botswana, Namibia, Swaziland, and Zimbabwe are infected with HIV. Life expectancy in the most affected countries will drop by as much as 20 years, rapidly reversing development gains made over 30 years. Reliable reports issued by internationally respected development institutions (such as the World Bank and UN-AIDS) estimate that there will be 40 million AIDS orphans in sub-Saharan Africa by 2010.

Unless there is a plan to address the needs of this population, the entire world will pay a very heavy price militarily, economically, and politically as it is forced to intervene to counterbalance the instability that will inevitably result from this pandemic. The United States, as the world's lone superpower, will face pressure to act. The time to develop a comprehensive strategy is now. The orphan population,

¹ This document benefited from the invaluable input from my colleagues at the Seymour Institute. In particular I would like to thank Marsha Coleman-Adebayo, *Senior Policy Advisor* at the Seymour Institute and Chair of the *Twenty First Century Group* AIDS Network, Washington, D.C.; Diana Aubourg, Chair of the *Twenty First Century Group* Steering Committee, Boston, Massachusetts; Kenneth D. Johnson, *Fellow*, Seymour Institute, Boston, Massachusetts; Jacqueline C. Rivers of the *Azusa Christian Community*, Boston, Massachusetts; Kurt Shillinger, *Boston Globe* Correspondent, Johannesburg, South Africa;

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along with other issues arising from the crisis, requires a 20-40 year plan, which must be elaborated and implemented as soon as possible.

Focusing on Sexual Behavior

Though it is an unpopular position to espouse, the issue of promiscuous sexual behaviors (which is driven by complex socioeconomic conditions and wholesale cultural breakdown) is at the heart of the pandemic. What is potentially useful about an approach that targets sexual behavior is that it is a relatively inexpensive strategy that relies on aggressive and well-targeted public education and outreach. There are comparative advantages to and arguments for focusing an anti-HIV/AIDS strategy on sexual behavior.

Even if pharmaceutical companies allowed for parallel importing and compulsory licensing for the production of AIDS drugs, sub-Saharan African countries lack the health care delivery systems needed for effective drug distribution and monitoring. Physical infrastructure, trained public health personnel, monitoring systems, and other elements are underdeveloped or non-existent. Creating and strengthening these components will take years.

An aggressive campaign focused on abstinence and monogamy can be developed and implemented immediately and at very low cost. HIV/AIDS infection rates in northern Africa and the Middle East (which along many development indicators resemble sub-Saharan African countries) are extremely low. All things being equal, what accounts for these low infection rates? Religious practice (Islam) that promotes conservative sexual behavior is largely responsible for the low rates of infection. A similar approach in sub-Saharan Africa can empower Africans with an effective offensive strategy.

Gay, white men in the United States made the connection between sexual behavior and the spread of HIV/AIDS. In addition to early testing and condom distribution, changing sexual behavior was an important part of their strategy to combat the disease. Declining infection rates among this population indicate that the strategy was successful.

Part of Uganda's anti-AIDS campaign involves public education about sexual behavior. Teenagers now delay their first sexual experience by about two years. The infection rate for Uganda, which was the epicenter of the pandemic, has declined.

Still, the other proposals in this document are critical to the long-term growth and development of sub-Saharan Africa and should be adopted.

The black church, for historic, moral and geo-political reasons, is in a unique position to work in partnership with African governments, religious institutions, and other civil society organizations in developing a strategy to address the issue. There are specific advantages to such a strategy.

Large, bureaucratic development institutions often find reaching the grassroots level problematic. Religious institutions in sub-Saharan Africa tend to be closer to the where the greatest needs are. Therefore, they are in a good position to advocate on behalf of their members. Religion is very much a part of the daily lives of much of sub-Saharan Africa and is potentially a powerful vehicle through which to conduct outreach and education initiatives. The black church in the United States can partner with African churches and religious institutions that have spoken out on the issue, serving to amplify the voices of indigenous calls for action on the disease.

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Following is an outline of several key areas in which action must be taken. The focus is not on outlining the problems, but in making concrete recommendations.

II. Helping People Affected by HIV/AIDS

Caring for the Orphans

The US, and in particular the black community, is in a unique position to lend support to African efforts to combat the disease. The black church in the United States, in conjunction with the Roman Catholic Church, should partner with African governments to spearhead a drive to build boarding schools/orphanages for the 40 million children left without guardians. (For example, there are currently about 40 million children in the US public school system). With 500 children per orphanage, 80,000 such institutions must be built over the next 10 years. In addition to providing shelter, care, and education, these boarding schools/orphanages should serve as civic education and leadership development sites.

To do this will entail a massive outlay of resources, which must come from religious institutions, and both the public and private sectors. Companies seeking to do business in Africa must come to grips with the role they must play in supporting such initiatives. A black, church-based effort can play a pivotal role in the development of a new labor force over the next 10 to 20 years. Without such an initiative, the possibilities for business development will be adversely affected.

What is necessary is a pan-African, charismatic, evangelical congress working in collaboration with the private sector, the US government and the Roman Catholic Church. The goal of this congress will be to develop a program modeled on the Peace Corps, and focused on providing assistance to the countries most ravaged by HIV/AIDS. Rather than duplicating efforts, this program will work within communities in affected countries that already are working to address the crisis.

The goals of the program are to:

- seek out and form meaningful partnerships with African religious institutions and clergy.
- provide workers (from churches, seminaries, colleges and universities) to build boarding schools/orphanages and to staff them.
- train community residents and youth in particular in AIDS education and prevention, with a focus on behavior modification and harm reduction (condom distribution and education about use).
- provide grassroots, abstinence- and monogamy-oriented, sex education campaigns.
- support and strengthen African, faith-based initiatives to combat the spread of HIV/AIDS.
- assist in the rebuilding of social and physical infrastructure adversely affected by HIV/AIDS.
- provide education for the development of a skilled labor force, with a focus on scientific and technological literacy.
- provide civic education for the development of future political leadership.
- strengthen existing health clinics, civil society organizations, and informal community networks that minister to affected people.

A massive call to the church world and to universities and seminaries must be issued to recruit young people with the willingness, time, and dedication to commit two years to working in such a program.

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Financial, logistical, and other forms of support must come from:

- governments of rich countries (the US and other advanced, industrialized countries).
- multilateral development institutions including, but not limited to: the World Bank, African Development Bank, the United Nations Development Program, etc.
- the private sector - (especially mineral extraction companies that do business in Africa; commercial banks that hold debt in Africa; and pharmaceutical companies, etc.).
- African governments, health ministries, religious institutions, civil society organizations and informal social networks.

Building Community Care Structures

In addition to caring for orphans, these religious partnerships must focus on caring for those who are sick and dying. It is critical to breakdown stigmas that lead to violence against those who are sick - especially women and children. In many African countries, admitting having the disease means ostracization, emotional and psychological abuse, and outright physical violence. Such treatment only exacerbates the fraying of community structures. It is therefore imperative that those who are sick be treated with compassion and dignity. Religious partnerships that include northern and African institutions and clergy can play a pivotal role in promoting community care structures. These structures will support not only those who are sick and dying, but also their families, providing a hedge against further community erosion.

It is clear that for any foreign effort to be successful, it must establish partnerships with African programs that are not paternalistic or condescending. To this end, identifying African religious entities and leaders will be critical.

III. Health Care Professionals

Hospitals and medical schools in the US enjoy the benefits of excellent resources, both intellectually and materially. These institutions can use their privileged positions in the medical world to encourage medical students and residents to spend a year in sub-Saharan African countries. In exchange for receiving credit at their home institutions, these medical personnel will

- support health clinics and hospitals that are struggling to serve people with HIV/AIDS.
- share relevant medical training and skills with medical personnel in Africa.
- support community-based HIV/AIDS education and outreach programs, especially in rural areas, which tend to be underserved.

IV. Access to Drugs

Pharmaceutical Companies and United States Trade Policy

The costs of AIDS cocktails are prohibitive for sub-Saharan African countries. These drugs can cost as much as \$20,000 per person, per year, well beyond the financial capacity of African health care systems. The situation of AIDS-infected people requires an immediate solution, which would involve:

- releasing African governments from intellectual property rights and allowing them to reproduce AIDS drugs cheaply.

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To make this a possibility, rich countries, donors, and the private sector will have to help build the necessary infrastructure and capacity for sub-Saharan African governments to be able to benefit from the possibilities of local drug production.

Other solutions must also be considered:

- the Treaty on Rights and Intellectual Property (TRIPS) must be reconsidered, as it privileges the agendas of rich countries. The treaty constrains African governments from taking actions that will improve the health of their populations and must be modified.
- the United States, through the United States Trade Representative (USTR), must be more flexible in allowing sub-Saharan African countries to use compulsory licensing, which would allow them to make or commission AIDS drugs themselves if they paid a negotiated royalty to the patent holder.

Policymakers must be clear about the strengths and weaknesses of this approach. Even if more flexible trade agreements can be reached, their utility will be limited by the lack of institutional, physical, and professional infrastructure in affected countries. Effective drug delivery presupposes the availability of capital and manufacturing facilities. Moreover, trained staff to dispense and monitor medications is necessary. In other words, more flexible trade agreements must be accompanied by appropriate financial, logistical, human, and physical resources. These needs must be met, not just because of the crisis, but also because of the continent's developmental needs.

V. African Political Leadership

Clearly, a major portion of the responsibility for the rapid spread of HIV/AIDS is due to the silence of African political leadership. The United States, in partnership with black churches, can use its political and moral leverage to pressure African heads of states to address the issue squarely. The United States government, in partnership with black churches should support and convene a conference of African heads of state specifically to address HIV/AIDS. Heads of state from industrialized countries should attend this conference to provide political support. The purpose of the conference would be to:

- highlight the benefits of an education campaign that focuses on sexual behavior.
- encourage and pressure African leadership to speak out on the cultural breakdown of their societies and the impact on youth in particular.
- provide a context for African leadership to develop coherent plans and strategies to address the spread of the virus.
- facilitate the exchange of best practices from other countries (e.g., Senegal and Uganda).
- present incentives for African political leadership to address the virus (trade agreements, foreign aid, etc.).

African leadership can create a climate of tolerance and compassion for those suffering and dying from AIDS by:

- participating themselves in public education campaigns (billboards, television, radio, pamphlets).

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VI. Debt Relief

While debates over debt relief for African countries have existed for some time, the AIDS pandemic makes such action urgent. Existing debt will be paid (if it were possible to repay it) by the economically active sector of the population in sub-Saharan Africa. It is precisely this population that is most affected by AIDS. In other words, the sector most likely to repay foreign debt will be dead - i.e. unable to repay it.

Debt repayment entails diverting scarce foreign exchange from domestic needs, including health and education. This has been burdensome and difficult under circumstances more favorable than those that currently exist under the AIDS pandemic.

Governments, commercial banks, and multilateral development banks must forgive Africa's debt. Default will be a very real possibility if the debt is not forgiven, if for no other reason than there will not be enough people alive to repay it. It is unrealistic to expect that a decreased workforce will be able to shoulder the increased burden of the debt.

Any debt forgiveness must take place within the context of government accountability and the promotion of sound macroeconomic policymaking. This does not necessarily entail standard International Monetary Fund (IMF) and World Bank prescribed programs.

VII. AIDS As A National Security Issue

In addition to being a development issue as the term is traditionally understood, HIV/AIDS is a national security issue. HIV/AIDS spreads more rapidly in conflict- and war-torn countries in sub-Saharan Africa. Data from Rwanda, Ethiopia, Sudan and Eritrea provide evidence for this claim. Soldiers, prostitutes, and large concentration of refugees and internally displaced people provide fertile ground and opportunity for the spread of the disease. Therefore, working to secure and end to such conflicts is a critical step in combating the pandemic.

Neither the US National Security Council nor the State Department accords sufficient attention to Africa. If the US and the United Nations are to assist in reducing the spread of HIV/AIDS, they must also apply the resources of its foreign and security policy-making apparatus to addressing the AIDS pandemic. The far-reaching implications of the AIDS pandemic in sub-Saharan Africa make conflict mediation and resolution imperative. Efforts should focus on Angola, Burundi, Congo, Ethiopia, Eritrea, Rwanda, Sudan, and other countries affected by large numbers of refugees.

VIII. Conclusion

This policy memorandum has presented an outline of a strategy to address the AIDS pandemic in sub-Saharan Africa. Coordinated action that includes the black church, religious institutions, both here and in Africa as well as the public and private sectors is necessary. Taking steps in any one area would be helpful. What is most needed, however, is a comprehensive strategy that takes into account the complex social and political structures and issues in Africa. The more steps that are taken, the greater will be the likelihood that the spread of HIV/AIDS will be slowed and halted.

January 18, 2000

FACSIMILE COVER PAGE

To : [REDACTED]
S nt : 5/11/00 at 7:03:32 AM
Subject

From : Cheryl Thompson
Pages : 7 (including Cover)

FYI

Following are two news clips from Zambian newspapers that covered a fact-finding trip led by Rev. Eugene Rivers. Additionally, the very rigorous itinerary for the trip that covered territory in Zambia and South Africa is included for your review.

The trip was organized and designed to provide a small group of clergy with an up-close look at the HIV/AIDS pandemic and also provide them with the opportunity to pose probing questions to every component of society -- from the President at State House to a small group of Catholic nuns running an AIDS orphanage/hospice in Zambia and South Africa. The trip lasted from May 1, 2000 to May 8, 2000.

CBS News 60 Minutes met up with the delegation and included much of their South Africa leg of the trip in a one-hour special on AIDS in Africa to be aired June 20th.

Also included on the trip:

Dr. Rev. A.G. Miller of Oberlin College, Oberlin, Ohio
Dr. Rev. Ronald Potter, Jackson State University, Jackson, Miss.
Dr. Ruth Bentley, National Black Evangelical Association
Dr. S. Tiffany Cunningham, University of Mass/ Boston/ Neuroscience
Kenneth Johnson, National Ten Point, Boston/ Harvard University

Please be in touch with comments and questions.

Cheryl Thompson
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THE MONITOR

Lusaka, Zambia

for Human Rights and Development

THE MONITOR May 5 - 11, 2000

Men need sexual education

By Goodson
Machona

A visiting clergyman from the United States has said Zambian men need massive amounts of education to make them realise they may be courting death every time they engage in extra-marital sex.

Reverend Eugene Rivers, who is the head of the Pan-African Charismatic Evangelical Congress, said the high levels of HIV/AIDS infections in Zambia were as a result of infidelity by men.

"The role of men in issues of sexual responsibility is of paramount importance if the disease is to be controlled," Reverend Rivers said.

He said he was in Zambia to build a collaborative and interactive relationship with government and the Church in the fight for debt relief, Human Rights and HIV/AIDS awareness.

On Thursday, his group had a working breakfast at State House with deputy minister in charge of religious affairs, Reverend



REVEREND EUGENE RIVERS: Part of the challenge is to get issues of behaviour and culture on the table

Peter Chintala. He said they discussed a range of issues, chief of which was the disintegration of the labour force as a result of the HIV/AIDS pandemic.

"Initially our mission is to listen and learn and get some sense of the context of the situation," he said. "Based on our findings, we will try and figure out how we can assist."

He said so far, his findings were that HIV/AIDS

infections were exceptionally high among young people.

"Mainly its because of their sexual behaviours. But this is a topic that is difficult to talk about in Black communities," he said. "Part of the challenge is to get issues of behaviour and culture on the table."

He is expected to leave for South Africa today. He has already visited Zimbabwe.

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By Rosalyn Phiri
A VISITING clergyman from the United States has challenged the church to translate what it teaches "with lips" into practical reality, of the especially on issues related to the HIV/AIDS pandemic.

Speaking during a luncheon hosted for his delegation by Church of God Regional Superintendent Bishop John Mambo yesterday, Reverend Eugene Rivers said there was need for concerted effort to fight HIV/AIDS which was afflicting millions of people in Africa.

Reverend Rivers, who described the scourge as "a great holocaust in Africa" said "irresponsible, selfish behaviour by men functions as a weapon of abuse against women and children."

"It's the church to protect the women and children. God is calling on the International Monetary Fund (IMF), the World Bank and the international community to defend the widows and the children," he said.

Bishop Mambo said many churches in Zambia had problems in providing the care of HIV/AIDS. But the Regional Superintendent observed that the problems of AIDS, poverty and other related issues were being aggravated in Africa by the 67 sailors due to the huge debt shock.

"If the debt is forgiven, the question of AIDS and poverty will come to pass," Bishop Mambo said. He said the church was in a better position to lobby for

Clergyman challenges church to be



Bishop Mambo chatting with visiting US clergyman Rivers at his house

organised nature across the globe.

"When it comes to mobilising, nothing can beat the church. We remove government when we want and we

loss," said Bishop Mambo. Reverend Rivers pledged that the group would visit the White House, the World Bank and IMF to fight the case of our African brothers.

