

Zwelinzima Vavi, General Secretary, COSATU, September 2005, Input to TAC Congress

Chairperson of the TAC Zachie Achmat

Leaders and activists of the TAC

Comrades and friends,

To start with, let me express my gratitude and congratulations to TAC and its leadership. In the past few years, you have set the agenda for the nation on this critical challenge of HIV and AIDS. At the same time, you have built an organisation that plays a critical role in giving people a voice on this subject. This type of activism and participation is crucial for our democracy and our revolution.

As your chair's report points out, however, there is still a very long way to go. The report makes clear that the crisis around AIDS remains. The data paint a chilling picture.

Let me again highlight some of the issues. This should not be necessary, but the fact is that denialism means that the impact of HIV and AIDS is all too often ignored. As a result, too many people sit by in silence and even ignorance while our people are decimated by the failure to provide treatment and support for people affected by the AIDS pandemic.

To start with, analysis of death certificates shows a shocking increase in the rate of death, at around 10% a year in the five years to 2002. Deaths due to TB and respiratory diseases like pneumonia and influenza, which are largely due to AIDS, have doubled or tripled. In 2001, these diseases account for almost 30% of the official reasons given on death certificates for people aged 15 to 49, up from 15% in 1998.

The fact that the figures are so out of date points to the failure of our society even to monitor the progress of AIDS adequately. Even more tragic is that many of these deaths are today unnecessary. With decent treatment, most people with HIV should live decades longer. The rows of gravestones in the cemeteries, like the data on death, point to our failure as a society to deal with this challenge.

A further indication of our failure emerges from the continued rise in the infection rate. According to returns from antenatal clinics, the infection rate climbed 3% between 2002 and 2004. Today, HIV affects every segment of our society, indeed every family.

Comrades and friends,

The causes of the HIV epidemic can be traced, ultimately, to public health policy failures and the structures of our society.

It starts, first, with the failure to ensure a comprehensive education and prevention campaign. By now, every South African should be well informed on the nature of this infection, how it can be avoided and how it can be treated.

Yet we all know that many people in our townships and villages still fall prey to a host of myths and legends. The media continues to spread sensationalist stories and vicious rumours. And con men like Dr Raath are allowed to report on fake cures and treatments without any adequate rebuke from the authorities. That ignorance can literally kill us: by exposing us to infection, and by leading to vicious stigmatisation of people with HIV.

The government in particular continues to lag in education and prevention. It has left this core campaign largely to rich advertising companies that think they can sell AIDS information like they sell luxury cars or cellphones. The dependence on LoveLife has wasted hundreds of millions of rand on glossy publications that provide almost no real information and that seem geared to selling a lifestyle of consumerism for the rich.

In the real world, where most live, two out of five workers still earn under R1000 a month, and unemployment is running over 40%. Where are the LoveLife publications and broadcasts for workers and the poor? Where are the education programmes to reach all our people where they are – in the townships, in villages, in schools and in the workplace? Every government department should be informing our people about HIV. Every civil society organisation should be pulled into the struggle.

Second, the public health system is still failing to treat people with AIDS system on an adequate scale. For every ten people who need anti-retroviral treatment, only one is getting it through the public sector, and another one through the private sector. The failure to give our people hope of survival makes it harder to ensure effective prevention. It condemns tens of thousands to an unnecessary death, leaves their children orphans and leaves our communities poorer.

We in COSATU saw the initial commitment to provide anti-retrovirals through the public system as a major victory. But what do we see? True, in the richest provinces – in Gauteng and the Western Cape – treatment is now available to many. But in too many others, the waiting lists are growing while roll out remains painfully slow. Our people still die because they are workers, while the rich still survive on private care.

A third factor is the refusal to ensure serious sex education in our schools, and to ensure that the realities of sexuality are dealt with openly and honestly across our society – in the media, in government policies and statements, and in our clinics. Educators are still not adequately equipped to ensure that learners understand the facts of life in the time of AIDS. For its part, the press makes no effort to assist in open and frank discussion of the issues.

A fourth reason for the failure to deal adequately with the HIV epidemic lies in the persistent underfunding and poor management of the public health sector. The difficulty of rolling out anti-retroviral treatment in itself demonstrates the deep-seated problems. Indeed, while South Africa spends more on health care as a share of its economy than most developing countries, the public health situation is far worse. That reflects the waste of billions on private health, while the public sector lacks beds, medicines, decent buildings, trained personnel and management.

Finally, two more fundamental social failures contribute to the spread of HIV.

On the one hand, there is an extraordinarily high rate of unemployment amongst our young people. Today, close to two thirds young people under the age of 30 have never had a job since graduating from school. Life is cheap when you don't see a future for yourself, when it is so hard to find a way to participate meaningfully in society.

On the other hand is the subordinate position of women. As long as women depend economically on men, they cannot make the choices they need to avoid HIV. They cannot fight against the silence that makes it harder to stop the AIDS epidemic and to get treatment. The situation is compounded by the persistent violence against women both inside and outside their homes.

Comrades and friends,

Ultimately, these failures start with a failure of leadership, beginning with the presidency and the Ministry of Health. Any health ministry that presides over the spread of an epidemic like this one has much to answer for. This lack of government leadership on HIV is a betrayal of our people and our struggle. We are sitting by while the biggest threat to our nation since apartheid is ruining our families and our communities. We have to turn this situation around. With the destruction trail that is so evident – when last did any of us hear our President mentioning the words HIV and AIDS? When last did we hear our Minister talking about the need to implement government policy including provision of the antiretrovirals and or accounting for failure of government to meet targets set by the government? Too many times we hear her speaking about the spinach. There is nothing wrong with encouraging our people to eat healthily and to live healthily. But there is something very wrong when there is silence about the other government policy such as the need

to ensure that people have access to cheap antiretrovirals.

COSATU itself must gear itself up for this battle. We have to acknowledge that our own efforts remain inconsistent. We need to ensure that every COSATU affiliate takes forward the struggle against HIV as a central priority for the working class. We must ensure that every workplace has policies to deal with HIV and AIDS. We have to ensure more of our shopstewards have training to counsel people with HIV. And we need to provide stronger back up for TAC campaigns that seek to ensure better prevention, testing and treatment for working people. I am happy to inform you that we have agreed with the TAC leadership to meet very soon after this congress and plan a much more tightly coordinated campaign of COSATU and the TAC.

To start with, we need to end the culture of denialism across society. HIV and AIDS should be core issues in every Alliance campaign, including the upcoming local government elections. Every major government speech should help increase awareness of the HIV crisis and fight the stigmatisation of people with AIDS. If LoveLife can't come up with an effective education campaign, the funds should be redirected to organisations that are more in touch with the majority of our people.

On the ground, every public servant should be trained to educate and help people affected by HIV and AIDS. The lifeskills curriculum must deal explicitly and openly with HIV and sexuality, and must be available for every student on a consistent basis. The whole education and prevention campaign by government must be redirected to meet the needs of ordinary South Africans. This campaign must be backed up by making counselling and testing part of routine healthcare in the public system.

We will of course continue to support the campaign for access to anti-retroviral treatment. We look to this congress to help define more effective tactics and strategies to achieve this aim. Every day lost is a death sentence for some of our comrades and friends. We need to come from here with a programme of action that will end the delays.

Together with TAC and other partners in civil society, we need to develop effective strategies to deal with SANAC. This organisation was supposed to be the main way that all stakeholders can take a strong stand on HIV. Instead, it has become a toothless extension of government, and wholly ineffective. We have to either turn it around or withdraw from it.

These are all critical short-run strategies. In the longer run, we will continue to struggle for a more just society, where unemployment and oppression of women are no longer a crisis. The fight for decent work for all will be taken forward through our jobs and poverty campaign, which will hold general strikes at provincial level through the month of October. I know that you will be in the front rows of the marches taking place in the Western Cape and Eastern Cape on the 3rd of October 2005 and later in all other provinces.

Comrades and friends,

We look to this congress to identify stronger strategies for the fight against the AIDS epidemic. We cannot continue in denial while thousands are dying unnecessarily. We are sure your deliberations here will mark the beginning of a new stage in this new struggle.

Amandla