

Analysis of HSRC Report
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On 5 December 2002, Human Sciences Research Council (HSRC) reported the results of a household survey entitled "Prevalence of HIV / AIDS in South Africa, behavioral risks and mass media". HSRC is a "social science research organization", yet it conducted a clinical study using a saliva test to measure the prevalence of antibodies to HIV in 8428 South Africans. The first question that jumps out is why did HSRC and not the Medical Research Council (MRC) publish this report on the prevalence of antibodies to HIV that used the highly problematic saliva test? I will leave criticism of the antibody test and other technical inconsistencies and contradictions to others. I prefer to address the political and professional bias that permeates the entire HSRC report, which in my opinion is clearly designed as propaganda to pressure Thabo Mbeki's government to accede to the hegemony of the US-based AIDS establishment.

The study conducted by HSRC was based on a number of unproved assumptions: 1) HIV causes AIDS, 2) both HIV and AIDS are contagious and sexually transmitted, 3) tests for antibodies to HIV indicate that a person is infected with HIV, 4) testing positive for antibodies to HIV is equivalent to being sick with "HIV / AIDS", 5) weight-loss, diarrhoea, fever, persistent cough, and TB in HIV-positive people are somehow different from clinically indistinguishable weight-loss, diarrhoea, fever, persistent cough, and TB in HIV-negative people, 6) the anti-HIV drugs prolong or at least improve the quality of life of HIV-positive people compared to those who do not take the drugs.

The HSRC report explicitly states assumption 1 in section 3.6.1 "HIV / AIDS Knowledge" on page 82. "[I]ncorrect responses mean a distinctly incorrect view...". An "incorrect view", as tabulated in Table 40 "HIV knowledge by age of respondent" on page 82, is that HIV does not cause AIDS. "If we add," the authors say, "the don't know and incorrect responses on this item we derive a figure of 24.3% of respondents who have either incorrect knowledge or are uncertain about the causal relationships between HIV and AIDS." The authors suggest that the incorrect and undecided views resulted from "recent debates in the country discussing the fact that HIV causes AIDS [producing] unintended effects, including greater confusion about prevention needs in some subgroups of the population." The authors of the HSRC report insist that people hold only "correct views", which are the authors' views, and are even intolerant of undecided views. This is supported by the fact that the authors of the HSRC report did not cite nor discuss any of the issues raised in the March 2001 interim report of the Presidential AIDS Advisory Panel. Furthermore, the HSRC authors did not mention that the six assumptions above are explicitly questioned or disputed by a third of the members of the Presidential AIDS Advisory Panel. The authors of the HSRC report also failed to mention the March 2002 ANC document "Castro Hlongwane Caravans, cats, geese, foot & mouth and statistics: HIV / AIDS and the Struggle for the Humanisation of the African" that specifically professes many "incorrect views".

Section 3.8 "Access to media information on HIV and relationship of media

exposure to knowledge and behaviour” that begins on page 92 is an analysis of how South Africans get information. One use to which such a thorough analysis of information can be put is to identify the sources that may disseminate information contributing to the “incorrect” and undecided views of 24.3% of South Africans. The authors of the HSRC report state that, “Although there is a general awareness of HIV / AIDS, most respondents still require further and more detailed information.” It’s a pity the authors did not report examples of the more detailed information that South Africans want. Are they asking the same questions that can be found in the interim report of the Presidential AIDS Advisory Panel? Are they asking for answers to the same questions raised by the ANC and Thabo Mbeki himself?