

TAC Electronic Newsletter

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- *17 July TAC statement: Follow-up: **Mr Mseleku must answer many questions***

Links:

- Revamped and substantially improved TAC website: www.tac.org.za
- Community stories:
 - by Ntombi Qhuza
 - by Georgina Booysen
- Memorandum handed over to Dr Richard Feachum at the Global Fund Partners Meeting on 2 July 2006
- [Court papers](#) filed in case against Rath and Minister of Health
-

[Recommended Website \(www.aidstruth.org\)](http://www.aidstruth.org) on science of HIV/AIDS that debunks AIDS denialism

- We need your help to do our work. Please [support](#) TAC.

TAC Eastern Cape youth march for HIV prevention: 15 June 2006

"As a parent, I feel it is important that we declare our schools HIV prevention zones. The reality is that our children are falling pregnant and are becoming HIV-positive. As parents we don't like that but we want to protect our children rather than only preach our beliefs to them. We disagree with the MEC [of Health] that condoms should not be made available in schools and that abstinence only must be taught. Our children are sexual beings and explore their sexuality so they need condoms and good information within school premises. " ?? Mrs. E. Baleka, chairperson of the school governing body (SGB) joint forum, Nelson Mandela Metro.

"As a student living with HIV, I struggle. We are not receiving any education and information about HIV/AIDS in our schools. We therefore see no benefit to disclosing within the school and we are afraid to ask our teachers questions about HIV/AIDS. The pregnancy rate is high within our schools and we get discriminated by nurses when we go to the clinics after school. They shout at us for wanting condoms and contraceptives. There is no support mechanism in our schools for students who are infected and affected by HIV." ?? Asanda Mofu from Rubusana High School, Queenstown.

"Being a mother and living with HIV as a student, I do not think abstinence is a solution to the problems we are confronted with. I see so many pregnant young girls in our schools and community. That alone shows the risk of being infected with HIV. Teachers still have a problem dealing with learners who are infected with HIV which leads to some of us feeling isolated. Therefore other strategies beyond abstinence are needed that will include information and access to condoms in our schools." -- Zandile Maraw, 17 years old, from Lady Frere Lower Seplan

"You have a duty to give us information, protection and choice ? we have a right to live". This was the tone of the more than 10 000 youths marching ahead of Youth Day (June 16) in Zwelitsha, Eastern Cape. The youths came from more than 150 schools in OR Tambo, Chris Hani, Amathole, Nelson Mandela Metro and Cacadu districts of the Eastern Cape.

The march was held because of frustrations expressed to TAC by parents, teachers and learners during our "Operation Vunduza". This was a mass mobilization and awareness raising campaign highlighting the inadequate policy of the Department of Education which bars condoms at schools and does not give consistent life-skills education. The Department's policy is inconsistent with the daily realities faced by many sexually active young students.

Teachers reported that they are ill-equipped to deal with the needs of sexually active learners as well as those affected and living with HIV and that the Department of Education does not appear to recognize the critical responsibility it has to prevent new infections as well as provide support for learners and teachers in need.

The key demands in a memorandum handed over to the Provincial Department of Education were for the provision of age-appropriate life-skills education, including sex-education, and condoms in schools as well as a greater recognition by the Department of the role it has to play in addressing the HIV epidemic.

Over 10% of youths aged 15-24 are HIV-positive in South Africa. Nearly half of South Africa's young people have had sex by the age of 19 (source: RHRU). There were over 3,720 school student pregnancies in the Eastern Cape in 2005 (source: Eastern Cape government). TAC believes that life-skills education (including sex education, gender and human rights education, and the science of HIV prevention and treatment) as well as condoms in schools are necessary to reverse the HIV epidemic amongst youth. In contrast to a popular myth, there is no evidence that condoms in schools

promote sex. The challenge is to develop a culture where condoms are always used for sex and where information which enables healthy sexual choices is provided. Making condoms available in schools, coupled with life-skills education, will help create this culture, reduce new HIV infections and save lives. The marchers criticized the growing conservatism in the Department of Education. Its approach is based on narrow morality and religious ideology with the consequences of promoting ignorance and shame about sexuality.

The MEC for Health, Mr Mkhangelisi Matomela did not accept the memorandum. It was instead accepted by the provincial Deputy Director-General of Education. He promised the marchers that the Department was sensitive to their demands. TAC General Secretary, Sipho Mthathi pointed out that while it was good that a large number of Department of Education officials came to accept the memo, Matomela's failure to attend --despite having confirmed the night before-- insulted the seriousness of the issues brought by the marchers to the Department's attention.

Since then, the MEC of education has not responded to the TAC nor its task team set up to follow up on the demands of the march.

The following list of demands were handed over the Eastern Cape Health Department:

- All schools should implement a comprehensive, evidence based HIV prevention programme.

- HIV policies and approaches should be guided by realities in the lives of young people.

- Schools should create their own HIV/AIDS policies based on the promotion of human rights, informed choices and addressing gender imbalances. These policies should state how schools will support learners and educators living with or affected by HIV/AIDS.

- The Eastern Cape Department of Health should support and monitor that schools implement age appropriate sexual and life skills education on a full time basis.

- Make condoms accessible, particularly in high schools.

- Roll out, on a large scale, training for educators, learners and school governing boards on the science and socio-economic issues related to HIV/AIDS.

TAC has started working with some of schools in the province. We help train school governing bodies to put in place appropriate school AIDS policies. In some areas immediate action needs to be taken to deal with crises including violence against female students. School AIDS Action Committees are being established to monitor and assist with implementation. TAC and partners, including the South African Democratic Teachers Union and Student Representative Councils, will continue to advocate for the Department of Education to change its policy. While the march specifically targeted the Eastern Cape Department of Health, the problems highlighted are national. Indeed, the Provincial Department of Health excused its policy by saying it is based on national guidelines. TAC will work with its partners to take this campaign across the country.

[Thanks to Masizole Gonyela for assisting with the above report and obtaining the quotations.]

Abstract of study on condoms in US schools

Condom availability programs in Massachusetts high schools: relationships with condom use and sexual behavior.

Authors: Blake SM, Ledsky R, Goodenow C, Sawyer R, Lohrmann D, Windsor R. Journal: Am J Public Health. 2003 Jun;93(6):955-62. [URL: http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?CMD=search&DB=pubmed](http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?CMD=search&DB=pubmed)

OBJECTIVES: This study assessed relationships between condom availability programs accompanied by community discussion and involvement and adolescent sexual practices.

METHODS: Sexual practice and condom use differences were assessed in a representative sample of 4166 adolescents enrolled in high schools with and without condom availability programs.

RESULTS: Adolescents in schools where condoms were available were more likely to receive condom use instruction and less likely to report lifetime or recent sexual intercourse. Sexually active adolescents in those schools were twice as likely to use condoms, but less likely to use other contraceptive methods, during their most recent sexual encounter.

CONCLUSIONS: The strategy of making condoms available, an indication of socioenvironmental support for condom use, may improve HIV prevention practices.

[END OF EASTERN CAPE MARCH STORY]

Scandal: Department of Health colludes with Matthias Rath

Director-General of Health Must be Suspended and Investigated

10 July 2006

The Mail & Guardian (7 July 2006) reported that the Director-General of Health, Mr Thami Mseleku, has twice instructed Port Health to release Matthias Rath's medicines. Mr Mseleku must be immediately suspended for his actions for two reasons: (1) It is unacceptable for the Director-General of Health to assist a known charlatan who claims his medicines can treat AIDS and who is endangering public health. (2) The Director-General of Health appears to have exceeded his authority and broken the law by stopping Port Health officials from carrying out their duty.

Mr Mseleku has undermined the country's legal framework established to protect public health. Since the AIDS epidemic began, people with HIV/AIDS have been vulnerable to unscrupulous activities aimed at exploiting them. Mr Mseleku's actions make it easier for these unscrupulous activities to continue unabated. It begs the question as to whether government has a real commitment to ending discrimination against people with HIV and protecting our health.

This is a scandal. It comes on the back of the admission of the head of the Medical Research Council (MRC), Dr Anthony Mbewu, that the MRC received R200 000 from Matthias Rath and kept approximately R60 000 of this money which was used to organise workshops for Rath.

We call for Mr Mseleku to be suspended immediately and the National Prosecuting Authority to investigate his actions.

Charlatans claiming they can treat AIDS act with impunity in South Africa. TAC and others have previously shown that Matthias Rath's experiments on humans have led to deaths. We have received doctors' reports in the last few days describing deaths and near-deaths because patients used untested medicines instead of antiretrovirals, including Ubhejane which is peddled to patients at R342 per month. Nozipho Bhengu died as a consequence of the lies of Tine van der Maas and the Minister of Health. DJ Khabzela died at the hands of a plethora of charlatans. In Cape Town city centre, you are likely to be handed pamphlets advertising healers who claim they can treat a multitude of diseases including AIDS.

This is happening because the Minister of Health not only tolerates quacks, she is perceived to actively support them. This must stop and all health-care workers, scientists and civil society participants in South Africa must demand that it stops.

Court Action

In November 2005, the TAC filed court papers against the Minister of Health, Matthias Rath and others. We are asking the Cape High Court to order the Minister of Health to stop Rath's experiments on humans, his distribution of unregistered medicines and his false claims. In March, the state responded and on Friday, we filed our reply to the state's response. These court papers are available [here](#). They are also available at the Cape High Court.

In its response, the state claims that it conducted an investigation and found no evidence of wrong-doing by the Rath Foundation. We have asked the state for the record of this investigation but it has refused. We have not seen any evidence that any proper investigation has been conducted. For example, the Law Enforcement Unit of the Department of Health has not interviewed any of the witnesses who have deposed written affidavits testifying to the illegal activities of the Rath Foundation. We will now proceed to court as quickly as possible to compel the state to provide us with details of their investigation and to get an order to put an end to the Rath Foundation's illegal activities.

[END OF STATEMENT CALLING FOR MSELEKU TO BE SUSPENDED]

Follow-up: Department confirms essential details: Mr Mseleku has many questions to answer

13 July 2006

The Department of Health has issued a statement defending its action to release Matthias Rath's medicines. The statement essentially confirms the facts of the above statement and the Mail & Guardian report, i.e. that the Department of Health instructed Port Health authorities to release Rath's product which contained a schedule two substance, N-acetylcysteine. The statement does not confirm Mr Mseleku's role, but neither does it deny it. However, Professor Peter Eagles, chairperson of the Medicines Control Council, has confirmed Mr Mseleku's role. The only disagreement of fact between the TAC and the Department of Health appears to be whether or not the Department acted unlawfully.

We therefore address the following questions to Mr Mseleku:

- It is our view, based on legal opinion, that Mr Mseleku acted unlawfully by instructing Port Health to release

Rath's product. Nevertheless, assuming we are wrong, does Mr Mseleku believe it was ethical for him or his officials to intervene to release the product of a company claiming an unproven treatment for HIV and that is the subject of a court case in which Mr Mseleku has written the main responding affidavit? (See <http://www.tac.org.za/rath.html>)

- Has Mr Mseleku intervened in this manner for other medicines?
- If yes, would he name them?
- Mr Mseleku has before him an [expert affidavit](#) that states that Rath's products need to be registered. He has not offered an expert refutation of the contents of this affidavit in legal papers. Why then did he allow unregistered medicines through Port Health?
- Which legal statutes give Mr Mseleku the authority to instruct Port Health to release products that they have impounded?
- Was the product released in the care of a registered pharmacist, as is the law for schedule 2 substances?
- If so what was the pharmacist's name?
- Was the pharmacist's name supplied to Port Health?
- Did the pharmacist indicate what his or her registered premises are? It is required by law that the pharmacist has such premises.
- Besides N-acetylcysteine were the quantities of the other substances in the product below the requirements beyond which registration is required? (We suspect they were not. See below.)
- Mr Mseleku is aware that it is disputed that Rath's products containing a schedule 2 substance are distributed by a pharmacist or registered nurse. Usually they are distributed by members of the South African National Civics Organisation and Mr Mseleku is aware of this. Did he take any steps to ascertain if the products will be distributed by a nurse or pharmacist?
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We are aware that a number of Department of Health officials are deeply concerned by Rath's products being brought into the country. Did Mr Mseleku take any steps to allay their concerns?

We are sceptical that Mr Mseleku can answer any of the above questions satisfactorily. To demonstrate that he has acted both legally and ethically, he needs to answer all of them satisfactorily.

TAC has also since the above statement was released obtained a bottle of VitaCell that Rath is distributing through the South African National Civics Organisation (SANCO) in the Eastern Cape. He is also distributing it through SANCO in Kwazulu-Natal. Putting aside Rath's false claims about these medicines, there are several problems with the way this product is bottled. In particular, the label prescribes doses far in excess of the recommended daily allowance for a number of vitamins.

In Rath's adverts that he distributes in the Eastern Cape, he claims that micronutrients reverse the course of AIDS. This renders his products medicines. SANCO people distribute Rath's medicines to people and claim they are an alternative to antiretrovirals. Rath and SANCO's actions are endangering lives. Their distribution of unregistered and unproven medicines must be stopped.

[END OF FOLLOW UP STATEMENT]

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