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Folder Title:

AIDS, 2 of 2 [Africa] [4]

Staff Office-Individual:

African Affairs-Smith, Gayle/Barks-Ruggles, Erica/Sanders, Robin/Rice, Susan/Dempsey, Nora et al.

Original OA/ID Number:

2853

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Withdrawal/Redaction Sheet

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001a. paper	Discussion Paper for NSC Deputies Committee Meeting (7 pages)	ca. 05/2000	P1/b(1)
001b. agenda	Deputies Committee Meeting Agenda (1 page)	05/03/2000	P1/b(1) KBH 10/21/2024
002. memo	Sandra Thurman to the President, re: AIDS in South Africa (3 pages)	05/01/2000	P1/b(1) KBH 10/21/2024
003a. memo	Kenneth Bernard to James Babbitt, re: AIDS Deputies meeting (3 pages)	04/13/2000	P1/b(1) KBH 10/21/2024
003b. memo	Kenneth Bernard and Sandra Thurman to Leon Fuerth, re: Interagency Working Group on the Global AIDS Crisis (3 pages)	04/10/2000	P1/b(1) KBH 10/21/2024
003c. paper	Interagency Working Group Consensus Paper (11 pages)	04/10/2000	P1/b(1)
004a. email	Gayle Smith to Kenneth Bernard, re: AIDS Deputies Meeting (3 pages)	04/12/2000	P1/b(1) KBH 10/21/2024
004b. memo	Kenneth Bernard and Sandra Thurman to Leon Fuerth, et al., re: Interagency Working Group on the Global AIDS Crisis (3 pages)	04/10/2000	P1/b(1) KBH 10/21/2024
004c. paper	Interagency Working Group Consensus Paper (11 pages)	04/10/2000	P1/b(1)
005. letter	Thabo Mbeki, President of South Africa, to President Bill Clinton (5 pages)	04/03/2000	P1/b(1) KBH 10/21/2024
006. report	Re: [AIDS] (2 pages)	02/10/2000	P1/b(1)

COLLECTION:

Clinton Presidential Records
 National Security Council
 African Affairs (Smith, Gayle/Barks-Ruggles, Erica/Sanders, Robin/Rice, Susan/Dempsey, Nora et al.)
 OA/Box Number: 2853

FOLDER TITLE:

AIDS, 2 of 2 [Africa] [4]

2007-1550-F
 ke2012

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

Freedom of Information Act - [5 U.S.C. 552(b)]

- P1 National Security Classified Information [(a)(1) of the PRA]
- P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
- P3 Release would violate a Federal statute [(a)(3) of the PRA]
- P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
- P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
- P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]
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- b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
- b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

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DEPUTIES COMMITTEE MEETING
ON GLOBAL AIDS CRISIS

DATE: May 3, 2000
LOCATION: Situation Room
TIME: 11:00 a.m. - 12:30 p.m.

AGENDA

- I. Scope of the Problem and gaps in the response. . ONAP, CIA
- II. Budget WHLA (or NSC)

Where we stand with the President's initiatives and other legislation
- III. Leadership State, ONAP

Discussion of the proposed appointment of a Presidential Envoy for AIDS Cooperation
- IV. A Strategic Plan OVP

Components of a strategic plan and timetable to focus U.S. efforts to deal with the broad scope of AIDS issues.
- V. Economic and Humanitarian Issues
 - A. Debt relief and AIDS. State, Treasury
 - B. Enhancing access to medications in Africa. . USTR, HHS
- VI. Security Issues
 - A. Department of Defense. DOD
FY 2000 activities and FY 2001 plans
 - B. AIDS prevention in UN Peacekeepers USUN
 - C. Intelligence CIA
FY 2000 activities and FY 2001 plans

DECLASSIFIED
PER E.O. 13526
2017-0739-M (1.28)
KBH 8/19/2022

Smith, Gayle E. (AF)

From: Siberell, Justin H. (NSA)
Sent: Monday, May 01, 2000 11:50 AM
To: Smith, Gayle E. (AF); @AFRICA - African Affairs
Cc: @MULTILAT - Multilateral and Humanitarian Affairs; @HEALTH - International Health Affairs; @NSA - Natl Security Advisor; @EXECSEC - Executive Secretary
Subject: Fact Sheet on AIDS [UNCLASSIFIED]

Gayle: This a.m., SRB asked for a one-page "fact sheet" on why the global AIDS crisis is a national security issue. Paper should include stats that explain the magnitude of the problem and the possible consequences. It should establish the factual basis for why this is a nat'l security question. (he commented that much of this was in the WPost article, but he wants it condensed into a single page.) please provide by COB today.

thanks, justin

CHARLIE ROSE



File: AIDS

**IVA ZORIC PRODUCER
FROM FAX (917) 369-3674
499 PARK AVENUE
NEW YORK, NY 10022
PHONE (917) 369-3674**

TO FAX #

202-456-9370

ATTENTION:

**BROOKE ANDERSON
National Security Council**

FROM:

IVA ZORIC

COMMENT:

**PLEASE DELIVER IMMEDIATELY. ANY PROBLEMS WITH THE TRANSMISSION
SHOULD BE REPORTED TO 212-940-1659. THANK YOU.**

CHARLIE ROSE Transcript #2673

May 2, 2000

CHARLIE ROSE, Host: Welcome to the broadcast.

For the outgoing American president, the twin towers of U.S. foreign policy -- Russia and China - - loom as large as ever. Should America lobby for China's entry into the World Trade Organization or hold out for concessions on human rights and more protection for American workers? Should nuclear disarmament treaties with the Russians be renewed or amended to allow for expanded missile defenses?

Tonight we discuss those issues and more with the president's national security adviser, Sandy Berger.

SAMUEL BERGER, National Security Adviser: China will get into the WTO. The question is, having opened the door to China, are we going to stand there, hold the door, let the Europeans and Japanese walk in, or are we going to walk in ourselves?

CHARLIE ROSE: Also tonight, actress NATALIE PORTMAN on her new film, *Where the Heart Is*.

NATALIE PORTMAN, Actor: It was just so different from everything else I had seen. It's kind of just this real mix between fantasy, this kind of fantastical fable kind of story where all these things happen with, you know, this prevailing moral in the end. And it was-- but also a lot of realism, too. And she meets all these crazy characters along the way, has all these wild experiences. And you know, she ends up understanding who her family is and why home is important.

CHARLIE ROSE: National security chief Sandy Berger and actress NATALIE PORTMAN -- next.

Sandy Berger Doubts U.S. Will 'Decouple' with Europe

CHARLIE ROSE: Samuel "Sandy" Berger is the national security adviser to President Clinton. For the past seven years, he's been one of the major figures defining America's role in the post-cold war era and shaping United States relations overseas. As the administration enters its final eight months, it is said to have stepped up its efforts to build a lasting legacy abroad for the Clinton administration.

Mr. Berger is in New York for a speech on China urging support for its entry into the WTO and permanent normal trade relations status with the United States. He joins me now to talk about that, as well as this administration's U.S. foreign policy and some other issues around the world. And I am pleased to have him back on this program.

Welcome back.

SAMUEL BERGER, National Security Adviser: Good to be here, Charlie.

CHARLIE ROSE: First, before we talk about the nuances of this, how significant and why is this permanent trade status?

SAMUEL BERGER: We've negotiated a deal with China to substantially open its market in order for it to become a member of the WTO. Now, the only thing we have to do is treat China the same way we treat all 132 other members of the WTO, and that is not review its trade status every year, the way we do China. That's the only thing we have to do in exchange for a 50 percent reduction in its tariffs, significant opening of its market from technology-- information technology to agriculture. The one thing we have to do is we have to treat it on a non-discriminatory basis. That's what's before Congress.

China will get into the WTO. The question is, having opened the door to China, are we going to stand there, hold the door, let the Europeans and Japanese walk in, or are we going to walk in ourselves?

CHARLIE ROSE: So you're saying they're coming in anyway, so the United States better get something out of this while it can.

SAMUEL BERGER: Economically, we have a lot to gain by engaging in the Chinese market. This is a quarter of the world's population. It's a very rapidly growing country. In order-- in this global economy, in order for companies to be competitive, they have to produce for global markets. We can't say to our companies, "We're excluding you from 20, 25 percent of the world." So in economic terms, Charlie, this is, I believe, really almost a one-way deal.

What I was talking about today here in New York is why I think this is so important in terms of our national security, as well as our economics.

CHARLIE ROSE: Why is it important in terms of the national security?

SAMUEL BERGER: Because I believe this will, if we-- if we give China PNTR, it will reinforce the forces of change in China and the way China deals with the rest of the world. If we reject it, I believe it'll have just the opposite effect. I believe, first of all, it will enmesh China in the international global economy and therefore increase the cost to it of not acting constructively. Number two, I think it will increase the conditions that make cooperation between us and the Chinese possible on everything from U.S.-Taiwan relations to non-proliferation.

I also believe that this will accelerate the forces of change inside China. China this year has two million people on the Internet. By the end of the year, they'll have nine million. Next year, they'll have twenty million.

This agreement opens up the information economy of China. When China has 50 million, 100 million Internet users, when it has 100 million cell phone users, when it has access to knowledge, I believe that it unleashes the potential of its people, the aspirations of its people. And I believe that this will be a very positive force for change in China.

CHARLIE ROSE: If it doesn't happen, if the Congress doesn't vote-- and The Washington Post today had a story that said it looks like the vote is going your way. You know, the principal people opposed to it are liberal Democrats because the people who are opposed to it are trade unions. Dick Gephardt's opposed to it. David Bonior's opposed to it. Right?

SAMUEL BERGER: Correct.

CHARLIE ROSE: You got some liberal Democrats, and you've got some conservatives-- I hear the Republican Party primarily is in line to support you on this?

SAMUEL BERGER: I think--

CHARLIE ROSE: Who's opposed to it?

SAMUEL BERGER: I think there are both Republicans and Democrats who are for it, and both Republicans and Democrats who are against it.

CHARLIE ROSE: Steny Hoyer came out for it.

SAMUEL BERGER: Right.

CHARLIE ROSE: He's always voted on behalf of human rights and--

SAMUEL BERGER: Right. Steny Hoyer's a good example. He's voted every year against the annual review.

CHARLIE ROSE: Right.

SAMUEL BERGER: But he said the reason he did that is because he didn't think we got anything for it. He now believes we should vote for PNTR because we now have opened the Chinese market. And once-- once having opened China to global competition, the state sector will shrink and the private sector will grow. And as that happens, the capacity of the government to control people's lives will diminish.

So I think in terms of the forces of human rights and the forces of freedom that we want to encourage, I believe this is a progressive step. I don't believe it's a sufficient step. I think we still have to speak out--

CHARLIE ROSE: Do we have--

SAMUEL BERGER: --on matters--

CHARLIE ROSE: --leverage, though? I mean, how do you exercise some leverage to say to the Chinese, "You're not honoring your agreements. You're not doing this. You're not doing that"?

SAMUEL BERGER: Well, first of all--

CHARLIE ROSE: If you don't have an annual review.

SAMUEL BERGER: But the annual review for 20 years in a row has upheld China's trading status, so there's no leverage left in that. It's a contentious annual ritual. It is not an instrument or vehicle for change.

If we are accelerating the forces of modernization and change within China, it will create its own dynamic within China which I believe will be positive. Conversely, I believe that if we reject this-- if China, having now undertaken the economic reforms that we have been encouraging for 30 years, we now say, "I'm sorry. We really don't want that"-- this will be--

CHARLIE ROSE: I mean--

SAMUEL BERGER: This will be-- this will reinforce the hardliners in China who want to pursue a more contentious course with the United States and a more hard-line course in Asia.

CHARLIE ROSE: Does that include-- I mean-- but on the one hand, you got the president and the prime minister both-- are you characterizing either of them as hardliners? I assume you're characterizing them as forces for change and-- and--

SAMUEL BERGER: They are forces for economic change. They've not been particularly forces for political change. But I think that over time, again, with economic change, with competition, with the growth of a private sector, with state enterprises shrinking, the forces of competition will stimulate the forces of creativity.

CHARLIE ROSE: Does this kind of conversation ever take place between the national security adviser or the president and high-level Chinese officials? "We want to do this because we think it's the right thing"--

SAMUEL BERGER: Absolutely.

CHARLIE ROSE: --"A, but B, we wish you would quit threatening Taiwan."

SAMUEL BERGER: Well, you may recall, Charlie, that when Jiang Zemin was here in Washington three years ago, the president at the news conference said, "Mr. President, you're on the wrong side of history when it comes to human rights and freedom. You're on the wrong side of history."

And when we went to China and we had a press conference, which the Chinese televised, the president spoke at great length about how stability can only come, in the long term, through people having some say and control over their lives.

You know, there has been change in China. Two hundred million people have been lifted from abject poverty. The people have more freedom in the way they live and where they work and where they go. I believe, as that economy is opened up, those-- those forces will intensify.

CHARLIE ROSE: Why doesn't the same argument apply to Cuba?

SAMUEL BERGER: Well, in 1992, Charlie--

CHARLIE ROSE: Everything you just said should apply to Cuba.

SAMUEL BERGER: In 1992, Congress passed what I think was quite a good law, called the Cuban Democracy Act. It was passed by Democrats and Republicans, signed by President Bush. And it said, basically, we need to proceed in a reciprocal way with Cuba. If Cuba moves towards reform, democratic, political or economic, we should move. If we-- as we move, they should move.

And we were embarked on that course until 1996, when the Cuban government shot down two American planes in international air space. Congress reacted very sharply, passed--

CHARLIE ROSE: Helms-Burton.

SAMUEL BERGER: --Helms-Burton. That put the embargo for the first time in all of these years into U.S. law. And so now, to change the embargo requires a change in U.S. law. I don't believe we'll have a consensus for that in this country until and unless we see some movement from Castro either in the direction of economic reform or political reform, as a practical matter.

CHARLIE ROSE: In other words, the Congress will never accept it unless there's some change by Castro.

SAMUEL BERGER: I believe--

CHARLIE ROSE: And Castro's relationship-- the way he's responded to Elian Gonzalez is not helpful.

SAMUEL BERGER: Well, in the last actually six or eight months, we've seen a crackdown in Cuba, not an opening in Cuba. But I think that given the fact that we now-- this is now the law of the land, the embargo, to change that will require some manifestation of change from Castro, something we haven't seen in the last year, the last eight years, over the last twenty years.

CHARLIE ROSE: Do you-- if you did not have Helms-Burton, if you did not have that-- what some would say conservative, right-wing opposition and in favor of the embargo, would this administration want to change and ameliorate the relationship with Cuba, in the interest of opening a place up, for the same reason you want to open up China?

SAMUEL BERGER: Well, we have taken steps, to the extent that we can under the law, to create people-to-people relations between the Cuban people and the American people. We've restored air traffic. People can now visit and travel to Cuba. We've allowed-- we've restored remittances. People can send money back. We've restored phone service and telegraph service, and CNN now has a bureau in Havana.

So we have tried to move in the direction of strengthening the relationship between the American people and the Cuban people. I think strengthening the relationship between the American government and the Cuban government is going to take some movement from Castro.

CHARLIE ROSE: Be a nice legacy, though, wouldn't it.

SAMUEL BERGER: Well--

CHARLIE ROSE: Even though that's not a word you guys bandy around much.

SAMUEL BERGER: I'm-- I'm more interested in accomplishments than legacies.

CHARLIE ROSE: All right, let me-- let me just stay with that idea. Has the American people, in the way they've responded to Elian Gonzalez, in a sense, seen in action the effort by the Miami Cuban exile community to influence American policy and therefore put Cuba much more in the spotlight than it had been and therefore perhaps will put this issue more in play?

SAMUEL BERGER: You know, we tried very hard-- the president's tried very hard through this painful ordeal to keep politics and-- out of this and to focus on this in terms of this young boy, his father, and not to let this be politicized either by some in this country or by Castro.

CHARLIE ROSE: That's a hard effort.

SAMUEL BERGER: It's very difficult, but I think it's appropriate. I don't think that-- this has been a painful issue for people. It's a hard issue, I think, for most people. I think most people have reached their judgment on it, but I don't think that we can be overly dismissive of people who disagree with us on this.

CHARLIE ROSE: And the administration stands strongly behind what Janet Reno did--

SAMUEL BERGER: Absolutely.

CHARLIE ROSE: --in that particular morning.

SAMUEL BERGER: Absolutely. I believe she-- she acted with great patience to try to negotiate this. I know myself, although she and-- the attorney general and-- was principally responsible, I know enough about some of the negotiating history here to know that for weeks, for months, there had been discussions to try to effectuate a peaceful transfer that just went nowhere.

CHARLIE ROSE: Where does it stand now?

SAMUEL BERGER: It's now with the court of appeals, which has to rule on the appeal. Meantime, Elian is here with his father.

CHARLIE ROSE: He stays at Wye Plantation?

SAMUEL BERGER: He stays at Wye Plantation, has some visitors, and the father has made clear that he will stay here until this matter is resolved in the courts. And I hope that's--

CHARLIE ROSE: So you-- it's up to the courts now.

SAMUEL BERGER: It's up to the courts now to hear the appeal over [unintelligible]

CHARLIE ROSE: And we don't really know whether-- the issue at the court was whether the kid had a chance to say something about-- about being--

SAMUEL BERGER: Correct. The issue was essentially who-- who speaks for a 6-year-old or a 7-year-old.

CHARLIE ROSE: About political asylum.

SAMUEL BERGER: Yeah.

CHARLIE ROSE: And the lower court said that he could have a voice in this. Now we don't know what he wants anyway, do we?

SAMUEL BERGER: Well, the-- I think the question, really, though-- I don't know-- that goes to the essence of who speaks for--

CHARLIE ROSE: Right.

SAMUEL BERGER: --a 6-year-old. I think that, except under the most extraordinary conditions, where you have a parent who is a caring parent-- and there's no doubt in my mind, having seen the transcripts of the interviews with the father out of the presence of any Cuban government officials, that he's a caring parent-- that he-- that he should decide, or a mother in that situation.

CHARLIE ROSE: The father should decide.

SAMUEL BERGER: Right.

CHARLIE ROSE: Right. And the stepmother, perhaps.

SAMUEL BERGER: Well, I think the parent--

CHARLIE ROSE: Yeah.

SAMUEL BERGER: --is particularly--

CHARLIE ROSE: Anti-ballistic missile treaty-- the administration has made a decision that it wants to amend the 1972 treaty in order to build or have the possibility of building some kind of limited missile defense against some rogue nation like North Korea. Is that a fair statement?

SAMUEL BERGER: Well, let me put it a little bit differently. Let me put it in slightly different terms. One of our responsibilities as a government is to think about what the new threats are, new threats of terrorism, new threats of weapons of mass destruction that might be miniaturized, that might be able to move from country to country, new threats of drugs.

One of the new threats that we face is that nations such as North Korea, such as Iran or Iraq, less susceptible of conventional deterrence than the Soviet Union was during the cold war, are gaining the capacity to build long-range missiles that can reach the United States with a nuclear weapon. Sometime later in this decade or early in the next--

CHARLIE ROSE: It is said for North Korea perhaps within five years.

SAMUEL BERGER: Perhaps. Now, we have a responsibility to deal with that, to come to grips with it, to decide what the best course is for America. What the president has said is he will decide later this year whether, in fact, to deploy a limited national missile system, event system that can deal with those threats based on four criteria.

One, what is the threat? How serious is it? How real is it? Number two, what's this going to cost? Number three, is it technologically feasible? General Shelton has called this "shooting a bullet with a bullet." This is not an easy proposition. Number four, what's the overall national security implications of doing this?

CHARLIE ROSE: Does it decouple Europe or that kind of thing.

SAMUEL BERGER: Well, first of all, on arms control--

CHARLIE ROSE: Right.

SAMUEL BERGER: --on the ABM treaty, on Europe, on Asia. Now, we would like, if the-- in order to give the president the greatest range of options, to reach an agreement with the Russians which would enable us to amend the anti-ballistic missile treaty for-- to allow this kind of limited national missile defense.

The ABM treaty calls for amendments. It has been amended before. It is not sacrosanct in its original terms. I think it is in Russia's interest to do that with this administration, rather than risk the possibility that this or a future administration would build a system outside of the arms control context.

So the president's not made a decision, but we also can't push this issue under the carpet and say, "We're not going to deal with it." We have to come to grips with the challenge this faces and reach an overall judgment of what's in the national security--

CHARLIE ROSE: I hear you saying -- tell me if I'm wrong -- "We don't know yet what we're going to do."

SAMUEL BERGER: The president's not made a decision.

CHARLIE ROSE: "Because we don't know whether it'll work, we don't know what the implications are with Russia and with our European nations and other arms control agreements, and-- and therefore we're not deciding yet."

SAMUEL BERGER: What the president's said is that he will make a decision about this during-- later this year, presumably late this summer or early in the fall, based on the criteria that I've talked to, a decision on whether to go forward next spring, which is when you'd need to begin in order to have a system in place by 2005, when the North Korean threat may be more real.

CHARLIE ROSE: Let me stop you there just one--

SAMUEL BERGER: But-- but--

CHARLIE ROSE: Go ahead.

SAMUEL BERGER: But he's not made a decision. We are actively discussing this with the Russians. We've had serious discussions with them. They're not in favor of this system at this time, but the discussions continue.

CHARLIE ROSE: And in today's paper there were reports that other European leaders were opposed to it because they feared it would be decoupling Europe. And they were saying, look, this system that you're talking about building only protects the United States. It doesn't do anything for us. And by the way, we're much closer to Iran and Iraq than you are.

SAMUEL BERGER: I'm not sure-- I've never quite understood the decoupling argument. The decoupling argument says somehow that it would make them more vulnerable. I'm not quite sure how us being more secure, therefore more willing to come to Europe's defense, makes them less secure.

So I think there's a little bit of fuzziness in some of that.

CHARLIE ROSE: You've heard the argument before?

SAMUEL BERGER: I've heard the argument before. I don't necessarily buy the argument. We are committed to the defense of our NATO treaty allies. Nothing we do here is going to change that.

That derives from the importance to us of the NATO alliance. We saw that again in Kosovo. It's our core alliance. And an attack on Europe would be considered an attack on the United States and has been for-- since 1947.

CHARLIE ROSE: You're going to meet with the president of Russia and the president of the United States in June. What's the agenda for the United States? And what is the priority for the United States?

SAMUEL BERGER: Well, first of all, I think it's important to put this in perspective. The president of the United States is meeting with the new president of Russia; a man who will be president of Russia for the next five years. A new generation of Russian leader, for better or for worse. It's important that that dialogue begin.

So number one, I think it's important for its own sake. Number two, we want to see a comprehensive agenda -- as, I think, President Putin does -- which includes the economic recovery of Russia, the things that we believe Russia needs to do. And I think that President Putin has indicated he believes Russia needs to do to restore its economic vitality, and are there ways that we can be helpful in a way that is not profligate or throwing money at a problem.

CHARLIE ROSE: Some kind of accountability for funds received?

SAMUEL BERGER: Or other kinds of things that we can do that really we have some assurance will, in fact, improve the economy.

Number two, there are a series of global issues where we have common interests. I think whether it's drugs, in some respects terrorism, there are a number of these issues where, I think, we and Russia can work together.

Number three, there are regional strategic issues we need to talk about -- south Asia, for example, being very important. There's a situation in Afghanistan. Norgorno-Karabakh -- the dispute between Azerbaijan and Armenia.

And then finally, we have an arms control agenda. And that agenda really has three parts -- ABN, which is connected to NMD, and START III. The Russian Duma has just under Putin's leader, first real step, ratified START II. I think that's a good sign. We've always said that once START II is ratified we'd like to move on to START III and keep moving down, to move down the levels of offensive weapons.

In Helsinki, the President and President Yeltsin agreed to bring them down to 2,000 and 2,500.

CHARLIE ROSE: That's a huge benefit to us because of the amount of reduction on their part.

SAMUEL BERGER: Yeah. And, of course, in some respects their arsenal is coming down, not only for arms control reasons, but for economic reasons as well.

CHARLIE ROSE: What's your assessment of him so far?

SAMUEL BERGER: I've known him for two or three years. I've worked with him. He had essentially my equivalent job for previous-- for several of the rapid-fire Russian prime ministers that came before. I think he's smart. I think that he's pragmatic. I think he's a work in progress. I think there are two strands here and we don't really know where the center of gravity is.

On the one hand this is a man who spent 12 years in the security services of the Soviet Union, the most insular, nationalistic part of the Russian bureaucracy. On the other hand, nine years as the deputy mayor of St. Petersburg when that city was at the cutting edge of economic reform in Russia. And I think that I really would call him a work in progress.

I think he has shown a steely brutality in Chechnya, which I find rather chilling. On the other hand, I think that he understands that Russia has to get its own house in order to be able to survive.

CHARLIE ROSE: When you talk to him about Chechnya, does he say to you or does he say that the president, or did he say before he became president or acting president, does he say to you, "Listen, we didn't like what you did in Kosovo, so don't talk to us about Chechnya?"

SAMUEL BERGER: Oh, that's one of his talking points. But I think more generally he sees Chechnya as a region in the country-- separatist region in the country beset by terrorists, who invaded Dagestan, the neighboring province, who are aided by the Islamic extremists from Afghanistan. And this is for him in his, at least, rhetoric, a nationalistic effort to maintain the integrity of Russia.

I think, unfortunately, and we've said this to him from the very beginning, the means that he has employed here are counterproductive, are brutal and are not likely to result in a lasting solution to Chechnya.

I think that he's finding, even though in a fact he's not in control of Grozny and in control of Chechnya--

CHARLIE ROSE: Whatever's left of Grozny.

SAMUEL BERGER: --whatever's left of it. It's not the last word. Yesterday or the day before, large numbers of casualties of Russian soldiers.

We have been urging him from the very beginning to engage in a political solution, not a military solution. And when the President was in Istanbul at the overcas summit, President Yeltsin across the table -- a very dramatic moment -- and President Yeltsin said, "It's none of your business, world, what we are doing in Chechnya." And the President looked at him and said, "Mr. President, when you stood on that tank in front of-- in Moscow, and you stood up for democracy and you stood against communism, had they arrested you and thrown you in jail you would not have thought that that was only a matter for Russia. That would have been a matter for the world. And so is Chechnya."

We've been quite clear with them. I wish we had been more successful with them.

CHARLIE ROSE: It is a big question in foreign policy today what is a matter for the world and when do you violate what are traditional notions of sovereignty?

SAMUEL BERGER: Well, I think those are two distinct questions. I think that there is a universal declaration of human rights that has been signed by most nations. I think it is of interest to the world when those are violated. That doesn't necessarily mean the world runs off and uses military force. But it certainly means the world has a right to stand up in the case of China, in the case of Russia and Chechnya, and say you are in violation of the basic standards of human rights.

Now my own belief is use of military force is a different matter. And we have never, in this administration, committed military force where there has not been, in my judgment, a national interest as well as a humanitarian interest. I think the only place, ironically, where America ever really committed force for purely humanitarian reasons was when President Bush did so in Somalia.

But whether it has been in Haiti, where we had a boat exodus coming out in tens of thousands; whether it was to stop a war that was spreading in Bosnia or to stand up to ethnic cleansing or stop a war in Kosovo, or to stand up to Iraq and Saddam Hussein, in each of those cases there may have been values at stake, but there were also interests at stake.

CHARLIE ROSE: You could make the case for national interest in all of the, but there's a real debate about that too in terms of how you define national interest. You can make the case in all those instances that America's national interest was at stake.

In Kosovo, what was America's national interest? National interest?

SAMUEL BERGER: I think that if Milosevic had been able to expel a million people from Kosovo with impunity, it would have-- you would have had a million refugees now, Charlie, in Macedonia, in Albania, in Romania. Those countries would have been destabilized.

We would be-- in my judgment, we would have been drawn in to a bigger conflict later when all of the Balkans was in turmoil. So, yes, we were standing up in the last year of the 20th century to ethnic cleansing -- and I'm glad we did -- but we were also saying that we had an important American national interest in avoiding that from becoming a regional conflict with far greater consequences for the United States.

CHARLIE ROSE: OK, this is a hard question then. It was in Europe and if it wasn't that sort of instability as a factor, would you have still done it just because ethnic cleansing was taking place?

SAMUEL BERGER: My own view is that when you commit American forces in a hostile situation -- I'm not talking now about a famine or where we've gone and sent forces into Mozambique or sent forces to try to deal with a difficult situation in what is not a hostile situation -- but my own personal view is that where you commit American forces into hostilities there needs to be a national interest at stake. And in many cases, there also will be an important national value--

CHARLIE ROSE: So would there be a national interest at stake-- So you're saying -- I hear you based on what you just said -- that if, in fact, you hadn't had the destabilizing impact because of Macedonia and possibly creeping into Greece, that if you didn't have that, then for ethnic cleansing reasons alone -- moral imperatives, the judgment of history -- you would not have gone in?

SAMUEL BERGER: Well, you know, one doesn't have to look back at that choice. I think the two converged. I think that clearly to have ended the 20th century with the vindication of massive ethnic expulsion would have been a sad note on which to end a bloody century.

But I also think that one commits American forces cautiously and as a last resort. There are American lives at stake when you do that. And I think in that situation, as I said before, I think that there was -- and I think most often in the kind of gross moral abuse situation that you're talking about, there is a convergence of national interests and national values.

CHARLIE ROSE: People in Africa are not sure if Rwanda was repeated that you would have--

SAMUEL BERGER: Well, I think peacekeeping is a different matter. I think that where you have a situation in which the parties have entered into a peace agreement, let's say in Congo now, perhaps, and you can do this on a multi-national basis and you're enforcing an agreement that has been entered into by the parties, I think that's a different matter. We have peacekeepers in various places in the world.

CHARLIE ROSE: Senator Jones already said they made a mistake in Rwanda, looking back.

SAMUEL BERGER: I think that there is more that we could have done in Rwanda, although I'm not sure we could have prevented what happened.

CHARLIE ROSE: Or you're not sure American troops should have been--

SAMUEL BERGER: This happened very quickly. It happened over a couple of weeks. I think, perhaps, looking back on it, reevaluating it, you could have perhaps created some safe havens where some people could have gone. But to have gone into this vast country where you had a totally chaotic situation, under those circumstances it would have been very difficult to do. I think there was more that we could have done and I wish we had.

CHARLIE ROSE: Is it fair to say with this president, who you've stood by his side for eight years -- deputy national security advisor and national security advisor -- that he's more -- and I don't want to use -- comfortable may not be the right word -- he understands better the application of force and is more willing to use it than he was in the first term?

SAMUEL BERGER: Well, I haven't done a statistical analysis.

CHARLIE ROSE: But you know his mind. Come on, you know his mind. You know his--

SAMUEL BERGER: I don't mean to be cute. The first term, we went into Haiti. We used force against Saddam Hussein twice. So there was not an unwillingness in appropriate circumstances to do that.

I think that as a country-- Let's put it this way, we've come out of the cold war in the late '80s. We had the Desert Storm kind of classic aggression. But really beginning, I would say with Bush's introduction of force into Somalia, we've had to come to grips and redefine what are appropriate circumstances for use of force.

And I think each circumstance has taught us something. We've learned some painful lessons in Somalia. I think in each of these circumstances you've learned better what the importance of a clear mission, the importance of an exit strategy, the importance of defining roles properly and the importance of command and control. And so I think-- it's only natural, I think, that any administration as it progresses down the track, gains experience.

CHARLIE ROSE: The experience ought to teach you something. Sanctions and then I'll go to a last issue. Sanctions with respect to Iran, with respect to Iraq. We mentioned the embargo on Cuba. Can you make an argument that those are serving America's national interests; that an engagement might not be better? I talked to the Iranian foreign minister and he basically will make the argument that, you know, yeah, we'd like to have a better relationship. Yes, we've got competing factions going on. But until sanctions is off the table, that's not something you negotiate. That shouldn't be there.

I'm asking do sanctions work?

SAMUEL BERGER: I think sometimes they do and sometimes they don't. Let's take Iraq and Iran.

Saddam Hussein is as much a threat to the region today as he was 10 years ago or the year before he moved across the border and into Kuwait. The sanctions regime we have in place in Iraq actually results in enabling him to sell his oil, take the money, put it in a U.N. account and use the money for food and medicine for his people.

CHARLIE ROSE: But he doesn't?

SAMUEL BERGER: In the absence-- he doesn't do it as much as we wish he did. He has more money there than he uses. In the absence of oil for food, we'd have oil for tanks. I don't believe the Iraqi people

would be better off. I don't believe his neighbors would be better off. I don't believe the region would be better off.

So in that situation, I believe sanctions are important. We need to try to maintain it.

Now in Iran is a different situation. Iran is in a period of very interesting and uncertain tension. On the one hand, it is still a country that engages in terrorism and it is still a country that has weapons of mass destruction program. It is still a country that tries to subvert the Middle East peace process.

On the other hand, clearly the Iranian people are trying to assert control over their lives. We've made it very clear that we support the forces of moderation and change and that we would be happy to have a dialogue with Iran. The pace of that really has-- and we've eased the sanctions to some degree. The pace of that really has to be set by Iran though. We don't want to be manipulated by the hardliners in Iran who accuse the moderates of being a tool of the great Satan.

CHARLIE ROSE: And the moderates are very aware of that too. I mean they understand how they vote along that issue.

OK. Finally, two quick issues -- terrorism. Didn't I see a report this week that said terrorism is now-- the most severe examples of terrorist headquarters are now in south Asia, in Afghanistan -- where we know Osama bin Laden is -- and in Pakistan, which used to be an ally of ours?

SAMUEL BERGER: In many ways Afghanistan is the law of unintended consequences. When the Russians-- the Soviet Union invaded Afghanistan in the '80s, we spent lots of money--

CHARLIE ROSE: Lots of CIA time.

SAMUEL BERGER: And succeeded in defeating the Soviet Union but we, in a sense, have reaped the whirlwind because what's left is a country that is in the hands now of extremists and is a center and a hotbed of sort of terrorist planning and organization. And these terrorist networks are increasingly now interconnected and a problem that is a serious one we've got.

CHARLIE ROSE: But they're not so much state sponsored.

SAMUEL BERGER: Not so much -- no.

CHARLIE ROSE: They're much more a loose confederation of people--

SAMUEL BERGER: That's right.

CHARLIE ROSE: --that are fueled by drug money and have other--

SAMUEL BERGER: That's right.

CHARLIE ROSE: --ideological objectives.

SAMUEL BERGER: Pakistan, I think, is a slightly different, in that we have had a long relationship with Pakistan. I think it's very important that we maintain that relationship. When the president recently went to South Asia, he had an extraordinary trip to India. We ended 50 years of estrangement with -- between the United States and India, the world's largest democracy and the world's oldest democracy. They're desperate for a good relationship with the United States.

But we also stopped in Pakistan, because -- and the president delivered a pretty strong message. He said, basically, I want to speak to you as a friend. You're heading in the wrong direction, you need to restore democracy, you need to deal with your economic problems. You need to stop trying to win a military victory in Kashmir, and you're spending all this money on nuclear weapons when--

CHARLIE ROSE: We -- yes.

SAMUEL BERGER: --when your people need economic reform.

I -- I -- I -- you know, we'll see how that -- whether that has an impact. But I think had we not stopped in Pakistan, we would not have maintained our contact with Pakistan, which I think is important for the United States.

CHARLIE ROSE: Have we enlarged the threat of Osama bin Laden, or has he ever been as dangerous as the perception is?

SAMUEL BERGER: Oh, I don't think -- I wish -- I wish it were true that we'd enlarged the threat of Osama bin Laden. The fact of the matter is that he was responsible for bombing of two embassies in Africa in which many Americans were killed. The fact is that the episode in Seattle around New Year's can be traced back to bin Laden's organization. The fact is that he is the sponsor of a good deal of terrorism and terrorist groups around the world.

I think that he's a dangerous character.

CHARLIE ROSE: So what do we do?

SAMUEL BERGER: Well, we try to pressure the Taliban, which controls Afghanistan, to expel him. We put sanctions on Afghanistan to try to put the pressure up on Taliban to get rid of him. We've tried to enlist the support of other countries.

CHARLIE ROSE: You have said, and the United States said, that AIDS is so destabilizing because of its impact, especially in African -- the continent, that it's in our national interest -- and it threatens our national security.

SAMUEL BERGER: I think that's true, Charlie. Couple of quick statistics. There are 50 million people now in the world infected with HIV/AIDS, 95 percent of them in the developing world. In 1998, 200,000 people in Africa were killed by wars, 2.2 million people died of AIDS. Some countries in Africa, more than 20 percent of the population is infected. Thirty percent of teachers, 40 percent of soldiers.

What you're beginning to see here is an epidemic that threatens not only the economic vitality of these countries, but their capacity to govern, their stability. And as they become increasingly gripped by this, I believe you will see countries that will unravel, you will see a greater degree of instability, more conflict.

And so we have a responsibility here to lead. What does that mean? It means we have responsibility to try to get other countries to see this as a problem, to deal with it collectively. The president will raise this with the EU in Portugal when he's there with Xavier Solana in a few weeks. We'll raise it at the G-7 summit in Okinawa.

We have a responsibility to try to work with national leaders like President Museveni in Uganda, who really has been a leader, gone out front in terms of education, and the rates have gone down, commit some of our own resources. We put \$255 million into this last year. And we then can leverage that by trying to get others, and particularly the international financial institutions such as the World Bank, to deal with both prevention, education, and dealing with the consequences of it.

And finally, the president's proposed a tax credit for our pharmaceutical companies who have no incentive now to develop vaccines for developing country diseases like certain AIDS--

CHARLIE ROSE: Because they're making no money.

SAMUEL BERGER: Because no one's going to -- has the money to buy them. So we're saying to them, OK, we'll help you develop these, essentially, if you will develop them, malaria, tuberculosis, and the strands of HIV which are unique to the developing world.

CHARLIE ROSE: How much money did we spend on the Kosovo engagement?

SAMUEL BERGER: Oh, you know, several billion dollars.

CHARLIE ROSE: Several billion dollars. I mean, is -- this is every bit as serious a threat as Kosovo.

SAMUEL BERGER: Well, I--

CHARLIE ROSE: I mean, look at the numbers.

SAMUEL BERGER: Yes, I think that--

CHARLIE ROSE: The risk to people is a--

SAMUEL BERGER: Part of the reason -- I know some people have been critical of our describing this as a national security issue.

CHARLIE ROSE: Well, I can tell you who it was, it was Trent Lott who said that the administration was pandering to gay voters by saying that AIDS is so widespread in some countries that U.S. officials worry it could undermine economic -- threaten foreign militaries and cause regional problems.

SAMUEL BERGER: But I think when Senator Lott looks at the facts here, I think he may reevaluate that. Because to say that this is a national security issue simply means that it's not going to be left over here on the sidebar for health ministers when they get together, but it is going to be something that leaders need to deal with together [unintelligible]--

CHARLIE ROSE: Who have power and resources.

SAMUEL BERGER: Right.

CHARLIE ROSE: Thank you for coming. I didn't mean to cut you off, it's just that I'm way over in terms of your own schedule, so I thank you for coming.

We'll be right back. Sandy Berger, national security adviser to President Clinton.

Back in a moment, stay with us.

Battenfield, Pat A. (AF)

From: Battenfield, Pat A. (AF)
Sent: Friday, May 05, 2000 8:31 AM
To: @EXECSEC - Executive Secretary; @RUDMAN
Cc: @AFRICA - African Affairs; @HEALTH - International Health Affairs
Subject: Thurman memo to POTUS on AIDS in South Africa [UNCLASSIFIED]

Importance: High

To: Execsec
CC: Mara Rudman

From: Gayle Smith and Ken Bernard

We were asked for our recommendation on SRB's response to Sandy Thurman's memo to POTUS on South Africa and AIDS (Log 3012). We are prepared to recommend that SRB concur, and do not have a problem with the substance. We would have preferred the third bullet on the last page to read, "encouraging participation by noted American scientists in President Mbeki's scientific review panel scheduled to meet next week in Johannesburg;" However, if it would delay things unnecessarily, we could live with the current wording.

However, we would like to recommend that such cross-cutting memos be jointly drafted or, if not possible, that SRB's formal concurrence be sought and appear on the memo. (We realize that some times this is difficult, because other WH offices appear not to be held to the 2-page limit, and in Sandy Thurman's case, for example, can move memos very quickly). A more formal clearance process could ensure that the President has the benefit of receiving memos from staff that reflect all views comprehensively, rather than separate memos that may or may not be consistent. Also, we believe this is important in order to clearly discern who has the action on any POTUS note sent back with the memo addressed to "Sandy", since we have two Sandys reporting to him on AIDS issues. Perhaps Execsec can address this.

THE WHITE HOUSE
WASHINGTON

3012

Date 5.2.00

To: BERGER/WW DESK

From: The Staff Secretary

ANY COMMENT ?

MAY 218:05


THE WHITE HOUSE

WASHINGTON

May 1, 2000

00 MAY 1 10:51:22

MEMORANDUM TO THE PRESIDENT

FROM:  Sandra Thurman, Director, Office of National AIDS Policy

SUBJECT: AIDS in South Africa

In response to your inquiry regarding the Washington Post story on President Thabo Mbeki and the controversy surrounding his comments about HIV and AIDS, I thought it would be helpful to provide you with an AIDS in South Africa background memo. This memo seeks to: address the relevant issues, analyze their impact on our global AIDS initiative, and provide a coordinated strategy for working with South Africa on their growing AIDS emergency.

South Africa currently has the fastest growing AIDS epidemic in the world. Since the fall of apartheid, South Africa has seen an explosion of HIV infection as a by-product of the increased flow of commerce, travel, and immigration. The number of people in South Africa infected with HIV is now estimated at more than 4 million, or 1 in 10 South Africans, with 1,700 new infections each day. Shockingly, more than 50% of these new infections are among young people under the age of 20, with a ratio of 6 teenage girls infected for every 1 teenage boy. Their 1999 national antenatal survey projects that nearly 1 in 4 pregnant women are already HIV+, and in the KwaZuluNatal Region, 1 in 3 pregnant women are HIV+. A recent report indicates that 60-70% of the South African National Defense Force may now be infected, up from estimates of less than 40% just two years ago. It is projected that in the next decade, more than 2 million South African children will be orphaned by AIDS, and the South African Security Institute has raised real concerns about the effect of this tragedy on crime and civil society. There is little debate that HIV and AIDS seriously threaten the future of South Africa.

Top level leadership is desperately needed in this fight. We know from our success here in the US, as well as the successes in Uganda, Senegal, and Thailand, that leadership is an essential ingredient in effective action against AIDS. When President Museveni came into power in Uganda, he made the battle against AIDS a top priority. Under his leadership, all government officials were directed to talk about HIV and AIDS in *every* public appearance and all government departments were required to engage in the fight. It was this multi-sectoral approach that created the "enabling environment" needed to ensure that the resources invested in AIDS achieved real results (a 50% reduction in infection rates). It was this bombardment with a *consistent* message about HIV and AIDS from the government and its partners that enabled Uganda to reduce stigma and to make serious progress. While President Mbeki has shown considerable leadership, his recent statements, and interpretations of his positions, have meant that the public message has grown inconsistent and confusing. Although the South African Government has developed a national AIDS plan, appointed a national AIDS council, and increased their AIDS budget, fear, denial, and stigma remain fierce and continue to plague efforts to slow the spread of HIV and to care for those with AIDS. As you may recall, on World AIDS Day, a South African woman disclosed her HIV status as part of a new education campaign, only to later that day be stoned to death by her neighbors. And she is not alone.

The domestic and international focus on President Mbeki's views unfolds in this context, but also in the context of major economic challenges facing South Africa. In post-apartheid South Africa, the needs and aspirations of the poor majority are paramount – but are as yet unmet. In a society where most cannot even afford aspirin, the costs of new AIDS drugs far exceed per capita health spending and per capita income. We believe that Mbeki is wrestling with the reality that an appropriate assault on AIDS may require not just increased health spending, but a reorientation of national economic priorities. He is also, we believe, posing an important challenge to all of those engaged in the fight against HIV/AIDS, and particularly those of us from wealthier nations: that the international community and Africa must simultaneously fight HIV/AIDS and poverty, or the two will combine to wipe out

Africa's future. This point has been obscured by other, more controversial statements, but does reflect one of the real challenges we face.

President Mbeki is to be commended for his desire to do all he can to respond to the "specific threat that faces [them] as Africans". But for those engaged in the battle against AIDS in South Africa, including the NGOs funded by the USG, the protracted debate about whether or not HIV causes AIDS seems to be feeding long-standing denial and stigma about AIDS. Ads have run in the South African newspapers distorting the President's comments and discouraging people from pursuing HIV counseling and testing – a primary goal of our LIFE initiative investment in South Africa. While we desperately need to use all media outlets to push a consistent HIV prevention message, the only message consistently getting to the South African public in the past month has been related to this controversy. This is clearly not the President's intent – but it is none the less where we are.

The reach of this debate extends far beyond the borders of South Africa. For the Congress and for our private sector, support for investing in the AIDS crisis in Africa is based not only on the magnitude of the crisis, but on the belief that there is a *real* opportunity to make a difference. The bipartisan Co-del that traveled to South Africa to look at AIDS, led by Reps. Gephardt and Houghton, was very disturbed by their conversations about HIV and AIDS with President Mbeki – but continue to be strong supporters of increased investment. For those who are more skeptical about our ability to slow the spread of HIV in Africa, this debate only heightens their anxiety. In addition, our colleagues in South Africa and across the continent have expressed concern that some African leaders, particularly those who have been more reluctant to acknowledge the full extent of their AIDS crisis, will wait to see how this debate plays out before taking much needed action. Unfortunately, the one luxury we do not have is time. Each day, 11,000 Africans become HIV+, and the rapid implementation of effective prevention efforts is essential. Nations with infection rates of less than 10% need to act now to keep their infection rates low. And the sixteen African nations with infection rates already above 10% (including South Africa where nearly 20% of adults are already infected) need to move aggressively to hold the line and reverse their growing tragedy. With your support and leadership, we have made great strides in the past year – and we need to do all we can to ensure that this effort continues to move forward.

In July, South Africa will host the International AIDS Conference. This is the first time that this conference will take place in the developing world and there is great interest. The organizers are expecting more than 10,000 participants and every major media outlet worldwide. While this recent controversy has led some activists to call for a boycott of the conference, it has only increased press interest. It is not clear if President Mbeki will address the gathering, and if so, what he would say. While protests are likely, we are all invested in helping to ensure that this conference is productive for both the battle against AIDS and for South Africa generally. But again, we are running out of time.

We have much in common with South Africa and together we can make a difference. In President Mbeki's letter to you, which you received from the NSC, he states that a "simple superimposition of Western experience on African reality would be absurd and illogical" and that, "contrary to the West, HIV/AIDS in Africa is heterosexually transmitted". While it is true that in the early 1980s in the US, AIDS was largely confined to gay white men, today HIV in the US is spreading most rapidly among women, young people, people of color, and the poor. In fact, the epidemic in the US increasingly parallels the epidemic in South Africa. A recent US study shows that of the 29 states that currently report HIV infections, girls account for 6 out of 10 new infections among teenagers. In addition, here as there, issues of race, gender, and poverty are inextricably linked to AIDS. Finally, while new treatments have brought health and hope to many here, less than 1/2 of people with HIV currently benefit from these promising drugs. Certainly, there is much more we all need to do – together.

One lesson that is now clear from nearly two decades of painful experience with this epidemic is that one-size-fits-all solutions do not work. We are constantly challenged to target our own HIV prevention and AIDS care programs to keep pace with the changing face of the epidemic here at home. We know that our success, both here and abroad, depends on our ability to support locally controlled and culturally appropriate interventions, designed to meet the particular needs and circumstances of those most at risk. What works in Des Moines, Iowa is no more

likely to work in the South Bronx or in South Central LA than it is to work in South Africa. And while the components of an effective HIV/AIDS strategy remain constant (ie. widespread education, voluntary counseling and testing, care and support), how these programs are implemented must be "home-grown" and uniquely tailored.

There is much that we can learn from each other and much progress that we can make together. We have all learned a great deal from the world's most effective HIV prevention program – which was not implemented in the West, but in Uganda. The US is justifiably proud to have been the major donor in the Ugandan success story and we continue to have great hopes for an enhanced AIDS partnership throughout sub-Saharan Africa. As a result of our LIFE initiative, we will be able to double our HIV prevention and AIDS care efforts in Africa, and to nearly triple our investment in the battle against AIDS in South Africa. In addition, the nearly \$2 billion per year we spend on HIV/AIDS research, including vaccine development, will continue to bear fruit not just for the US but for our global community.

USG should continue to work closely with the SAG toward our shared goals. I have talked extensively with both the NSC and the State Department and we are all in agreement that the active engagement of our friends in South Africa is the most productive strategy for moving forward. The upcoming State visit provides an ideal opportunity for further dialogue. In the interim, we are all working to keep the lines of communication open and to lay the foundation for future progress. While your Office of National AIDS Policy (ONAP) is coordinating the flow of information specifically related to HIV/AIDS, our colleagues at the NSC are ensuring that this interaction fits within the broader framework of our ongoing relationship with the SAG. ONAP activities include:

- meeting with the South African Health Minister and Ambassador to the US to discuss our *common* challenges and shared desire to work in partnership;
- participating in an upcoming meeting with South African Health Officials in Mozambique next week where I will co-facilitate a workshop on HIV/AIDS at the US-Southern African Development Council (SADC) Forum with the South Africans;
- ensuring participation by noted American scientists including those from the NIH and the CDC in President Mbeki's scientific review panel scheduled to meet next week in Johannesburg; and,
- discouraging a boycott of the International AIDS Conference among US AIDS organizations and AIDS experts.

It is our hope that this process will assist President Mbeki in his quest to leave no stone unturned in responding to this growing tragedy. While the HIV/AIDS pandemic will continue to raise new and serious questions, we should continue to seek ways to use the knowledge we have gathered and the lessons we have learned for the benefit of the millions whose lives are caught in the crossfire.

Thank you.

Battenfield, Pat A. (AF)

From: Battenfield, Pat A. (AF)
Sent: Thursday, January 27, 2000 2:56 PM
To: Bernard, Kenneth W. (HEALTH)
Cc: @HEALTH - International Health Affairs; @AFRICA - African Affairs
Subject: Draft Invite for AIDS IWG meeting [UNCLASSIFIED]



AIDSiwg.doc

I've pulled together the attached draft invite for your February 8 IWG meeting on AIDS. I understand from Nora that you want to update the invite language and perhaps craft an agenda to go along with the invite. Nora will be glad to discuss and clear. You also need to fill in the missing names/numbers and include a poc of contact name and number for clearing the people in. Assume you will take it from here.

KEN
DID NOT
USE ALL
THESE NAMES

UNCLASSIFIED

date: 1/27/2000

FROM: KEN BERNARD
202-456-9298 (phone); 202-456- (fax)

SUBJECT: Invitation to IWG Meeting on AIDS, 2/8/2000

TO: SUSAN RICE, State	647-4440	647-6301
FRANK LOY, State	647-6240	647-0753
JACK CHOW, State	647-8309	647-0753
????????????, Defense		
TIM GEITHNER, Treasury	647-0656	647-0417
ROBERT MALLET, Commerce	482-8376	501-1262
ERIC GOOSBY, HHS		
SUE BAILEY, HHS		
DEBBIE BURKES, HHS		
KEN THOMAS, USUN	212-415-4296	212-415-4299
R. P. EDDY, USUN	212-415-4402	212-
ROBERT KYLE, OMB	395-4657	395-0345
DAN MENDELSON, OB	395-5178	395-5631
????????????????, CIA		
VIVIAN DERRYCK, AID	712-0500	216-3008
BARBARA TURNER, AID	712-1190	216-3235
HELENE GAYLE, CDC	404-639-8000	404-639-8600
NEAL NATHANSON, NIH	301-496-0397	301-496-2119
????????????????, DIA/AFMIC		
LEON FUERTH, OVP	456-9501	456-9500
JIM BABBITT, OVP	456-9501	456-9500
TOM ROSSHIRT, OVP	456-7173	456-2685
MELANNE VERVEER, WH/OFL	456-6266	456-6244
CHUCK BRAIN, WH	456-2230	456-6220
ROB WESCOTT, NEC	456-5905	456-2223
JOE PAPOVICH, USTR	395-4510	395-3891
DAN SHAPIRO, NSC	456-9171	456-9170
NORA DEMPSEY, NSC	456-9261	456-9260

You are invited to an **IWG meeting on AIDS** co-chaired by Sandy Thurman and Ken Bernard at 1:30 p.m. on Tuesday, February 8, in Room 208 OEOB. Each invitee can bring one person.

Attendees must be pre-cleared to enter the building. If you wish to attend, please phone at 202-456- with your name/dob/ssn.

UNCLASSIFIED

Battenfield, Pat A. (AF)

From: Smith, Gayle E. (AF)
Sent: Wednesday, April 19, 2000 9:08 AM
To: Crowley, Philip J. (PRESS)
Cc: @AFRICA - African Affairs; @MULTILAT - Multilateral and Humanitarian Affairs
Subject: FW: Mbeki Guidance - URGENT REVIEW REQUIRED [UNCLASSIFIED]

Importance: High

Changes tracked. Did a modification of Uganda point because I recall the numbers from my head and want to confirm them with a paper - gave you an alternative if I cannot find the paper in time. Thks, GS

-----Original Message-----

From: Crowley, Philip J. (PRESS)
Sent: Wednesday, April 19, 2000 8:59 AM
To: @AFRICA - African Affairs; @MULTILAT - Multilateral and Humanitarian Affairs
Cc: @PRESS - Public Affairs
Subject: Mbeki Guidance - URGENT REVIEW REQUIRED [UNCLASSIFIED]
Importance: High

Lockhart is going to be asked about Mbeki at 9:30. Take a look at this. Also, do we confirm that a visit by Mbeki is "under consideration?" What do we say about the State visit?



Mbeki.doc

MBEKI LETTER
April 19, 2000

Did South African President Mbeki send a letter to the President regarding the AIDS epidemic in his country? What did he say? Do we think that he is espousing a dangerous course of action that has been scientifically discredited? Has the President responded?

- South African President Thabo Mbeki has written to the President. The President has not yet responded. This was a private communication between two leaders and I don't want to comment specifically on the contents of the letter.
- There is no question that President Mbeki understands the depth of the health crisis facing much of Africa, including his own country. South Africa is doing a great deal, including appointing a senior government task force, an AIDS council between the public and private sector, and a country-wide education campaign.

☐ We recognize that the AIDS epidemic in Africa, including South Africa, is manifesting itself in different ways than it has in the United States. They are doing everything within their capacity to deal with this crisis. They don't have the same health care infrastructure that we do, for example, which means that in addition to what the South African government is already doing, they also need to look at additional approaches relevant to specific conditions in Africa. ~~so we recognize that there needs to be a different approach in Africa than there has been in the West.~~

- ~~Do we agree~~ Do we agree with the views of every expert he's consulted? No, we don't and we have communicated that to the South African government. But we do agree with his premise that more has to be done globally, and more needs to be done in Africa.
- We have to keep in mind the limited resources Africa has to deal with this. In a country like Uganda, for example, estimates are that it would take \$22B to mount an effective campaign against the effects of AIDS. Yet Uganda's entire government budget is but \$2B. (PJ – I am recalling these numbers and need to confirm them) – if I do not get back to you, say “Our estimates are that in some

African countries, like Uganda, treating every infected individual would cost more than ten times the national budget.”

- There is no question that AIDS threatens the economic, political and social progress that Africa has made. That’s the reason the Vice President and Ambassador Holbrooke put this issue front and center in the United Nations Security Council in January, and why we have an interagency working group studying how we can help Africa confront this major challenge.

Battenfield, Pat A. (AF)

From: Bernard, Kenneth W. (HEALTH)
Sent: Thursday, April 13, 2000 6:00 PM
To: Babbitt, James F. (VP); @AFRICA - African Affairs
Cc: @HEALTH - International Health Affairs
Subject: FW: AIDS Deputies meeting [UNCLASSIFIED]

As sent to Jim.

-----Original Message-----

From: Bernard, Kenneth W. (HEALTH)
Sent: Thursday, April 13, 2000 5:58 PM
To: @NSA - Natl Security Advisor
Subject: FW: AIDS Deputies meeting [UNCLASSIFIED]

Pls pass to Jim and Mara (and Sandy if appropriate)

To: Jim Steinberg

From: Ken Bernard

(Concurrence: Jim Babbitt, Gayle Smith, Sandy Thurman)

SUBJECT: Deputies Committee Meeting: Enhanced USG Response to the Global AIDS Epidemic (Currently April 27, 2:00)

In February, Sandy Thurman and I convened an Interagency Working Group on expanding our role in the global HIV/AIDS crisis. The meetings included representation from State (including USUN), USAID, DOD, Joint Staff, Treasury, Commerce, CIA, DOL, DIA, HHS (including NIH and CDC), OVP, OMB, USTR, NEC, NSC and OSTP. (note: Peace Corps is now being added.) We have been working closely with Gayle and Nora on the IWG which has substantial Africa equities.

The IWG has prepared a Consensus Document, which summarizes the current context of the expanding epidemic, extent of USG HIV/AIDS activities, funding issues, and "next steps" for USG action which can be agreed at the A/S level (penultimate draft attached).

A number of issues and actions discussed by the IWG would benefit from the Deputies buy-in to help move implementation quickly. A few others would require decisions. We would like your comments on, and approval of, this outline before we draft the agenda.

1. Coordination and Leadership issues

--**Structure and Coordination of USG HIV/AIDS Programs:** We will propose that Deputies approve the IWG recommendation to expand staffing of Sandy Thurman's office.

--**Enhanced International Leadership:** Details of the "Presidential Envoys for AIDS Cooperation" (PEACs) initiative will be laid out for discussion and approval. Possible deliverable for the US-EU Summit, and or G-8.

--**Cooperative HIV/AIDS efforts with other nations:** - Next steps to ensure economic burdensharing, especially in the planning for the US-EU Summit and G-7/G-8. We will be prepared to outline the macro-level costs of specific interventions, such as prevention and care, preventing mother-to-child transmission, provision of antibiotics in Africa, etc.

--**Competing budget initiatives for AIDS funding:** Gaining support for the Administration's additional \$100 million increase while dealing with Congressional interest in a variety of other, even larger, earmarked increases for AIDS. WH Legislative Affairs and ONAP are taking the lead on this, and will have recommendations in advance of the DC.

2. Security Issues:

--**DOD engagement:** South Africa, Nigeria, Rwanda, Zambia, Cambodia, Ghana and Eritrea are a few of the countries already requesting DOD assistance for mil-mil AIDS prevention activities. Funding of \$10 million is in the President's FY 2001 budget request, although reprogramming FY 2000 funding for this purpose is an option needing discussion by the Deputies. The future earmarking of DOD/State IMET funding for AIDS training Should also be discussed, and we believe that Deputies should task DoD to develop a comprehensive, global plan for tackling HIV-AIDS in our mil-mil relations.

--**Intelligence amplification:** Will propose that Deputies approve a specific mandate for intelligence community reporting on the extent and impact of the epidemic.

--**UN Peacekeeping:** Next steps for ensuring mandatory HIV/AIDS prevention efforts for all UN Peacekeepers.

3. Economic and Humanitarian Issues

--**Finance:** Consider how to increase speed of HIPC countries accessing debt relief funding for AIDS control activities. Ensuring increased World Bank (IDA) funding of the President's AIDS and vaccine initiatives. Consider the pros and cons of, and possible options for expanding targeted debt relief to non-HIPC countries, such as Nigeria, that have both significant debt and AIDS problems. There is considerable disagreement on this issue. The decision for the Deputies is whether the issue is important enough to explore new debt initiative or other financial instruments.

--**Enhancing Access to needed medicines:** Establish an IWG tasked with making recommendations to enhance the developing world's access to needed medicines. A

group, chaired by HHS and USTR are already working to followup the announcement made by the President in Seattle. Next steps will be outlined.

--**Business Community outreach:** The VP has publicly committed to hosting a meeting of U.S. business leaders whose firms are active in Africa. The meeting will call for corporate resources and ideas to 1) protect the international workforce from HIV/AIDS, 2) joint efforts to stop the spread of global AIDS, especially from mother-to-child. Leon will be prepared to provide further details.

--**USG task force to focus on the challenges of delivering services (and drugs) to reduce mother-to-infant HIV transmission.** In his recent speech to the African Summit the President emphasized his support of this initiative. Consider options and costs to move forward.



AIDS IWG Consensus
Concurrence...

April 10, 2000

MEMORANDUM FOR

MR. LEON FUERTH
Assistant to the Vice
President for National
Security Affairs

MR. FRANK E. LOY
Under Secretary for Global
Affairs
Department of State

DR. SUSAN E. RICE
Assistant Secretary for
African Affairs
Department of State

MR. TIMOTHY GEITHNER
Under Secretary for
International Affairs
Department of the Treasury

DR. SUE BAILEY
Assistant Secretary of Defense
for Health Affairs
Department of Defense

CAPTAIN MICHAEL MEYER
Director, Armed Forces Medical
Intelligence Center
Department of Defense

MR. MARK L. SCHNEIDER
Director
Peace Corps

MR. ALAN BOWSER
Deputy Assistant Secretary for
Basic Industries
Department of Commerce

MR. MACARTHUR DESHAZER
Associate Deputy Under
Secretary, Bureau of
International Labor Affairs
Department of Labor

DR. DAVID SATCHER
Assistant Secretary for Health
and Surgeon General
Department of Health and Human
Services

MS. BARBARA TURNER
Assistant Administrator
Bureau for Global Programs,
Field Support and Research
Agency for International
Development

MR. PAUL FRANDANO
Chief of Societal Groups
Office of Transnational Issues
Central Intelligence Agency

MR. JOSEPH PAPOVICH
Assistant USTR for Services,
Investments and Intellectual
Property Rights
U.S. Trade Representative

MR. ROBERT D. KYLE
Associate Director for
National Security and
International Affairs
Office of Management and
Budget

FROM: Kenneth W. Bernard, National Security Council
Sandra Thurman, Office of National AIDS Policy

SUBJECT: Interagency Working Group on the Global AIDS Crisis

1. Attached please find the final IWG document on expanding the U.S. role in controlling the international HIV/AIDS epidemic. It includes a summary list of "next steps," and is the result of two large interagency meetings in February and March, and five smaller issue-oriented subgroup sessions. The first draft of the document was circulated and attempts have been made to incorporate all suggested changes. Please note that designation of agency "leads" is not intended to be exclusive. Follow-up actions will be coordinated by lead agencies with the understanding that all interested parties should be included.

Please review the final document and provide your Department concurrence by Monday, April 17. We will assume concurrence if we do not hear from you by that date.

2. The consensus document is not intended to be static, but rather an ongoing attempt to ramp up the USG response to the HIV/AIDS crisis. A number of issues and actions raised by the IWG will require further discussion at the departmental level as well as in the Deputies and Principals Committee process.

Next steps:

- The IWG will meet again in June, prior to the International AIDS Conference in Durban, to document progress on each of the action items outlined in the consensus document. The lead agencies will coordinate input into this process.
- An issue-specific discussion/decision paper is being prepared. It will expand on the following issues raised in the consensus document:
 - Coordination of USG international AIDS activities, with recommendations and options for staffing in Washington, coordination of programs in the field, and USG leadership initiatives such as the "Presidential Envoys for AIDS Cooperation" and U.S.-EU Summit preparation.
 - Security issues, including increasing DoD military-to-military training programs, involvement in UN Peacekeeper education and HIV/AIDS control, and specific taskings for the intelligence community.

- Economic and trade issues, including access to medical care and pharmaceuticals in poor countries, evaluating expanded debt relief/debt swaps for AIDS control in the developing world, and focus on the macroeconomic impact of the epidemic.

Where agencies and departments have equities, they are encouraged to begin preparing options and discussion points on these issues as soon as possible.

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
003c. paper	Interagency Working Group Consensus Paper (11 pages)	04/10/2000	P1/b(1)

COLLECTION:

Clinton Presidential Records
National Security Council
African Affairs (Smith, Gayle/Barks-Ruggles, Erica/Sanders, Robin/Rice, Susan/Dempsey, Nora et al.)
OA/Box Number: 2853

FOLDER TITLE:

AIDS, 2 of 2 [Africa] [4]

2007-1550-F
ke2012

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

- P1 National Security Classified Information [(a)(1) of the PRA]
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C. Closed in accordance with restrictions contained in donor's deed of gift.

PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).

RR. Document will be reviewed upon request.

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Battenfield, Pat A. (AF)

From: Smith, Gayle E. (AF)
Sent: Wednesday, April 12, 2000 8:47 AM
To: Bernard, Kenneth W. (HEALTH)
Cc: Dempsey, Nora B. (AF); @AFRICA - African Affairs
Subject: FW: AIDS Deputies meeting [UNCLASSIFIED]

Ken - good to go. My compulsive side is tempted to do a few more grammatical tweaks, but I think I would drive you nuts, and I try to manage that compulsive side.

Thought the meeting with Harmon yesterday was inspiring. This is the kind of innovative thinking we need.

Just an idea - we may want to do a briefing for Leon before the deputies, depends on what Babbit thinks, but in terms of getting over some of the humps (DoD, IPR etc.) he is a good ally.

-----Original Message-----

From: Bernard, Kenneth W. (HEALTH)
Sent: Tuesday, April 11, 2000 5:05 PM
To: @AFRICA - African Affairs; @INTECON - Economic Affairs; Shapiro, Daniel B. (LEGIS); @MULTILAT - Multilateral and Humanitarian Affairs
Subject: AIDS Deputies meeting [UNCLASSIFIED]

See attached - concurrence/changes (to the note to Jim only) by tomorrow am SVP.

To: Jim Steinberg

From: Ken Bernard

Concurrence: Jim Babbitt, Gayle Smith, Dan Shapiro, Eric Schwartz

SUBJECT: Deputies Committee Meeting: Enhanced USG Response to the Global AIDS Epidemic

In February, Sandy Thurman and I convened an Interagency Working Group on expanding our role in the global HIV/AIDS crisis. The meetings included representation from State (including USUN), USAID, DOD, Joint Staff, Treasury, Commerce, CIA, DOL, DIA, HHS (including NIH and CDC), OVP, OMB, USTR, NEC, NSC and OSTP. (note: Peace Corps is now being added.) We have been working closely with Gayle and Nora on the IWG which has substantial Africa equities.

The IWG has prepared a Consensus Document, which summarizes the current context of the expanding epidemic, extent of USG HIV/AIDS activities, funding issues, and “next steps” for USG action which can be agreed at the A/S level (penultimate draft attached).

A number of issues and actions discussed by the IWG would benefit from the Deputies buy-in to help move implementation quickly. A few others would require decisions. We would like your comments on, and approval of, this outline before we draft the DC discussion paper this week.

1. Coordination and Leadership issues

--**Structure and Coordination of USG HIV/AIDS Programs:** We will propose that Deputies approve the IWG recommendation to expand staffing of Sandy Thurman's office.

--**Enhanced International Leadership:** Details of the "Presidential Envoys for AIDS Cooperation" (PEACs) initiative will be laid out for discussion and approval. Possible deliverable for the US-EU Summit, and or G-8.

--**US-EU Summit and G-8 AIDS initiatives** - Next steps to ensure economic burdensharing. We will also outline the true cost of specific AIDS prevention and care programs, such as preventing mother-to-child transmission, provision of antibiotics in Africa, etc, and proposals for meeting these goals.

--**Competing budget initiatives for AIDS funding:** Gaining support for the Administration's additional \$100 million increase while dealing with Congressional interest in a variety of other, even larger, earmarked increases for AIDS. WH Legislative Affairs and ONAP are taking the lead on this, and will have recommendations in advance of the DC.

2. Security Issues:

--**DOD engagement:** South Africa, Nigeria, Rwanda, Zambia, Cambodia, Ghana and Eritrea are a few of the countries already requesting DOD assistance for mil-mil AIDS prevention activities. Funding of \$10 million is in the President's FY 2001 budget request, although reprogramming FY 2000 funding for this purpose is an option needing discussion by the Deputies. The future earmarking of DOD/State IMET funding for AIDS training Should also be discussed, and we believe that Deputies should task DoD to develop a comprehensive, global plan for tackling HIV-AIDS in our mil-mil relations.

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Nigeria, that have both significant debt and AIDS problems. There is considerable disagreement on this issue. The decision for the Deputies is whether the issue is important enough to explore new debt initiative or other financial instruments.

--**Access to needed medications in poor countries - IPR:** Proposed
HHS/USTR/Commerce follow-up to President's Seattle WTO announcement.

--**Business Community outreach:** The VP clearly wishes to be the lead on business outreach issues. He is sending out a letter to a broad audience, calling for corporate resources and ideas to 1) protect the international workforce from HIV/AIDS, 2) joint efforts to stop the spread of global AIDS, especially from mother-to-child. OVP will outline next steps in follow-up.

--**USG task force to focus on the challenges of delivering services (and drugs) to reduce mother-to-infant HIV transmission.** In his recent speech to the African Summit the President emphasized his support of this initiative. Consider options to move forward.



AIDS IWG Consensus
Concurrence...

April 10, 2000

MEMORANDUM FOR

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Assistant to the Vice
President for National
Security Affairs

MR. FRANK E. LOY
Under Secretary for Global
Affairs
Department of State

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Assistant USTR for Services,
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MR. ROBERT D. KYLE
Associate Director for
National Security and
International Affairs
Office of Management and
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FROM: Kenneth W. Bernard, National Security Council
Sandra Thurman, Office of National AIDS Policy

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FOLDER TITLE:

AIDS, 2 of 2 [Africa] [4]

2007-1550-F

ke2012

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President

Republic of South Africa

April 3, 2000.

Mr President,

I am honoured to convey to you the compliments of our government as well as my own, and to inform you about some work we are doing to respond to the HIV-AIDS epidemic.

As you are aware, international organisations such as UNAIDS have been reporting that Sub-Saharan Africa accounts for two-thirds of the world incidence of HIV-AIDS. These reports indicate that our own country is among the worst affected.

Responding to these reports, in 1998 our government decided radically to step up its own efforts to combat AIDS, this fight having, up to this point, been left largely to our Ministry and Department of Health.

Among other things, we set up a *Ministerial Task Force against HIV-AIDS* chaired by the Deputy President of the Republic, which position I was privileged to occupy at the time.

Our current Deputy President, the Hon Jacob Zuma, now leads this Task Force.

We also established *Partnerships against AIDS* with many major sectors of our society including the youth, women, business, labour unions and the religious communities.

We have now also established a *National AIDS Council*, again chaired by the Deputy President and bringing together the government and civil society.

An important part of the campaign that we are conducting seeks to *encourage safe sex and the use of condoms*.

At the same time, as an essential part of our campaign against HIV-AIDS, we are working to ensure that we focus properly and urgently on *the elimination of poverty among the millions of our people*.

Similarly, we are doing everything we can, within our very limited possibilities, to provide the necessary medicaments and care to deal with what are described as 'opportunistic diseases' that attach to acquired immune deficiency.

As a government and a people, we are trying to organise ourselves to ensure that we take care of the children affected and orphaned by AIDS.

We work also to ensure that no section of our society, whether public or private, discriminates against people suffering from HIV-AIDS.

In our current budget, we have included a dedicated fund to finance our activities against HIV-AIDS. This is in addition to funds that the central government departments as well as the provincial and local administrations will spend on this campaign.

We have also contributed to our Medical Research Council such funds as we can, for the development of an AIDS vaccine.

Demands are being made within the country for the public health system to provide anti-retroviral drugs for various indications, including mother-to-child transmission.

We are discussing this matter, among others with our statutory licencing authority for medicines and drugs, the Medicines Control Council (MCC).

Towards the end of last year, speaking in our national parliament, I said that I had asked our Minister of Health to look into various controversies taking place among scientists on HIV-AIDS and the toxicity of a particular anti-retroviral drug.

In response to this, among other things, the Minister is working to put together an international panel of scientists to discuss all these issues in as transparent a setting as possible.

As you know, AIDS in the United States and other developed Western countries has remained largely confined to a section of the male homosexual population.

For example, the cumulative heterosexual contact, US percentage for AIDS cases among adults/adolescents, through June 1999 is given as 10 per cent. (HIV/AIDS Surveillance Report: Midyear edition, Vol 11, No 1, 1999. US Department of Health and Human Services.)

The cumulative absolute total for this age group is reported as being 702,748.

US AIDS deaths for the period January 1996 to June 1997 were stated by the US CDC as amounting to 32,760, (Trends in the HIV & AIDS Epidemic: 1998, CDC.)

On May 13, 1999, a SAPA-AFP report datelined Paris stated that 1998 UNAIDS and WHO reports had said that AIDS was responsible for one death in five in Africa, or about two million people.

It quoted a Dr Awa Coll Seck of UNAIDS as saying that there are 23 million carriers in Africa of HIV.

This SAPA-AFP report quotes Dr Coll Seck as saying: " In Southern Africa, the prevalence of the (HIV) infection has increased so much in five years that this region could, if the epidemic continues to spread at this rate, see its life-expectancy decline to 47 by 2005."

(Interestingly, the five years to which Dr Coll Seck refers coincide closely with the period since our liberation from apartheid, white minority rule in 1994.)

The report went on to say that almost 1,500 people are infected in South Africa everyday and that, at that point, the equivalent of 3.8 million people in our country carried the virus.

Again as you are aware, whereas in the West HIV-AIDS is said to be largely homosexually transmitted, it is reported that in Africa, including our country, it is transmitted heterosexually.

Accordingly, as Africans, we have to deal with this uniquely African catastrophe that:

- *contrary to the West*, HIV-AIDS in Africa is heterosexually transmitted;
- *contrary to the West*, where relatively few people have died from AIDS, itself a matter of serious concern, millions are said to have died in Africa; and,
- *contrary to the West*, where AIDS deaths are declining, even greater numbers of Africans are destined to die.

It is obvious that whatever lessons we have to and may draw from the West about the grave issue of HIV-AIDS, a simple superimposition of Western experience on African reality would be absurd and illogical.

Such proceeding would constitute a criminal betrayal of our responsibility to our own people. It was for this reason that I spoke as I did in our parliament, in the manner in which I have indicated.

I am convinced that our urgent task is to respond to the *specific* threat that faces us as Africans. We will not eschew this obligation in favour of the comfort of the recitation of a catechism that may very well be a correct response to the *specific* manifestation of AIDS in the West.

We will not, ourselves, condemn our own people to death by giving up the search for specific and targeted responses to the specifically African incidence of HIV-AIDS.

I make these comments because our search for these specific and targeted responses is being stridently condemned by some in our country and the rest of the world as constituting a criminal abandonment of the fight against HIV-AIDS.

Some elements of this orchestrated campaign of condemnation worry me very deeply.

It is suggested, for instance, that there are some scientists who are 'dangerous and discredited' with whom nobody, including ourselves, should communicate or interact.

In an earlier period in human history, these would be the heretics that would be burnt at the stake!

Not long ago, in our own country, people were killed, tortured, imprisoned and prohibited from being quoted in private and in public because the established authority believed that their views were dangerous and discredited.

We are now being asked to do precisely the same thing that the racist apartheid tyranny we opposed did, because, it is said, there exists a scientific view that is supported by the majority, against which dissent is prohibited.

The scientists we are supposed to put into scientific quarantine include Nobel Prize Winners, Members of Academics of Science and Emeritus Professors of various disciplines of medicine!

Scientists, in the name of science, are demanding that we should cooperate with them to freeze scientific discourse on HIV-AIDS at the specific point this discourse had reached in the West in 1984.

People who otherwise would fight very hard to defend the critically important rights of freedom of thought and speech occupy, with regard to the HIV-AIDS issue, the frontline in the campaign of intellectual intimidation and terrorism which argues that the only freedom we have is to agree with what they decree to be established scientific truths.

Some agitate for these extraordinary propositions with a religious fervour borne by a degree of fanaticism, which is truly frightening.

The day may not be far off when we will, once again, see books burnt and their authors immolated by fire by those who believe that they have a duty to conduct a holy crusade against the infidels.

It is most strange that all of us seem ready to serve the cause of the fanatics by deciding to stand and wait.

It may be that these comments are extravagant. If they are, it is because in the very recent past, we had to fix our own eyes on the very face of tyranny.

I am greatly encouraged that all of us, as Africans, can count on your unwavering support in the common fight to save our continent and its peoples from death from AIDS.

Please accept, Your Excellency, the assurance of my respect.

THABO MBEKI.

H. E. President Bill Clinton,
USA.

Washfax Receipt
DEPARTMENT OF STATE
4

8

Message No.: 026213

Classification: UNCLASSIFIED

No. Pages: 6

From: Steve Mull
(Officer Name)

S/S
(Office Symbol)

202-647-6548
(Extension)

7224
(Room number)

Message Description: Cable to USEU Brussels: Developing a Framework for
U.S.-EU Cooperation on HIV/AIDS and Other Infectious Diseases in
Africa

For (Agency)	Deliver To:	Extension	Room No.
NSCS	Robert A. Bradtke Executive Secretariat	456-9461	WHSITRM
SMITH, G	BLINKEN	BERNARD	
NOVA	YEE		

MUST GO

NON-MUST GO

Remarks: Please Clear by: 3/31

NSC POC: _____

S/S Officer: *M*
Steve Mull

CROSSHATCH

ORIGINAL

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CLR 4:	A R
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CLR 6:	H Y
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PRIORITY USEU BRUSSELS, LISBON

PRIORITY ALLEU, ALAFD

E.O. 12958: N/A

TAGS: PREL, EAID, EU, TBIO

SUBJECT: DEVELOPING A FRAMEWORK FOR U.S.-EU COOPERATION ON
 HIV/AIDS AND OTHER INFECTIOUS DISEASES IN AFRICA

REF: LISBON 930

1. SUMMARY. ENHANCING U.S.-EU COOPERATION ON HIV/AIDS AND INFECTIOUS DISEASES IN AFRICA HAS THE POTENTIAL TO BECOME AN IMPORTANT INITIATIVE AT THE UPCOMING U.S.-EU SUMMIT IN PORTUGAL. THIS CABLE CONTAINS A NON-PAPER TO BE SHARED WITH EU COUNTERPARTS AS A FIRST STEP TOWARD DEVELOPING CONSENSUS ON HOW TO APPROACH THE ISSUES. IT ALSO CONTAINS IDEAS ABOUT THE NEED FOR ADDITIONAL PUBLIC DIPLOMACY EFFORTS DIRECTED AT ENCOURAGING INCREASED ATTENTION BY AFRICAN LEADERS TO THE GROWING PROBLEM OF INFECTIOUS DISEASES. THE HOPE IS TO LAUNCH AN IMPORTANT INITIATIVE THAT WILL ATTRACT ADDITIONAL RESOURCES AND WORK IN A COMPLEMENTARY WAY WITH G-8 EFFORTS. END SUMMARY.

2. THE SECRETARY RAISED THE ISSUE OF ENHANCED U.S.-EU COOPERATION ON HIV/AIDS AT THE U.S.-EU MINISTERIAL IN LISBON

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ON MARCH 3 IN RESPONSE TO PRIME MINISTER GUTERRES' PROPOSAL TO LAUNCH AN INITIATIVE AT THE NEXT U.S.-EU SUMMIT FOR IMPLEMENTATION DURING THE FRENCH PRESIDENCY. COMMISSION PRESIDENT PRODI RESPONDED POSITIVELY WHEN THE SECRETARY RAISED THE IDEA WITH HIM A WEEK LATER. HE SUGGESTED INCLUDING INFECTIOUS DISEASES SUCH AS MALARIA AS WELL. REFTTEL NOTES HOW THE EU PRESIDENCY VERY MUCH WANTS TO MAKE FURTHER PROGRESS ON HIV/AIDS IN AFRICA AN INITIATIVE FOR THE UPCOMING U.S.-EU SUMMIT IN PORTUGAL.

3. ACTION ADDRESSEES ARE REQUESTED TO SHARE THE FOLLOWING NON-PAPER WITH APPROPRIATE COUNTERPARTS IN THE PORTUGUESE MFA AND THE EUROPEAN COMMISSION/COUNCIL SECRETARIAT AND REPORT BACK ON INITIAL REACTION NO LATER THAN APRIL 5. EMBASSY PARIS MAY ALSO WANT TO SHARE WITH APPROPRIATE FRENCH OFFICIALS AS ANY INITIATIVE WOULD BE UNDERTAKEN DURING THE FRENCH PRESIDENCY OF THE EU. WE HOPE TO USE THIS INPUT IN DISCUSSING THE SUBJECT AT THE APRIL 13 SENIOR LEVEL GROUP MEETING. OTHER INFO ADDRESSEES ARE FREE TO SHARE THE NON-PAPER WITH APPROPRIATE CONTACTS.

BEGIN NON-PAPER:

4. THE HUMAN TOLL OF THE AIDS EPIDEMIC IS STAGGERING. FIFTY MILLION PEOPLE WORLDWIDE HAVE BEEN AFFECTED WITH THE HIV VIRUS; 33.6 MILLION ARE NOW LIVING WITH HIV/AIDS, AND ANNUAL AIDS-RELATED FATALITIES HIT A RECORD 2.6 MILLION IN 1999. NINETY-FIVE PERCENT OF ALL CASES ARE IN THE DEVELOPING WORLD. AIDS IS NOW THE LEADING CAUSE OF DEATH IN AFRICA AND THE FOURTH IN THE WORLD. OTHER INFECTIOUS DISEASES, NOTABLY MALARIA, ALSO EXACT AN ALARMING HUMAN TOLL. IN ALL, INFECTIOUS DISEASES CAUSE SIXTY-FIVE PERCENT OF DEATHS IN SUB-SAHARAN AFRICA. AIDS IS WIPING OUT DECADES OF PROGRESS ON A HOST OF DEVELOPMENT OBJECTIVES IN AFRICA. SINCE HIV/AIDS GENERALLY AFFECTS THE YOUNG AND MOBILE, ITS ECONOMIC, POLITICAL AND SOCIAL CONSEQUENCES ARE EXPECTED TO BE SEVERE AND LONG LASTING. THE NUMBER OF CHILDREN IN AFRICA WHO HAVE LOST ONE OR BOTH PARENTS TO AIDS EXCEEDS TEN MILLION. ANNUALLY, AN ESTIMATED ONE MILLION AFRICANS DIE FROM MALARIA. CHOLERA, DYSENTERY AND OTHER DIARRHEAL DISEASES ALSO ARE MAJOR KILLERS IN THE REGION, PARTICULARLY AMONG CHILDREN, REFUGEES AND INTERNALLY DISPLACED POPULATIONS.

-- WE HOPE TO MAKE AFRICA THE FOCUS OF THIS INITIATIVE WHILE RECOGNIZING THE GLOBAL SCOPE OF THE HIV/AIDS/INFECTIOUS DISEASE PROBLEM. WE SEEK THE EU'S VIEWS ON HOW TO PROCEED

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WITH AN EFFECTIVE GEOGRAPHICAL FOCUS FOR THIS PROPOSED INITIATIVE.

5. THE U.S. AND EU HAVE AN ESTABLISHED RECORD OF COOPERATION ON VITAL HEALTH ISSUES, INCLUDING THE ESTABLISHMENT OF A U.S.-EU TASK FORCE ON COMMUNICABLE DISEASES AND COOPERATION BETWEEN ASSISTANCE AGENCIES. IT IS IMPORTANT AT THIS TIME TO REEXAMINE AND REVITALIZE THESE COLLABORATIVE EFFORTS. IT IS EQUALLY IMPORTANT THAT THE U.S. AND EU REAFFIRM THEIR HIGH-LEVEL COMMITMENT TO DEALING COOPERATIVELY WITH HIV/AIDS AND OTHER INFECTIOUS DISEASES IN AFRICA THROUGH COLLABORATIVE DIPLOMATIC EFFORTS.

DEVELOPING A TRANSATLANTIC FRAMEWORK

6. THE U.S. AND EU SHOULD ACT NOW TO REAFFIRM THEIR READINESS TO ASSUME A LEADERSHIP ROLE IN THE FIGHT AGAINST HIV/AIDS AND OTHER INFECTIOUS DISEASES. WE SHOULD USE THE NEXT U.S.-EU SUMMIT TO STRENGTHEN OUR MUTUAL COMMITMENT TO FIGHT HIV/AIDS/INFECTIOUS DISEASES IN AFRICA.

-- WE ARE OPEN TO IDEAS CONCERNING HOW THIS RECOGNITION CAN BE ACHIEVED AT THE NEXT U.S.-EU SUMMIT. ONE SUGGESTION IS A JOINT SUMMIT STATEMENT CONFIRMING OUR MUTUAL AND RESPECTIVE COMMITMENT TO ADDRESS THE GLOBAL HIV/AIDS PANDEMIC. ANOTHER POSSIBILITY IS AN OPEN LETTER FROM PRESIDENT CLINTON, PRIME MINISTER GUTERRES AND COMMISSION PRESIDENT PRODI TO AFRICAN HEADS OF STATE AND OTHER LEADERS CALLING FOR ENHANCED COLLABORATIVE EFFORTS TO ADDRESS THE HIV/AIDS AND INFECTIOUS DISEASE SITUATION THERE.

-- IN THE FUTURE WE WOULD LIKE TO DISCUSS, PERHAPS IN A NEW FORA, ISSUES NEEDING INTERNATIONAL ACTION SUCH AS HEALTH AND PREVENTION STRATEGIES, DRUG AVAILABILITY IN POOR COUNTRIES AND DEVELOPING A HIGH PROFILE COMMUNICATIONS STRATEGY FOR PUBLIC DIPLOMACY ON HIV/AIDS CONTROL (SEE BELOW). OUR GOAL IS ALSO TO ENCOURAGE RESPONSIVE AND RESPONSIBLE ACTION IN AT RISK COUNTRIES AND TO EDUCATE FOREIGN LEADERS ON THE IMPACT OF HIV/AIDS ON POLITICAL STABILITY, ECONOMIC GROWTH AND THE DEVELOPMENT OF CIVIL SOCIETY.

-- WE ARE INTERESTED IN FURTHER EXPLORATION OF COLLABORATIVE DIPLOMATIC EFFORTS IN THE SOUTHERN AFRICAN DEVELOPMENT COMMUNITY (SADC), AS PROPOSED BY THE U.S. AT A

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RECENT MEETING OF U.S.-EU TASK FORCE ON COMMUNICABLE
DISEASES CO-CHAIRS.

MOBILIZING RESOURCES

8. WINNING THE FIGHT AGAINST HIV/AIDS AND OTHER INFECTIOUS DISEASES WILL REQUIRE SUBSTANTIAL RESOURCES. UNAIDS ESTIMATES THAT IT WILL REQUIRE AT LEAST USD ONE BILLION ALONE FOR HIV PREVENTION PROGRAMS IN AFRICA TO STEM THE RISING TIDE OF INFECTION. BECAUSE OF THE INCREASING IMPORTANCE THE U.S. PLACES ON THE INTERNATIONAL HIV/AIDS FIGHT, IT WILL SPEND WORLDWIDE OVER USD 225 MILLION IN FY-2000 FOR INTERNATIONAL HIV/AIDS PREVENTION AND CARE PROGRAMS ALONE. THIS FIGURE DOES NOT INCLUDE RESEARCH FUNDING. THE U.S. ENCOURAGES THE EU TO CONTINUE PROVIDING GENEROUS FINANCIAL SUPPORT. THE IDENTIFICATION OF ADDITIONAL RESOURCES, HOWEVER, IS NOT A PREREQUISITE AT THIS TIME FOR THE LAUNCH OF A NEW HIV/AIDS INITIATIVE. THE U.S. SEEKS FOREMOST TO USE ITS WORKING RELATIONSHIP WITH THE EU TO IMPROVE THE NATIONAL AND INTERNATIONAL POLITICAL COMMITMENT TO ENHANCE THE ABILITY OF AFRICAN NATIONS TO ADDRESS THE CHALLENGES OF HIV/AIDS.

-- THE U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT HAS ASSISTED IN DESIGNING AND IMPLEMENTING HIV/AIDS PROGRAMS IN 22 AFRICAN COUNTRIES. WE ARE PREPARED TO DRAW ON THESE EXPERIENCES AND WORK WITH THE EU TO SHARE LESSONS LEARNED. HIV/AIDS/INFECTIOUS DISEASE COOPERATION MERITS FULL DISCUSSION IN OUR HIGH-LEVEL ASSISTANCE CONSULTATIONS AND IN OTHER APPROPRIATE DEVELOPMENT ASSISTANCE FORA. WE WANT TO ENCOURAGE FURTHER PROGRAMMATIC THINKING ON HIV/AIDS/INFECTIOUS IN AFRICA AND ELSEWHERE ON BOTH SIDES OF THE ATLANTIC.

--- WE WELCOME INFORMATION ON CURRENT EU SUPPORT FOR THE FIGHT AGAINST HIV/AIDS AND OTHER INFECTIOUS DISEASES, BOTH IN AFRICA AND ELSEWHERE. A FULL EXCHANGE OF INFORMATION WILL ENABLE US TO DEMONSTRATE TO OTHERS THE STRENGTH OF OUR JOINT COMMITMENT. THE EXCHANGE OF INFORMATION ON PREVENTION, TREATMENT AND CARE ACTIVITIES FOR HIV/AIDS WILL ALSO ALLOW US TO FOCUS NEW EFFORTS ON INTERNATIONAL NEEDS AND GAPS.

-- THE U.S. WOULD BE PLEASED TO MAKE AVAILABLE TO EU OFFICIALS THE RECENT NATIONAL INTELLIGENCE ESTIMATE ENTITLED

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"THE GLOBAL INFECTIOUS DISEASE THREAT AND ITS IMPLICATIONS FOR THE UNITED STATES". THIS REPORT, WRITTEN BY THE NATIONAL INTELLIGENCE COUNCIL, SUCCINCTLY CHARACTERIZES THE MULTI-DIMENSIONAL IMPACTS OF INFECTIOUS DISEASES IN KEY AREAS OF THE WORLD AND DELINEATES THE THREAT TO ECONOMIC AND POLITICAL SYSTEMS.

9. AN IMPORTANT ASPECT OF THE U.S.-EU APPROACH SHOULD BE WORKING TOGETHER TO LEVERAGE SUPPORT FOR THE FIGHT AGAINST INFECTIOUS DISEASES IN OTHER INTERNATIONAL FORA. THE YEAR 2000 IS IMPORTANT BECAUSE OF THE STRONG G-8 ENGAGEMENT WITH THE GLOBAL HIV/AIDS CRISIS. WE HOPE THE U.S. AND ITS EUROPEAN PARTNERS WILL WORK JOINTLY FOR A COMPREHENSIVE TREATMENT OF HIV/AIDS ISSUES AT THE G-8 SUMMIT IN OKINAWA. THE U.S. AND EU CAN ALSO EXAMINE WAYS TO STRENGTHEN THEIR SUPPORT FOR UNAIDS' AND THE WORLD BANK'S INTERNATIONAL PARTNERSHIP AGAINST AIDS IN AFRICA. WE CAN WORK TOGETHER TO ENCOURAGE MULTILATERAL DEVELOPMENT BANKS TO DEDICATE ADDITIONAL CONCESSIONARY LOANS TO EXPAND IMMUNIZATION AND PREVENT AND TREAT INFECTIOUS DISEASES, INCLUDING HIV/AIDS. WE MAY ALSO WISH TO DISCUSS WAYS TO ENCOURAGE HIGHLY INDEBTED POOR COUNTRIES (HIPC) TO USE, AS A PRIORITY, THEIR DEBT SERVICE SAVINGS FOR HIV/AIDS PREVENTION AND CARE ACTIVITIES AND OTHER MEASURES DIRECTED AT INFECTIOUS DISEASES. THESE ACTIONS MIGHT INCLUDE WORKING WITH THE MULTILATERAL INSTITUTIONS AND AT-RISK COUNTRIES TO FACILITATE ACCESS TO CONCESSIONARY LOANS FOR HIV/AIDS ACTIVITIES.

REINFORCING POLITICAL WILL

10. A CRITICAL ELEMENT WILL BE FOR THE U.S. AND EU TO DEMONSTRATE SOLIDARITY WITH HIGHLY IMPACTED DEVELOPING NATIONS AND TO FOSTER INCREASED POLITICAL AND SOCIETAL COMMITMENT TO COMBAT HIV/AIDS AND OTHER INFECTIOUS DISEASES. AT THE NEXT SUMMIT AND BEYOND, U.S. AND EU LEADERS MUST ENCOURAGE NATIONAL ACTION. THEY CAN ALSO GIVE SPECIAL RECOGNITION TO THOSE AFRICAN NATIONS, SUCH AS UGANDA AND SENEGAL, WHERE IMPORTANT COMMITMENTS TO DEVELOPING MORE EFFECTIVE HIV PREVENTION PROGRAMS HAVE BEEN MADE. A JOINT U.S.-EU STRATEGY SHOULD ALSO UTILIZE THE TOOLS OF PUBLIC DIPLOMACY TO ENCOURAGE AFRICAN PARTNERS TO BUILD OR STRENGTHEN NATIONAL INFRASTRUCTURES AND TO DEVELOP EFFECTIVE HIV/AIDS EDUCATION AND PREVENTION/MITIGATION.

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WEAPONS IN THE FIGHT

11. A COMPREHENSIVE STRATEGY WILL ALSO REQUIRE MAKING SURE THAT DRUGS, VACCINES AND OTHER HEALTH SERVICES ARE MADE ACCESSIBLE TO THE DEVELOPING COUNTRIES IN AFRICA. AT THE SAME TIME WE ARE COGNIZANT OF THE CRITICAL RESEARCH AND DEVELOPMENT UNDERTAKEN BY PHARMACEUTICAL COMPANIES ON BOTH SIDES OF THE ATLANTIC AND WILL WORK TOGETHER TO SAFEGUARD INTELLECTUAL PROPERTY RIGHTS. THE U.S. AND EU CAN BEGIN TO EXPLORE HARMONIZED WAYS TO MAKE VACCINES DEVELOPED FOR HIV/AIDS AND OTHER DISEASES SUCH AS TB AND MALARIA MORE WIDELY AVAILABLE TO THE MOST NEEDY. OUR JOINT EFFORTS CAN ALSO EXPLORE WAYS TO INCORPORATE THE PRIVATE SECTOR IN A COMPREHENSIVE APPROACH. WE CAN ALSO AGREE ON GUIDELINES FOR SHARING THE LATEST INFORMATION AND ANALYSIS ON EFFECTIVE ANTI HIV/AIDS STRATEGIES. WE CAN WORK TOGETHER TO SUPPORT THE GLOBAL INITIATIVE ON VACCINES.

A JOINT PROGRAM

12. IT IS OUR HOPE THAT THESE EFFORTS CAN BE LAUNCHED DURING THE PORTUGUESE PRESIDENCY AND THAT IMPORTANT IMPLEMENTATION WORK WOULD BEGIN DURING THE FRENCH PRESIDENCY. WE HOPE TO BE ABLE TO IDENTIFY SPECIAL AREAS OR PARTICULAR PROJECTS WHERE WE CAN WORK TOGETHER WITH THE EU ON SOME ASPECT OF THE HIV/AIDS PROBLEM. IN THE PAST, THE U.S. AND THE EU HAVE DISCUSSED AND EXCHANGED INFORMATION ON PROGRAMS FOR HIV/AIDS SURVEILLANCE AND BLOOD SAFETY. WE HOPE TO USE THE LEAD-UP TO THE U.S.-EU SUMMIT TO DEFINE THE POSSIBLE PARAMETERS FOR JOINT PROJECTS OR COMPLEMENTARY HIV/AIDS PROGRAMS.

13. PLEASE SLUG RESPONSES FOR OES/EID: N CARTER-FOSTER, G; J CHOW; AF/EPS: T HOLMES, AND EUR/ERA: J WALSER.

YY

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Withdrawal/Redaction Marker

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
006. report	Re: [AIDS] (2 pages)	02/10/2000	P1/b(1)

COLLECTION:

Clinton Presidential Records
National Security Council
African Affairs (Smith, Gayle/Barks-Ruggles, Erica/Sanders, Robin/Rice, Susan/Dempsey, Nora et al.)
OA/Box Number: 2853

FOLDER TITLE:

AIDS, 2 of 2 [Africa] [4]

2007-1550-F
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RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

- P1 National Security Classified Information [(a)(1) of the PRA]
- P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
- P3 Release would violate a Federal statute [(a)(3) of the PRA]
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- P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
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RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

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- b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
- b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
- b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

Battenfield, Pat A. (AF)

From: Bernard, Kenneth W. (HEALTH)
Sent: Wednesday, March 29, 2000 2:40 PM
To: @NSA - Natl Security Advisor
Cc: @AFRICA - African Affairs; @MULTILAT - Multilateral and Humanitarian Affairs; @EUROPE - European Affairs; @VP - VP Natl Security Affairs
Subject: [UNCLASSIFIED]

Pls pass to Sandy, Jim and Mara:

From: Ken Bernard
(cleared by Tony Blinken, Nora Dempsey, Matt McLean, Hoyt Yee)

Subject: "Presidential Envoys for AIDS Cooperation"

One of the issues being discussed in the Interagency on International HIV/AIDS, is the USUN-originated idea to have each concerned country name a "Presidential Envoy for AIDS Cooperation. (PEAC)." The concept has been discussed at some length (generally positively) at the working level, and will come up when the IWG process moves to the DC/PC arena.

Because Dick Holbrooke has considerable personal interest in moving the proposal forward, I am sending you a brief description of the idea for your reading pleasure. If approved by the administration, it would make the most sense that the U.S. "PEAC" be either Sandy Thurman, or someone reporting through her. The current UNAIDS program could act as the PEACs "secretariat" to avoid further institutional or bureaucratic structures.

Based on discussions between MKA and the EU interlocutors (EC President Prodi and Portuguese FM Gama), the U.S.-EU Summit is looking for an AIDS/Africa initiative. The Summit could be a place where the PEACs proposal could be discussed and rolled out as a deliverable if 1) you like it, and 2) others do too.

There are lots of unanswered questions, but pls. give it some thought (before RCH brings it up with you some time without advance notice).

Brief description of proposal:

- The USG would promote the "Presidential Envoys for AIDS Cooperation" (PEACs) initiative to intensify and coordinate the global response to HIV. The President would appoint a U.S. Envoy for AIDS Cooperation (the U.S. PEAC), as the USG began a diplomatic effort to encourage other concerned nations to follow suit. Regional or issue-specific sub-groups of a high-level body - the "Forum of International PEACs" - could then meet regularly to help coordinate and intensify wide-ranging international anti-HIV efforts.
- The Envoys could initiate discussions on important issues needing international action such

as prevention strategies, access to medications in poor countries, and development of a high-profile communications strategy for public diplomacy on HIV/AIDS control. The PEACs forum would publicly announce a set of ambitious global goals the world would commit to working together to meet, and then serve as the high-level motivating body that works to see they are met (e.g., goal: raise the total level of public/private international anti-HIV spending to \$1 billion; goal: reduce the incidence (rate of new cases) of HIV infection by 25%; goal: ensure 75% of infected persons will have access to basic care and support services).

Battenfield, Pat A. (AF)

From: Bernard, Kenneth W. (HEALTH)
Sent: Wednesday, March 22, 2000 11:54 AM
To: @AFRICA - African Affairs
Subject: FW: International AIDS/ leg issues [UNCLASSIFIED]

FYI, my note to Mara.

-----Original Message-----

From: Bernard, Kenneth W. (HEALTH)
Sent: Wednesday, March 22, 2000 11:31 AM
To: @RUDMAN; Lackey, Miles M. (LEGIS)
Cc: @LEGISLAT - Legislative Affairs
Subject: International AIDS/ leg issues (UNCLASSIFIED)

I remain somewhat confused regarding the plethora of authorization bills on international AIDS assistance (you have a chart from several weeks ago). The Leach Banking bill was voted out of conference with an authorization for \$200 million/ year fo a World Bank Trust Fund for AIDS. Administration took no position (although Treasury would probably have supported it if pushed). I just received from John Kerry's office a proposed ammendment by Frist to the technical assistance bill, Title II, Subtitle C. "Assistance to Countries with large Populations Having HIV/AIDS." It authorizes the \$50 million for the GAVI among a bunch of other things. I realize that authorization is not appropriation., but it is good that it has bipartisan support.

Anyway, I still feel adrift as to what is going on and who is providing administration coordination of all the health/AIDS/Africa bills on the hill. Who should be coordinating all this? I presume Sandy Thurman and Bob Kyle at OMB. Comments? thanks, --Ken

THE WHITE HOUSE

Office of the Vice President

For Immediate Release
Monday, January 10, 2000

Contact:
(202) 456-7035

**VICE PRESIDENT AL GORE UNVEILS NEW \$150 MILLION INITIATIVE TO
COMBAT THE SPREAD OF AIDS AND CONTRIBUTE TO INTERNATIONAL
INFECTIOUS DISEASE PREVENTION EFFORTS**

New York, NY -- Today, in a speech before the United Nations, Vice President Al Gore will announce that the Administration's FY 2001 budget include a new \$150 million investment to assist efforts to combat the international AIDS pandemic and contribute to international infectious disease prevention efforts. This new initiative provides \$100 million for preventing and treating HIV and AIDS in Africa, Asia, and other regions of the world -- double last year's increase.

It also dedicates \$50 million for purchasing vaccines against other diseases that ravage poor nations, including hepatitis B, certain forms of meningitis and yellow fever, helping to save millions of children. Purchasing existing vaccines is the first step toward accelerating the development and delivery of vaccines for AIDS, malaria, TB, and other diseases disproportionately affecting the developing world. This investment is part of a comprehensive plan for action that will meet the Administration's commitment in this area, as described in the President's September speech to the U.N. General Assembly.

"AIDS and other infectious diseases are the largest catastrophes in the history of modern medicine," Vice President Gore said. "We hope this initiative will provide relief and hope to the millions of children and families around the world."

THE AIDS PANDEMIC THREATENS THE ECONOMIC AND SOCIAL STABILITY OF SUB SAHARAN AFRICA AND ASIA. The United Nations calls the AIDS pandemic in sub-Saharan Africa "the worst infectious disease catastrophe since the bubonic plague." An estimated 5.7 million people were infected with HIV by the end of 1999, and India may have become the country with the largest number of new infections this year.

- **Sub-Saharan Africa and Asia disproportionately bear the impact of the AIDS epidemic.** While sub-Saharan Africa accounts for only one-tenth of the global population, over 70 percent of individuals infected with AIDS globally live there. Currently, 22.5 million people in sub-Saharan Africa are infected with HIV, and every day, an additional 11,000 become infected. In Asia, HIV and AIDS is already widespread. Because this region has 60 percent of the world's population and has the steepest infection curve, experts are predicting that Asia will soon become the epicenter of the epidemic. In addition, during the next decade, more than 40

million children in Africa will be orphaned by AIDS, making it difficult -- if not impossible -- for them to obtain adequate food, clothing, education, and health care services.

- **The AIDS epidemic is jeopardizing the economic stability of the sub-Saharan African and Asian regions.** The economic toll in HIV and AIDS are taking in Africa underscores the linkage between the spread of this disease and poverty in the region. Although Africa is making unprecedented economic gains, they are jeopardized by an infection which is killing skilled personnel -- and which demands increased investment in government spending.

- **The AIDS pandemic threatens Africa and Asia's regional and national security.** High levels of HIV infection among members of the armed forces weakens their ability to perform their national duties. In addition, studies have linked the growing number of children orphaned by AIDS to future increases in crime and civil unrest as these children raise themselves alone, often turning to crime, drugs, prostitution, and gangs to survive.

ONE THIRD OF ALL DEATHS EACH YEAR WORLDWIDE -- 17 MILLION PEOPLE - - RESULT FROM INFECTIOUS DISEASES. The developing world bears a disproportionate burden of these diseases, which not only destroy lives, but perpetuate the cycle of sickness and poverty. Vaccines have been critical and cost-effective weapons that have eradicated smallpox, reduced polio to the lowest levels in history, and drastically lowered measles rates. Building upon these extraordinary achievements, we must work to ensure that all children have access to effective vaccines.

- **Over eight million children die each year of centuries-old diseases -- and more than four million of these deaths could be prevented by existing vaccines.** The dramatic expansion of vaccine coverage in the past several decades now saves almost three million lives each year, and prevents hundreds of thousands of cases of paralysis and blindness. Yet, the wider use of existing vaccines against hepatitis B, certain forms of meningitis, yellow fever, and other diseases could prevent an additional four million deaths each year and reduce untold suffering.

- **Immunization is one of the most cost-effective health interventions.** It costs only \$15 to immunize a child, yet in developing countries, children remain 10 times more likely to die of a vaccine-preventable disease than those in the industrialized world.

- **Vaccines are one of the most cost-effective ways to improve the well-being and productivity of the poorest countries.** Investments in health are as central to economic progress in poor countries as investments in education and physical infrastructure. Yet, because these countries often cannot afford to buy vaccines, the market does not provide incentives for pharmaceutical companies to develop vaccines for diseases that disproportionately affect developing nations.

- **Effective vaccines do not yet exist for malaria, TB and AIDS, which kill nearly 6 million people each year.** Because developing countries often cannot afford to buy vaccines, the market does not provide incentives for pharmaceutical companies to develop vaccines for diseases that disproportionately affect those countries. Only 2 percent of all global biomedical

research by the public and private sectors is devoted to the major killers in the developing world. Vaccines are the best solution for these diseases, but progress has stalled. The global community must intensify both research and development, and make commitments to purchase new vaccines for these diseases when developed.

VICE PRESIDENT GORE UNVEILS NEW, \$150 MILLION INITIATIVE TO COMBAT AIDS AND OTHER INFECTIOUS DISEASES. Today, in a speech before the United Nations, Vice President Gore will announce that the President's FY 2001 budget will include a new, multi-million dollar investment in combating the spread of HIV, AIDS, and other infectious diseases in Africa, Asia and other developing countries. This initiative will:

- **Invest an additional \$100 million in HIV and AIDS prevention and treatment efforts in Africa and Asia.** The President's budget will invest a total of \$325 million in HIV prevention and AIDS treatment around the world, doubling last year's allocation. Funds will be targeted to the countries where the disease is most widespread and where our efforts will have the greatest impact. Activities include:

Increasing primary prevention efforts. To reduce the incidence of new HIV infections, this initiative will help to: implement mass education efforts and community based counseling and testing services, provide AZT short-course therapy to infected individuals to prevent further transmission, implement treatment protocols to reduce mother to child transmissions, and implement blood supply screening procedures.

Providing care and treatment for individuals infected with HIV. Currently, treatment options for HIV infected people in sub-Saharan Africa and India are limited; less than 5 percent of people know their HIV status, and health care providers are often without the tools necessary to diagnose and treat HIV and the associated opportunistic infections. This initiative will provide medical and social services to individuals with HIV, including treatment of sexually transmitted diseases, opportunistic infections associated with HIV, and tuberculosis.

Caring for children orphaned by AIDS. Together with host government and social service agencies, this initiative will invest \$10 million to provide school fees, food assistance, counseling, basic health care, and other services that orphaned children need through community mobilization programs.

Strengthening the public health infrastructure. This initiative will assist African and Asian institutions in effectively tracking the spread of HIV infections throughout the Sub-Saharan and Asian regions, in order to focus HIV and AIDS prevention and treatment resources and provide training and technical assistance to developing clinics and community based organizations delivering prevention and care.

Assisting armed forces in preventing the spread of HIV within military organizations. The DoD will work with its African counterparts to invest \$10 million to prevent the spread of HIV within military agencies throughout Africa.

Initiating HIV prevention programs in the workplace. This initiative will invest \$10 million to initiate workplace programs designed to reduce discrimination against employees infected with HIV and AIDS. Funds will also be used to develop partnerships with the business and labor communities to launch HIV prevention activities for employees, their families and communities.

- **Invest \$50 million in purchasing vaccines for developing countries.** As part of a broad Administration vaccine initiative, the budget includes a new \$50 million investment in the Global Fund for Children's Vaccines. The fund, administered by the Global Alliance for Vaccines and Immunizations (GAVI), a new, collaborative effort of UNICEF, the World Bank, the World Health Organization, and other governments and private organizations around the world.

Initial contributions to this fund will be used to purchase existing vaccines for hepatitis B, haemophilus influenzae B, and yellow fever, along with related safe injection equipment. Vaccine purchases will be administered through UNICEF, which runs an efficient immunization program today.

This fund is one step toward encouraging the development and delivery of new vaccines. The developed nations have the scientific and technological capacity to make new vaccines possible, and a renewed international commitment to purchase vaccines will encourage private research and development. The Administration is now developing further proposals to accelerate the invention and production of new vaccines, and to increase investment by developing nations in building sound delivery systems for vaccines, medicines, and other basic health services.

Return
to AIDs
file

FACSIMILE COVER SHEET
OFFICE OF THE ASSISTANT SECRETARY
INTERNATIONAL AFFAIRS
DEPARTMENT OF THE TREASURY
1500 PENNSYLVANIA AVENUE, NW
WASHINGTON, DC 20220

URGENT

DATE: September 3, 1999

PAGES TO FOLLOW: 1

TO: Ken Bernard, NSC

ADDRESSEE'S FAX NUMBER:

202/456-9390

ADDRESSEE'S CONFIRMATION NUMBER:

202/456-9298

FROM: Margaret Kuhlou

SENDER'S FAX NUMBER:

202/622-0404

SENDER'S CONFIRMATION NUMBER:

202/622-0656

SPECIAL INSTRUCTIONS/MESSAGE:

Ken, attached please find suggested text describing two sample countries whose social spending programs, including AIDS prevention, could potentially benefit from the deeper debt reduction that would be afforded under the Cologne initiative. If you need to make significant changes, please clear the substance with Bill Schuerch.

Should you need additional information, you can reach Bill Schuerch or Joe Eichenberger through the Treasury operator at 622-1260.

The recently agreed Cologne initiative to expand debt reduction under the Highly Indebted Poor Countries program, or HIPC, could play an active part in increasing AIDS prevention activities in the poorest countries of the world by freeing up resources for health care and public awareness. Two examples of countries at different stages of their battle with AIDS who will benefit from the Cologne initiative are Uganda and Tanzania. Uganda, the first country to receive HIPC debt reduction, is already using funds that would otherwise be used for debt service for increased social sector spending. Uganda's experience in reducing the rate of HIV/AIDS infection demonstrates what can be done with strong political leadership and effective programs in the health sector, primary schools, and more broadly with private organizations and religious groups. Tanzania is just beginning its efforts to combat AIDS. They will soon be eligible for participation in the HIPC program and the Prime Minister recently visited Uganda to gather lessons for Tanzania as they embark on their own AIDS prevention program.

The Cologne agreement will more than double the debt relief to be provided under the HIPC program, freeing up resources for Uganda and Tanzania and other eligible countries to finance basic social sector spending, including more intensive efforts to prevent the spread of AIDS.

For the initial countries eligible for debt reduction under HIPC, we will work with the International Monetary Fund and the World Bank to encourage them to develop pilot projects that integrate AIDS programs more effectively into each country's public health strategies.

THE WHITE HOUSE

Office of the Vice President

For Immediate Release
Monday, January 10, 2000

Contact:
(202) 456-7035

REMARKS AS PREPARED FOR DELIVERY BY VICE PRESIDENT AL GORE
U.N. SECURITY COUNCIL SESSION ON AIDS IN AFRICA

Mr. Secretary General, Members of the Security Council, Distinguished Guests, and, in particular, Honored Delegates from the Nations of Africa:

"HIV/AIDS is not someone else's problem. It is my problem. It is your problem. By allowing it to spread, we face the danger that our youth will not reach adulthood. Their education will be wasted. The economy will shrink. There will be a large number of sick people whom the health will not be able to maintain."

Mr. Secretary and Members of the Council: These are not my words. They were not uttered in the United States or the United Nations. They were spoken by my friend, President Thabo Mbeki of South Africa, as he declared South Africa's Partnership Against AIDS more than a year ago. The same words should be spoken out not only in South Africa, not only in Africa, but all across the earth. In Africa, the scale of the crisis may be greater, the infrastructure weaker, and the people poorer, but the threat is real for every people and every nation, everywhere on earth. No border can keep AIDS out; it cuts across all the lines that divide us. We owe ourselves and each other the utmost commitment to act against AIDS on a global scale - and especially where the scourge is greatest.

AIDS is a global aggressor that must be defeated.

As we enter the new millennium, Africa has crossed the first frontiers of momentous progress. Over the past decade, a rising wave of African nations has moved from dictatorship to democracy, embraced economic reform, opened markets, privatized enterprises, and stabilized currencies. More than half the nations of Africa now elect their own leaders -- nearly four times the number ten years ago -- and economic growth in sub-Saharan Africa has tripled, creating prospects for a higher quality of life across the continent.

Tragically, this progress is imperiled, just as it is taking hold, by the spread of AIDS which now grips 20 million Africans. Fourteen million have already died -- one quarter of them children. Each day in Africa, 11,000 more men, women, and children become HIV positive -- more than half of them under the age of 25.

For the nations of sub-Saharan Africa, AIDS is not just a humanitarian crisis. It is a security crisis -- because it threatens not just individual citizens, but the very institutions that define and defend the character of a society.

This disease weakens workforces and saps economic strength. AIDS strikes at teachers, and denies education to their students. It strikes at the military, and subverts the forces of order and peacekeeping.

The United States is profoundly moved by the toll AIDS takes in Africa. At the same time, we know that our own country has not achieved as much as we should or must in our own battle against AIDS. I am pleased that our Surgeon General is here today; his recent report tells us that we have not overcome the ignorance and indifference that lead to infection. We must continue to study the success of others, while we seek to share our progress with them.

As Vice President, I have journeyed four times to sub-Saharan Africa. I have taken along top health officials, AIDS specialists, corporate leaders, and physicians. We have spent long hours with African leaders, heard their ideas, and discussed their difficulties with the fateful crisis of AIDS.

It is inspiring to see so many in Africa -- not only leaders, but health care workers and community workers, mothers and fathers, and countless ordinary citizens -- fighting to save the lives of the people they love. Ten years ago, Uganda was suffering the world's highest infection rates. Today -- because the whole nation has mobilized to end stigma, urge prevention, and change behavior -- Uganda is now recording dramatic drops in the infection rate. Uganda, which used to be proof of the problem, is now powerful proof that we can turn the tide against AIDS.

We know that the first line of defense against this disease is prevention. And prevention depends on breaking down the barriers against discussing the extent and risks of AIDS. That is one purpose of this historic Security Council meeting. Today, in sight of all the world, we are putting the AIDS crisis at the top of the world's security agenda. We must talk about AIDS not in whispers, in private meetings, in tones of secrecy and shame. We must face the threat as we are facing it right here, in one of the great forums of the earth -- openly and boldly, with urgency and compassion. Until we end the stigma of AIDS, we will never end the disease of AIDS.

We also must do much more to provide basic care and treatment to the growing number of people who, thank God, are living, instead of dying, with HIV and AIDS. This requires affordable medicine, but also more than medicine; it requires that we train doctors, nurses, and home-care workers, that we develop clinics and community-based organizations to deliver care to those who need it. Today, fewer than 5 percent of those living with AIDS in Africa have access to even basic care. We know we can prolong life, reduce suffering, and allow mothers with AIDS to live longer with their children, if we offer treatment for opportunistic infections like tuberculosis and malaria.

Our ultimate goal, our best hope, is to prevent AIDS by vaccination, and we are committed to the maximum possible research. But we need to do more to harness the talent and power of the private sector. In September, in his speech to the General Assembly, President

Clinton said it was wrong that only two percent of all biomedical research is directed to the major killer diseases in the developing world. He pledged America to a new effort to speed the development and delivery of vaccines for AIDS, malaria, TB, and other illnesses that disproportionately afflict the poorest nations.

This three-part strategy of prevention, treatment, and research is the right fight. And the United States has contributed more than a billion dollars to wage it worldwide -- more than half of that for sub-Saharan Africa. But we must do more.

Last year, I announced the largest-ever increase in the U.S. commitment to international AIDS programs -- \$100 million to fight AIDS in Africa, India, and other areas.

Today, I announce America's decision to step up the battle. The budget the Clinton-Gore Administration will send to our Congress next month will include an additional increase of \$100 million for a total of \$325 million to fund our worldwide fight against AIDS. This new funding will include efforts:

- To reduce the stigma and prevent the spread of AIDS;
- To reduce mother-to-child transmission;
- To support home and community based care for people with AIDS;
- To provide care for children orphaned by AIDS;
- And to strengthen health infrastructure to prevent and treat of AIDS.

I would also like to announce here this morning that the budget we will send to our Congress next month will include \$50 million for the United States' contribution to the Vaccine Fund of the Global Alliance for Vaccines and Immunizations. This contribution -- in fulfillment of the promise President Clinton made to the General Assembly -- will help fund the research, purchase, and distribution of lifesaving vaccines in developing nations.

I am also announcing today an initiative for an expanded public-private partnership in the battle against AIDS. Indeed, in the coming months, I will convene a meeting of U.S. business leaders active in Africa, to develop a set of voluntary principles for corporate conduct to make the workplace an effective place for the education and prevention of AIDS. Let us also set this goal: through public and private efforts, in partnership with partner nations, we will attack the cycle of infection at one critical point -- its most heartbreaking point -- the moment of mother-to-child transmission.

In addition, I announce that our budget request for next year will -- for the first time ever -- offer specific funding for the U.S. military to work with the armed forces of other nations to combat AIDS. Inside our own country, our armed forces have acted effectively to prevent the spread of AIDS in the military. Secretary of Defense Cohen is ready to share our experience with our military counterparts in Africa.

We are also committed to helping poor countries gain access to affordable medicines, including those for HIV/AIDS. Last month, the President announced a new approach to ensure that we take public health crises into account when applying U.S. trade policy. We will cooperate with our trading partners to assure that U.S. trade policies do not hinder their efforts to respond to health crises.

But to win the ongoing global battle against AIDS, we must also fight the poverty that speeds its spread. In June, in Cologne, we joined with our G-7 partners in the Cologne Debt Initiative, a landmark commitment to faster and deeper debt relief for the heavily-indebted poor countries.

We will continue to engage our G-7 partners to bring greater resources to this effort. Today I challenge the world's wealthier, healthier nations to match America's increasing commitment to a worldwide crusade against AIDS.

But more money is not enough. We must also make sure that more money has more impact. Next July, the global community will gather in Durban, South Africa for the 13th International AIDS Conference. There are many inspiring efforts to fight AIDS all around the world. Right now, they amount to many isolated efforts, not a single focused assault. We must knit together the separate initiatives by local, national, regional, and global organizations, to take maximum advantage of their synergy and success. We will work with the organizers of the Durban Conference to advance this essential objective. It is essential, because how we speed the money, and how effectively we target it, not just how much we spend, will determine how many lives we save.

AIDS is one of the most devastating threats ever to confront the world community. Many have called the battle against it a sacred crusade.

The United Nations was created to stop wars. Now, we must wage an win a great and peaceful war of our time -- the war against AIDS. For all, here and around the world, willing to enlist in this cause, let us hear and heed and take heart from the words of an African poet, Mongane Wally Serote:

"remember
the passion of our hearts
the blinding ache and pain
when we heard the hysterical sobs
of our little children crying against fate

we heard these, we knew them, we absorbed them
but we surged forward
knowing that life is a promise, and that that promise is us..."

That promise is us. We here in this room -- representing the billions of people of the world -- we must become the promise of hope and of change. We must become the promise of

life itself. We have the knowledge, the compassion, and the means to make a difference. We must acknowledge our moral duty and accept our great and grave responsibility to succeed.

We must make the promise and keep the promise to prevail against this disease -- so that when the story of AIDS is told to future generations, it will be a tale not just of human tragedy but of human triumph. And the moral of that story will be the capacity of the human spirit to summon us in common cause, to defeat a common foe, and secure the health and hopes of so many of our fellow human beings.

May God bless all who have suffered from this disease. May God bless the united effort of our united nations to end it -- soon and forever.

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