
THE

House of Assembly Debates

(OFFICIAL REPORT)

FIRST SESSION 1999 – 2004

HOUSE OF ASSEMBLY

Tuesday, December 11, 2001.

Pursuant to the adjournment, the House of Assembly met at 11.20 a.m. on Tuesday, December 11, 2001.

PRESENT

His Honour I. A. ROETT, G.C.M., B.A., Dip. Ed. (Speaker)

His Honour J. M. EDGHILL, J.P. (Deputy Speaker)

Hon. Sir Henry FORDE, K.A., Q.C., M.A., LL.M.(Cantab.)

Rt. Hon. O. S. ARTHUR, M.Sc. (Econ.) (Prime Minister, Minister of Finance and the Civil Service)

Mr. D. J. H. THOMPSON, LL.B. (Hons.) (Leader of the Opposition)

Hon. Sir HAROLD St. JOHN, K.A., Q.C., LL.B.

Mr. L. R. TULL, Q.C., M.A. (Oxon.)

Hon. Dr. R. L. CHELTENHAM, Q.C., M.A., M.Sc. (Econ.)

Hon. Miss B. A. MILLER (Deputy Prime Minister, Minister of Foreign Affairs and Foreign Trade)

Mr. G. W. PAYNE, LL.B.

Hon. R. C. EASTMOND, J.P., B.A.(Hons.), Dip. Ed., LL.B. (Hons.), L.E.C. (Minister of Labour and Social Security)

Mr. D. CARTER (Chairman of Committees)

Hon. R. N. GREENIDGE, B.A., LL.B. (Minister of Education, Youth Affairs and Sports)

Hon. G. A. CLARKE, B.Sc., Dip. Ed., J.P. (Minister of Housing and Lands)

Hon. R. D. MARSHALL (Minister of Public Works and Transport)

Hon. H. F. LASHLEY (Minister of Social Transformation)

Hon. R. St. C. TOPPIN, LL.B. (Minister of Commerce, Consumer Affairs and Business Development)

Mr. D. St. E. KELLMAN

Hon. Miss H. E. THOMPSON, LL.B. (Minister of Physical Development and Environment)

Hon. Miss M. A. MOTTLEY, LL.B. (Attorney General and Minister of Home Affairs) (Leader of the House)

Mr. M. Z. WILLIAMS

Mr. T. A. PRESCOD, B.A.

Rev. J. J. S. ATHERLEY, B.A., B.Sc., J.P.

(Parliamentary Secretary to the Attorney-General and Minister of Home Affairs)

Mr. D. T. GILL, B.Sc.

Hon. N. A. LYNCH, B.Sc., M.B.A. (Minister of Tourism and International Transport)

Hon. A. P. WOOD, B.Sc., M.Sc., M. Phil., J.P. (Minister of Agriculture and Rural Development)

Hon. R. R. FARLEY, B.Sc., J.P. (Minister of Economic Development, Industry, International Business)

Hon. Miss C. Y. FORDE, L.C.P., J.P. (Minister of State in the Ministry of Education, Youth Affairs and Sports)

Prayers were taken by Canon Father Ivan Harewood.

Mr. SPEAKER: The House is now in session.

MINUTES

Mr. SPEAKER: The Minutes of Tuesday, December 4, 2001.

Hon. Miss M. A. MOTTLEY: Mr. Speaker, I beg to move that the Minutes for the Honourable the House of Assembly for its meeting of Tuesday, December 4, 2001, which Minutes have been circulated, be taken as read.

Hon. R. C. EASTMOND: I beg to second that, Sir.

Mr. SPEAKER: If there are no corrections or observations, then let these Minutes stand confirmed.

ANNOUNCEMENTS BY HIS HONOUR THE SPEAKER

Mr. SPEAKER: I am to report to this Honourable House that I am in receipt from the Accountant General of the Accounts and Statements for the month of August, 2001.

PAPERS

Hon. Miss M. A. MOTTLEY: Mr. Speaker, I am commanded to lay the following:

1. Report of the Public Enterprise Investment Fund for the quarter ended September 30, 2001.
2. Report of the Social Investment Fund for the quarter ended September 30, 2001.
3. Annual Report of the National Assistance Board for the period 1998 to 1999.

FIRST READING OF BILLS

Hon. Miss M. A. MOTTLEY: Mr. Speaker, I beg to move that the Land Tax (Amendment) Bill, 2001 be read a first time.

Hon. R. C. EASTMOND: I beg to second that.

OBITUARIES

Hon. Miss M. A. MOTTLEY: Sir, I rise to pay tribute for the life of James Nathaniel Clarke, late of St. Philip who is the father of the Honourable Member for St. Philip North. Mr. Clarke would have passed away a week before last at the age of eighty-one years old having lived a prolific life and one of service rendered to his community and indeed to his family. It is of significance to me having not met Mr. Clarke that those who have spoken of him and those who turned out to pay their last respects to him on Saturday morning all were able to speak keenly of a man who had a strong sense of duty to his community and to his family and one which was borne of not being over-awed by the circumstances in which he found himself both at his birth and during his life.

It is also of significance to me, Sir, that Mr. Clarke who was the father of six children but also the father of six step-children and, I am told, treated all twelve as if they were all his own was able to achieve success in guiding them through life such that each one in his or her own right has been able to achieve significance in their chosen path.

I am reminded, however, Sir, that in the eulogy which was delivered of him, his son, Mr. Henderson Clarke, indicated that he may have had disappointment in respect of

what each child should have done but that cumulatively his overall wishes were still met by the pool of children even if the individual child did not meet the individual expectation.

Suffice it to say that for a gentleman born in his circumstances and being responsible for the lives of so many children in a Barbados of earlier times, for those children to have all achieved what they have, is a statement of absolute credit to the character and life of Mr. Clarke.

It is also significant to me, Sir, that he obviously had a keen sense of loyalty, having spent almost some 35 years as Superintendent at River Plantation. I am sure that others in here will speak of his sense of loyalty in other areas, including politically, where he would have followed his loyalty to one political organisation for all of his life with the exception of the occasion of his son's entry into politics which allowed him to step back out of active politics to render support to his son but not actively to work against the party which he supported all of his life previously. That is the test of true character. At the end of the day, Sir, family is important and he clearly reflected that by giving his son his support but he did not seek to compromise his beliefs by openly creating any unfortunate scenes or unfortunate difficulties.

I believe, Sir, that in circumstances where we are today, it is important for us to chronicle the lives of a number of ordinary Barbadians who by dint of their character and by dint of their effort and sacrifice have really paved the environment which we benefit from today and the standard of living of which we boast so often. It is persons such as Mr. Clarke who quietly went about their business, who understood the importance of continually learning and continuous self-education – I am told he was an avid reader – who also understood their responsibility to their communities, particularly to assist those who were not as fortunate as they were in respect of the benefits that would have accrued unto them during life.

I want therefore on behalf of the Government to register our condolences to the Honourable Member for St. Philip North and to his family to say that we are truly saddened by the passing of his father and that we appreciate that he, too, would have been shaken, particularly when you have had the presence of a parent for as long as he has, to have them no longer with you must be a very difficult thing to undergo.

Sir, I believe that Mr. Clarke's example as a citizen of St. Philip, and I use that term because St. Philip people like to feel that they have a strong, distinct identity. His contribution to that community and to that parish has clearly gone with a level of distinction and has clearly been noticed by those around. There was a clear appreciation at the funeral on Saturday morning by the residents of St. Philip

and that was evident by the massive turn out on that morning. I believe, Sir, that the appreciation for him extends not only in the community sphere or in the sphere of politics but also in the sporting arena where I am told he was also able to display very keen skills both as a sportsman at first and also later as a fan of various cricketing teams and other sports that were played in the parish.

I want also to ensure that an appropriate Resolution can be forwarded not only to the Honourable Member for St. Philip North but to all the members of the family indicating the deep sadness which this House feels on the passing of James Nathaniel Clarke after a life of distinction and service to his community, to his family and indeed to the organisations to which he belonged during the course of his life.

Thank you, Sir.

Mr. D. J. H. THOMPSON: Mr. Speaker, I rise to associate the Opposition with the remarks led off by the Honourable Member for St. Michael North East and to express our condolences to the Honourable Member for St. Philip North on the passing of his father, James Nathaniel Clarke.

I believe the Honourable Member for St. Philip North would have benefited in two very significant ways from his father. At a personal level, being his son, the attributes that he would have passed on to him which have been so well explained by the Honourable Member for St. Michael North East which are part of the example which the Honourable Member for St. Philip North in his private and public life and profession displays, but he was also fortunate to have a father whose politics would have been of considerable benefit to him when he chose to run in the St. Philip North constituency. His father had been a long-standing and ardent and very hard-working supporter of his predecessor and also of the Democratic Labour Party in that constituency. No doubt he was able to transfer to his son, on the theory that blood is thicker than water, much of that support.

At a personal level, I lived right on the boundary of River Plantation and I know from my own experience that the Honourable Member for St. Philip North was able to benefit considerably from the fact that his father was a very well respected, upright person in the community whom people generally felt worked hard, earned an honest day's living and produced some outstanding children and was supported very strongly by a large network of friends in the St. Philip constituency.

11.30 a.m.

River Plantation was, at one time, one of the more productive sugar plantations in Barbados and it eventually came under the control of Government. Those who are familiar with the agricultural industry will tell you that River

Plantation was a difficult one to manage because it was a plantation that when there were high levels of rainfall large tracks of lands would be submerged. Eventually the River tenantry had to be broken up and moved because of the problems with drainage and access.

My party is and will be eternally grateful for the work which James Nathaniel Clarke would have done for us down through the years. I am sure members understand when you have people in the community who are upright and of good standing that they are a shining beacon which others are able to take up and carry forward with great success.

Prior to my association with the Honourable Member for St. Philip North, my parliamentary representative, I met and worked with a sister of his and I have found her and the Honourable Member to be very articulate members of the St. Philip community. The Honourable Member for St. Philip North is a bit more meticulous and methodical and not given to as much emotion but you can tell that it came from a strong commitment to education by both parents. The Honourable Member for St. Philip North needs to take the example set by his father and seek to transpose his work in the constituency into the lives of other young people so that they will aspire to the high ideals of service, dedication, loyalty and hard work to make Barbados a better place.

I join with the Honourable Member for St. Michael North East and all other Honourable Members in supporting this Resolution. I extend my condolences to the Honourable Member for St. Philip North and regret that despite my promise, I was not able to attend the funeral due to another prior engagement. I hope that the loss which the family feels will be tempered by fond recollections and memories of the contribution that James Nathaniel Clarke made to his family and to his community through the work that he did throughout his lifetime for the people of Barbados.

Hon. R. R. FARLEY: Mr. Speaker, I rise to express my condolences on behalf of the people of Christ Church East in the passing of James Nathaniel Clarke, who is the father of the Member of Parliament for St. Philip North along with his five siblings.

I was touched by the funeral service held for Mr. Clarke last Saturday morning. What I found most memorable about it, was that there was nothing ritualistic about anything that was done. Sometimes you attend these ceremonies and you get the sense that people are doing what they are required to do but what I sensed at that funeral service was an outpouring of love, respect and genuine feeling from all who were in attendance.

The eulogy was very descriptive and gave a clear indication of the life and work of Mr. Clarke and it was

clear that there, in rest, was a man who was loved and respected by all and who over the period of his 81 years had made a tremendous contribution to the building of a community, parish and nation.

I did not know him personally but the example which one can take from the way his children, in the way they conduct themselves throughout their various endeavours in our country is a clear indication of the nature of the example which they were seeking to follow.

He was clearly a person who was a pillar of his community. He was the pillar of the community as an employer being a superintendent and manager of a plantation within the community, as a father with a number of children, as the village barber, as the mentor to several persons in the community, as a political activist and as a sportsman.

It is important to note as well that from all indication he did not embark on any of these activities for personal gain but out of a wider sense of wanting to advance the interests of the people of St. Philip. Sir, it is interesting to note that as an employer in those days, Mr. Clarke, as a superintendent of the plantation would have been one of the major business persons in the community. It is also interesting to note in the accounts of persons who spoke of him that he was well loved as an employer. He was fair as well as firm and those who worked for him knew they were required to get on with the job but at the same time there was no loss of love there as well.

His contribution touched all areas of national development. If you look at the various roles he played throughout his life, we can identify all of the important aspects of national development. He was an example of strong family life with his children and step children and if all of us were to follow that example of commitment to family then the society would have no problem. Barbados owes much to the expertise and even husbandry, which was demonstrated by persons of his generation in the way that they utilised what, in those days, was the only significant national foreign exchange earner and generator of wealth, that is the land that is used for agriculture and the husbandry which they displayed, is something to which we all owe a debt of gratitude.

11.40 a.m.

I would hope that the expertise, which has been developed by persons of that generation, will be appropriately harnessed and all of the information which they had. Unfortunately this information is not written anywhere. Certainly from speaking to my grandfather and father, whom were all involved in agriculture, I know that they know better than a person with a PhD in Agriculture. They knew when to plant, how to plant and how to space the plants. I would hope that the Minister of Agriculture, who is

part of that St. Philip community, would ensure that his officers would be able to benefit from the knowledge of these giants of agriculture.

Asides.

Hon. R. R. FARLEY: Sir, he also had a sense of community, which is an important aspect of national development. That sense of community was expressed by what is, thankfully, a continued tradition, the tradition of the village barber. The village barber, like the barber in my district, is not just a man who cuts hair. It was not a place you would enter and leave. It served as the unofficial meeting place for the people of the community, particularly the men of the community.

Sir, you did not go to the barber only to get your hair cut and then leave, it was the meeting place. Sir, predating the community centres, and sporting pavilions and other modern facilities, it was the key man's house in the community where hair was cut. If it was not the barber, it was the butcher, but they were strong men in the community who served the function of organiser of a place where the men would meet, discuss issues of the day and learn from one another. It was in those traditional cultural settings, much of the knowledge of the older generation of men was passed on to the younger generation, and that was important.

I am sure that as 'CD', 'Super' or several of the other names by which he was affectionately known, Mr. Clarke, as he performed that important function of grooming of the men in his community, he also imparted of his knowledge and wisdom to several generations.

Sir, it was also touching that, by way of information provided in the eulogy, in those days he was privileged to have one of the radio receivers in the community. I heard of stories of persons of the older generations travelling distances to go to hear radio transmissions, particularly when the West Indies were playing cricket in Australia or England, or when there were boxing matches and other activities going on. We also heard unfortunate stories of persons who were also privileged and were not inclined to share this privilege with persons of the wider community, not so with 'CD', 'Super', James Nathaniel Clarke. All were welcomed at his home to partake of the fact that he had access to the international community.

His interest in sports was not limited to boxing. He was also somewhat of a cricketer. 'Cappy' Greenidge may claim that it is really in his gene to have been able to have some kind of cricketing ability but not as well as you, Sir, Mr. Speaker, as you were his captain and he has to follow your fine example.

Mr. SPEAKER: Captain of the elder Clarke or the Honourable Member?

Asides.

Hon. R. R. FARLEY: Sir, you were captain of the Honourable Member for St. Philip North, Sir.

Asides.

Hon. R. R. FARLEY: Mr. Speaker, the contribution of Mr. Clarke to St. Philip's sports, coincided with a period of steady, continuous, progressive developments which have seen St. Philip rise from the situation of being not on the list, a non-entity as far as sporting talents, to being a national leader in sports in several spheres but more particularly in cricket and football. His contribution to sports in St. Philip and to St. Catherine Sports Club, in particular, is important. In fact, it is, perhaps, lamentable but true in some situations today, that there are a number of clubs which are not able to continue to hold the interest and attract the participation of the elder statesmen of their community, in the way that Mr. Clarke would have been attached to his sporting activities and clubs in the parish. I hope that clubs would surround themselves with these elder statesmen, as they have much to offer, not only in the narrow field of sport but in the building of excellent men and women.

Finally, on the theme of the sense of community, which many of us need to have, that sense of community was also expressed in his political activity. It is interesting to note the reports that his involvement in politics was not by way of seeking to advance his interest. His involvement in politics was as the spokesman for his community to say to the Member of Parliament, to his chosen political party and to whoever would listen, that this is what needs to be done for these people in this community. It was in that role, as a man with his feet firmly planted on the ground, as a friend, confidant and a mentor of every citizen of his community, he was able to articulate their needs and concerns, and to use his position within the official structure of his chosen political party to ensure that those interests were met.

Sir, such was the man whose passing we commemorate today. He would be surely missed by his community, the wider St. Philip and, indeed, all of us in Barbados. I would want to, on behalf of the constituents of Christ Church East and my family, express our condolences to all of the children of the late James Nathaniel Clarke and that he may rest in peace.

I thank you.

Hon. Miss H. E. THOMPSON: Mr. Speaker, for those of us who journeyed to St. Catherine Church on Saturday morning, which the Honourable Member for St. Philip North

has advised me, is not only a small road but it is on the eastern tip of St. Philip. We could not help but be overwhelmed by the number of persons from St. Philip and all over Barbados who came out to join with his family in the mourning of their patriot.

Many of us did not know him but one must commend one of his sons who had the strength of character – I think it must have been a very difficult thing at the passing of a parent to deliver the eulogy at a funeral and to do so with such aplomb. He painted a picture of a man of tremendous character and personality, a man of integrity and strength. He made James Nathaniel Clarke live for those of us who had never had the opportunity to meet him.

I could not help but reflect as that son spoke about how James Nathaniel Clarke must have represented the very best of Barbadian tradition and culture, the very best of generations and Barbadians of a particular generation and it was seen in so many facets of his life, as we learned that morning. Barbadians of that generation valued education because they, themselves, being the children and grand children of former slaves, knew what it was like to be ostracised from social mobility. We in Barbados must be grateful that he has adopted that attitude, because not only did his children benefit, but also his stepchildren who are placed throughout the educational system in Barbados. The Honourable Member for St. Philip North, in leading the policy direction in the Ministry of Education, but himself having been a teacher with much skill for many years and having four other siblings, including step-siblings who, themselves, are involved in the training of young minds in Barbados and also in the administration of education throughout the country.
11.50 p.m.

Therefore, Mr. Clarke's first legacy to Barbados is through his children's contribution to the educational life of this country. Sir, there is something that I learnt and found very interesting. Many persons of today's generation tend to scan the headlines of newspapers and to read stories very selectively, but people of Mr. Clarke's generation, very much like he did, tend to read the newspaper from cover to cover. We learnt that even on his sick bed that members of the family had to read the newspaper for him from cover to cover, taking in every single news article. Such was his quest for knowledge even as he lay dying. It is, that being born in an era where you were excluded from access to knowledge, where when the opportunity came that you so valued it, that you wanted to be informed about everything around you. I believe that we saw, as we learnt about the wide range of activities in which he involved himself within the community of St. Philip that quest for knowledge was manifested not only in the knowledge he was able to assimilate personally but then the use to which he put that knowledge for the benefit of the wider community.

He was, as I understand it, an icon in St. Philip politics. It was interesting to hear the observations made of him by a former Member of this House, Mr. Warrick Franklyn who was, himself, a Parliamentary Representative for St. Philip North. It is interesting how political rifts and attitudes developed in his family because we learnt from Mr. Franklyn how this very deep and committed Dem, this loyal supporter of the Democratic Labour Party and one of those most effective canvassers, was placed in a very difficult position when his son decided that he was going to run for what Mr. Clarke must have seen as a long-standing enemy in the BLP. Sir, faced with that conflict, Mr. Clarke made a very interesting choice when confronted with this dilemma that his son was proposing to be a candidate for the BLP when he had been a Dem. Mr. Clarke, we are told, made two comments which I thought were interesting, (1) he was not going to slap tar with him, and (2) fools rush in where angels fear to tread. But we have learnt that like many Barbadians, Mr. Clarke's life was governed by a number of sayings which represented a philosophy and an attitude to life that they tend to pass on to their children. Growing up in Barbados, we have sayings like 'don't hang your hat higher than you can reach it' *et cetera*.

Sir, even in supporting him, Mr. Clarke applied the philosophy that had governed his life and his approach to things, but still had to say that after all he is his son, so he will still be supporting him even though he did not actively get out and canvass for him in the way that he would have vigorously wanted to for the other party that he was supporting.

Sir, it is in that that we see what was perhaps one of Mr. Clarke's greatest strengths; the commitment to family whatever the circumstances. The notion that children, whether step-, grand- or children of your loins are, in fact, to be valued. Their contribution to be nurtured and they are to be supported and to be guided in making their own choices as adults, and as a parent, he must respect that choice. That is what Mr. Clarke did and even though his son was doing something that he may not have wished for him, he was able to say, that is not the choice that he would have made for him but he was an adult and Mr. Clarke supported him in his choice. Sir, even though he was saying things that betrayed his true feelings, he was still giving his son the kind of support that a son, in those circumstances, would have expected from his father.

Sir, it speaks to part of the strength of Barbadians of that era; they formed very large families, had very limited resources, earned small salaries, but found a way to so prudently manage their resources, that they were able to adequately care for all of their children, give love to them and make them feel comfortable in their homes. So often, we hear Barbadians say, 'I grew up poor but I did not know I was poor, because my mother made us so happy and comfortable.' That was part of the experience of the family

of James Nathaniel Clarke who had 12 children. To both his own and his stepchildren, he found the time and resources to care for them while, at the same time, finding opportunities to contribute significantly to the life of the community in which he was born and worked. We heard how he, himself, even without formal education, clearly displayed qualities of tremendous leadership - in sports, giving guidance, being a mentor to young people and to his own son 'Cappy' who likes to feel that he has some skills on the field; skills that are not historically recorded anywhere except in his own head but in so far as he has given us an annotated commentary of his exploits on the field, we accept that there are very real figments of his imagination but that his father, from every thing we are told, he was able to offer and give guidance and courtship to the younger people of the St. Philip community.

It is interesting to note that his skills at management not only extended to his own personal management of his home and family but that he, even without formal education, came to be a manager of a major agricultural entity of the day and by all accounts, effectively managed that organisation, especially the human resources element. We have seen in recent times how the handling of our human resources is not the happiest, if in fact, I should use that expression. He was able to manage men and to manage them well and to deal with competing interests of people who wanted to be promoted, who had multi-tasking to do - indeed, all of the challenges that one encounters when faced with management of any organisation and the handling of one's human resources.

Sir, the fact that he was so well respected in his community spoke to the quality of management skills that he had, because if those skills were not properly exercised he could have alienated a whole community and he did not. People were able to come to him and ask for advice and guidance and were treated with respect because of the quality of management and the strength of character that he exhibited.

Sir, I think that we have to thank Mr. Clarke, because when the history of Barbados is written, in my view, it is going to be interesting. I am not sure that any of the historians are currently looking at it, but the way that institutions and parishes in Barbados have taken precedence in both the community and national life at any given time, it is interesting to see that so many Prime Ministers could have gone to one particular secondary school. Interesting too, I think, it will be when we look at St. Philip to see how the culture of St. Philip has emerged to the point where they describe themselves as 'Philippines', where Red Plastic Bag can come to the National Stadium and bring an entire 'posse' with him and if the judges made the mistake of not allowing him to compete at all, the Stadium is only half full.
12.00 noon

The point I am making, Sir, relative to Mr. Clarke is that there must have been individuals of tremendous personal stature and character who, by their own contribution to community life, have caused St. Philip to emerge as a parish which people speak of with significance to the point that they classify people from St. Philip, with a whole nomenclature called, Philipines.

Therefore, we have to thank Mr. Clarke and others like him for the contributions that they would have made to the growth of community life and community spirit in St. Philip, and the fostering not only of children but of people in the wider community, so that a culture of music has emerged from St. Philip and a culture of cricket has emerged from St. Philip. In fact, for those of us who study Barbadian accents, St. Philip is one of the parishes of Barbados which has a very strong and very individual Barbadian accent, if you know the lilt of the language.

Aside.

Hon. Miss H. E. THOMPSON: I would not say that, Sir.

If you know the cadence and rhythms, with which people from various geographical districts in Barbados speak, you are able to pick up the differences in accents. It is clear when you hear people from St. Andrew, their pronunciation of particular words is very different from somebody who comes from the City and St. Philip has its own peculiar accent. It would be interesting, Sir, from a point of view of a social study, to see how social factors and community factors have fused in St. Philip to cause St. Philip to emerge as one of the more important parishes in our constituency.

Sir, I am happy to be able to join with my colleagues in paying tribute to the life and contribution of the late James Nathaniel Clarke and also to thank him not only for his contribution to St. Philip but in fact, I think that we must thank him, Sir, that one of his sons who grew up in really humble and simple circumstances, has emerged as a leader in this country and he is making a significant contribution to our national development.

Sir, I extend to the Honourable Member for St. Philip North and to all of his family and indeed to the entire St. Philip community to whom Mr. Clarke clearly made such an outstanding contribution, my own condolences and those of the people of St. James South.

I am much obliged to you, Sir.

Mr. D. St. E. KELLMAN: Mr. Speaker, I rise also to give my condolences to the family of the late James Nathaniel Clarke. Sir, even though he was from St. Philip, I

did not know him personally, although there is a possibility that I might have known him, but not knowing that that great man would have been the father of the MP for St. Philip North, because of my connection with the Barbados Sugar Industry.

In giving a tribute to Mr. Clarke, I could easily be speaking about Mr. Lescar Carrington, a man whom we call Sam Pooner, better known as Mr. Warner, from Checker Hall, or Mr. Sam Baker from Pie Corner or Mr. Sylvan Yearwood from Checker Hall. Sir, there are men within this community, who, when you look at what they have contributed to the community, one sometimes wonders why these men have not been rewarded or honoured for the amount of work they have done for their communities. For the simple reason, Sir, I was not there to see Mr. Clarke but I can bet you that in St. Philip whenever there was a topical issue, that Mr. Clarke would have been there among the youngsters in the community, guiding them and explaining to them the true values of things as he would have seen them.

Sir, men like Mr. Clarke are sadly lacking in Barbados because even though they worked hard, they found time to give back some of what they learned to the youngsters in the community. Sir, I have always said that we need to find people within Barbados who can find time to go back to the communities and guide the youngsters of Barbados.

I am telling you, Sir, if we were to carry out a survey in St. Philip, even though I do not know him, Sir, you will find that there would have been many young men and women who would have been prepared to say, that because of Mr. Clarke, I have been able to be guided in this particular direction.

I am saying, Sir, if he probably was from a different social background, he would have been a 'Sir' or something like that today. That is why, you would have heard me on many occasions, Sir, lamenting the fact that the true builders of our community are not rewarded for the hard work they have given to the community.

I am saying, Sir, at this juncture, we need to stop and reflect on what is happening within our communities to see how we could apply the Mr. Clarke's theory, in order to solve the problems within our communities.

Mr. Speaker, the River Plantation was one of those plantations owned by the Government and anyone who understood the history of plantations bought by the Government would know that the Government would have thought it was important to keep that particular plantation in agriculture and, therefore, they would have made the bold decision to compulsory acquire or purchase that plantation,

to make sure that our agricultural produce remains at the same quantities or higher quantities as they were previously. This meant that Mr. Clarke would have worked at one of the most difficult plantations. It also meant that his contribution had to be much higher than those farmers and workers who worked on the plantations that did not have those particular problems. Therefore, his contribution must be truly measured and appreciated.

It is true, Sir, there is another value of Mr. Clarke that must be appreciated and that is his loyalty and honesty. Mr. Clarke was not scared to tell his son about his particular feeling, neither was he scared to tell the person that his son was running against, of his particular problem and to give a commitment to both and it is important that Mr. Clarke stood for a principle and lived by that particular principle. People like those must be appreciated, Sir, and that is why I have said, we need more of the Mr. Clarkes within our communities.

I am also saying, Sir, that if there was a well near the main road in St. Philip and there was a street light, you would have been able to see Mr. Clarke on that well, educating the youngsters in the community. I strongly believe, Sir, that Mr. Clarke would have been giving advice to all those involved in the Ministry of Agriculture, whether it was about planting sugar cane, the reaping of sea eggs or planting cotton. A lot of people in this parliament would not have known, Sir, that River was one of the front leaders in diversifying cotton. As I said, earlier, Sir, although I did not know the man I am prepared to make this statement because of the production that River delivered to the cotton crops. 12.10 p.m.

They used to produced it very well. I am saying that Mr. Clarke saw the true potential of the cotton crop in Barbados but the only problem is he will not now get the opportunity to see the true potential of the cotton crop where we can brag that we have moved from the primary to the tertiary stage. Sir, I hope that not too long from now somebody will be able to take the message to Mr. Clarke that what he wanted to see is finally being achieved in this country.

I knew the Honourable Member for St. Philip North sister before I knew the Honourable Member. Let me explain that because all of a sudden I can see that the Speaker has a different face. It was around 1994 in St. Martins when she said to me that she is going to deliver the seat. She did not say that her brother was going to deliver the seat, Mr. Speaker, she said that she was going to deliver the seat. I do not know how she would have known about me but she told me that and I remember it very well because a meeting was on the west side and she was in the shop on the east side but she was confident that she had the capacity to deliver the seat to her brother and she was prepared to do so. Sometimes I

somehow wonder if the brother won the seat or if the sister won the seat for the brother because I am convinced that the sister might be more of a politician than the brother.

Asides.

Mr. D. St. E. KELLMAN: I am saying, Mr. Speaker, that the politics of that family is very strong and the Clarke's name is very outstanding in St. Philip and it is a name that we need to make sure that the locale...

Asides.

Mr. D. St. E. KELLMAN: I said the Clarke's name in St. Philip, I did not say in St. George North.

We have to make sure that we continue to appreciate the value of the Clarke family and continue to have fond memories of that family. We know that sometimes there might be a little slip but we will make sure that we keep that good relationship with the Clarke family.

I have said on more than one occasion that there is a commonality between the people of St. Philip and the people of St. Lucy. When one looks at the landscape and everything of the two parishes and see their strong beliefs especially the belief in themselves – I am sure that on Sunday night as I was celebrating, the Honourable Member for St. Philip North was also celebrating.

Sir, I want to give my condolences to the Honourable Member and his family. I also want to say that we need to understand that if we are to correct the social problems of Barbados that it is people like James Nathaniel Clarke and his comrades who can do a lot to solve this particular problem for us.

I am grateful to you, Sir.

Hon. R. C. EASTMOND: Mr. Speaker, it was in October of 1970 that I met a gentleman who in time was to become the current Honourable Member for St. Philip North. What struck me at the time when I met the current Honourable Member for St. Philip North was his sense of discipline, his humility and the fact that he clearly knew what he wanted in life.

I, therefore, came to the conclusion that he has had such a rearing and an upbringing that whoever would have been responsible for raising him, as we say in Barbados, would have done an excellent job in providing focus to a young man who clearly was, even in 1970, so astute that one could only conclude that he would have been going places.

In time, I met the siblings of the Honourable Member for St. Philip North. I met two chaps, one is called 'Quartz' and the other is called 'Styles'. I also met Eleanor and 'Pam-Pam'. These are the foremost siblings of the Honourable Member for St. Philip North. For years I have been friendly with the Greenidge and the Clarke family. There can be no question that the late James Nathaniel Clarke would have been a person who, despite growing up in a Barbados that was not kind to most people of his hue in those days, would have decided through sheer hard work and discipline to do his utmost for his family and for himself.

I was told that he was a keen sportsman in his early years practising outdoor sports and I was also told that in his last years he was one of the foremost dominoes players this island have ever seen.

Mr. Speaker, I am also aware, that in the context of community life in the wider parish of St. Philip, James Nathaniel Clarke would have achieved such a measure of personal popularity and influence that he would have rallied scores and scores of St. Philip people to particular causes which would have evolved in that parish.

One of the distinguishing features about the parish of St. Philip is its community spirit. Whether that community spirit manifest itself in sports or in things other than sports there have always been particular persons from the parish who have stood out as parish icons. I remember in the northern section of St. Philip there was a gentleman called Blades who has been known to have mobilised communities to various forms of action. There would also have been many others in the parish but among them all, James Nathaniel Clarke would have stood out as a strong family man, as a no nonsense man, as a man with the common touch, as a man who was God-fearing and as a man who decided that come what may his family had to achieve under his guidance.

The self-taught man, Mr. Speaker, is fast becoming a rare species in Barbados but in an era when secondary education was by no means commonplace in this country, persons of the ilk and calibre of James Nathaniel Clarke would have applied themselves to teaching themselves. I have a lot of time for persons who, despite the disadvantage and disability of not receiving a formal education in a structured educational environment, still decided that they want to learn. James Nathaniel Clarke would have come along in an era before a number of teaching aids where the principal methods of learning would have been by books, newspapers and such like.

It is a credit to him that his daughters, Eleanor and Cecile, would have been able to make something of their lives. It would have been a credit to him that his other children would have been able to grow up in St. Philip, and

interact among the people of St. Philip and themselves become persons admired in the parish.

I regret his passing. He achieved four score and one year on this earth and may his family take comfort both in the long life he led and the very fine example he would have set.

I personally must apologise to the Honourable Member for St. Philip North for not being able to make the funeral but he can be assured that my sentiments are sentiments of sincerity and on the behalf of the good people of St. James North and my own family I extend our condolences and would readily associate with the Resolution which this Honourable House is likely to pass.

I thank you, Mr. Speaker.
12.20 p.m.

Hon. A. P. WOOD: Mr. Speaker, it would be remiss of me, being the representative of the neighbouring constituency of St. Philip South, if I did not rise in this Honourable Chamber to give my condolences on the behalf of the constituents of St. Philip South and, indeed, my family to the Honourable Member for St. Philip North and his brothers and sisters and extended family.

Mr. Speaker, I, myself, did not have a lot of conversation with Mr. Clarke, but I can well remember many years ago going to St. Catherine's, our very successful parish team of many years ago, and listening to some of the older folks talking about the strategy which should have been employed on the cricket field, giving many wise words of advice to the captain and players of St. Catherine's. Among those persons whose voice was to be heard the loudest would be James Nathaniel Clarke. Of course, most of us who would have grown up in rural constituencies looked forward to the advice rendered by persons like James Nathaniel Clarke.

Mr. Speaker, I spent many hours on returning home from school and certainly on weekends sneaking down the road most of the time without the permission of my father and sitting at the feet of persons like James Nathaniel Clarke. We had a village shop at Four Cross Roads and Sam Marshall used to run the shop. Assembling there would have been persons of similar intention and knowledge base of James Nathaniel Clarke, like Joseph Barrow whom we used to call "Levy". Then there was Mr. Holder whom we used to call "Peenie Man", a very small man but full of ideas. Then we had Clarence Scott, alias Scottie. Right there at that shop, Mr. Speaker, I learnt a lot, and I am certain that many a young person who had an interest in politics, in agriculture and general self development would have benefited tremendously from James Nathaniel Clarke.

Previous speakers have made mention of the fact that Mr. Clarke would have been village barber by virtue of his appointment as Superintendent of Works at River Plantation. That would have given him an opportunity to help mould and shape the lives of many persons, especially in the area of agriculture. I have known many of Mr. Clarke's kids for a number of years. All of them would have started in very humble beginnings like myself and it is due to the hard work and the commitment of Mr. Clarke since he made many a sacrifice to ensure that his kids made the best possible use of the educational system in order to lead healthy and very productive lives in this Barbados. Mr. Speaker, the type of life lived by Mr. Clarke as it relates to caring and sharing has been instilled in his kids and it has been done in a manner which has allowed the family, immediate and extended, of Mr. Clarke, to be known throughout the length and breadth, not only of St. Philip North but of St. Philip South as well.

When one looks at the type of life Eleanor, Cecile, "Quartz", "Styles" and certainly the Honourable Member for St. Philip North have led over the years, one must appreciate that all the sentiments expressed on the contributions made by Mr. Clarke really are genuine and they come from the Honourable Members' hearts. I know of the benefit of persons like James Nathaniel Clarke. They have been the pillars and have provided tremendous support and tremendous advice to persons in St. Philip. They have helped with the St. Philip Parish becoming so closely knit, being the envy of other Honourable Members in this Honourable Chamber. Mr. Speaker, we owe it to – and when I say "we" I mean the Honourable Member for St. Philip North and myself and I must include the Honourable Member for St. John because he is a parishioner – we owe it to people like James Nathaniel Clarke and others who would have given unselfishly to the building of communities and collectively the building of the parish. We owe it to them to continue in that vein.

Mr. Speaker, on behalf of the good people of St. Philip South and certainly on my family's behalf, and my family is very well-known to the family of James Nathaniel Clarke, I want it to be placed on the record that we offer our deepest condolences to the kids of James Nathaniel Clarke and the extended family. Thank you.

Hon. G. A. CLARKE: Mr. Speaker, I rise in this House to pay tribute to a man whom I believe came out of what I would term the "great tribulation". I believe that the years between 1920 and 1931, young boys growing up in a rural constituency had few opportunities as we now have today, in an era in which there were hard times, especially the 1930s, in which black people had to fight for their own identity. No doubt, people of Mr. Clarke's era had to fight for survival in those early years.

In listening to a tribute on Saturday I could not help but admire a man who read his newspaper every day and at times like this when most of our population has gone to secondary school, in today's society very few people read the newspaper even though they have secondary education. One has to admire a man who read the editorial, the sports pages and even the obituaries and read almost every aspect of the newspaper. One has to admire such a man who was really self-taught.

I believe that most boys in those years went only to primary school and I must say that in speaking to many people of that era one cannot help but say that the educational system of the day really promoted a number of disciplines that we do not have today, that the three "Rs" were well thought out and young boys had to learn to speak and write. I understand that he was one of the best writers of the day. He had a very good hand writing. It seems to me that if boys of his era had the same type of facilities and opportunities as we have today they would have done even better than most of our people are doing today. It shows us that even though we have promoted free secondary education, persons of that era did very well for themselves and it is very important to note that young persons who only went to the primary level wanted only the best for their children.

Here is Mr. James Nathaniel Clarke, a young man, growing up in the 1920s and 1930s, having just left school wanting to ensure that his children became somebody in society.
12.30 p.m.

He was a strong disciplinarian who insisted that his children did their homework and performed well at school, that they did well not only in terms of an academic qualification but participated in sporting activities and in serving their community. I believe that such a man like James Nathaniel Clarke, we must pay tribute to and encourage our young people to emulate persons like him.

I understand he was a very good whisk player. I learnt that from people in my village who knew of his sportsmanship and the community work that persons like Mr. Clarke and other gentlemen did by going from village to village to test the skills of the various community players of that day.

From listening to the tributes, I recognise that Mr. Clarke was dedicated to his community, was a good analyst in his own right and was committed to the party that he supported. He supported his son in his political endeavours and we must try to emulate him because more people need to be committed to political institutions today.

Sir, we as rural persons must continue to look up to persons who have made sacrifice in terms of agriculture, sports and education to promote the welfare of our people.

Sir, on behalf of my family and all the people of St. George, I wish the family of James Nathaniel Clarke the best as they go through these trying times.

Mr. SPEAKER: I would like to associate this Honourable Chair with the sentiments expressed in the passing of the father of the Honourable Member for St. Philip North. I would also like to express on behalf of my family, myself and the constituency of St. Michael Central our sincerest condolences.

This House with acclamation accepts the Resolution of sympathy and directs that the appropriate Resolution be sent to the grieving relatives.

As a mark of respect I invite all Honourable Members present and everyone to stand with me in observing one minute silence.

One minute silence was observed by the House.

SUSPENSION OF STANDING ORDERS

Hon. Miss M. A. MOTTLEY: Mr. Speaker, I beg to move that the following Standing Orders Nos. 6, 16, 18, 20, 42(5) 43 and 44 be suspended for the balance of today's Sitting.

Hon. R. N. GREENIDGE: I beg to second that.

The question was put and resolved in the affirmative without division.

ORDER NO. 13 – RESOLUTION TO APPROVE THE BORROWING OF THE EQUIVALENT OF BARBADOS DOLLARS OF THE SUM OF FIFTEEN MILLION, ONE HUNDRED AND FIFTY THOUSAND UNITED STATES DOLLARS (US\$15,150 000) FROM THE INTERNATIONAL BANK FOR RECONSTRUCTION IN AND DEVELOPMENT (IBRD) TO ASSIST THE FINANCING OF THE BARBADOS HIV/AIDS PREVENTION AND CONTROL PROJECT

Hon. Miss M. A. MOTTLEY: Mr. Speaker, I rise to move the Resolution before the Honourable House in respect of the approval for the borrowing of the equivalent sum in Barbados Dollars of US\$15 150 000 for a programme to fight the spread and control the incidences of HIV/AIDS within Barbados.

It is a significant Resolution for two reasons. Firstly, that we should be coming to this House to ask for the

approval to borrow funds from the World Bank in the year 2001 after the Government of Barbados was graduated from borrowing from the World Bank some six years ago. This is significant largely because it had been contemplated that we would not be eligible to borrow any funds from the World Bank for any purpose, developmental or otherwise, given the fact that they had determined that the circumstances of Barbados' economic development were such that we were graduated from borrowing from them.

Secondly, it is also significant because not only have we been allowed to borrow and the loan has been approved by the bank but the purposes for which the loan has been approved represents the first instance anywhere in the world where a country has been allowed to borrow to provide funds for the purchase of anti-retroviral drugs for the purposes of public health usage in any part of the world. Also the sum of money being borrowed will be used for the purposes of recurring expenditure as opposed to one-off capital expenditure which would normally be the purpose to which these funds would have been applied.

Mr. Speaker, the significance does not end there because we as a nation have determined that it is our intention to fight the spread of the HIV/AIDS disease within the context of these shores. Barbados is a country whose very existence depends on the movement of people largely because of the fact that our major sector is the tourism sector. It is an open economy, one where the influx of people on an annual basis represents four times our population and there is a level of inherent vulnerability, one that must be taken into account in determining how best we can make ourselves less vulnerable to the disease which has wreaked havoc on mankind. Without wanting to go into details today, Sir, suffice it to say that we as a people and as a Government, are cognizant of the significant threat posed to the development of this nation, by the existence and prevalence of HIV/AIDS among our population.
12.40 p.m.

It is fair to say, Mr. Speaker, that the focus of the fight against the disease, until last year, was largely centred in the Ministry of Health, through the Ministry and its subsidiary organisations within the National Advisory Commission on AIDS. While they would have done significant work promoting the awareness of the danger of the disease, the recognition that they needed to be done at a national level and the recognition that Barbados' future development would be compromised if more was not done, was, in fact, realised and a decision was taken to establish responsibility to fight the HIV/AIDS disease within the Prime Minister's Office so that it would be capable of coordinating the responses, not only of Ministries within the public sector but also elements of civil society in this fight.

I believe the task at hand is a mammoth one, one that requires a multi-pronged approach, which is clearly

evidenced by the structure of the loan which is before this Honourable Chamber. There is no doubt that our primary responsibility should be to reduce the mortality rate of the disease and to ensure that those, who have now been diagnosed, have the opportunity of living as long as possible in as comfortable circumstances as possible.

I believe the commitment by this Government is to provide, free of charge, the anti-retroviral treatment to all Barbadians who are eligible, and I am told that eligibility will be determined, among other things, by the CD-4 count, which is a count of the white blood cells of the particular individual. Once a person's CD-4 count falls below a certain level, they will automatically become eligible for the treatment. If we are capable of providing that treatment to those persons so as to lengthen, as well as to make them more comfortable in their existence, that is a matter which should allow us to feel that we are honouring our responsibilities to those who have been made honourable citizens of Barbados.

The effort towards the fight against HIV/AIDS did not start last year. In 1995, the Honourable Member for St. James South, then Minister of Health, would have committed this Government to the provision of AZT to pregnant women, so as to assist in the transmission rate of the disease from the pregnant mother to the children who are born. I am happy, Sir, that I can state to this Chamber that our rate of transmission has dropped from 38 per cent in 1999 to approximately 4 per cent in the year 2000. We trust that it will continue to drop to virtually zero within a short space of time.

Sir, that is no mean achievement when one considers the fact that the United Kingdom only took the initiative to provide AZT to pregnant mothers in the year 1999. Some four years after the Barbados Government would have taken that decision, you can understand the significance and foresight of this Government in taking the decision in 1995. Those who would have been following current affairs recently would have seen the extent of civil commotion in South Africa last week, as they seek to urge their Government that it is about time that they provide AZT treatment free of cost to pregnant mothers to reduce the incidence of the disease on transmission to their children.

I, therefore, believe that while we would not wish to be complacent on those things which we have achieved, as a society we must use it as inspiration to continue in the battle so that we understand, like Uganda, Thailand and Bahamas, it is possible to be able to win the fight against HIV/AIDS. The effort in winning that battle rest not solely on prolonging the lives of those who have already contracted the disease, but it also rests on being able to reduce the incidence of persons who have contracted HIV. All Barbadians must, by now, be aware that it is possible for a person to be HIV positive without having contracted full-blown AIDS. In

those circumstances our battle to reduce the number of persons who test positive for HIV must also be part of our effort.

Sir, for that reason a section of the loan also directed to the prevention and the control of HIV/AIDS and it is in that area that the modification of behaviour and change of attitudes will, in fact, ensure that persons accept individual responsibility for their lifestyle and behaviour in such a manner as not to render themselves vulnerable to the contraction of the HIV disease.

It is of note, and for the purpose of the records of the House, that I indicate that since the collection of records in December 1984, there has been a total of 2 408 persons tested positive for the HIV virus. A number of 1 383 persons who have been counted as reported cases with a number of 1 060 dying as a result. Unfortunately, this would mean that the fatality rate was in excess of 76 per cent. I believe that those figures as well as the figures which show that the highest degree of incidence lies in the most productive age groups, between 25-49, would have galvanised us, not just the Government, but civil society to know that we have no choice but to try to win the fight against this dreaded disease. Dread not in terms of the stigma which is attached to it but in terms of its impact on individuals and the wider society.

There is absolutely no doubt that after we invest, in a country such as ours, where we provide free education, primary to tertiary, where we provide the level of social services, where we provide the level of benefits such as subsidies in transportation, housing *et cetera*, once we invest all of that money in someone, for them to be taken in the middle of their adult lives as a result of this disease, not only represents a major loss with respect to the death of that person, but also a major loss of investment given the fact that this Government and previous Governments have invested as heavily as we have done.

12.50 p.m.

Therefore, for us not to take this step to increase the fight and the investment that we make in the fight against HIV/AIDS would be foolhardy given the fact that we continue to invest in the individual development of our people and their collective development.

This loan therefore, represents a significant step in being able to carry on that fight and it is such that it recognizes that the battle must take place in terms of prevention and control. Sir, for that, the sum of US\$5.7 million has been provided and it must take place in respect of our diagnosis, treatment and cure where possible. The sum of US\$14.3 million has been provided and that will see the construction of the lab as well as the clinic at Sir Winston Scott Polyclinic both of which are finished and both of which now will be staffed to ensure that appropriate

testing can be done to register the CD-4 counts and the other testings that are required to ensure that persons can have access to a clinic where the appropriate counselling and treatment can be available to ensure that there will also be an opportunity for the rehabilitation of the building which used to formerly house the UNDP for the establishment of a drop-in clinic. Sir, I believe eventually a food bank will be established, so that we can make the life of those who have already displayed the full-blown disease more comfortable and ensure that there is a greater level of compassion on the part of those who are capable of making their lives more comfortable.

The third aspect of the loan is the question of the management and the institutional strengthening because unless those agencies who have a responsibility of being able to fight the spread of the disease are strengthened then our efforts in the long run cannot be sustained and, as older Barbadians say, we will be 'putting money in Maxwell Pond' and not ensuring the sustainability of the effort.

The reality is, Sir, that a structure as part of the loan has to be to ensure the sustainability of the effort. Sir, we believe too that with training and institutional strengthening provided by the agencies involved, this can be achieved. Sir, one of the significant things which we must also recognize is that there are different modes of transmission of contracting the disease. We spend a lot of time speaking about the negatives of the Q.E.H., but we do not speak about the positives where they exist. It is of significance that since 1985 we have started testing blood and there have been no reported cases of anyone contracting HIV/AIDS as a result of a blood transfusion in Barbados.

Now, Sir, there are not many countries who can make that boast and I believe that the public of Barbados should therefore have that sense of confidence, particularly since one never knows what fate might befall us and one will never know to what extent one must rely on those services. I believe that record over the last 15 years is one of which we should be justifiably proud but, equally, not to become complacent but to ensure that those standards which must be attained and adhered to are continued in the fight to ensure that no one in Barbados can suffer as a result of contracting the disease from a blood transfusion.

Mr. Speaker, Sir, this Government has much to do to win the fight against HIV/AIDS, just as much as we, as a nation, have much to do, but I believe that we already have been on a good wicket. I am told that when the loan was being negotiated with the World Bank, their officials were highly congratulatory of Barbados' public service and, indeed, those who had rendered service in this effort, who are not necessarily public servants but who have served on the committees managing the fight against the disease.

Sir, it was said that Barbados' programme was outstanding in both design and structure. It was comprehensive and the time in which it was drafted was a matter to be commented upon since they did not expect us to be able to respond as quickly as we had. It is also of note that we have tried along the way to work with other Caribbean territories and are committed to doing so because we recognize that we are not alone in this fight.

Indeed, Sir, the Caribbean Region stands as that region which has the second highest prevalence rate after the sub-Saharan Africa, but it is one which must be of some concern to those charged with the development of the Region. I must tell you however that while in no way I say this to give us any comfort, the reality is that I think we have better systems of recordings in respect of our public health system. Therefore, our number of reported cases probably reflects the truth of what is out there largely because our systems within our public health management are perhaps better than a number of other developing countries and hence, the high relativity of incidences that we show in respect of the prevalence of the disease. Sir, that is not meant to cause us to slack off, nor does the fact that we have been successful in various elements of our fight. For example, as I indicated, the AZT treatment for pregnant mothers, the absence of recorded cases in respect of blood transfusion. All of those things are things of which we should be proud, but not things that should allow us in any way to reduce the quality or strength of our efforts in the fight against this disease.

We have also seen the massive public education programme taking specific focus within the context of Government. Eight line Ministries were chosen to be able to spearhead the effort within the public service:

1. The Ministry of Health,
2. The Office of the Attorney General,
3. The Ministry of Home Affairs,
4. The Ministry of Labour and Social Security,
5. The Ministry of Tourism and International Transport,
6. The Ministry of Education, Youth Affairs and Sports,
7. The Ministry of the Civil Service and Public Sector Reform and,
8. The Ministry of Social Transformation.

The training and sensitization programme within those Ministries has started and must continue until they are satisfied that they have reached as many people as possible

in respect of the sensitization process. There is a lot in respect of the other Government Ministries which will come on stream because, at the end of the day, we must have all public servants fully sensitized as far as possible, not only to the modes of transmission but to the other issues surrounding the management of the fight relating to the disease.

One of the things, therefore, Sir, of significance is that the Ministry of Labour, along with the Commission, has already produced two booklets –

- (a) an ILO Code of Practice on HIV/AIDS and the World of Work,
- (b) AIDS in the Workplace.

Sir, we recognize that those sensitivities may be particularly strong and that in Barbados we should not wish to have persons unfairly discriminated against purely by reason of the fact that they are HIV positive. I believe that this process will continue to take time. We did not get there overnight and we will not fight it overnight. Indeed, I would like to say that in very many instances, the attitudinal changes on the part of individuals which are necessary in order to fight successfully the contraction of HIV/AIDS are the same attitudinal changes that are necessary for us, collectively and individually, to fight the spread of drug usage, crime, reckless behaviour generally resulting in road accidents and other reckless behaviour in the society.

Therefore, the concept of a Barbadian who accepts full responsibility for his or her actions such that they do not compromise their own Safety, or the security of other persons must be the ultimate objective of any Government. Therefore, for those who would wish to condemn the Prime Minister for placing the Ministry of Culture in the Prime Minister's Office, I say that they do not understand the challenges facing a Government in an early 21st Century where a large part of Government's Expenditure is being used to fight those things which are, as a result of behavioural problems of individual citizens, whether it is in the form of being able to fight HIV/AIDS, the form of fighting the spread of drug usage and its concomitant consequences in terms of crime, public health issues, break down of families, *et cetera*. Whether it is being able to fight crime itself, that we are doing, and having to place more expenditure in ministries to combat these issues, largely because more individuals in our society are in fact, living lives that place themselves at risk. If we are to be successful in causing Barbadians to accept responsibility for how they live their lives such as to ensure that they do not place themselves at risk, then the level of expenditure necessary to fight HIV/AIDS, to fight drugs, to fight crime and to fight road accidents, could be reduced.
1.00 p.m.

I hope, therefore, Sir, that the major assault which is necessary in terms of bringing about an attitudinal shift will in fact, continue. I do not expect it to change overnight but it has to change and I believe, Mr. Speaker, it is of significance that we would obviously be more vulnerable to a disease such as this, given the libertarian attitudes of the 1960s and 1970s which would have fostered a level of personal freedom and personal behaviour which may have placed us more at risk than at previous times before the existence of that revolution in the west.

Aside.

Hon. Miss M. A. MOTTLEY: I would not go so far as to call it recklessness, Sir, but it may well require serious thought on the part of individuals, as to whether their lifestyle is in fact not their greatest threat to a long life or whether crime, as they perceive it outside, has a greater chance of taking them. In truth and in fact, we are playing Russian Roulette with our lives in respect of those decisions that we make, and in a society which has had a relatively liberal view towards sex and sexual practices and relationships, we have serious thinking to do, in terms of how we behave as individuals.

By the same token, Sir, this disease places at the forefront of our consideration, the need for tolerance as a community. Tolerance, because while persons have contracted the disease, they are not and must not be scorned. They must not be treated like if they are pariahs and the extent to which we are a civilised society, will be judged by how we treat those who are least capable of taking care of themselves. I would like to believe, Sir, that a society whose history has seen its people mired in injustice and oppression, will always be cognizant of its responsibility to take care of its most vulnerable in the best way that it can, with a degree of empathy and compassion that is worthy of the situation.

I would also like to believe, Sir, that this Government is motivated by those considerations, in terms of how we structure our programme, and the extent to which we are prepared to put both human and financial resources in the fight against this disease.

Sir, it cannot be done by the Government alone and there should be no attempt for anyone to foist on the public, a belief that it can be done by the Government. This is a fight for all Barbadians. This is a fight that must be assumed if we are going to change the extent to which we are at risk and if we are going to accept responsibility for ensuring the quality of life that we presently enjoy.

We, Sir, as a small island developing state, will always have to make an effort in maintaining the quality of life that we have, because of our inherent vulnerability as a State and

as a people. As I indicated, the very nature of our economic circumstances means that we accept four times our population on an annual basis and it therefore means that however good we are in reducing the incidence in terms of the spread among Barbadians that once you have people coming into the country on an ongoing basis, and once you have people whose behaviour renders them at risk, by reason of either sexual interaction or cooperative drug use, you will always remain vulnerable because of the nature of openness.

Therefore, the fight must be an ongoing fight. It must be the fight of the church, it must be the fight of youth groups, it must be the fight of community groups, it must be the fight of schools, it must be the fight of Government at its highest level, with the political well-being expressed, as it has been done by the Right Honourable Member for St. Peter, the Prime Minister but with it being sufficiently buttressed by all who have responsibility for executive decision making in this country, ensuring that all of our actions work in that one coordinated effort to reduce it.

Our immediate objective, Sir, is to reduce by 50 per cent, the mortality rate within the next three years and then a 50 per cent in its prevalent rate over the next five years, of the number of persons contracting HIV/AIDS. I truly believe, Sir, that this is within the capabilities of this country and its population, particularly given our success rate with the AZT with pregnant mothers, particularly given our success rate with reducing to virtually zero, those persons contracting HIV/AIDS from blood transfusions.

I believe, Sir, that we may even be able to shorten that time period, if we can ask each Barbadian to see himself as a part of the front line battle in the crusade against the spread of this disease.

I want to comment, Sir, on those who continue to work in its cause, in particular the Chairman of the National HIV/AIDS Commission, Dr. Carol Jacobs who has also served with distinction, at the level of the UN HIV/AIDS Council and has been in the forefront, along with the previous Minister of Health, fighting for a reduction in the cost of the anti Retroviral treatment so as to ensure that countries like Barbados are capable of affording it and providing it for its citizens as we have committed to do.

I want to also bring the House's attention to the fact that this is an issue that clearly has gained global currency. One only needs to have followed the debate in respect to Brazil and South Africa to know that countries are asserting their right to be able to have generic applications of these drugs manufactured, so as to be able to afford the cost of them for distribution among their population.

India and Brazil perhaps are two of the major countries that have established manufacturing concerns to do so, and indeed those drug companies which have had the intellectual property rights have had to recognise that there has to be some merit and there is some merit in the claim being made by these countries.

Indeed, Sir, this development has also caused a greater level of caution to take place in the whole development of the World Trade Organisations and the development in a new round in services as well as those developments that take place also in Geneva at the World Intellectual Property Organisation. It is understood that if we were simply to accept and to respect the intellectual property rights of the drug companies, entire nations could have their development compromised simply because of their inability to afford access to the appropriate treatment to stem the arrest and to stem the mortality rate of the disease in their countries.

It is said, Sir, that Guyana is exploring the opportunities for manufacturing the generic drugs and we will have, as a CARICOM country, to investigate and to assure ourselves of the quality and standards which are used to see whether we can even further reduce the cost which has already been reduced for us.

I believe that Barbados was the first country outside of Africa, to have benefited from that reduction and that is of course, due to both the former Minister of Health and as I said, Dr. Jacobs who ensured that, as long ago as last year in Brazil, they started the discussions to ensure that as a country, we can benefit.

Sir, this debate is historic for many reasons and the effort which Barbados has made today is also historic in the fight against this disease but, we simply have no choice. It is something that we do with a heavy heart because we, as a country, would like not to have to face issues such as this, but that is our lot and it is a lot which we will accept in terms of how we fight it but we recognise that it must involve the effort of each and every Barbadian. While the Government's responsibility is to give leadership for the fight and to provide resources for the fight, it is only with the assistance of each and every Barbadian that we can truly say that we have won the fight against HIV/AIDS.

1.10 p.m.

As I said, we are not unique in history because many a country and many a civilization have had their whole system and way of life compromised by the various plagues and public health diseases which are being spread around. But this is our lot to fight and I trust that we will do so with the calm assurance that we have displayed today and with the sense of conviction that has seen us reap the successes which the programme has reached today.

With those few words, I beg to move that this Resolution do now pass.

Hon. R. N. GREENIDGE: I beg to second that.

SUSPENSION OF SITTING

Hon. Miss M. A. MOTTLEY: Mr. SPEAKER, I beg to move that this Sitting be suspended until 2.15 p.m. today.

Hon. R. N. GREENIDGE: I beg to second that.

The question that the Sitting do now suspend until 2.15 p.m. today was put and resolved in the affirmative without division and Mr. SPEAKER suspended the Sitting accordingly.
1.13 p.m.

RESUMPTION

Mr. SPEAKER: This Sitting is resumed.

ORDER NO. 13 – (Cont'd)

Mr. D. St. E. KELLMAN: Mr. Speaker, I rise to speak on this Resolution. It is true that the Resolution has to do with foreign borrowing and, even though one might feel strongly against foreign borrowing as it relates to other matters, one must consider the importance of this particular borrowing which has to do with HIV/AIDS. There is no doubt that AIDS and drugs will create havoc for the lives of all Barbadians.

It is true that many people have spoken on these particular issues but I want to say today that the biggest fight that we have is a fight to get rid of AIDS and the usage of drugs from our society. There is no doubt that if we do not spend money on fighting AIDS that the population of Barbados will soon be wiped out. It was once thought that AIDS was a phenomenon within a particular grouping only but the truth is AIDS is now something that can be contracted by anybody and that is the seriousness of the issue.

I sometimes wonder what life is going to be not only for my sons but for every single young person living in Barbados. Can you imagine having to live a life now in Barbados and having to make a change from the relationship that you are in and you do not know what relationship you are about to enter? You know it is possible that a man could be married and his wife passes away or vice versa and it is obvious that one would expect there to be a continual relationship between the man and another person or the woman and another person but nobody knows what they are getting into.

I am saying that the world powers must recognise that the same way they can spend large sums of money developing new arms to fight wars of destruction that they must find the necessary amount of funds to do the research to protect lives. It is clear to me if they are not prepared to put money to solve this particular problem considering that this is one that could wipe out small societies, that this particular problem could be a population growth problem and I hope it is not.

I hope that every single idea has been tapped into and that we are serious about fighting AIDS in the world. One must also recognise that there might be some countries who might believe because they have large populations that they could easily allow the situation to continue hoping that small nations will be wiped out and then they can find the solution to the problem. I am saying, Sir, if that is a thought of anybody that that thought should be put on the back burner and the thought of solving the particular problem or finding the solution for the corrective treatment for the AIDS should be worked on.

I believe honestly that we have enough resources that we can devote to fighting this war on AIDS and we can find a solution but it seems to me that the G8 countries are more caught up on wars and are not interested in protecting lives because it appears that they are more interested in destroying lives.

A small society like Barbados should also be very careful because the evidence is here that AIDS was not started in Barbados but was brought to Barbados. One can only ask oneself what a small country like Barbados would look like ten years from now having to fight AIDS and drugs.

I am saying that any serious Government will do everything within its capacity to make sure that some of the better students are allocated to research in fighting things like AIDS and to research to allow young people to change their habits whether it is their sexual or drug habits. I would not like to look at this from the point of view of HIV/AIDS only but to look at it from the point of view of HIV/AIDS and drugs because those are the things that can make a serious change to the population in Barbados and we will be foolish not to believe that there will not be people who would deliberately spread AIDS in Barbados to eliminate our class.

I am saying that is the seriousness of this particular debate and that is why I am not interested in whether we are borrowing money today or not or what the interest rate is. What I am interested in is protecting the lives of young Barbadians and making sure that there is a future for young Barbadians in the country that they so love.

We must also understand that there is something called international jealousy and that Barbados is a country where a lot of people like coming to and there are some people who might feel that they can continue to allow these problems to continue so that they will gain in the long run. I am saying that a Parliament like this, must understand the seriousness of this particular problem and must devote the working time of certain officials into doing research to find a solution for this particular problem and when I speak about a solution I am speaking about a cure.

There is nothing wrong, and we have the capacity to do it, for a young doctor in Barbados to do the necessary research to come up with a cure because if we do, Barbados will become one of the richest nations in the world because it is something that everybody wants and this is something that we need to invest in. We cannot only invest from the point of view of funding or supplying drugs to the patients we must look at it from the point of view of finding a way to devote our young minds to research to find a cure for AIDS because AIDS is a problem for Barbados and we should not be looking to outsiders to solve that particular problem for us. We have the capacity to do that for ourselves. Because we are a small nation, we should not sit back and wait for someone else to find the solution for us.

I am saying that a population between 268 000 to 270 000 is not a large population and it can be wiped out by drugs and AIDS and all of us can be affected. In the 80s people thought that only a minor group would have been affected but in 2001 every single person in Barbados stand the chance of being infected by AIDS and that is why we must understand the seriousness of it and that is why we as a Parliament must put all the necessary resources and look for corrective measures and if we have to use the educational process to solve this particular problem we must do it.

I am hoping that those players who have been entrusted with the privilege to look after this aspect of it will not only look at the educational side of it by having the necessary ads educating Barbadians that if you do this or you do that you might not get AIDS but they will be able to tell the Government of the day especially the Minister of Health and the Minister of Education that there is a natural relationship between health and education and that we must blend that relationship between health and education to find the necessary personnel and allocate the necessary funds to them to make sure that they do the necessary research so that we might be able to find a cure.

It makes no sense to provide the drugs to stop or delay the effects, what we need to do is to find the personnel and the resources to find the solution. I would like to believe in my dying days many years from now or even shorter than that that I will hear that a Barbadian was the one who found the solution and the cure for the AIDS virus because there is

no better promotion that a small country like Barbados could get than have to broadcast to the whole world that because of our educational process and the ability to study that we have been able to tap into a subject that affects every single country in the world and have been the one to find the cure for this HIV/AIDS virus. Stop believing the problem is not ours. When I hear people talk I am under the impression that we have problems with AIDS in Barbados but the cure is not our problem, the cure is someone else's. The truth is that the countries we expect to find the cure for us are countries that have large populations. Sometimes I wonder if some of them have not found the cure already but are only waiting to eliminate some small countries because they know the size of the particular population. Some people might think it is a joke but we have to understand that the same way that countries can go to war and kill many people they will also find other ways of getting rid of people.

2.25 p.m.

Sir, we cannot believe that we are not dealing with what I call international politics and the politics of population growth. We have to understand that that is a factor. It is not only about trade and population growth but it is also an allocation of how you plan to make sure that those small developing countries do not develop too fast or that they are not too dependable on you.

Mr. Speaker, as I said, normally when I look at this Resolution and I see \$15 million being borrowed again, I would have zeroed in on the amount of money being borrowed and where it is being borrowed from but, because of the particular issue you are dealing with, Sir, I cannot be caught up in this particular aspect of this today because I recognise the importance of funding AIDS in a country like Barbados with a population of only 268 000 and I understand the importance of a small country not only supplying drugs to the patients but also using some of the resources to do the necessary research to find the cure.

Thank you very much, Mr. Speaker, Sir.

Hon. R. R. FARLEY: Mr. Speaker, I rise to speak in support of this Resolution which seeks permission from this Parliament to borrow from the World Bank \$15 million to aid in the financing of this fight against HIV/AIDS. This financing is part of the commitment of the Government of Barbados to spend \$100 million over a five-year period in this all important battle. Indeed, this administration would have signalled that the fight against AIDS is not just a health issue. It is not an issue which in its early days was seen in a moral context but it has really emerged to be a development crisis and indeed threatens the development not only of the future of Barbados but of the entire world. Therefore, nothing but the greatest of effort is required in order for us to combat the problems such as exist as well as to prevent the escalation of the problem as it threatens our very future.

It is important that we recognise that this marks a different direction in terms of our relation with some of our international financial institutions and the World Bank in particular. We have always suffered from a situation in which because of our good effort and economic management we have been rewarded by being graduated out of access to concessional finance for development purposes. As you would be aware, Mr. Speaker, Barbados had several years ago been graduated from access to World Bank financing for the regular capital works. We have, over the years, used World Bank financing for the construction of schools, for the construction of roads and other public infrastructure but we are no longer able to do that.

To the Bank's credit, and I should make the point before I go on that, in fact, while it speaks negatively of the World Bank in terms of how they reward us for our success it also gets us to understand the extent to which Barbados in its short history of independence has been able to tackle many of the challenges to public infrastructure, health and education which other countries around the world are now trying to tackle.

If you look at the World Bank Annual Report, you will note the reasons for which financing is advanced and the countries to which they are advanced. They are for problems which no longer exist in Barbados, the matter of building access to primary school education, the matter of building access to basic health care, the matter of building access to running water, things of that nature which are no longer issues for which Barbados would have to go to the World Bank or other institutions. However, we are confronted with the other aspect of development, which is this threat to development.

It is significant to note as well, Sir, that this current period which we are in, this year in particular, marks a point at which there is now unanimity around the world in terms of political, economic and other commitments to the fight because, as you know, in some countries there was not either a governmental commitment or a total national commitment to the fight against AIDS. The reality is that one of the negative aspects of globalization which, as you know, Sir, presents itself by way of not only freer trade but freer movement of people. A greater interdependence among nations, the dependence on services, particularly in tourism as one of the means of economic development also means that none of us is able to insulate himself or herself by closing our borders either from cultural penetration, from financial flows or from the spread of diseases.

The health problems of one country become the health problems of another and you can look across the whole spectrum whether it be in terms of environmental contamination where a fish-kill in Barbados could be caused by contaminated water coming from the mouth of the

Amazon. We can go on and on with examples. We are fortunate today that the entire world has recognised that there needs to be concerted effort if we are to address our problems. In terms of world proportion, so far some 22 million persons have died from HIV/AIDS and there are some 36 million persons living with HIV/AIDS around the world. In our case in Barbados we happen to be located in a region which statistically has been identified as having the second highest prevalence rate for HIV/AIDS.

Sir, what that represents to us is a situation in which the dangers posed are great. Our population is small and already because of the changing structure of the population where we are having somewhat of an aging population and as you know from other matters raised in this House from time to time there is already pressure on the working age population in order to meet the pension needs of the older population. This has been occasioned by the fact that our life expectancy far outstrips the average for Latin America and the Caribbean and for several other countries. Our life expectancy at 76.6 years by far outstrips the average life expectancy for Latin America and the Caribbean which according to the latest reports is at 70 years. Therefore, Sir, there is already that pressure.

When you contemplate the added burden of the fact that the highest incidence of HIV/AIDS is disproportionately heavy in the 15 to 49 year age cohort, it then indicates the development challenge which we face and why nothing short of a herculean effort would be required from all of us if we are to secure the future of Barbados.
2.35 p.m.

The World Bank realises that it needs to play a vital role in providing financing for countries around the world including countries like Barbados that has previously been graduated from borrowing from the bank. Therefore, this marks an era in this particular regard.

The Millennium Summit in July 2001 had included among its many goals not only poverty reduction but the commitment to aim towards the reduction of the HIV/AIDS rate by half. This is consistent with the goal which the Government of Barbados has. The Summit committed, through the World Bank and other financial institutions, to putting their monies where their hearts and desires were which is something unknown of previously. Many of the international institutions and the larger countries of the world often express philosophies, hopes and desires which are not backed by finance but in this case they have committed funding to various projects including the World Bank having a development bank facility to work towards an international AIDS vaccine initiative. They have been able to contribute towards the situation by working with the pharmaceutical companies particularly through negotiations

sponsored by UNAIDS. UNAIDS has been on the forefront of this and has been able to have the manufacturers of HIV/AIDS drugs reduce their prices by as much as 90 percent in some cases. The cost of the anti-retroviral drug has reduced considerably over the initial cost and the prices are falling further. This is part of a kind of international cooperation which is essential.

The commitment which we have made to look after the many aspects of the HIV/AIDS situation have benefitted from this international initiative to reduce the cost of drugs. This speaks to the sustainability of the programme. We are satisfied that our ability to continue to supply this much needed medication is well within our ability and well within our means. The borrowing of this money from the World Bank is to jump-start that programme as well as other aspects which we will touch on a bit later.

Sir, this threat of HIV/AIDS represents a threat to our social capital because to us, social capital, the knowledge and the skills of our people, is the most important aspect of our national assets. We also face the challenge of, having at the level of the individual family, the network of earnings, guidance and stewardship all interrupted through this particular situation.

I am pleased to say that there has been some success through the efforts of the National Advisory Commission on AIDS and other intervention in helping to slow the rate of growth of the disease.

Sir, we must not become complacent. I would want to say from my own observation that there has been some slackening of effort and focus in having HIV/AIDS as a top-of-the-line issue between when it was first highlighted in the early 90s and now. We need to get back to the situation where every one of us take the position that the life we save could very well be our own because given the world wide nature of the prevalence of HIV/AIDS infection and full movement of people and integration into various aspects of society, it is a problem we could very well face.

Sir, in terms of the Caribbean region for example, the reality is that nine out of the twelve countries in the Caribbean basin are countries which have relatively high rates of infection. Unfortunately, leading that group of countries would be our neighbour to the north, Haiti. We also have research which has pointed us in the direction of a number of problems in the society which we need to address. Recently a survey in one of the daily newspapers indicated that a significant proportion of boys in Barbados were having sex by the age of twelve. I do not know what is the percentage for girls because the survey did not indicate this. The reality is that if we are to address this problem in the

future much of the effort at education and change of approach of lifestyle has to be spread to both old and young.

It is interesting to see from the research how the situation varies from Caribbean country to country. What is clear is that there is no room for moralising on the issue. The fight against HIV/AIDS has to be based strictly on what I call 'humanizing'. Whatever our moral stance on people's individual behaviour or whether we can speak about sexual practises and lifestyle openly or not, it has to be our stance that each and every human being is worthy of our love, care and compassion, that each and every human being is an important part of our national development effort. Therefore, every effort that is made, be it in terms of medical intervention, education or prevention has to be seen in that particular context.

There are some tough decisions and matters which may run against the main stream of traditional Barbadian cultural thought and practices that we may have to consider as we go into the future towards this fight and I want to urge all persons in Barbados to take note of this.

I want to say that education and distribution of condoms have worked in other countries. Brazil has had significant success in its programme, a programme such as this and which was supported by the World Bank as well. They had two loans from the bank in 1994 and a further loan in 1999. They utilised some 400 community-based organisations to take the message to each and every community in Brazil to speak to people in their own language and in their own cultural and social context. They also made use of 175 non-governmental organisations in this fight. They distributed 180 million condoms and taught people how to use them.

Sir, I remember the days where a number of things were considered taboo in terms of public discussions and today we have got to the point where these things are discussed openly. Items such as condoms could go into the mainstream of discussion because the reality is that we may be surprised to know that they are some people who do not know how to use them, Sir. Therefore, they would not use them because that is the case and that has proven to be the case in several other countries.

2.45 p.m.

Sir, in the case of Brazil it is the distribution of condoms, the training of teachers, students and other persons as trainers, and the attitude adjustment situation and consideration of the drug users. We do not have the problem of infection by needle sharing. Intravenous drug use is not a major phenomenon. The social and economic issues arising out of drug use and dependency, which push people

into prostitution and other areas, are areas which would be of concern to this programme in Barbados.

The aim of the Government in this exercise, in terms of the reduction to the spread of the transmission of the disease, extending the productive and useful life of those persons who might be infected, is to be financed out of this \$15 million loan from the bank. We must not lose sight of successes that we have had so far. Barbados is one of the countries which took early action by way of providing AZT and other treatment to pregnant mothers. We have been able to reduce the onward transmission of HIV/AIDS from mother to a child down to negligible proportion. We have been able, through 100 per cent blood screening to ensure that Barbadians and other persons who may need to have access to blood transfusions in Barbados, have been able over the last several years to have access to none other than fully tested and cleared blood service for the appropriate use.

This particular intervention which would add another dimension to a programme that has already gathered some momentum, by way of making provisions for a lab, to ensure that we will be able to do more speedy and effective HIV testing on individuals to ensure that we will be able to provide facilities for ongoing treatment with comfort, dignity as well as convenience, form part of the financing of this programme. Those are our successes.

Sir, we could not have reached there without the work of a number of pioneers. I cannot mention everyone, but I recall the work of Dr. Timothy Roach, in the early stages of the HIV/AIDS awareness programme in Barbados. In more recent times Dr. Carol Jacobs and others who work in the National Advisory Commission on AIDS, they have served the country well by way of heightening awareness, giving of their time and professional expertise, not for personal gains but for the development of country and to save us from this particular challenge. Sir, the help which they are now getting in the efforts which they have undertaken from a volunteer perspective, I am sure they would certainly welcome.

I am satisfied that this most important project will result in averting a situation in which the most productive age group of our population could, without intervention from Government and the other players in Barbados, have resulted in a reduction in the level of growth for our country. It just remains for us to give the programme our full support and to see the programme as not being one that is external to us but one in which each and everyone of us, by way of the individual choices that we make on a day by day basis, by way of the commitment which we make to help prevent or alleviate a situation as the case may be, is one in which we will play a most vital part.

Sir, in closing, I want to reiterate the fact that I am pleased that the international financial institutions,

particularly the World Bank, appear to be taking a more active and positive role in the development of our countries and has not continued to discriminate against those countries. Sir, through hard work, we have been able to improve their situations as reflected in the high per capita income, long life expectancy, low rates of inflation and all of the good economic indicators which have prevented us from being able to access international finance for development purposes.

I am pleased to support this Resolution and I wish the members of the International Commission on AIDS well and I thank you very much, Mr. Speaker.

Mr. D. J. H. THOMPSON: Mr. Speaker, I will not be long on this matter. I believe the Honourable Member for St. Lucy has adequately expressed the concern and the approach that we will be taking in relation to this issue. I want, however, to say that I am still a bit perplexed that Honourable Members on the Other Side, who are the chief policy makers in Barbados, have not been directly and forcefully putting their hand on the moral and other culture concerns which are at the centre of a debate such as this.

For example, the last speaker, quite cautious in his approach, spoke of issues that we may have to consider. I know that there are tendencies that when one starts to delve into moral concerns and to delve into concerns relative to people's personal conduct or sexual preferences, there are always arguments that there are cultural considerations and sociological considerations that one has to take into account. Anybody who ignores these cultural and sociological considerations are right wing extremists. Either a type of right wing extremist that believes in 'Taliban-style' government.

Asides.

Mr. D. J. H. THOMPSON: The 'Taliban-style' government of religious fundamentalism or alternatively a more relaxed anti state involvement approach in which people should have, as a Parliament concern, a personal choice guarantee *et cetera*.

Sir, the real concern, contrary to what many people may feel, because of our historical development and the role the State plays, because of the resources that the State commits to health care in this country, we do not really have the luxury of staying too far away from this debate as policy makers. Unless you are going to write an open cheque and say that people are free to do as they like in Barbados and Government would underwrite the cost of any of the consequences of their actions, then the State and political parties do have an obligation to tell people what they think is appropriate conduct, what is an appropriate lifestyle, what

kind of cultural and other changes are going to be important to our society, so that we can effectively manage relations and protect a generation of Barbadians from destruction, it is very important. This is very important. I do not know when AIDS was first identified in Barbados but I certainly know that I grew up as a young person with a luxury, up to 1984, of believing that I could do as I like, as the Honourable Member for St. Michael East has suggested. I was not one to do as I like but the belief was there. The point is, that does not exist now. He has used the right words; people simply cannot do as they like largely because, as I say, we have a system of health care in which the State funds, almost from cradle to grave, many of the health issues that affect our population. We have a small resource base. The fact is that Barbados has been able to accept a large chunk of the World Bank Funds that were committed to this project. In fact, a very significant chunk when it is looked at but, at the same time, the generation of Barbadians – the sons of the Honourable Member for St. Lucy, the daughters of the Honourable Member for St. John and the other Members on that Side who have sons and daughters, have to be protected and the lifestyle change which the Honourable Member for St. Michael North East spoke about broadly, needs to be very clearly set out.

2.55 p.m.

Sir, there is nothing wrong with this Parliament as a general principle of policy stating what is, in our view, appropriate behaviour or the ideal kind of behaviour that people should aspire to in this society. Therefore, I do not think that it offends against the freedom of citizens to act, because there are some persons who are going to act inappropriately anyway. Neither am I saying that law should be introduced to curtail every inappropriate behaviour because we also know that there are a lot of things that happen that are inappropriate but rather we pretend that it should not be taken care of by legislation nor that it does not happen, than to deal with it.

We all know the prevalence of the use of marijuana in Barbados and yet we pretend that we have one of the most successful programmes of drug interdiction, *et cetera*, to deal with the problem of the use of marijuana, which can be extremely dangerous to those persons who become addicted as with alcohol or with any other form of addiction and, therefore, for some people, they move on to other drugs that bring them into direct contact with methods of transmission of viruses. As I said, I believe it is still the obligation of Ministers. You are not going to receive any censure from this Side because I do not think that we are so antediluvian in our approach to think that we are going to say that a Minister of Government is not entitled to say, as a matter of policy, what is broadly accepted as appropriate behaviour. As I say, we are not advocating 'Taliban-style' Government or tactics to repress anybody or to reduce their personal freedom. I believe it is important for us to intensify the sex education programme in Barbados. Before 1984 you could have a

discussion with young people about sex. I can remember Sir Clyde Gollop. Anytime one wanted to revive a youth group, send for Sir Clyde Gollop to talk about contraceptives and if you were getting three or four young people coming out to the meeting, once it is advertised you would get about 70 people from the community to come. He would come from the Family Planning Association or the Community Development, but nowadays it is almost irresponsible without having those discussions on the downside because of the impact of AIDS and what should otherwise be viewed, in most circumstances, as a beautiful act of procreation or pleasure, depending on one's intention.

Therefore, I think it is important for the Government to spell out clearly what they consider to be a healthy lifestyle and for people not to be afraid to have a debate in which they indicate what they believe are the key issues. We do not have to skirt around these kinds of things, I believe we can promote family values in Barbados in the context of families as we know them in Barbados and that a child has the right to grow up in a reasonably safe and secured environment, free from financial pressures, having both adequate shelter, health care and other incidents which should attend the childhood of Barbadians. We can promote the objectives of the development of strong families in Barbados without being accused of being right-wing conservatives and also the appropriate behaviour that supports that and which may not have been relevant prior to 1984 but in the past two decades have become extremely important to protect particularly our young people.

Sir, the Honourable Member for Christ Church East has made mention of it having its greatest impact on the young people at the height of their economic powers, the height of their wage and salary earning capabilities. When it cuts them down it means that is another potentially productive, bright worker and a person who could contribute to the development of this country is being destroyed. That person may be a parent and, therefore, it leaves children and families in a state of dislocation and children very often orphaned.

Sir, fortunately in a society like Barbados, we have not had the greater problem of dealing with children who do not have parents and again, because of the cultural development of this country, people tend to quickly assume responsibility which is not always the case in other societies where there is an element of estrangement. That in itself will produce another generation of young people whose development will be attended by all kinds of problems. Again, because they are growing up in an environment that is not as secured but worse than that they are going to be growing up in an environment, despite what we say in here, that will place them on unequal footing relative to the children of parents who did not die or were not infected by the virus. Let us understand that is the reality and in a small society it can be extremely devastating and we need to recognize that.

It also places an almost intolerable burden on our health systems and whereas the Government is able, at this time, to start a programme and has access to \$15 million to do so, this is but a start. It cannot be a one-off exercise. It means the Government has to determine from now on, into the future, how much public sector spending requirement will be allocated to dealing with the problem attendant from the HIV/AIDS epidemic. Therefore, beyond the \$15 million, the Government is going to have to tell us exactly what it is likely to commit broadly down through the years, either as a percentage of its overall budget or in specific terms to deal with the problem.

We also need to be conscious that Barbados is a tourism destination and that the question of sex workers, *et cetera*, is an important consideration in that regard. Again, it is not only sex education in terms of children. I noticed a report in the *Nation* Newspaper... Every now and again we get these very sensational reports about the number of young people in Barbados who are engaged in active sexual activities and the age at which they start, the statistics of which do not always bear out the headlines that are attendant to them. I am not sure that the statistics I saw were really as earth-shattering as people may want to pretend. However, in the context of primary school children again, with the existence of HIV/AIDS undetected or whatever within the primary school systems, these dangers are very great and are very real.

3.05 p.m.

Sir, that is why we need to focus on our young people but beyond that, there is also a need to focus on those persons whom we do not officially acknowledge as sex workers but who are in fact, engaging in that kind of activity. We are very good at pretending that these things do not exist and suggesting that if you accept that these things exist, all of a sudden Barbados becomes the most immoral place on God's earth. When in fact, we know the amount of gambling that takes place in Barbados and for those who morally oppose gambling, despite the fact that we pretend that gambling is something that is almost foreign to our country.

Again, we know and have known, not from yesterday, but from the 1960s that there have been persons involved, as I say, in what one might call sex employment or sex workers and that is known and because of our tourism industry, it is something we have to accept. We know the widespread use of drugs in our country and even though we may not be able to cope as effectively as we could with the incidence and use of marijuana, I am more concerned about those persons who go on to use more serious drugs at this time.

I believe that where the attendant to the use of those drugs is the exchange of needles or other kinds of activities by which they can become infected, we need to focus on life style changes and determine, for our country, what we

believe to be appropriate lifestyles, and promote them actively.

It is also important to recognise that as politicians we do have a role to play, not only in visiting the HIV/AIDS Hospice and carrying a few tins of condensed milk and some corned beef and going to visit people and offering them a few token items to assist them through their pain and distress. I believe persons do, by and large, despite what we may think about ourselves and the extent to which we may pull down ourselves, look to us for signals about how to construct their lives and how to succeed.

Therefore, we have an important role to play in seeking to put them on a desirable path and in ensuring that the lifestyles that they pursue are healthy and that we could try to insulate them from the impact of the HIV/AIDS crisis.

In small societies, there is also the problem of confidentiality. This is always a major concern so that as you expand the programme and as you make drugs available or more widely available to persons who are suffering from the virus, you have to recognise that it also means that a larger number of persons are going to be aware.

I do not know what methods are going to be used. Perhaps the pharmacists may be more involved and perhaps other people who are health professionals who would not have been involved before, are going to become more involved in the programme and this in itself, is something that we are going to have to manage very carefully.

If you live in an environment where you have a large population, in which people do not know their next door neighbour, that is one thing. But in a small society with 250 000 people, all you have to do is break out with a rash, or your hair start to drop out, and people do not view that as a skin problem but they say that you have HIV/AIDS. If you start to lose weight or if there are any physical changes, your teeth drop out or whatever, people start to speculate at that level and if it is confirmed, you could imagine the pressure that must exist both mentally and otherwise, as I say in small communities, is very great.

Sir, I agree with the Honourable Member for Christ Church East even though he did not describe what he believed was an appropriate lifestyle, that we need to have a more humanising approach to dealing with this problem and to ensure that those who are unfortunately suffering from the HIV/AIDS virus are given the best opportunities that can be offered to them in the circumstances.

Sir, these are some of the issues that concern me and I only rose because I felt it was still necessary, in the context

of what dangers confront our young people, to say that I still believe firmly in my heart, that we have an obligation, as politicians to tell people what is the ideal environment in which our young people can grow.

We have that obligation and we must not succumb to restrictions that all of the restraints should be removed and that people should be free to make every choice that they want to make. There are just some choices that Barbados cannot afford because we do not have the resources. We have already committed ourselves to providing for our citizens and because of that, as I say, where somebody chooses on their own volition to be irresponsible and to be careless, it has a cost to the Barbados Government. In many other countries of the world there is no such cost, either because the Governments do not have a facility, or do not have the kind of social provision that we have and therefore, it is irrelevant both to policymakers and even to people living in the community, what happens to that individual.

I do not think that is the kind of Barbados we have grown up in, and perhaps one of the reasons why we pretend that things do not exist here when we know very well that they are consuming our society is because, very often if we acknowledge the magnitude of the problem, it cuts against the grain of the perception that Barbadians have of themselves. Therefore, it may reflect the way in which people react in trying to solve a smaller problem because they start to see it as too large an issue with which to deal.

I do not think this is too large an issue for us, working together as Barbadians and I pledge their support. I believe the Honourable Member for St. Lucy in his remarks, even went further than I did, in saying that we believe that the Government has an obligation, in this regard, to work feverishly to protect a generation of Barbadians from annihilation because, as I say, we would have failed to say to them that there are some things that we simply cannot do. They bear too great a cost to Barbadians and to Barbados as a whole, and we have to urge you by whatever means possible, to avoid that kind of contract.

Thank you, Sir.

Hon. Miss H. E. THOMPSON: Mr. Speaker, I am very pleased in this debate to give support to the loan agreement that is before the House. I think that it represents on the part of the Government, a very serious investment in our human capital and insofar that it is an investment in our human capital, then it is an investment in national development.

When one recognises, Sir, that on average every three days a person in Barbados dies of HIV/AIDS, then one has to recognise that this is a disease which has taken a toll on the public and that it strikes the most, those people who are in their most productive years.

I was just looking at the figures, Sir, and it is interesting to note, in the information given by the Ministry of Health and by the Commission, that between 1984 and March 2001, the largest cohort of Barbadians who have died as a result of HIV/AIDS, have been in the 30-44 age group with that number being 628. The two cohorts which immediately follow would be the 15-29 age group with 292 persons and the 45-59 age group with 137 persons.
3.15 p.m.

I think it is very interesting that in the age group 1 – 14 – and we must assume that in that group there are not only those persons who would have contracted AIDS *in utero* but some of these would have been persons themselves who were sexually active – 60 persons have died. In the age group 60 plus, 137 people have died and it is very interesting that of those 137, 107 of those persons have been male and 30 females. Now, I do not know what that tells us about the proclivity of the males in our population but it is a very interesting statistic. When I was Minister of Health, that was something that I found very interesting because it seems to me that is exactly ...

Asides.

Hon. Miss H. E. THOMPSON: The Honourable Member for St. Lucy is right that there are a large number of men in the 60-plus age group who are sexually active with women substantially younger than themselves and who are ending up contracting the disease. In that age group they tend to think that they would not catch the disease but they are, in fact, at considerable risk and these are not statistics to ignore.

I, therefore, commend the administration on this particular initiative which in my view is part of this whole attempt to lift the national profile of HIV/AIDS, its potential impact on the most productive age groups of our population and, in fact, to ensure that the programme has a multi-sectoral approach and that every Government agency and every quasi government agency are involved in some kind of progressive AIDS programme which seeks to ensure that the number of people who are contracting the disease is significantly reduced and that other persons who are, in fact, already infected are treated in the most humane way, at the expense of the State.

The Barbados AIDS programme continues to be the most progressive AIDS programme in the Caribbean. Very early on, a previous administration in Barbados established the National Advisory Council on AIDS (NACA) and that Council did a great deal of work in terms of the sensitization of Barbadians to the issue, the development of initial protocols and a policy agenda to deal with the problem of AIDS in Barbados. By 1994, however, when we came to

government, that programme had lagged, NACA was no longer meeting and the AIDS programmes had gone into abeyance. We sought as a matter of urgency, I then carried the portfolio of the Minister of Health, to revitalize the programme and to give it a new and more forward thinking thrust. I think we were able to achieve that even if I appear to be blowing my own trumpet in this regard and I apologise if I do but I simply want to put the facts before the House. We established a vigorous support programme for Persons Living With AIDS (PLWAIDS), so that they were not ostracized and alienated by families, friends, co-workers and everybody else. We provided a strong support system for them. We expanded the role of the AIDS Information Centre which had been established prior to 1994. We established a food bank because a number of people, as they became progressively ill or as they were fired from their jobs when it was found out that they had this disease or were alienated from their families, had no access to income and as a result no access to proper food. It is critical, Sir, for those people who are HIV infected or have full-blown AIDS not only to be properly medicated but to have a well-balanced and nutritious diet. We established a food bank which allowed persons who have the disease to access food on a regular basis without having to make any financial contribution at all to the programme. The food was available to them free of cost.

3.20 p.m.

We extended all the support programmes to the persons suffering with AIDS and by early 1995 within six to nine months of this Administration's coming to office, Barbados established what was the first in the region, the first hostel for persons infected with AIDS in the institution of the Elroy Phillips Centre.

That institution has proven to be a source of succour and a source of respite for many persons who have been struck down with this disease. People of all social backgrounds who find themselves brought low by the ravages of AIDS have been able to get comfort and care in their last days in the Elroy Phillips Centre. Several other Caribbean islands have now followed our example, many years post our having done it, to establish similar hostels or hospices in the region to give support to persons with the disease.

In 1995 as well, Sir, Barbados again established what was the only programme of its sort in the Caribbean when we took a decision to give AZT to pregnant women who were HIV positive or had full-blown AIDS from the time of the first trimester of their pregnancy, in tablet form and intravenously during birth and then with the corroborating support medication after delivery and then to give AZT to the new born children. I think it is for a year, because the medical evidence was that where that treatment regime was followed the offspring do not contract the disease or even if

they show HIV positive initially, eventually the disease appears to leave their system. That was critical, Sir, if we were to save a generation of Barbadians to stop the phenomenon that has devastated Africa with young children orphaned, alienated from their families, nobody wanting to care for them because of the fear and the stigmatization which exists with this disease.

That we were able as far back as 1995 when nobody else in the Caribbean was doing it to put a programme like that in place is a tribute, I think, to this Administration. At that time, Sir, we were targeting 25 to 40 persons per year and it cost us \$1800 per patient per month. For every pregnant woman who had to be treated with AZT it was costing the Government of Barbados \$1800 per person and then of course a similar amount for the child.

Sir, even though this really did impose a stress on our budget at that time because it was coming at a time when there was a concomitant increase in the incidence of chronic diseases in Barbados which we had to find medication for, we felt at the time that that was the kind of contribution we needed to make for that group of at-risk young people if they were to have an opportunity to live comfortably in the land where they were born.

It was during this period, Sir, and I heard the Honourable Member for St. John talk about the need to have programmes for sex workers but I would wish to inform him that as far back as 1995 under the leadership of Dr. Carol Jacobs who is now, in my view, rightly classified as a czar and I think that we have to thank her for the contribution that she has made selflessly to this programme over time without recompense, without remuneration she has committed to it, and has worked tirelessly. We started then back in 1995 a programme for two specific groups, sex workers of all types, and we did it very quietly where we went into the "red light" districts and into communities where we knew that sex workers existed and we worked with them in order to get them to practise safe sex in what is the oldest profession in the world and I think that we did record some measure of success in that regard. We also felt at the time that it was critical that we should target young men.

The Honourable Member for Christ Church East is right that very often it is young men who do not really know how to put condoms on properly or are likely not to use them properly or are so impatient that they do not want to put them on or they are the ones who complain about the lack of sensitivity. We worked with young men on the block and young men in communities and in youth groups in order to ensure that condom use became standard as far as we could guarantee it amongst our young men.

We also worked with young women in the polyclinics to encourage them to encourage their own partners to use condoms where necessary so that there has been a very active and very aggressive programme.

Aside.

Hon. Miss H. E. THOMPSON: I am very happy to report and I say thank you to the Honourable Member for St. Thomas who just passed me a note and I think it is important in the context of the remarks I was making to have it read into the records. In 1995 when we started this programme – I see the Honourable Minister of Health has just joined us – the mother to child transmission of HIV/AIDS was 35 per cent. With the implementation and the continuation of this programme that transmission has now been reduced to four per cent.

Sir, I think that speaks to a tremendous record for a developing country with limited resources such as Barbados to have been able to achieve that in a six-year period. Similarly, Sir, by the time we came to Government in 1994 and you will note, Sir, that in the context of the remarks that I am making today I am trying as Bajans say, Sir, to give Jack his jacket by giving credit to the former Minister of Health for some of the measures which he put in place.

By the time we came to Government in 1994 we were one of the earliest countries in the developing world to be able to guarantee a safe blood supply. In situations where in many developing countries and in a few developed countries there are still incidents of transfer of the disease to patients when they go for blood transfusions or other medical treatment requiring them to be transfused. We were able in Barbados to guarantee the integrity of our blood supply.

We had hoped in 1995 and before I left the Ministry, before I was hastened on my way in 1999, to introduce a strong programme of anti-viral drugs for all persons who were suffering from HIV/AIDS. At the time, the cost was \$1600 per person – I am seeing \$1600 per person per annum but I do not think that that figure is correct. I think the figure is higher than that because what we did at the time would have cost us to introduce...

Aside.

Hon. Miss H. E. THOMPSON: Yes. \$1600 per person per month – I knew that the figure I had could not be right – to treat people with HIV/AIDS. I believe that is the price now when the cost of the drug has been considerably reduced as much as by half. In 1995, 1996 and 1997 the cost was double that and when we looked at the number of persons who were infected or had full-blown AIDS, we simply could not have afforded the millions of dollars it would have taken to put the programme in place. I am very

glad that over time with the lobbying of the developed world that the pharmaceutical industry has reduced the cost of the drug and with the aid of this particular loan we are now able to give support to many persons who would otherwise die or have to endure a life of agony as a result of the ravages of this disease and Barbados is now able to protect its people. I am really very pleased to see it.

Africa, for instance, is not only a country in deep political crisis but part of what is the concern now about the future development of Africa is that a generation has died and another generation will die as a result of AIDS. If we in Barbados do not try to protect our only resource, the human capital that we have, then Barbados is not going to be able to enjoy the kind of development that we are accustomed to nor are we going to be able to continue to build our economic growth.

Sir, why AIDS represents a threat for Barbados of even more significance than it would for many other countries is that Barbados is showing an aging population profile. Fewer and fewer people in Barbados are having children. Many women such as myself, professional and otherwise, are making the conscious decision not to have any children at all.

3.30 p.m.

The size of the average family is getting smaller and smaller because once upon a time the average family would be five and six people. Mr. Speaker, my mother had five children but my sister has two children and I have none. We are typical of what we are seeing in our population profile today. Families are small and more and more people are living longer as a result of improved health care so we are not getting the large numbers coming into the workforce that we used to.

Sir, I am going to deal with attitude as well but when I was Minister of Health one of the complaints that men frequently made about the use of condoms, apart from lack of sensitivity, was the fact that standard size condoms are not the correct size condoms for black men. After visiting the pharmacies and seeing what was available, I am happy to report that we can now go into pharmacies in Barbados and see a variety of large size condoms which were not available before.

Sir, if men cannot find condoms that fit, then they are not going to use them. Sir, I went to Collins Limited because I felt I had a duty as Minister, having heard men complain repeatedly, to do something to assist them in the programme and Collins Limited in particular has been very responsive in this matter.

Sir, there are a few issues that we still have to deal with as a society. One is giving support to families who have a

member with AIDS because to discover that a family member has AIDS can be devastating to that family. It is amazing that people often blame the person for catching the disease. Sir, how does one manage the household when a family member has the disease? How are the linen and crockery managed? How does one deal with the use of the toilet if there is one bathroom for everybody and maybe there are children and adults living in the household?

We need to get into a broad-frame educational programme that gives sensible support to families who are confronted with this problem. Very often people get put out of the household simply because the family does not have the knowledge to cope with AIDS and because of lack of information and fear and to protect the rest of the household they put out the member who is in danger of putting the rest of the family at risk. Sir, I want to appeal, now that we have this loan, that a programme for family support be established.

Sir, I think there is still too much stigmatization and poor attitudes in respect of AIDS. Some months ago there was a strong rumour that I had contracted AIDS and it was amazing the way people reacted to me. Persons were sceptical and when I reached out to shake hands or to embrace people they would immediately pull back because they were afraid and having heard the rumour they felt there was some truth in it and they did not know how to treat me.

Sir, when I reflected on it, one of the most devastating things for a person who is HIV/AIDS positive must be the fact that so few people want to touch them. Sir, we value human touch whether it is a slap on the back or to shake a hand. The value of human touch and caress is very important and this is one of the things that you lose immediately once you become HIV/AIDS positive and it must be one of the hardest things to live with.

We have to educate people in the community to know that when a person is HIV/AIDS positive that it does not mean that you cannot touch them or that you have to stay away. We have to teach people in the work and school environment how to treat persons who have AIDS, what is acceptable contact and what is unacceptable contact and that simply because somebody has this disease it does not mean they should be totally alienated emotionally from friends, family and the rest of the community. It is going to be very important to develop protocols which allow for us to treat people in the social and work environments who have this disease.

Sir, greater public education is needed. We still have an attitude that somebody is to blame. There is also a false projection that – A man was attempting to pay me a high

compliment, soon after the rumour had circulated that I had AIDS.

3.40 p.m.

A man saw me at a supermarket in my constituency and he was looking at me, up and down. I was wearing something close-fitting, Sir. I was packing my trolley and after a while I noticed that he was following me around in the supermarket. Clearly, when it overwhelmed him, he came up to me and said, “you in good health for true. You cannot look like that and have AIDS.”

Asides.

Hon. Miss H. E. THOMPSON: We think that because we look at people and because they look healthy we can make judgement about whether they are HIV positive or not. That is something that we must be educated about. Nobody bears the stamp of AIDS on them. You cannot pick it easily. Sir, anybody who is sexually active and takes the risk of not using a condom, even once, can put them at risk of AIDS.

Sir, if we carry out a survey and people are asked to be honest, the majority of people would say that they do take chances sexually and do not use condoms every time. It means that all of us in the society are at risk. Therefore, there is no need for us to treat our more unfortunate brothers or sisters who contract this disease with contempt, because there but for the grace of God goes any of us.

There are a few more points I want to make, Mr. Speaker, but you have indicated to me that I have two minutes left.

Mr. SPEAKER: You have one minute now.

Asides.

Hon. Miss H. E. THOMPSON: I would wish to make one point. It is a point that I feel passionately about. I am unapologetic about it. I would wish to recommend strongly, that we make specific amendment to the Offences Against The Person Act. As I recall it, murder is defined as an intention to kill or cause grievous bodily harm with malice aforethought.

It is my view that if a person knowing themselves to be HIV positive or to have full-blown AIDS without informing a sexual partner, had sex with them, then that individual is evincing an intention to kill or to cause grievous bodily harm. They are passing a death sentence on the individual. They are putting that person at terrible risk. I feel that wherever an individual goes out there, knowing that he or she is HIV positive, does not inform a sexual partner, has sex

with them, without using a condom, that person should be charged either with murder on the death of the partner or with attempted murder, or with the attempt to cause grievous bodily harm. It is a very serious matter, Sir.

I have recently been involved in a situation where a person whom I know and who was very prolific sexually, had sex with a number of women not using any kind of protection. To my knowledge four of those women are now HIV positive, they are only the ones that I know about. It is a terrible thing that those women and their children have to endure.

Sir, I believe that this is a matter that we have to treat with upmost seriousness and the Honourable Attorney General has to look at a legislative amendment which is cognizant – Sir, I am glad that the Honourable Member for St. Michael North West, the Honourable Attorney General of Barbados is re-entering the room at this time. Sir, this is a very serious matter and I would wish that sometime very soon in this Honourable Chamber, we should give legislative effect to what I speak of today.

Sir, I wish to commend all of those persons who are now charged with the responsibility of carrying our AIDS programme forward. It is, indeed, a serious and tremendous responsibility with which they are charged. In a real way they are protecting the human capital and the future development of our country. Therefore, Sir, I wish them every success in this endeavour.

Thank you.

Mr. T. A. PRESCOD: Mr. Speaker, I rise to make my contribution to this very important debate. I am extremely proud that a country of 166 square miles, with limited resources, can embark on a programme like this and have access to US\$15.1 million from the World Bank in order to expand this programme and to remain consistent in responding to treating the victims of AIDS, also being able to put preventive measures in place through education and other means in order to be of assistance to these poor persons who have experienced the pain, after having enjoyed the comfort, in some cases, of sexual activity.

I make this point because the Honourable Member, who spoke before me, indicated that every three days there is a victim of AIDS in Barbados, but every night men and women take the risk of becoming a victim.

Tonight in countries like Africa, especially South Africa, Nigeria and some of those African countries, the State would be happy to be in possession of finance to be able to respond to the most vulnerable poor in the society, who probably have the highest level of sexual propensities.

In some cases, most black men do not perceive themselves as macho men unless they are able to have more than one relationship. We have argued the case, to our advantage and to give credence to our behaviour, that it is part of our cultural heritage to have more than one woman under the legitimacy of polygamy. Others have argued that black men, in countries like Barbados, had to service partners, more than one female partner, because men in search of income in order to feed their families in countries across the world had to leave many women devoid of the joys of sex. Therefore, men felt that they had the responsibility to travel from one house to another and fill that void.

Sir, a macho man in this society is not a man of ability or a man of wealth, but a true macho man is a man who has more than one woman and that myth has been perpetuated in a society like ours. Sir, even among the youth in their teenage period and among old men at the age of 60. Men feel that their manhood is being threatened as soon as the potency level falls. They use all types of boosters, drugs, in order to restore their manhood because they believe that as long as they cannot have an erection, life is not worth living and that they have outlived their usefulness. Therefore, in a society where that myth is perpetuated, we have a fundamental responsibility to reverse a myth that has been given credence in a society like this. I am going to call not only for the mechanism that must be put in place by making these drugs accessible, but we have to have an independent educational programme in this society to reverse that type of psyche in the male folks within the society.
3.50 p.m.

I am not trying to say that only men are the victims of AIDS, but the figures seem to suggest that more men are the victims of AIDS than women and obviously we know the reason for that; men are extremely active across the landscape and mostly after 6.00 p.m. Sir, the mechanisms that are being put in place are plausible. The methodology that we are using is to have a multi-sectoral approach and also an inter-ministerial approach to this problem with each individual agency focussing on the society with its own programme. Sir, that is admirable but what I am concerned about is that in some cases, especially the educational programmes that are carried out by medical practitioners and which are usually in lecture form, sometimes using the scientific or technical language of these practices, in my view, does not come over in the same comprehensive way that it ought to come over, in order to make those who are more active to be fully aware of the dangers of AIDS.

Men do not reason when they are going to have sex, neither do they anticipate in most cases if they are going to contract AIDS. Most black men believe that they must conquer and they also hold a myth that sex is not sex with a condom. These are the harsh realities that we must face in Barbados and as the Honourable Member for St. John said

before, we need to put the fact in simple language so that we can reach the people that need to understand the dangers that exist in our society.

Presently our human capital is being challenged as a consequence of these joys. We are not talking about blood transfusion or having contracted AIDS through breast feeding. The figures which I have before me indicate that the majority of victims caught this virus as a consequence of sex, but I tend to deduce from it that it is those whose love for sex is so infinite that they do not even care if they have sex with man or woman.

The figures also reveal that while, initially, the victims were those who were involved in homosexual activities, the victims are now those who are heterosexuals – men who are playing football, tennis and cricket in order to enjoy the highest level of sexual activity. One of the institutions that I am very concerned about, that we must pay some special attention to and which we have been talking about for quite a long time is Glendairy Prison. It is said that such institutions, including the Psychiatric Hospital – I have not seen any such figures on the Psychiatric Hospital as yet – but interacting with inmates from that Hospital and hearing other inmates in their more lucid moments talking, it seems to suggest that that type of activity also exists within that institution. I cannot tell what percentage of the inmates is involved in the behaviour but that kind of institutional life seems to suggest that it is a haven for such relationships and, therefore, we have to put mechanisms in place to respond to these things so that when ex-inmates are reintegrated into the society and share themselves with other persons outside of the confines of the prison, that those relationships can be considered as wholesome relationships and that nobody who gets involved in these relationships will become victims as a result of the relationship between an ex-inmate and those who are on the outside.

I know that it is a very sensitive area to touch but it is one that needs to be seriously touched. We need to have some form of testing for those persons while they are within the prison. There is nothing wrong with testing inmates in order to determine if they are healthy. I do not know what type of adjustment will be required, if it is an administrative decision or the decision must be made by a higher quarter in the governance of Barbados, but I believe that it is something that we need to examine and make a decisive decision on how we are going to deal with matters of that kind.

Sir, I talked about the macho man's behaviour and I want to touch on these cultural practices in this society. I am not directing this to any specific gender, but it seems to me that men are more involved in this type of behaviour than women. We have people who get involved in sex in a very meaningless way because of the joy. We have exercises in

Barbados very early in life among teenage boys and girls where they swop partners. Sir, these are cultural practices that we must arrest and deal with in this society. We can put all the mechanisms in place to assist those who are already victims but we have to move in advance of persons becoming victims and try to educate the society to a level of responsibility to each other. Every human being must understand that someone cares for him.

One of the problems that we have in this society is that a lot of people believe that nobody cares for them and, Sir, nobody likes to live a life believing that they are not wanted in a society. Then there are too many persons out there who become victims of persons who are not genuinely interested in their well-being and would use all types of flirtatious language to capture their hearts – some through finance, some through the melody of the language. They abuse the relationship and, in many cases, these young women and men are victims of the joys which they spread.

4.00 p.m.

Sir, I believe we have to put an innovative programme in place. We have to not only use the method of panel discussions and lectures but we have to use poetry. We have to use the modern poetry that is appealing to young people. We have to use dub artists and not only calypsos because if the dub is reaching a wider majority of young people in the society, then we have to use that as a means of reaching the young people with the message, more so than trying to impose the music that we want to preserve because of its cultural value.

A clear indicator or manifestation of which music reaches the young people is seen at the National Stadium because if there is a calypso show, you will see the age groups that respond. Sir, if you have a show with dub, you will see the age groups that respond and we have to use it as a medium because of the reality in our lives.

We can also use dance as a form of reaching the young people in the society, but we have to use all the means available to us if we want to preserve the most valuable elements in the population, that is the youth in the population. We have to be concerned with the mortality rate and if we are now having one death every three days, we have to work assiduously to reduce that.

The African states that I mentioned before such as Nigeria and South Africa, with all their wealth, do not have a programme that is as effective as this. They are now in international forums, calling for the cancelling of foreign debts, in order to have capital available to them to fight this epidemic.

The State must be lauded for introducing a progressive programme like this and being awarded \$15 million to assist with the preservation of human capital...

Asides.

Mr. T. A. PRESCOD: We have to pay it back but normally, in these circumstances, these types of loans are very seldom given for such activities. Sir, that is why I said for human capital, soft loans, in the circumstances. Countries that are richer than ours are not able to reduce and control the outbreak of the virus. This is not like gonorrhea or syphilis for which there are remedies but we are still trying to find a solution of reducing the victims of HIV/AIDS. We are happy to have an antiviral drug at present, to help us to allow these persons to live much longer than they normally would live.

Mainly in these circumstances the poor persons in the society should be extremely happy that the Government is not indifferent. I do not know if that is because Government Members too are likely to be victims because everybody in this society is likely to be a victim in these circumstances.

The reality is that very few poor people in this society would have been able to find \$1 600 a month, in order to be in possession of the required drugs, to help them to suppress the ramifications of this HIV/AIDS which normally leads to AIDS.

I have known many young people in my community, who because of their state of poverty, were unable to extend their lives. I have also known of a case where a young man, just a few days before members of his community and the staff of the Barbados Water Authority were able to raise funds for him through organising a dance, went into the hospital and after spending a few days, by which time the finance was collected for him, he had already deceased.

Sir, this contribution of \$15 million is of general importance to the entire society but more so to those who would not have been in a position to raise that \$1 600 consistently every month, in order to treat themselves. I am hoping, Sir, that we intensify the message to the youth and to the general society in the near future.

The Honourable Member who spoke before me also spoke about the families of the victims. I have experienced the trauma that families go through, as a representative, having to go to the houses after their children deceased or their child deceased. I have seen the families as they went through that period of difficulty and there is a need for programmes, not only to be in institutions like the Central Bank or in areas that most working class people do not feel comfortable in, we need to have the programmes focussed more on the communities in the various neighbourhoods. They should be properly organised, well-structured NGO organisations like the Pinelands and Israel Lovell Foundation, to which I have an interest, Sir,

where they will be quite willing to work in collaboration with the Government agencies, in reaching the communities which are densely populated.

Asides.

Mr. T. A. PRESCOD: Sir, we need to be able to reach densely populated areas where in some cases, individuals do not even pay much attention to national debates in the House of Assembly or outside the House of Assembly.

If you have forums in the community centres, in the churches and in the schools, where men can use language that is conducive to their environment, and they can ask questions without having to face the embarrassment of being in an atmosphere where people expect them to use standard English, and expect them to understand technical terms but where persons feel free to use the language that they are accustomed to using. I believe that the educational programme will have a greater impact on the small communities across Barbados, so I am asking that the NGOs be involved in this campaign.

Sir, I am happy to see that these mechanisms, as I indicated before, will be put in place. We have some of them in place at present but we need to put additional ones in place and also, that new techniques will be used in the days ahead, in order to reach the general society and to reach the persons who are victims of the HIV/AIDS virus.

I want to give my full support to the Government in moving expeditiously, Sir, to see if we can reduce the mortality rate which comes as a consequence of this epidemic called HIV/AIDS. I also want to give credit to all those officers and Government ministers who are responsible for putting this programme in place over the last few years, especially when I look to see, Sir, that we have been able to curtail the spread of the virus to those unborn children, who would have been victims, if we did not have such a progressive and comprehensive programme in place that would negate the transfer of the virus from mothers to the unborn children in our society. Sir, I believe that is really one creditable point that must be made in these circumstances. 4.10 p.m.

In all, Sir, I am sure that the Opposition will support this programme and Barbadians in general would benefit as a consequence of this \$15.1 million from the World Bank.

I thank you very much.

Mr. M. Z. WILLIAMS: Mr. Speaker, I too would like to lend my support to the debate before this Honourable Chamber and to express my sincere congratulations to the

persons who have worked over the years in Barbados in relation to HIV and AIDS victims.

I would also like to say a special word of congratulations to the new commission, the National Commission on HIV/AIDS, which was formed earlier this year. I personally believe that this body can be considered as doing a remarkable job so far in bringing the awareness of AIDS to Barbadians.

I also believe I should take a different turn in this debate. I must say that one who has had a medical check to the point that one can feel comfortable in mind, and I am speaking from a personal point of view, one may consider that a life like mine may be considered as a permissive life and a life that one would probably figure that because there were several females involved in this life that there is a possibility that people like myself may be contemptuous towards the sickness of HIV and AIDS. I stand here today as a living example that it is not what you do but it is how you do it.

Asides.

Mr. M. Z. WILLIAMS: Sir, one of the important factors I am concerned about is the education process as has taken place over the years in relation to HIV/AIDS victims in Barbados. I remember the very first AIDS death in Barbados way back in 1984. It was about 4 o'clock in the afternoon that this person was churched at the St. Michael Cathedral and Barbados came to a standstill and everybody flocked to the St. Michael Cathedral because this was a popular person.

We have lived in this society to see some of our friends, family and associates pass on as a result of this sickness. It grieved some of us to know that a loved one has died but the most hurtful thing I am concerned about at this time, is that families seem to think that people who died of AIDS have committed the greatest offence this world has ever produced. I think we need to remove this belief that because an individual died of AIDS that he has committed the biggest sin on that family and that family has to live with that sin. It hurts my heart to think that since 1984 and to this very time 2001 that after all the educational process that has been carried out by those responsible for bringing the awareness of AIDS to the people that we are still creating the stigma of AIDS on people.

Sir, the medical profession of Barbados has shown us with their figures that they have been able over a period of time to sort some of the cases out and to look at a better system of treatment because someone who contracts the virus is likely to have a flu like symptom first or a mild sickness because the span of that virus is likely to be eight years depending on the person. For example, some people

who are AIDS carriers, as the Minister and representative of St. James South said, do not look like if they are carrying the AIDS virus because they look plump and they are blooming but they are carrying the virus.

When one looks back to 1984 there were two deaths in this country due to AIDS but when one looks at the figures from 1984 right up until today, it can be held at 62, so there has to be something that is going on in terms of rectifying and educating Barbadians about the HIV/AIDS virus.

I have heard several statements in here by people who I think should know better. I say that because we all are men and men must be honest and fair to themselves. I am going to be fair to myself and I hope that I can be fair to this Chamber. A lot of men seem to think that sex is something that they can nilly-willy deal with or that they have got full control of sex but several of them have been caught in the act of life because they could not spare those two seconds to put a condom on because they did not want to break what was happening at that time. Men feel that they are kingpins and they protrude right into the system because as far as they are concerned, they want to continue to act without a break.

Asides.

Mr. M. Z. WILLIAMS: Let us be honest with ourselves. We must not sit in this Chamber and blame women or anybody, we must blame ourselves for trying to be what I called the 'macho man' because men figure that if they stop to put that condom on they will lose the impact of what their mind set out to do.

Asides.

Mr. M. Z. WILLIAMS: We must be honest with ourselves. Women, in my humble thinking, walk with condoms in their wallets and in their bags. Men today drive around and some of them if they have to commit an act go to the automart to buy the condoms. They do not travel with the condoms; but women travel around with condoms in their bags. Women are more conscious of the contamination or the contracting of the sickness and are prepared in some cases. 4.20 p.m.

Mr. D. St. E. KELLMAN: On a point of order. The Honourable Member is misleading the House, Sir, by saying that women walk with condoms in their bags. I think what he means is some women.

Mr. M. Z. WILLIAMS: Most women who are sexually active are prepared.

I will go further in this Honourable Chamber to express the fact that some women have been trained how to place a

condom on the man's penis without the man even knowing that the condom is on his penis. There are many men today and in this society and some of us in this Honourable Chamber must admit that if you are not prepared then the battle at the end is all your fault.

Mr. Speaker, as I continue with this debate, people flock to the funeral in curiosity when someone has died of AIDS. Some flock to see how the person looked. Some flock to see how the family would react, but during that person's illness it hurts to think that they are ostracized, that the very people who put on their Sunday best to attend the last rites of that person did not spend five or ten or fifteen minutes with that person as a way of consoling that person in the course of his or her illness. This is one of the things that I think Barbadians must be conscious of.

It is all right to vote for this money, yes, Barbados must be seen as one of the leading countries in the world fighting against the HIV/AIDS virus but we must also understand that regardless of what money we vote for, regardless what technocrats, what people we have in position to control this, it falls back on the society to make it work.

You see young people going to fetes and school children are now going to school with two things on them and their parents must understand this is a fact. They are going to school with cellular phones on them and condoms in their bags. Until we accept that, we are not accepting the true things that are happening in Barbados. If you do not want to accept this in this Honourable Chamber, then you are not a parent in Barbados. How many parents in Barbados know that their sexually active child has a condom as part of his or her luggage in their school bag? How many parents have stopped to find out that?

The important thing about the issue here before us today is that the educational process is not telling somebody one thing and keeping it there, you have to go to the lowest form to make certain people understand what you are talking about. Do you think that when a fellow drinks a Guinness and gets some sweet words from a girl and walks around the corner and gets a little smooch on the corner and puts his hand around her and his body starts to activate and he is not prepared that he will stop? He is not going to stop, Sir, and you cannot blame the man. I have heard a lot of people blaming men. Some women in this country are responsible as well because they create a situation that is conducive for what I have just spoken about to happen.

Mr. Speaker, I am saying that we must be very careful in cases where there are fetes in Barbados. I remember at one time several nightclubs in Barbados made it possible to have condom machines in their establishments and the condom machines that were in the ladies' rooms at the various

establishments still exist in some places but they are not fed because nobody services them anymore. The condom machines that were placed in the male toilets at a lot of those places were destroyed and disfigured. It is a fact. You can still find some of those condom machines in some of the nightclubs of Barbados in the toilets of the females but where they were placed in the male toilets they were destroyed.

Sex is beautiful, sex is a gift, childbirth is a gift. One must understand fully that a child did not ask to come here. A child was not thrown here. Preparation was made before that child came and nine months of childbearing is proof that that child is a gift. It hurts your heart to think that in this day and age little children are born into this world with sickness. It hurts your heart when you hear of a young child whose life has not started, who has not seen a star pitch, to be affected by that serious HIV/AIDS. We have had several cases in Barbados. It is carried by blood in the system. I am not one to believe that if you use the same toilet as an AIDS victim that you are likely to catch AIDS. I am not one to believe that if you use the same glass as an AIDS victim you are likely to catch it, but I would be concerned if that AIDS victim were to use a shaver and I would not use the same shaving machine because it is likely that that shaving machine most likely might be contaminated as far as the blood is concerned. If the person has a situation where their fluids are exposed, then, yes, but I believe that is in the final stages.

When one goes to the doctor and gets an AIDS test and is told at the early stages that as far as it is concerned one is a carrier and in the early stages, I believe that is the time to let everybody in the family know. There are situations where some have been told and they have kept it back from their friends and families for a long time and when the families discover that that member of the family is carrying the virus it is too late. So I am appealing to those who know that they have had an AIDS test and those who know fully well that they have at least been called positive to be honest to themselves and be honest with their families and friends. If you are going to wait to the ninth hour to expect there is going to be help, the only help you will be getting is the help of the undertaker or of someone not giving you the assistance you want.

I think with all of the various bodies I am seeing involved in this brief, the several bodies in Barbados who are involved in the fight against HIV/AIDS from the police, the school teachers, the Ministry of Education, people from Youth Affairs, the Chamber of Commerce, that everybody in Barbados is aware of the seriousness of this virus. I am saying at this particular time that as we look at it Barbadians are becoming a little bit more conscious of it but the problem we are confronted with is the problem I spoke about earlier and I am not going to elaborate on it. It is sexual contact. We had a belief that the virus was only carried by "anti-men". If

that was the case and in some cases it is likely to be but we have a situation where there are cases in Barbados where people who have been involved in drugs have contracted the disease because of the various instruments used and as a result they suffered.

Let us be honest and I am going to say this on the Floor of this Chamber and I have no apologies to make, if we are to believe what I am hearing, then this country is doomed because there are a lot of young men out there who are not 100 per cent straight. Because they are not 100 per cent straight they are batting both ways. Because they are batting both ways, the innocent person is likely to be caught in the passage. I say to you in this Chamber it is not the older folk who become scared of death now. I am scared of death. I want to live all the time. I do not see why I should go at this stage of my life while I have had a beautiful life all along, a real beautiful life, an excellent life. I think that what we need to do at this time is to do what I have just said, parents, make sure that you are aware of your child's sexual activities, that you know exactly what that child has in that bag, make sure you know what your child is doing on the school compound. 4.30 p.m.

Mr. Speaker, as parents, if we are to fight this serious virus, we cannot push anything under the carpet. We should not feel that only the child from Cats Castle can be contaminated, we should also be concerned because the child from the heights and terraces also can be contaminated.

Sir, I am emotional in this debate because I have lost friends as a result of the virus. I have seen some of my friends who have the virus ostracized and people were looking away from them as if they were not friends at one time. Sir, we need to get over that attitude.

Sir, I would like to say special thanks to the doctors and nurses at the Queen Elizabeth Hospital, the staff at the Elroy Phillips Home, Dr. Timothy Roach, the Chairperson at the National Commission on HIV/AIDS who work day in and day out with persons who have the disease. I also want to say special thanks to Sade Leon-Slinger who spends a lot of her time counselling people who have contracted the virus and making them feel that someone cares and that they can live a fulfilling life even though they have the virus.

Mr. Speaker, I am pleased that this Honourable Chamber, in the year 2001, can discuss this sickness in an open way. In 1984 when it was announced that this country had a problem with AIDS no one wanted to deal with it at that time. Today, I am proud, as a Barbadian, to have the privilege to be in this Chamber to see my colleagues on both Sides of the Chamber agreeing that in order for us to have a safe Barbados we must put our heads, hands and minds together.

We see the number of cases of AIDS in Africa and people talk about black people having the virus but, Mr. Speaker, not only black people are inflicted with the disease. I am saying that we should not bring this disease into colour, age, community, technocrats or the man in the street because it is everybody's problem and worry.

Mr. Speaker, in closing I want to say that Barbados will be safer when we use the media to educate our citizens about HIV/AIDS. We need to go on national television and show men in Barbados that using a condom is not a problem and that using the condom at the correct time is extremely important.

I want to encourage the ladies to continue protecting themselves and I want to see the figures relative to men much lower when I come back to this Chamber at a later date so that it not a case where men are blamed but we have all put our heads and hands together and fight this good fight.

Hon. Miss C.Y. FORDE: Mr. Speaker, I am happy for the opportunity to participate in this debate. Many issues were already raised by Honourable Members and I will try to avoid repeating things which were said before but there are some things I would like to reinforce.

Mr. Speaker, in 1984 when the first cases of HIV/AIDS were known fear crept into the hearts of most Barbadians. At that time most Barbadians were of the view that it was a homosexual thing because only homosexuals were involved. I do not think that the population was properly sensitised to dealing with the disease, recognising that it was something new. 4.40 p.m.

There are other sexually transmitted diseases and as a young child I remember hearing people talking about a particular disease where the man would get a 'clap'. The man would use some penicillin and the problem would be solved. We know that the HIV/AIDS virus is devastating. Therefore, there has to be further research in order for us to be able to come up with some kind of treatment that would eradicate the disease.

Mr. Speaker, I remember as a teacher, in 1988, recognising that there were children in the classroom who had contracted the HIV/AIDS virus and the teachers and parents were afraid. There was so much gossip in the communities that teachers were ostracising other people's children because they heard that little children in the school were suffering with the disease. Sir, there may have been other workers on the compound who might have been HIV infected.

Mr. Speaker, I thought that the Barbados Union of Teachers, at that time, had done an excellent job in trying to

tackle the problem, sensitising teachers as to how to deal with students and other workers who suffer from the AIDS virus. The Barbados Union of Teachers prepared a handbook for teachers in Barbados and the Caribbean, through the Caribbean Union of Teachers. It is a document which can be used to sensitise them but not as a teaching document. Sir, I am not going to read from it but I would like to make it a document of the House so that other Honourable Members can get an opportunity to see the work that was done by the Union of Teachers. I am aware that doctors and other medical staff prepare themselves for this dreaded disease that has taken hold of human kind.

Mr. Speaker, I want to commend the Governmental and non-governmental agencies for the professional approaches they took to ensure that Barbadians became aware as to how to deal with AIDS victims at school, institutions and homes. Many Honourable Members have already spoken to this particular issue.

The comments that were made by the Honourable Member for St. Michael East regarding men having to fill that void that was created because many of the men went overseas to work, or words to that effect. I do not support it at all. It is a kind of socialisation that most Barbadian men have. They believe that they must have a different woman for every day of the week. Sir, because of that kind of lifestyle, I think that a lot of these health problems are impacting on us in the society. I think that our males and females need to take stock of their lifestyles and try in every area to improve them.

I support the call for a number of projects and programmes that would help to tackle the issue of education for members of our society and not only through drama and cultural activities. I support what the Honourable Member for St. Michael East said regarding the lecture approach that is usually used. I support any effort that will not only go the route of the lecture, but, indeed, demonstrations from among people within the communities, bringing the messages to people, not only in the communities but the church and pavilions and households as well. I think that will help to reach many other members of the population who may not, for one reason or the other, want to be seen in any forum because of the stigma that is attached to the HIV/AIDS disease.

Mr. Speaker, I support every effort to enlighten and educate the population. Before I lose sight of this particular point, Mr. Speaker, I want in a personal way to extend congratulations to the producers and actors in their *Final Truth* dramatic production. Yesterday there was a matinee show for fifth and six form students at the Frank Collymore Hall. I understand that tonight would bring the show to its conclusion. I think that it was a very timely

production and that all Barbadians should have made a special effort to see it.

I would want to support the idea that came from the production, last weekend, for our national television to use that production to sensitise people at home, in their living rooms. Everybody may not have had the money to go the Frank Collymore Hall, but the contents from the production speak volumes for Barbadians to get a good idea as to what is AIDS, how it impacts on the body and it is not a disease that impacts on the lives of only working class people. It spreads the whole gamut of the society and at all levels. Sir, I think that production should be given the necessary support by all agencies in Barbados but more particularly through our national television.

Mr. Speaker, the Honourable Member for St. Michael North West made mention of how victims are treated and sometimes their families as well. I support that. I have had former students and friends who suffered and died as a result of the HIV/AIDS virus. I know that it is not beyond any human in Barbados to contract this disease. I think that because the stigma was created in the first instance, many people point fingers, ostracise, insult, beat and do all kind of negative things to the victims and I think that is very unfortunate. Sir, when we speak as a people who are very highly educated, we boast of our literacy level, but when we hear comments coming from people who we expect to know better, it really saddens my heart.

I am seeing the HIV virus the same way that I see cancer, diabetes and other diseases that impact on one individual but it spreads and spirals out to all other members of the family. It impacts on them because of the treatment that has to be offered to the family, because of the monetary resources that must be available in order for them to get the best treatment and all the other things that help to make them comfortable during the final stages of life.

Mr. Speaker, I think that the gossip is what helps to destroy the psyche of those individuals who suffer from the disease. We need, as human beings, to be more sensitive, accommodating and empathetic towards other individuals. It is unfortunate that we have come along in a generation of Barbadians who have lent support to human kind at all levels. All of a sudden we seem not to remember the shoe is not on our foot but we do not know when it will come. I think that it is important that, as people who care for each other, we understand that we need to be supportive in every respect.

Mr. Speaker, I know that during the tenure of the Honourable Member for St. James South as the Minister of Health, the AZT was introduced at the hospital and various polyclinics free of cost to young pregnant mothers. We have heard of the excellent outcome of that particular exercise. I

would want to laud the medical staff and others who have been working assiduously to ensure that the percentage of the HIV/AIDS victims is reduced through the offering of that particular product. We know that it is expensive and that there are many people who would not be able to afford it. Therefore, the initiative by the Government must be lauded.

Sir, my concern, at this time, is for the 15 to 49-year olds, our most productive, in this society, and the 29 to 49-year olds who are the most economically active, and the devastating effect that the HIV/AIDS virus has had on that section of our population. When we look at Barbados and its size as a country that relies on its human resources in order for it to be able to expand, the support of the Opposition and, indeed, the initiative of the Government, speak volumes of what is happening here in our small country. When we look at the situation in the sub-Sahara Africa and the destruction that has taken place there, not only among the working class or the ordinary workers but, indeed, the impact that it has had on teachers and top civil servants, principals, *et cetera*, millions of them have died leaving millions of orphans behind.

4.50 p.m.

It saddens the hearts of many of us when we recognize how humankind can be wiped out by the disease and there are times when Governments are unable to put resources into the health sector that would assist with such ventures. It, too, is unfortunate when some Governments will put most of their budget into military exercises or buying guns and other war related equipment, which I think is unfortunate. Therefore, we in Barbados must thank God for the privileges that we have that a caring Government, with the support of the Opposition and others, can deal with this issue by the borrowing of the US\$15 million that will go a long way in helping to address the needs and help with the implementation of the programme; some of which are already implemented while others are to come, for our people here in Barbados who are considered to be the best resources we have in the world.

There are some objectives that have been outlined, Mr. Speaker, to show how the project that has been embarked upon involving, in the first instance, to show the eight-line Ministries that have come together in a collaborative way to be able to identify projects and to implement those projects across the length and breadth of Barbados. I think that initiative is useful because many individuals are of the view that when one Ministry does something it should be duplicated somewhere else and there is never any dove-tailing. But as far as I am seeing this whole exercise, Mr. Speaker, these eight-line Ministries have come together:

- 1 The Ministry of Health,
- 2 The Attorney General's Office,
- 3 The Ministry of Home Affairs,
- 4 The Ministry of Labour and Social Security,
- 5 The Ministry of Tourism and International Transport,
- 6 The Ministry of Youth Affairs,
- 7 The Ministry of the Civil Service and Public Sector Reform and,
- 8 The Ministry of Social Transformation.

They have come up with the concept and have put it together so that it could be implemented. I know that approximately over the last six weeks, many of the civil servants at all levels have been meeting and are being trained as to what this is all about and how to deal with the issue in the workplace, within the home, *et cetera*. I think that is a very bold step in helping to sensitize our workers and people as to how to deal with the problem. We must take out that stigma and deal with it as a reality in order for us to be able to handle the whole situation.

Mr. Speaker, I have a few other areas that I want to touch before I close and, in a very brief way, I want to make reference to tourism. Sir, I am not bashing men, but it is a reality that when someone speaks to them about their lifestyle, the number of different women per day, per week or whatever, when they are being cautioned about HIV/AIDS virus and the impact it could have on them, they remind you that you do not get AIDS from an animal. And I think that is very unfortunate. They remind you that to use the condom is not as pleasurable as to go skin to skin. Therefore, I want to caution all the women and men out there that it is important to stick to one partner but if they have any doubts – and you should always have your doubts – come with a condom or abstain from having sex. Use the preventative measures in order not to become a statistic a few months or years down the line and Sir, I very much stand for that.

I also want to make mention of the Bible. Many of the Books of the Bible advocate one man to one woman. I am not going to be here tearing down homosexuals, lesbians, or whoever. If they choose to have that lifestyle that is their business as long as it does not impact on the rest of the society. Therefore, two women together if they choose and there is one partner, that is their business. Two males together if they choose, that is their business. One man, one woman. If we continue to practice our good, wholesome lifestyle as the Bible has advocated, I think that many of these scourges that are now in existence would certainly die out.

I wanted to make the point about the tourism issue to say, yes, in order for us to have tourism and to be able to reap the benefit, we too are travelling to other people's countries. The emphasis must be placed on the use of protection when working with other persons who come in from overseas and to us when we travel, while ensuring that our health is well looked after in the entire exercise.

It is sometimes unfortunate when speaking to some of the more educated people and they speak as though they have no modicum of commonsense at all, when you start to talk about sex. Sex is pleasurable, they would like to have it every day. I think it is unfortunate and we need to become more realistic in the various things that we say and do. Sir, I am all for the abstention or the use of protection, the one partner in a relationship or sexual control. I think Mr. Speaker, that is the way we should go.

Another issue I want to touch on is that we have a lot of closet homosexuals, Mr. Speaker who, because of their lifestyle, live one life in the daytime and another at night. I think that it is important that each of us take stock of our life to ensure that it is not the almighty dollar that is most important. Sir, I always speak of an advertisement that used to come on *Rediffusion* when I was a younger child. That advertisement was all to do with McDonald Diquex and a hair grease and every time the advertisement came on, the first thing that was said was, 'have you ever wondered why millionaires jump off buildings?' 'Have you ever wondered why people have to bother about good health?' Sir, all the advertisement was trying to say was that health was most important in one's life. Therefore I think it is important that rather than having to look at getting that almighty dollar and doing anything to be able to get that money to buy a big house, a car or to send your children to ballet when you know that you cannot afford it – champagne mouth with mauby pocket. That is a very unfortunate situation. Too many of our people want to get rich quickly but they do not want to bother about what they are doing in order to get there. What is the point? At the end of the day it is vanity and vexation of the spirit, because when people have reached the stage of acquiring all the wealth, then they have to squander their health and then they are six feet down. It does not make sense at all. The unfortunate thing about that is that the young people are watching to see how the adults operate by making quick money and they too, are trying to copy or to emulate the same kind of lifestyle. I think that going that route, Mr. Speaker, will definitely destroy our society even further.

Mr. Speaker, I want also to make mention of the various groups in the society that volunteer time, service and resources, including monetary resources, to ensure that the various individuals get to enjoy a quality life even though they have contracted that disease.

5.00 p.m.

Sir, I speak of the bereavement services in particular, even though I know that there are other organisations. The bereavement services do not only deal with families after a death. That organisation deals with families at the area where there is terminal illness, where there is loss of a limb, where there is suffering at the level of a lame victim who is on the way out and so on. I think that organisation also needs to be commended for the excellent work that it is doing in this society.

We know that the trauma, Mr. Speaker, is tremendous. In particular, I am thinking of young children whose mothers and fathers have passed on, as a result of the HIV/AIDS virus. Sir, some of them are now in the society not having contracted the disease, but there are others who have, and really need special attention from teachers, neighbours and from other family members, in order for them to be able to spend the next few years of their lives enjoying it all.

I am happy for those persons, Sir, who are in the PLWHA called Persons Living With HIV/AIDS, the way that they have recognised that people care about them. They are giving them time and resources, which encourage them to come out and speak so that others can be sensitised. They say to them:

"You do not have to go the same road as I because of my lifestyle or because I am like this, it is a result of me not using the necessary protection. Therefore, I am free to speak. I am HIV Positive but I am now taking stock of my life at this point in time and I am encouraging all of you."

Sir, this is the kind of education that is being offered by these individuals and coming out to say that they have HIV/AIDS is therefore giving young people another chance which, I think, is a very laudable exercise. I would want to thank NACKA and the AIDS Centre and all the other organisations that are working with the young people and others, to help them to choose another way in life.

I have already touched, Sir, the use of the print and electronic media. I mentioned *CBC* but indeed the print media also has a role to play in helping to sensitise others. Sir, mention was made earlier of the blood screening in 1985 and I too am unaware of anyone who has been infected through blood transfusion.

I talked about the AZT in 1999 for free, the training of the public servants and others in communities, the counselling of victims, families, friends and others, the participation of these line ministries, target groups for sensitization, religious leaders, youth groups, sexually active young people and others, who will help to take the message into the various communities.

Mr. Speaker, I want to laud all the people of Barbados for the understanding, care, concern and sacrifice that they have made in helping to change the situation by bringing more persons on board and helping them to understand how HIV/AIDS will impact on their lives.

In wrapping up, Sir, I would just want to make mention of some other initiatives. Some are in place and some are still to come on board concerning the fully staffed and equipped walk-in clinic, a drop-in centre with a food bank, easier access to social services, micro lending facilities and skills training, recognition of individual human rights, documentation of discrimination in any form, ensuring adherence to work place policies and two booklets, the ILO Code of Practice on HIV/AIDS in the workplace and the list, Mr. Speaker, goes on.

Sir, again I want to thank the Government for its proactive approach. We could have been putting money into other agencies. We know that the World Bank had a policy where they would lend funds for building structures and repairing roads. I am happy that the Government has taken this bold step to look at the preservation of humankind through the funding of this HIV/AIDS project.

I want to congratulate all those organisations with Dr. Jacobs, Ms. Alies Jordan, Sade and others, those who work with Elroy Phillips Centre and the other organisations that have been working, making that great sacrifice to ensure that all Barbadians, those who are down with HIV/AIDS disease, as well as the families and other support organisations get the benefit of sensitizing the public, bringing the others on board so that we can help to eradicate the scourge of the HIV/AIDS.

I want to thank you, Mr. Speaker.

Mr. D. T. GILL: Mr. Speaker, I rise to make my contribution to this Resolution and I would say that today is probably the most significant and momentous sitting of this Parliament for this Century.

Sir, this Resolution transcends any legislation dealing with social justice, criminal justice, any economic Bill, primarily because it is about the actual savings of people's lives. Sir, to put it in a capsule, this Parliament today is waging war on the HIV enemy. Unlike war, where thousands of people are exposed to death so that several thousands more may live, we are addressing the concerns of thousands of people who are facing death, having exposed themselves to the enemy.

Hence, Sir, we are hoping to give a longer lease on life so that people can see their children and they could have a slightly longer association with them, Sir, both before birth

and after birth. Sir, in recent times I have been associated with summer camps and I have come across some cases where there were three sets of children from different parents and one set of children had lost a mother, one set had lost a father and the other set were orphans. They had no parents. Sir, this was just a gathering of some fifty to seventy-five children. I know that figure may not be statistically significant but it may set you to sit upright and to think.

It is absolutely important, Sir, that we acquaint ourselves to date, with certain figures. They will cause some alarm but not alarm, Sir, to the extent that you would run away but rather, alarm that would make us sit up and work out well-thought and level-headed decisions. Sir, I have here some statistics which show the numbers of persons being infected with the HIV/AIDS locally, some two thousand four hundred and sixteen people between 1984 and now.

Sir, in the year 2000, we would have had some 267 HIV/AIDS cases and it is more alarming when you look at the actual numbers of deaths between 1984 and March 2001 which is the first quarter of this year. We are now in the final days of the last quarter and we see that one thousand and eighty-six persons have fallen victim to the enemy. In the year 2000, one hundred and eight people, in 1998 one hundred and fourteen people and, Sir, a simple arithmetical process of putting that over three hundred and sixty-five days of the year, will tell you are looking at something like a death every three days.
5.10 p.m.

Sir, we do not want to take those figures but if we look to the figures in the most developed country right next door to us you will see in the United States of America that some 6 000 persons have been infected with the virus and they are between the ages of 15 to 24.

In the year 2000 alone, the number of HIV/AIDS deaths were some three million worldwide, and I am led to look at the younger people who will carry the world tomorrow, so I look at people in the age group 15 to 30 and that figure includes some 580 000 children under 15 years old.

Sir, when one looks at the new HIV conditions occurring yearly in the United States of America there are some 40 000 to which 70 per cent are male and 30 per cent are female. Again, looking at that vulnerable age group which is expected to carry the world and societies, half of those deaths are persons less than 25 years old.

Sir, it is against this background both locally and internationally that this Parliament comes here today to legislate but two things underpin this legislation. One will be the cost and the other, or which get this legislation going,

will be the political will. If the will is not there then the project cannot be carried. To tackle this problem the factor or the main ingredient that concerns us is the actual drug therapy. Every Barbadian and every person in the world, I suppose, knows of the drug AZT. That and its offspring are seen as the drugs of last resort if you want to make sure that you would want to spend a little longer with your friends and your family.

Sir, one may tend to look at the cheapest source of drugs because only US\$4.4 million of this \$15.1 million is going to drug therapy, so we must make that clear to the wider population. If we are not careful as to how best we will spend this money then this project could be in vain. Therefore, I would like to caution those who will be doing the budgeting, allocation and management of the funds that the cheapest does not always mean the best.

A lot is said about generic drugs and I would like to say from the outset that I see nothing wrong with generic drugs because if these drug houses dealing with generic drugs are ethical companies, I have no problem with them going to the market. Sir, if there are fly by night generic companies I have a real concern there because vultures are out there who would like to get a piece of this \$4 million and you will hear that they want a piece of the pie and that aid can be sourced from such and such a market but we must be very careful. The generic houses that come to mind are those in Canada where you have big companies like Novo, Connaught and Apo who are known to produce generic drugs which are not very much different from the branded drug houses internationally.

First of all, we must source from countries, not necessarily our CARICOM partners, with a history for sound and stable government so that our supply will be uninterrupted. We must source from countries that are known for good manufacturing habits. We must source from countries that have state of the art technologies. We must source from countries which provide us with good airlifts, just as when we are looking at our tourist industry, so that preparations are not left at the Wharf side or at the airport for weeks on end while we are waiting desperately for the supply. We must source from countries which are going to label in proper English because I do not want to see us importing from countries with the indications, storage and expiry dates in Swahili, Dutch or Greek because Greece is known for its generic houses. We must source from countries known for sustainable and dependable supplies and from countries where companies do not spring up this year and by next year there is no trace of that company which happens very often because we should have learnt something from the dialysis machines of recent times.

Sir, as I said, there is a lot of money going around at this point in time or that will be circulating with respect to

this programme and we must be very careful how it will be spent and with whom it will be spent. If you tell me that there are countries within our region who are manufacturers you would want to know what you mean by manufacturing. Is manufacturing importing and then repackaging? Is manufacturing taking it in the halfway ready stage and completing it? Or is manufacturing starting from the raw materials and giving you the finished product?

Sir, a great part of this programme ensures or deals with the ensuring of the improvement of one's health. I have had persons come to my office and said to me that they are HIV positive and they have been getting some sort of medication but at times they cannot get them. Their nutrition is below par. People now are a lot more open and they will confide in you. I heard a previous Minister of Health speak that under her tenure, prenatal clinics saw to it that mothers were treated with anti-retroviral and the neonates were also treated with anti-retroviral so where we are today is a continuation of the seeds sowed earlier.

We have seen a fall in the mother to child transmission figures where in 1995 the mother to child transmission was 35 per cent but today it is currently at four per cent. We know it was an expensive feat to achieve it, but we achieved it and we should blow our own trumpets. When I say "we" I do not necessarily mean the administration but the entire Barbados.
5.20 p.m.

Sir, the anti-retrovirals are particularly the most important of all of these drugs being used in this therapy. Alongside the anti-retrovirals, and I did not hear much being said about it, are those other drugs which will maintain a healthy body, separate and distinct from the anti-retroviral therapy. These other drugs will look after things like lesions of the skin, conditions like tuberculosis, disease of the mouth – these are the areas that break down most frequently and make the patient unable – and this is why people will stand their distance – to enjoy a more comfortable life. It is important that these other medications be supplied and be available.

In so doing, Sir, we must make sure that we get the best price also for those drugs with the maximum potency available. This best price and best potency continue to occupy the mind of international bodies whether they are the World Health Organisation, NGOs such as the Geneva based group, Médecins sans Frontières – doctors without boundaries. The ability to purchase the best quality with the lowest price is an ongoing battle.

Sir, it is necessary that we take this three-pronged attack where we look at the anti-retrovirals as they are and then those others to which I have just referred, the ones

which I said will help to maintain a better well-being for tuberculosis, skin lesions and infected mouths. Those are the ones which you will see in the literature referred to as treating the opportunistic infections. Then, Sir, there are those which will look after the pain. There is a lot of pain associated with this HIV/AIDS syndrome, whether it is physical pain, joint pain, muscular pain or if it is psychological pain. Sir, we heard much today about people being ostracised and left out by their families and friends and that does create a great deal of pain.

I heard one of the Members earlier on the Floor speak to Brazil being able to reduce the price and that is a fact. Because once there is that volume being demanded, and I must add that Brazil is one of the countries which does its manufacturing but, in addition to doing your own manufacturing, if you have the ability to purchase in great volume then there will be this concomitant decrease in price. That is the basic premise upon which the Barbados Drug Service is built. So long as you purchase quantities in excess of a given amount then the price without taxes and duty will be significantly smaller than if you were purchasing below a certain volume. Because Barbados has already been involved in a formulary system and this rigorous system of tendering, this alone, or in great measure, has resulted in the price of certain medicaments being much cheaper than you can get even in the countries of manufacture.

Sir, I think that those involved in the Commission should, wherever possible, work with the international agencies such as the UNAIDS and the offshoots of the world health organisations and just as years ago the initial vaccines and the initial immunisation drugs were costly, relatively speaking, those agencies to which I refer were able to source and supply developing countries or underdeveloped countries with vaccines and various forms of immunisation at very cheap rates. Today, we do not even realise that when you take your children to the private or public clinics to get things like vaccines for whooping cough and vaccines for measles and tetanus that we are benefiting because of the work of organisations like the World Health Organisation and PAHO. Therefore, I would ask that those persons involved in this project keep very close ties with the international bodies so that wherever possible the price would be as affordable and therefore we could stretch the budget as far and as long as humanly possible.

Sir, there are other means by which we could get the best price available. There will have to be some collaboration between the Ministry of Trade and the entities which are driving this process so that they can look at voluntary licensing, compulsory licensing and parallel imports. These all have to do with getting ethical, branded drugs at lower than the price at which they are manufactured or in the country of origin.

To show you how the entire world trade is linked and inter-linked, we have spoken about the TRIPS Agreement, the Trade Related Aspects of Intellectual Property Rights, in recent times. We have to pay attention to the various clauses in the World Trade Organisation where companies and countries such as Barbados purchasing preparations which are under patent and the new laws will dictate the patent will expire after 20 years but there are mechanisms whereby countries such as Barbados could appeal and make it possible that these costly drugs could be allowed into the country at a more than reasonable price.

Sir, there is the other side of it, the economic and the social side of it which one has to consider and in the word of the Executive Director of the UNAIDS, Mr. Pieter Piot, this is what he had to say about this HIV/AIDS. He describes it as a major threat to development and to human society. Sir, very well and very potently put together. Sir, it destroys not only the body but it destroys the society and structures which Governments over the years laboured and put in place and, in the end, it undercuts the growth and harms the development of the society. On the other side of the Atlantic we see Botswana, when we look at our own black brothers how they are suffering, we do not want to go there and rediscover the wheel. We know what is happening there and it would be remiss of us to know what transpires in other parts of the world and knowing that our lifestyle, our sexual habits are no different from those other countries then, pray tell me, what should stop us from falling into the same position as countries such as Botswana?

Again, I am looking at the very young, those under twenty in the fifteen-year old group. In Botswana, it is astonishing to learn that a child of fifteen years has a one in two chance of dying of HIV/AIDS. Were we not to have followed that system of treating around birth the mother and the child we could have been headed for this situation. So the money to date, outside of this project, has been well spent and we know that once this project comes on stream it should also be well spent.

5.30 p.m.

Sir, it is not easy coping with someone who is suffering with dengue fever in the same household let alone HIV/AIDS.

Sir, this Resolution today holds the hand of the impoverished because it is a fact that poverty will continue to breed and fuel the abject poor. The abject poor cannot afford proper nutrition or the basis supplement. Sir, the abject poor, without a stable job, would be led to prostitution much easier than the person with a well-paying job. These are factors which impact negatively on the poor and we must look after that sector of our economy.

Sir, apart from the socialization, we must look at other conditions which Barbadians must deal with on a day-to-day basis. Those are the conditions that are hereditary that we cannot escape easily like diabetes, hypertension, cancer *et cetera*. Those take a great toll on the human psyche and productivity of the economy grid and to couple those conditions with HIV/AIDS, unchecked and running rampant, you will see the toll it will take on our budget and health care system and also how the society can easily breakdown.

Sir, there was mentioned about children being orphans. This takes us back to child labour from which we might want to extricate ourselves, where one child has to look after five or six siblings. Sir, this does not augur well for the society or development of children in the 21st century.

Sir, I am sure this must have occupied the mind of the Minister of Finance when he visualised how the wider economy at the macro level could be affected by a work force, diminished and dwindled, if the condition of HIV/AIDS should go unchecked. In parts of Africa in 2001 there is 0.7% falloff in per capita and it has been projected that in other parts of Africa by the year 2021, if measures are not taken like this one, some 24 to 33 percent of the GDP will go into decline.

Sir, I remember saying to some of my friends when the first case of HIV/AIDS resulted in Barbados that it was nothing to smirk about because in the not too distant future every family in Barbados will lose a relative, somebody on the same street, someone whom they went to school with or worked with. Sir, today we know close friends, relatives and associates who have gone the other side.

This project, apart from purchasing the medication and the other support schemes must involve everybody. It has to be a totally collaborative process. It has to involve the schools, teachers, counsellors, the trade union, private enterprise and the insurance companies so that by 2005 we can look back and see from whence we came. We can ill afford at this point in time to adopt the technique of waiting, watching and trying to rediscover the wheel or become complacent because we are voting these sums of money and above all not to comply.

Sir, I am grateful for your time.
5.40 p.m.

Hon. R. C. EASTMOND: Mr. Speaker, earlier in the afternoon reference was made to the number of deaths in 1984 caused by the disease that we are here discussing. While it is true that in 1984 not as much was known then about HIV/AIDS as is known now. Let me begin by raising a particular attitude which prevailed then and which I daresay has not vanished entirely.

When the first victim died, apart from the speculation, rumours and the curiosity, as to the nature of this disease, Barbadians were noted, at the time, for wondering what really was this thing and who would be affected by this thing. It seems to me as in early times, it still has not gone. Many people look at this from a moral perspective more than from anything else.

I recalled hearing all over Barbados when that first unfortunate incident occurred, that A's name was on a list and B's name was on a list. The allegation was that the deceased had a diary and a list. The way people have 'whizzy whizying' and spreading the gossip. There was little sympathy for the victim. There was a rash judgmental attitude taken to this. In time, notwithstanding the dissemination of a measure of public education enlightening Barbadians about this, we still have, Mr. Speaker, the very unfortunate attitudes where rather than to offer love and empathy to those unfortunate persons who suffer, people still tend to identify sufferers as persons who went astray, who have fallen from the way like lost sheep, who have transgressed some cardinal role and who are being made to suffer for the errors of their ways.

Sir, considering this unfortunate attitude, it is my respectful submission that there are still persons who tend to see this as a moral matter and a disease caused by recklessness. I am always taken aback when I hear people sit in judgement over sufferers, behaving as though they are immune and behaving as though the sufferers are inherently wicked by having done something wrong.

The fact is, in this country, there have been persons who contracted on their first sexual experience. There are those in this country who do everything in their power to lead model lives, but weak as human flesh is and with the natural desires, trying the upmost to express themselves, there would have been countless persons in this country and abroad who, with no idea at all that there was the possibility of contracting this illness, ventured into sexual activity and ended up suffering.

Mr. Speaker, in terms of the immediate effect of illnesses like HIV/AIDS, let me begin by looking at those who are, perhaps, the most unfortunate in all this. I refer to those babies born with HIV. What would they have done wrong, Mr. Speaker, to have come into this world bearing that particular malady? I am going to urge all society to gear itself for a better appreciation of this and for taking the necessary steps that the spread does not continue at the same pace that it has here in Barbados and the Third World.

Mr. Speaker, there is no question that for the last ten or so years, after we in this country became aware the disease, we have seen it strictly as a health matter bearing consequences on those who contracted it and their families.

The speed of the spread and the social impact have been such, that in addition to being a matter of health, it is now a matter that bears significant implication for the human resources of Barbados, bears implications for the development process and has, if something is not done to arrest its dissemination, the capacity to bring this country and, indeed, many other countries, to their knees.

Sir, when I say that this has implications for the development of our human resources, if you permit me, I am going to quote from an Honourable Member of this House, who, about four years ago, when looking at the factors on production and what gets the production process going, isolated capital, isolated land and then sought to attribute a special characteristic, labour. I refer to the Honourable Member for St. George North, who would say that in the whole process of production and development, an animate productive force called labour should be seen as the principal factor in the production process.

To the extent that the two other factors are inanimate, to the extent that they cannot be mobilised in the absence of labour, I would want to urge on this Honourable House, that if we regard the condition of our human resources, whether that condition is a sound one to carry the country forward, whether that condition be under threat where progress can be retarded, then we would all get onboard in supporting the measure before this Honourable House.

I am advised, Mr. Speaker, that several Government departments have been brought on board in respect of mobilising resources to do something to halt the spread of HIV/AIDS. Permit me to look at the objectives which the Ministry has identified as the objectives to be promoted in ensuring that the Ministry does its utmost to the halt of AIDS and to do something more to protect the human resources of this country.

The Ministry of Labour and Social Security has identified five objectives which are:

- (a) to strengthen cooperation between the social partners,
- (2) to enhance activities and avoid duplication in a national effort,
- (3) to provide and manage resources for the Ministry's proposed programme,
- (d) to enact legislation to protect the work force to provide workplace documents to guide employers and employees about HIV/AIDS,
- (e) to reduce the incidence of HIV/AIDS in the workplace through education.

These objections are to be supported by three particular strategies promoting an ethical, legal and human rights environment, by disseminating workplace documents to all ministries, departments and organisations. Secondly, mitigating the impact on people infected and affected by HIV/AIDS in the workplace. Thirdly, reducing the vulnerability of the formal and informal sectors in the work force through large scale sensitisation of constituents.

Mr. Speaker, mindful of its mandate in promoting tripartism, the Ministry has engaged the social partners and has brought onboard a number of interested stakeholders to get its strategy going in respect of carrying out its mandate aimed at ensuring that we in Barbados see a decline in the incidence of AIDS. The activities today, which the Ministry has pursued, have been reviewing existing labour legislation to ascertain whether any amendments should be made to include provisions dealing with HIV/AIDS; in that legislation in respect of Employment Rights, regarding safety at work and to inform workers of the provisions of the legislation mentioned above.

Mr. Speaker, I can say that this Honourable House has had the opportunity to have seen the proposed Employment Rights Act, and there is in that Act a clear provision forbidding discrimination against persons who are known to be HIV positive and to be AIDS suffers. In addition to this, the Minister is reviewing other legislation to ensure that persons are not being discriminated against. Of the 650 subjects identified as persons to be sensitized in respect of the Ministry's intention to educate them, in excess of 90 percent have been so sensitized. The Ministry has undertaken in the early stages to printing 350 copies of the International Labour Organisation's Code of Practice on HIV/AIDS AND THE WORLD OF WORK. Sir, having printed these copies it has encouraged those who have received them to copy them further and distribute them throughout the country.
5.50 p.m.

Mr. Speaker, even though with only \$53 917 as its Budget under this particular Head, this Ministry set about to do its utmost to get both employee and employer organisations to work with it. Indeed, every indication has been so far that trade unions, employers' agencies and Government departments have been doing their utmost to support the Ministry in its mandate to do what it has set out to do. The Ministry of Labour and Social Security hopes that, at the end of the day, having set its plans in train and having carried out its mandate that ultimately success would be achieved in ending the discrimination of persons living with HIV/AIDS and that success would be achieved in halting the further spread of HIV/AIDS in the workplace.

I would want to say to this Honourable House, Mr. Speaker, that the Ministry of Labour and Social Security is

but one of the many different Government Ministries which has taken on the responsibility of public education, of sensitizing target groups, of getting society to understand that what we are dealing with is human illness in the first place and that a lot of the myths and fictions that are put out about this disease are just what they are, myths and fictions.

We would have heard from other Honourable Members that as much as this disease is communicable, it is not communicable in every single way, but by a specific way. There are other areas within health care management where experts will tell you that there are other illnesses which are far more easily communicable than HIV/AIDS and because of the nature of how it is transmitted in a highly specific way as against how illnesses like the common cold and flu are transmitted, that so long as people take the proper safeguard in relation to how it is being transmitted then we, in Barbados, can live in a society and in the community among those who have it without necessarily contracting the disease from them. In any event, who are we who are so fortunate not to have it, to be so harsh and unsympathetic to those people who have it as to want to avoid them in every way, as to want to judge them in every way, as to act as though we are immune and they are super-susceptible, as though we have it within us to avoid this plague while they were so weak as to give way to it.

Mr. Speaker, perhaps this society must apportion a greater amount of value to the whole process of public education. There are instances and have been many instances in this country where, on a lot of other matters, the best strategy was to educate. But even though those involved in the process of education might sometime wonder how impactful they have been as they try to educate, we cannot give up. Even though in any given year the statistics would suggest that more people have been affected than we would want, we still cannot give up. We must be determined to put our hands to the plough and go to all lengths to continue to educate.

To some extent, Mr. Speaker, in consequence of some people's self-righteous attitude that it can happen to him or her out there and not to me and, perhaps, because of certain myths of how the HIV/AIDS virus can be controlled so it could not affect them, people decide sometimes to take chances. Sir, it is for this Parliament as the highest court of the land from time to time, not only to take time off to consider this very grave matter, but also for this Parliament to encourage all the means at its disposal to ensure that the threat to our current youthful generation and the ultimate threat to the country if this generation is badly affected, is avoided.

Mr. Speaker, I did not develop the point too well about the question of the threat to the human resources but I will conclude by saying this. This country could not be where it

is today were it not for human effort. This country could not be where it is today were it not for that ethic that informed and impelled Barbadians to work productively to build the country. This country, even if there was an abundance and unending amount of money and an abundance and unending amount of other resources like technology for example, could not have reached the stage where it has, in the absence of human efforts and creativity, human innovation and ingenuity.

Sir, where the human being stands at the centre of the production process then any threat to him can have severe implications on his capacity to do his utmost to develop his country. We would not want a population that is so sick, so weak or so medicated as to have to either leave the workforce early, stay at home or be nursed all the way through in circumstances where, with more care, understanding and knowledge, those persons in the workforce will be able to avoid this plague and live meaningful productive lives.

Sir, persons who have reached adulthood must have a level of concern and empathy for the youngsters out there. There is no doubt that many youngsters in Barbados are already cautious and informed but there may be some others who have the theory that a partner, from outside appearances, might look so good that that partner could not possibly be ill. I believe that one of the problems affecting young Barbadians is where the average young Barbadian sees a member of the other sex and forms the opinion that nothing can be physically wrong with that person and might very well literally drop his or her pants and take a chance not realising, Mr. Speaker, that one can be HIV positive and appear well. Then at the opposite end of the spectrum, one might get a Bajan who hears a rumour that someone is HIV positive and they will avoid this person as though he is a societal leper. These two extremes of behaviour must be avoided. The extreme of the behaviour that one's partner looks so good that she or he cannot be possibly sick and then the other extreme that this sickly-looking person has an incurable disease and therefore must be avoided. I do not like that habit of Barbadian treating these persons as lepers and pariahs – and this is a hard one, Mr. Speaker – where, even the families of the HIV/AIDS sufferer who should be supportive, understanding, sympathetic and empathetic, are sometimes the very first ones that would want to abandon them. I admire those who are courageous enough to come out and state their position. I remember when Ervin 'Magic' Johnson, in 1989, came out publicly and told the people that he was diagnosed as HIV positive, I admired his courage. In this country, we had a young man called Elroy Phillips who went public. He did not only go public to the fact that he bore the disease but also as far as his sexuality was concerned he was given to a certain proclivity. Today, we have a Centre which is named after him. Sir, in mentioning the Elroy Phillips Centre, there are those persons who are

literally abandoned there and then the staff there are trying their utmost to provide the care and because of how desperate they are, they often wear down the patience of the staff who are there to care for them.
6.00 p.m.

Mr. Speaker, in my respectful submission, the whole society must be mobilised. There are those who stand at the centre of the leadership effort. One Honourable Member here said that we must have the political will to do something about this disease but there are those technically trained people, who stand well placed to do some excellent work and have been doing some excellent work and having not served you with notice, Mr. Speaker, as to their names, I will not be calling their names.

At the same time notwithstanding the fact that there are those who are prepared to go beyond the ordinary call of duty to sensitise Barbadians and educate them, ultimately all Barbados owes it to posterity to get this effort on board. I personally would have done my best in the classroom and in the community but now that I am placed in the Ministry of Labour and Social Security, a ministry where part of its mandate is the care and protection of the human resources of Barbados, I too will be devoting more time and more effort to spreading the word, Mr. Speaker, as to how we can best do something to control this scourge.

In the context, Mr. Speaker, not just of this but the capacity of this illness to retard development in Barbados, and in the context of the ex colonies of the Third World where the disease has really asserted itself and has ravished many a third world country in Africa and Asia and in the Caribbean, I think that it is not too early – in fact, it may be a little bit late – for us to do our utmost and for all to be involved in a magnanimous effort to rescue humanity, especially our youths.

Sir, no Barbadian should feel so self-righteous and so absolutely protecting as to say that it is their business, it is not mine. No Barbadian should say that fellow got sick because it is his fault and act unconcerned. We all owe it to the society and similarly to posterity to do our best and to do precisely what my ministry intends to do, that is, to end the discrimination of persons living with HIV/AIDS and to do our utmost to reduce and minimise the spread of HIV/AIDS in the workplace, as far as the Ministry of Labour is concerned but certainly in the wider society, as far as all Barbados is concerned.

Mr. Speaker, with these few words, I am obliged to you. Thank you.

His Honour J. M. EDGHILL: Mr. Speaker, I rise to support this Bill which is before this Honourable House. I have listened to many speakers before me. Some talked

about the negative socio economic impact this epidemic is liable to have on Barbados. Others talked about the statistics of the amount of people who have died in the last fourteen years from HIV/AIDS and some talked about other things pertaining to that virus. However, I would like to speak about HIV/AIDS and treatment associated with that disease.

HIV was said by some people to be genetically engineered. Others feel that it was designed by the CIA. Some researches feel that the monkey in western Africa had the SIV which is a virus very similar to that of the HIV. Some research also shows that the chimpanzee had the SIV and as I said earlier, this is a virus very similar to the HIV. It is said that the Africans eat the chimpanzee, thus the reason for them catching HIV/AIDS. Researchers also feel that the polio vaccine which was distributed to people in the Congo, Rwanda and other African states was responsible for HIV among many Africans.

We in Barbados however, had our first case of HIV in 1984 and since then we have had quite a number of deaths. Sir, since then, much work has been done to minimise the deaths, as well as the spread of HIV/AIDS among many Barbadians and a lot of this work was done by Dr. Carol Jacobs who is within this Chamber, among other Barbadians. I would like to say how much I commend Dr. Jacobs for the work she has done over the last ten years, at least in helping to reduce the number of persons in Barbados contracting HIV/AIDS.

I think with this liable to become an epidemic, it is necessary for us in Barbados to think in terms of getting an HIV/AIDS specialist because researchers feel that GPs unwittingly, could contribute to the drug resistance epidemic by not realising that the incorrect use of these anti-retroviral drugs could be very dangerous. As a matter of fact it could be just as dangerous as chemotherapy.

Right now, there are 17 anti-retroviral drugs used to treat the HIV virus. These drugs are very similar in the way they work and if someone is resistant to one of these drugs, that person is liable to be resistant to several of these other drugs. Therefore over the years, scientists have developed the theory that it is necessary to have a combination of these drugs, in some cases two and in other cases three and in recent times, especially in the case of Barbados, it is felt that the best combination to treat HIV/AIDS would be AZT plus combivir, AZT restavir and maybe lithfavin.

These drugs are indeed very effective and as I said earlier, they could be very dangerous to individuals if they are not used in the right way and if the right doses are not prescribed. Therefore, it is necessary, as I said to have the highest qualified persons, at least one or two very highly qualified specialists so as to look after what is liable to occur in Barbados within the next decade or so.

6.10 p.m.

I was also made aware by the Minister that there are six pharmaceutical companies which are interested in giving or selling to Barbados some of the top line pharmaceuticals. I was listening to a speaker before me who talked about the possibility of we in Barbados using generic drugs but if one had to look at the list of these companies one will recognise that they are not generic companies. In actual fact, these companies are Abbot Laboratory, Boehringer, Bristol Meyers Squibb, Roche Pharmaceuticals, Glaxo Smith Kline and Merck Sharp and Donne. These are all very reputable drug companies and the quality of drugs available or manufactured by these companies are always of a very high standard. So I am quite pleased to see or to recognise the fact that the Minister is looking at some of the best drug companies from which to get these anti-retroviral drugs.

I have also been told that there have been negotiations in terms of price and some of these companies have been able to reduce the price of what they are willing to supply to Government, some by 3.5 per cent and some as high as 83 and 87 per cent. So as a result of Barbados being able to buy these drugs in very big supply obviously these companies are willing to reduce their prices, and in some cases very significantly, to this country.

As a result of having to use these drugs, as I said earlier, one has to be very careful as to how they are used and prescribed because one of the fears we have is that of resistance to these drugs. We also have to look at maximising the effect of these drugs when we have HIV cases because if we use them too early there is the possibility of people becoming resistant to these drugs so it is very important to use them as late as possible so as to maximise the effect which people would get from them as well as to lessen the anti-resistance which one is liable to get from them.

We also have to create a centre of excellence whereby the blood could be tested on a regular basis and whereby the level of the virus could be tested and then as a result of that, the proper drugs or the right doses could be administered.

We also have to look at things like incompatibility because nowadays we have quite a lot of patients who are over 50 who are HIV positive. Some of these people are on hypertensive drugs, some are on diabetic drugs and some of them are on various types of drugs. So we have to look at things like incompatibility because if there is any sort of incompatibility occurring, it means that the result of the use of the drug could almost be insignificant.

I would like to give you an example, not necessarily with any of the drugs associated with HIV, but a common thing like aluminum hydroxide gel which could be prescribed as an antacid if somebody has air. You may go to

a doctor and tell him that you have an infection and the doctor prescribes a tetracycline, what will happen is that you will get a precipitation. In other words, as a result of the chemical reaction you will get a precipitation and as a result of that you will be having no form of treatment because a precipitate forming substance cannot dissolve in the stomach or in the gut and thereby you would not be doing anything significant. As a matter of fact, you will be wasting time. So these are things that we would have to look at.

I personally feel that we are in good hands and as I said earlier on, it is extremely important for us to look at getting a couple of AIDS specialists to ensure that we will have a 50 per cent reduction in the mortality rate over the next three or four years.

At this stage I will like to commend the Government for getting this money from the World Bank. I understand that this is a pilot project but obviously it shows us the World Bank has a lot of confidence in the way Barbados governs itself and as a result of that we are getting some money from the World Bank. I think the World Bank is cognisant of the fact that there would have to be continuation of it. As a matter of fact, the Government must recognise that they just cannot stop there. As long as they start to assist HIV patients, they will have to continue it.

I am hoping, through educational programmes, that the people who are on these drugs would not feel that because they are on these anti-retroviral drugs that they cannot spread AIDS. It is still very important for persons to be very sensitive and be able to control themselves even if they have to use condoms when they are going with a partner. So on that note I will like to commend the Government once again for having the foresight to spend so much money to protect the lives of Barbadians most of whom are in the productive part of their lives and look forward to a reduction in the number of HIV/AIDS cases in this country over the next three to four years.

Thank you so much.

Hon. R. N. GREENIDGE: Mr. Speaker, I want to begin by saying that no sum which we borrow to fight HIV/AIDS can be described as being too great, not at this stage of our development. I believe that this epidemic is more devastating than the Cholera which plagued this country at the turn of the century and even more devastating than the black death which plagued England a couple centuries ago because there are no geographical barriers to this pandemic whatsoever because it is all over the world and that is what makes it virtually so very gruesome.

I was also, Mr. Speaker, very impressed with the way in which the two Honourable Members on the Other Side spoke. It is clear to me that they did not seek to make this a

contentious issue whatsoever. Indeed, the Honourable Member for St. Lucy actually said that he was not interested in the amount or in the interest to the loan, all he was interested in was what the loan was seeking to do. I do believe, Sir, that anything that we can do to win the battle against HIV/AIDS we must as a country seek to do that.

6.20 p.m.

Since the records were being kept over 1 000 Barbadians have closed their eyes to this particular virus. That is a lot of our human resources gone and almost imperceptibly it has virtually decimated a particular section of our workforce. It has taken some of our workmen from us when they were at the peak of their working lives and in their most productive years. It has left many orphans in Barbados and has devastated many families and I would want to thank the Ministry of Labour for the work which they have done in this regard under my tenure and even since then. They have virtually been taking the fight, going to the public and doing a lot of public education. It has become a labour issue too because as I said, Sir, it strikes at our workforce.

Indeed, Sir, the International Labour Organisation some two years ago thought that the main feature of the ILO conference should have been a talk and address to the entire body, the full plenary on HIV/AIDS. They chose to do that job a young lady from Botswana. I have to confess up front Mr. Speaker, that when she took the podium she was one of the most beautiful black women I have ever seen in my life and I have seen a lot. As she took the podium her first words were: "I am HIV Positive". It stunned the audience.

A lot of persons who had given a little whistle when she walked to the podium, their mouths dropped because they themselves never suspected. She related to us that she was a very poor girl coming from a village in Botswana and that she never thought beyond her wildest dreams that at some point she would have been standing before such an august chamber, as she described it, to speak to so many persons of influence. She was one of the few people in her family still alive. Her husband had died of AIDS, her uncles and people all around her had gone. She had set out on a mission that she would for the remainder of her life fight against this plague.

She looked well, as I said. Having dedicated her life to this, she was able then to interact and make contact with some of the leading pharmaceutical companies in the world and therefore she had access to some of the best drugs and some of the best medication. At the end of her speech what she said was this: "Since I was here in Geneva, I could have spread this virus even more because no less than a dozen of you have made approaches to me since I was here."

Mr. Speaker, that in itself said a lot. It says a lot of what other people in here were saying about seeing people who look this way but still might very well be carrying the virus. It is on that score, Mr. Speaker, that I would want to commend our Committee for having set up that People Living With AIDS Association. In the same way that this lady's message came home to us so very poignantly I think that when it comes from the horse's mouth, from someone carrying the virus, it will have a lot more impact. I believe that the message Magic Johnson sent was extremely full of impact as well because it came from someone with the virus saying what to do and what not to do. If you want people to avoid going to prison, let a prisoner himself come out and tell the young boys and the young girls what prison is like. Of course, from what I understand our prison might encourage a few but the point is that when it comes from the horse's mouth very often the message gets home.

Mr. Speaker, I believe that one way for us to succeed in this fight against HIV/AIDS is to approach it in what the Honourable Member for St. James South described as the multi-sectoral approach. I believe that we can look at our society virtually section by section. We can look at sportsmen and sportswomen, at school children, at law enforcement officers, at entertainers and take it section by section and deal with them on that basis and level. I say that because every section of our society has its own peculiar vulnerability. No section of our society is untouchable not where this particular virus is concerned.

I will concern myself, as I think I have a duty to do, with our schoolchildren and our sportsmen. I believe that we need to target them and send a very strong message to them. I recall that just over a month ago we had what was our national sportsmanship day which we held at the Gymnasium. At least that was one of the events. We thought it useful to use Dr. Carol Jacobs on that occasion to speak to the sportsmen and sportswomen who were at the Gymnasium because we thought we would have had a captive audience of sportsmen and sportswomen and having that captive audience, we would be able to speak to that specific section of our society.

You would recall also, Mr. Speaker, that only last week on the Floor of this House when I was introducing the national sports policy I called upon sports administrators and on the National Sports Council to put together a summit on HIV/AIDS for our sportsmen. I will repeat, Mr. Speaker, I am worried and I know of what I speak.

Mr. Speaker, a sportsman is generally speaking youthful, popular, fit and virile but invariably a sportsman is single and, above all, a sportsman is vulnerable. If you ask sportsmen if they have any fears of this infection, if they are scared of HIV/AIDS, some sportsmen are brave enough to

say no and it is therein that the problem lies. They are at the age where everything is going in their favour.
6.30 p.m.

Mr. Speaker, I recall when Obadele Thompson returned from Sydney I drove in the front sitting with the driver and he was standing at the back and, Mr. Speaker, I will not say on the floor of this House what no less than four or five ladies said when they came to that vehicle or where they invited him to write his autograph.

Asides.

Hon. R. N. GREENIDGE: Mr. Speaker, we have fertile imaginations so I do not have to say. The smothering of our sportsmen by the other sex is not unusual. You will recall in Magic Johnson's book that he related the hundreds of casual sexual partners he had after many of his NBA games. Mr. Speaker, even today where local teams are concerned, whether football, basketball or cricket, it is not unusual for beautiful young ladies to visit the dressing room of the players. This high profile lifestyle of our top level sportsmen is a threat and they have to know how to live with the threat.

Mr. Speaker, the world has lost sportsmen and sportswomen to AIDS and we, in Barbados, have never made any announcement about it. Mr. Speaker, of the 1 000 persons who I mentioned that died of the AIDS virus some were sports persons.

Sir, it is not a comforting thought to us in the region that this Caribbean region is second only to sub-Sahara Africa when it comes to HIV/AIDS in our 18 to 25-years age group. As I said that is the age group in which many of our sportsmen and women find themselves.

Mr. Speaker, no money we borrow to save our children can be too much. I think that the time has come when our teachers in Barbados can no longer be shy, timid, cowardly or old-fashioned in speaking about the need for abstinence and about the dangers of HIV/AIDS to our children. Mr. Speaker, all of the hangups about mentioning words like condoms, penis, vagina and sexual intercourse have to go through the window. There was a time when teachers were ashamed to call those words but the time has come when we have to discard that old-fashioned approach and tell our children like it is.

I have to applaud the Honourable Member for St. Michael North West for the graphic way in which he described things like putting on a condom. People might say that this is nothing to speak about in the House of Assembly but all of those hangups must go through the window because we are trying to prevent death.

As the newspapers said, our young boys are having their first sexual experience before they reach the age of twelve. Mr. Speaker, that did not happen to you or to me.

Asides.

Hon. R. N. GREENIDGE: Mr. Speaker, I too want to thank the many teachers, guidance counsellors, research persons of the calibre of Dr. Jacobs and Dr. Roach who would have gone to various groups and schools from time to time to try to save our Barbadian children. It is that young age group that we must target because as the Honourable Member for St. James South said when she spoke, there are recorded deaths from HIV/AIDS in the one to twelve age group as well, so we have to get to them very early and try to prevent them from being burnt. We have to dispel a lot of these myths because some of them may find themselves here in Barbados and you will hear people say that they have the virus and that they have to look for a virgin. Mr. Speaker, part of the education will be to dispel some of the myths.
6.40 p.m.

I would also hope that there is some provision for counselling because I think that it is an area that very often gets neglected. Many HIV victims are suicidal and that is understandable. Many of them are at the point of taking their lives, because the thought of dying within a very short time is not easy to cope with. Sir, you also heard that workmates, family and friends tend to recoil and withdraw themselves rather than support persons suffering from HIV/AIDS. There are no more hugs and kisses for the HIV victims any longer. Some of them even get dismissed from work because of suspicion or others know that they have the virus.

Sir, as the Honourable Member for St. James North said, it is heartening that the Employment Rights Bill has made a provision which says that no worker can be dismissed merely on the grounds that he or she has the HIV/AIDS virus. I would also hope that the book mentioned and distributed by the Ministry of Labour will be taken and read, because those books point out very clearly how employers should treat HIV positive workers.

I think that it was the Honourable Member for St. Thomas who mentioned the strong message sent by the production called *The Final Truth*. I would also want to make a plug, Mr. Speaker, for the St. Martins Mangrove School, that is a school in St. Philip. They have two good pieces on AIDS, which I think should be promoted. Perhaps, if any of the Honourable Members in the Chamber have functions at which they would want something of that nature, a message being sent to the audience, they can use the St. Martin Mangrove School. There is a well-trained group of children who often put on very good shows. They were excellent at NIFCA, Government House and they performed at the highest level, and the two pieces that they have this year deal with AIDS.

Mr. Speaker, my ten minutes are up. I want to thank the Minister of Finance, in particular, for not being indifferent to this problem. I think it is a matter that has national proportions to it. It is like throwing a lifeboat to a drowning society.

I am obliged to you, Mr. Speaker.

Hon. G. A. CLARKE: Mr. Speaker, I rise to compliment the Government and the Commission and to say that I believe the Government has taken this epidemic very seriously. The Government has set itself targets in which they recognise the seriousness of this disease and would want to, not only educate the public of Barbados about the seriousness of the disease, but in a number of ways, seek to showcase what a small developing country can do with a disease where there is no cure.

I believe that on both sides of the House, there is no divide on the question of how we treat AIDS patients and what can be done, not only to eradicate the disease, but to educate people in such a way that they would change their habits and lifestyles.

Mr. Speaker, I believe that there are several things that should be done to help promote the awareness of this disease in the home, school, the workplace and the society. I am not going to speak for the full thirty minutes on this topic because all Honourable Members have spoken about the disease and the methods that are being used to fight the disease, and what we are doing through culture, sports and the Ministries as a whole.

I want to make the point that several years ago a man by the name of Thomas Robert Malthus, during the latter part of the 18th and 19th centuries, an Economist of the classical mode, spoke about the necessary evils in society among the population. He spoke about famine, diseases, black death, yellow fever, wars, earthquakes and hurricanes. He said that all of these things were necessary in society so that those persons who were weak and ill could dissipate from society and allow the strong to survive, this was his theory. All of those persons who followed, since then, became known as the Malthusians of society.

Mr. Speaker, Malthus did not envisage a society in which a virus or disease would not only threaten to wipe out the entire society, but also to wipe out the economic stability of a country, the AIDS virus. He did not envisage that a disease would plague a society 100 years after, for which there would be no cure but in which an entire world's population could be wiped out from the face of the earth. Hence, although in principle we believe in the Malthusian theory, one has to sit back and ask oneself the question, what is this disease? Is it contagious? Is it really spread based on sexual promiscuity? One has to ask the question, if God in

his wisdom, has decided that this is a time for Him to warn mankind about his sins? Because one can only see that this must be a plague that is touched on mankind because of the sins of the fathers.

6.50 p.m.

Mr. Speaker, I always like to speak to elderly gentlemen who have told me over and over again that in their heyday there were no condoms. In my district I met a man who is around 94 years old, has 14 children and he is still quite strong. I understand there is a man in this very House who has more than 14 children and he is still strong. I believe that these persons were educated to the fact of what to do.

The Honourable Member of St. Michael North West today, very honourably spoke of his exploits and how successful he was in his day, but he also made the point that it is not what one does, it is how he does things. I believe, Mr. Speaker, it is what you do. Families were established to procreate and the very fact that today we are attempting to control that element in which God Himself has put man, something seems to be wrong and it seems to me it has to do with our education; what we do and how we do things. We have to be very conscious of the fact of who are our partners. We are told that there are a number of people who have stuck to one partner. I have heard the Honourable Member of St. James North say today that he knows of cases where persons, on their first outing, have contracted the virus and there are many cases in which we have heard about this. I believe there are scientists who have proven beyond a shadow of doubt that it is a sexually transmitted disease. However, there are other scientists who also believe that this virus could have come from other elements, contacts or chemical preparation. Sir, the most important thing that is believed today, is that it is spread because of sexual contact.

Mr. Speaker, it is sad, the reason being that we are living in a society in which our youngsters will not enjoy the pleasures of sex as we do and there must be some attempt now to control that stigma. This may be good because it might be a way of bringing back the society into some form of control and I think that it has to do with the education of people.

All of us, Mr. Speaker, have to sit back because in today's society, persons are not as promiscuous as they used to be. We have now to sit and examine our lifestyle. We have to examine the matter of conscience. I believe that the AIDS Commission has been doing a wonderful job in sensitizing the community to be aware of what are some of the things that they should be doing. They have not only reached out in the schools and in society, but also in the Government departments. I think that even though they have done a lot of work within the Ministries there is still more to be done.

I think, Mr. Speaker, that when one looks at, for example, going to a dance or party, that after the party persons have drinks in their heads and are likely to do most things, I think the HIV/AIDS Commission must go into those places where they do not now venture, and through the technology available, not only visual shows, or setting up condom machines, but make those patrons aware of the dangers of this disease because I think it is at that time where they can have a problem.

Sir, it is most likely the case where the number of innocent persons venturing out to these fetes, sporting events, *et cetera*, can be led astray and I think the HIV/AIDS Commission should take that under serious consideration.

Mr. Speaker, it appears to me that HIV/AIDS patients are mainly from poor homes. I am not saying that they are only from poor homes and I want to be clear on this but, according to the statistics, there were more than one thousand deaths. I would want to find out where these deaths have occurred. Are these deaths occurring from the developed society? Are they occurring among the rich, middle class, or the poor?

It is my submission that from investigations, listening to the obituaries and my own observation, it appears to me that most of these AIDS patients are from poor homes where there is overcrowding in the homes and also in depressed districts.

Asides.

Hon. G. A. CLARKE: Sir, I believe the majority of cases come from poor homes where they are uninformed, unenlightened, and where there are a number of persons with low educational standards. I think that more has to be done in the poor districts. We have to look at the type of housing that we are providing for these persons. Mr. Speaker, it is a fact that the Government will have to look at how we provide shelter for these AIDS patients. I know for a fact where an entire family, the mother, the father and all of the children contracted the virus and no sooner than the society recognized that these people had contracted the virus they started avoiding them.
7.00 p.m.

There was a case in which an HIV/AIDS patient died in one of our units and when the next occupant heard that the tenant before her was an HIV/AIDS patient, she did not want to go into the unit. Sir, people are still fearful that they can contract the HIV/AIDS disease, not through sex alone but they think that it is contagious. We had to convince the new tenant that we had cleaned the unit and did whatever possible to ensure a safe health standard for all tenants.

Sir, I think that the society must be aware of the disease but I do not think everybody is aware that it is not a contagious disease because we still avoid people with HIV/AIDS. We have heard of cases where an individual would talk to an HIV/AIDS patient but as soon as they found out that the patient has the virus, they start to back off. So something seems to be wrong that we, after 15 years or more of hearing about this disease, most of our people are not convinced that it is not contagious.

In some cases, if a family member has the disease, you will find that the family is divided in terms of what they drink, how they drink and from where they drink. Sir, to my mind, this is still a problem and we have to educate our people about the HIV/AIDS virus.

I also understand, Mr. Speaker, that the HIV/AIDS Commission will target the eight polyclinics that we have in Barbados. I hope that more can be done in the districts of the countryside, for example, at the Glebe Polyclinic and at the polyclinics in St. Peter and in St. Philip to educate all the people in those districts about the HIV/AIDS virus.

I also feel, Mr. Speaker, that not only should we try to target the health institutions but I think that the churches have a role to play and they have to be more actively involved than in the past. Also, the community groups, women's organisations and men's organisations have to be in the forefront to protect ourselves and our society from the plague and the disaster which is likely to come.

I also believe, Mr. Speaker, that there must be more research done about the HIV/AIDS virus, to determine how we can control it across the world. It appears to me and it also appears to most parliamentarians from their speeches today, that the Caribbean region is one of the places with a high rate of the disease.

Sir, we understand that our region depends heavily on tourism but in promoting tourism, we have to make our visitors and locals more aware of the HIV/AIDS virus and our efforts to control this disease.

I also understand, Mr. Speaker, that persons get tested and I think all persons should be tested for this disease. I do not believe, however, that the results should be made public knowledge but anyone who is tested positive for the HIV/AIDS virus, should make his or her doctor aware of the situation and look at what they could do to avoid spreading the disease.

Sir, there are a few people who travel abroad, who decide that they would not get tested in Barbados or will not get tested in their country of origin. The doctors may never know, and that person may be either spreading the disease or concealing the disease. I do not think that we should allow

the test results to be known, although we have heard that in a certain segment of the society the people are saying that they need to know. For example, you need to put up a placard on your chest and say that I have HIV/AIDS or I do not have HIV/AIDS.

Sir, I think that we have to watch the access to death certificates very carefully. Presently, anybody could go to the Registrar and ask for a death certificate and people do it. I am not sure if this is the right way but they do it...

Mr. SPEAKER: But the persons would have died, I take it.

Hon. G. A. CLARKE: Yes, Sir.

Then, based on the knowledge contained from the death certificate, they would avoid the family and this is what would have happened.

Aside.

Hon. G. A. CLARKE: In many cases there were people in my district, where persons tried to avoid the family because they say that your son or daughter had the HIV/AIDS virus.

Aside.

Hon. G. A. CLARKE: As I said, they go to the Registrar, get the death certificate to find out what that person died from, so Sir, we have to watch that very carefully.

Mr. Speaker, as I have said before, it is very much everybody's business. I think the Government is promoting the awareness of the disease but more research needs to be done in order to determine what can be done to protect the society in which we live.

With those remarks, Mr. Speaker, I would like to support this Resolution.

Hon. Miss M. A. MOTTLEY: Mr. Speaker, I beg to move that there be further considerations of this Resolution. I also ask that the matter of Papers be recommitted.

Hon. G. A. CLARKE: I beg to second that, Sir.

The question is that further consideration of this Resolution was put and resolved in the affirmative without division.

Mr. SPEAKER: We will now recommit to Papers.

GOVERNMENT NOTICES

Hon. Miss M. A. MOTTLEY: Mr. Speaker, Sir, I beg to give notice of the following:

1. Telecommunications Bill, 2001.
2. A Resolution to grant the sum of \$14 033 315 from the Consolidated Fund and to have it placed at the disposal of the Government to supplement the Estimates, 2001-2002 as shown in Supplementary Estimates 2001-2002, No. 8 which form the Schedule to the Resolution.

FIRST READING OF BILLS (Re-committed)

Hon. Miss M. A. MOTTLEY: Mr. Speaker, I beg to move the following Bill be read a first time.

The Telecommunications Bill, 2001.

Hon. G. A. CLARKE: I beg to second that, Sir.

The question was put and resolved in the affirmative without division.

SUSPENSION

Hon. Miss M. A. MOTTLEY: Mr. Speaker, I beg to move the Sitting be suspended until 8.00 p.m.

Hon. G. A. CLARKE: I beg to second that, Sir.

The question that the Sitting be now suspended until 8.00 p.m. was put and resolved in the affirmative without division and Mr. SPEAKER suspended the sitting accordingly.
7.10 p.m.

RESUMPTION

Mr. SPEAKER: This Sitting is resumed.

ORDER NO. 13 – Cont'd

Hon. R. St. C. TOPPIN: Mr. Speaker, I want to join this debate to speak very briefly to the matter before us today. Clearly there is no doubt that AIDS is really a very serious and frightening phenomenon. In fact, there are some who would say that it is perhaps the fiercest and most frightening phenomenon that has confronted mankind to date and it is, therefore, incumbent upon every Government to ensure that it uses its available resources to fight it. Therefore, I am fully supportive of the Resolution before us today to further deal with this dreadful disease.

Mr. Speaker, I basically will just make two brief points. Everyone spoke in varying tones in relation to the issue of HIV/AIDS. The issue I will deal with first has to do with the supply of information about the disease. I believe that one of the problems in terms of how the population respond in particular to those afflicted with the disease has to do with the difficulty in knowing exactly the full potential of the disease, particularly how it can be transmitted. For example, there is much doubt in the minds of people as to whether it can be transmitted by body fluids or by the shaking of the hand, and if so, in what circumstances.

I dare say, Mr. Speaker, that while there are those who speak in terms that there is no need to fear physical interaction with someone who has been infected with the virus, there are many who would be very reluctant to have any physical interaction with someone they know is, in fact, infected with the disease. Therefore, I think it is incumbent that the medical profession speak in very clear terms as to how exactly the virus is transmitted. You will hear on occasions that nothing less than coming into contact with blood or semen will transmit the virus. At other times you will hear that it can be obtained by kissing but it must be deep kissing where they must be breaking of the skin. Sometimes you will hear that it can be transmitted by saliva and body fluids like sweat and there is a fear because they say that a break in the skin can, in fact, accommodate transmission of the virus even from perspiration. Now, as I said, I am not purporting to be an authority here but clearly I think that there needs to be a clear and unequivocal voice in terms of how the virus can, in fact, be transmitted. That is the very first point I want to make

The next point deals with the issue of cures for the virus. Now, whenever there is a gathering or a conference in relation to AIDS it is always merely to repeat what is known already which is how dreaded the disease is, how many people it has already killed and how many more people it will kill in the next five years or the next decade. In fact, it is almost like if the society is to just accept that without more and throw its hands up in the air in despair and say okay at some stage we will probably all die of the dreaded disease. No emphasis at all is placed or very little on the issue of what is happening in the world in relation to advances made in relation to curing the disease. I am not talking now about treating the disease, I am talking about curing the disease.

I think it is clear that modern medicine or conventional medicine as it is sometimes called needs to recognise its own limitations because on its own admission there is no cure they say for AIDS at this time. I do not think that everyone in the world would agree with that statement because there is also an area of medicine referred incorrectly to sometimes as alternative medicine although that was the first medicine in which you have a number of holistic practitioners who, in fact, profess that they have already scientifically worked on HIV and AIDS cases with 100 per cent success.

I believe that it is incumbent upon the medical profession to recognise that it needs to work hand in hand with those alternative practitioners or holistic practitioners to see that a satisfactory solution can be reached in relation to the treatment of this dreaded disease. There are persons, not only abroad but right here in Barbados, who have been treating persons and may I say not only in relation to AIDS but in relation to other diseases that were or that are often considered to be terminal and so on, where the medical profession gives up on them or seeks to inflict all sorts of chemotherapy that would only kill them faster anyhow and writes off people who then turn to holistic practitioners.

I know of cases where persons with cancer have turned to holistic practitioners and have, in fact, ended up fully cured of the cancer by the same holistic practitioners but the medical profession for some reason does not want to interact or play with these holistic practitioners rather all they want to do, it seems, is to spend time discrediting these holistic practitioners who, in fact, can give you actual case histories where they have worked on people with these ailments that were supposedly incurable and have managed with great success to cure these ailments. I think it is incumbent on the medical profession to do a bit more than they are doing in this area right now.

I also remember, Mr. Speaker, that some years ago, I believe it was about a decade ago, 1991/1992, a news item broke and it was published in a newspaper that an African country, I believe it was Kenya, said that they have found a cure, I think it was called Kemron, for the HIV/AIDS virus. Now, according to them they had tested 100 cases of HIV positive persons and used this Kemron on them and in all 100 cases the reading went from positive to negative. Now if that is not a cure I do not know what is. But the western world got hold of that and a delegation went to Kenya, and I am aware that Barbadian medical personnel were also included in that delegation, to have a look at this Kemron and simply came back and said that the test being done was not scientific enough and from then until now we have never heard a single word about this issue of Kemron and how it could perhaps be working in relation to the treatment of AIDS.

I believe that is not good enough and I believe it is really incumbent on small states like ours not to get caught up in any politics between the developed and the developing world but to recognise that we have on our own a number of HIV and AIDS infected persons that we need to ensure are properly treated. Therefore, we must not allow ourselves to be led by those who would want to put politics even into AIDS as I believe has happened in the case of that Kemron and Kenya. I honestly believe so because it is more than passing strange that persons can report a 100 per cent success literally in terms of 100 cases and from then until now no Barbadian medical practitioner has ever made any reference at all to that issue of Kenya and the Kemron.

I believe, therefore, as I said, that the medical profession has admitted its limitations in relation to the treatment of HIV/AIDS. The unfortunate thing is that the ordinary man in our society holds the convention of the medical practitioner in such high esteem that whatever he says they are prepared to be guided by. There is to date no medical practitioner except perhaps one who is on a call-in programme on Thursday mornings who has acknowledged that alternative medicine has a role to play in the treatment of people in this society. There is none so they will never encourage people to go and seek treatment where in fact they can obtain very valuable medical treatment. I know, Mr. Speaker, because I have had problems with my shoulder and various things and have gone to people that a medical doctor would never have told me to go to – Mr. Cheeseman, Mr. Hunte, Richard Cohen, all of them who can on the spot stop pain that you do not feel again that medical practitioners cannot stop except by telling you to use a lot of pain killers that will only stop it temporarily, but they do not cure it. People out there are actually curing these things but the medical profession which is in a position to work hand in hand with them are scorning them and, as a result, harming the good of the society by not encouraging people to try to access a form of medical treatment that is often cheaper than the conventional medical approach and that will in fact cure you from different and various ailments, not only AIDS but other things as well.

8.10 p.m.

Mr. Speaker, I want to make those two points but before I sit I want to make one other point which I could make at another date but I will do it now. As we are on the area of drugs I want to say that I think it is entirely unsatisfactory that in this country there is not one single pharmacy to dispense drugs that is open twenty-four hours per day. I think that is a very sad state.

Only recently, a lady from my constituency had a case where her daughter at eleven o'clock one night was so ill that she had to call in a doctor to the house to see her daughter and the doctor merely said that she needed certain medication and there was not one single pharmacy in Barbados open at eleven o'clock.

Aside.

Hon. R. St. C. TOPPIN: They say that they are open twenty-four hours a day but when you check at eleven o'clock or twelve o'clock they are not open. In fact, that place was called, she said, and was told at eleven o'clock if she could get there right then. The woman said she could be there in fifteen minutes and they said, "No, in fifteen minutes we will be gone." There was not one other pharmacy that she could turn to.

I believe the time could well be coming, Mr. Speaker, when there may have to be a situation where it is legislated that in fact drugs and medication must be made available to Barbadians on a twenty-four hours a day basis subject to very serious penalty for not so doing. The logistics can be sorted between the various pharmacies because you are playing with people's lives. If that had been a very serious ailment that night the little girl may well have died because she could not get medication until the next morning when the pharmacies were open. I just want to make that point. I believe that the time may well be coming when Government should look very seriously at legislating, making it compulsory by law that pharmacies in this country, at least a pharmacy must be open twenty-four hours per day.

Mr. Speaker, with those few words, as I said earlier, I fully support the Resolution and commend the Government for the good work it is doing in relation to the HIV/AIDS issue and if only the medical profession would work hand in hand with those who also have a role to play I believe the society would be well served. Thank you.

Rev. J. J. S. ATHERLEY: Mr. Speaker, thank you very much for giving me the privilege of speaking to this Resolution I would like to be brief and also reasoned in my presentation and hopefully it will be of the quality of those who have gone before. My understanding is that one or two members in this Honourable Chamber are expecting some controversial submission on my part. I do not know why that would be. There is clearly no controversy in my mind with respect to my desire to support the Resolution that we are considering.

I would wish to begin by complimenting those who are in the front line of this battle. I think all Honourable Members of this Chamber do recognise that we are in fact engaged in a battle and I think the submissions thus far have suggested that we are resolved to give our energies to this particular fight but I especially want to compliment those in the front line because I think, though resolved to be part of this effort, not all of us relish the responsibility of being on the front line and confronting this issue fully face to face. Those who have done so and those who are principally committed to doing so and those who are leading us in the effort to counter this scourge must be sincerely complimented and I do so with a full heart.

The presence of HIV/AIDS and its potential to spread threatens our national development. That is a point which cannot be overstressed or overemphasised. Clearly, by recent experience, we have shown as a Government and as a people that we are determined in how we deal with other prominent threats to our national development. We have shown that we can deal with the threat occasioned by the mouthings and the efforts of the OECD; we have shown that we can respond to any threat to our national development

emanating from the Financial Action Task Force; we have shown that we can respond to the hostile forces which are attendant upon the philosophy of liberalization; we have shown that we are resolved to respond to the scourge of drug trafficking and what it portends for national development. I think the fact that we are debating this Resolution today suggests that we believe that we have determined that we can by means being presented to this House today make a fairly robust effort to respond to the potential threat to our national development caused by the presence of HIV/AIDS and its likely spread. Certainly, there is an obvious and significant threat to our labour resource pool that is fundamental to the business of productivity.

We are living now in an era when we must bring all resources into play in an effort to be as productive as possible so that we might compete in this new global environment and find our own niche within the region and within the wider world. I think that if there are present among us any forces which would work against the best interest of the development of our human resource pool then it is of course in our best interest to do what we can to counter such.

I see this measure therefore as in part responding to that issue. It threatens our labour force at a very bad time if we look at it in those terms. We have invested over the years a lot in the business of education as part of our social human development, indeed, as part of a wider economic development and we have traditionally allocated more funds to the business of education of our people than perhaps any other sector of our economy. Yet, we have the heartbreaking experience from time to time of seeing our best young lives eroded, taken over, destroyed by the scourge of HIV/AIDS. We cannot on the one track continue to invest so heavily in our people in the area of education, then to see them robbed of their future and the nation robbed of their input and contribution because of the presence of such an evil in our society.

Of course, there is the impact upon our national reputation if AIDS becomes more of a scourge to us than it is already. A certain reputation attaches itself to us as a nation. Such things cannot be good for the development of our tourism industry, our tourism sector which is the driving sector now within the economy. I am trying to suggest that we are therefore in a battle to preserve what there is of good and what is positive in terms of national, social, economic and human development.

There is a cost. The economic resources which must be brought to bear to provide treatment to respond to the spread of AIDS across the nation is a high cost. I think what we are reflecting here by introducing this measure is that we are prepared to invest whatever the cost may be in the necessary

struggle to reverse the trends which have been set in train among us already.
8.20 p.m.

We cannot say that AIDS is a poor man or working man's disease. I have heard a bias in that direction, that the scourge seems to be associated with those who come from the poorer sector of our community and those of the working class. AIDS is an affliction which attaches itself to any one of us regardless of what our social or economic standing might be. It has nothing to do with geography, ethnicity or social class. We have to fight on all fronts in this society and we have to invest our energies and financial resources to meet the threat.

The borrowing of \$15 million is justified and the source of funding is the World Bank. We have in the past been the beneficiaries nationally of enormous investment of World Bank resources for development of schools and educational facilities.

We are not looking to develop physical infrastructure here but certainly, we are looking to address an issue of national security. It is an issue of national security with respect to the preservation of our human capital. Beyond that we are talking about investing in our future and safeguarding the lives and interest of our children.

Mr. Speaker, if we debate this Resolution with any meaning we will also recognise that we are talking about the perseveration of our family heritage in Barbados. We do not need to get into a debate about what is a model structure for families but suffice it to say, we have had good family heritage passed on here in Barbados and we certainly want to preserve that and protect the interest of our children. We often say that we are a country devoid of natural resources and we overlook the fact that we have tremendous natural resource in the children of this country.

The presence of HIV/AIDS and the potential spread of HIV/AIDS portends an evil for the preservation of that natural resource. Just as we would go to great lengths to protect our natural environment, we should perhaps even go to greater lengths to preserve our natural resource when it comes to the interest of our small children.

I support the view that we need to promote strong family values in this country and programmes such as this should not be divorced from our efforts to promote and preserve strong family values. It is, in part, the erosion of such that is the cause of many of the ills in our society today. The various forms of deviance, many of them have their origin with respect to the family situation in Barbados right now.

The lack of permanence in relationships is another family value which is facing erosion. We need a deliberate and studied policy with respect to the preservation of what is good about family life in Barbados.

Clearly, in dealing with HIV/AIDS, the matter of support for families who are immediately faced with the reality of AIDS is essential. Having looked at some of the programmes intended by some of the Ministries which are in the forefront of these battles, I see that this has not gone without getting some attention. We have to confess guilt to the fact that we have become a society where too often the abandonment of our charges is an offence to which we cannot claim innocence. We heard often of persons abandoning the elderly at the Queen Elizabeth Hospital. We know of cases where children have been abandoned by their families. We are very well aware that people who are faced with the presence of this scourge in their own lives are often victims of this type of abandonment. As a society we cannot make that a response and families have to understand that whereas the state might have some responsibility that the first line of responsibility is the family and we must come to terms with that as a nation.

HIV/AIDS and the potential spread of it is a universal threat. Therefore, the counter to HIV/AIDS must be a universal counter. I certainly believe that the biggest threat in this country right now is the presence and trafficking of illegal drugs. I say that not to take away in any way from the enormity of the threat which faces us as it relates to HIV/AIDS. The response must be universal and I am pleased that is the type of approach that Government has taken.

I support fully the move to ensure that this fight is given the backing and prominence which is necessary by locating the centre of thrust within the office of the Prime Minister. It is a fight that cuts across ministerial lines. It is a health issue both from a medical and mental perspective. It is a developmental issue, a labour and industrial relations issue because we have to come to terms with AIDS in the workplace. We have to think in terms of productivity and social security issues. I know the Ministry of Labour and Social Securities has started formulating a proper response from that particular perspective.

Mr. Speaker, it is also a moral issue and those who would say otherwise fail to understand the nature of the threat we face when they fail to realise that. It is a moral issue and we cannot get away from that truth. The Honourable Member for St. George North has given the sermon already for the day and I will not be sermonising again. I will invite the attention of Members of this Honourable Chamber to a passage taken from the Bible, Romans, Chapter 1, Verses 24 to 27 and ask them to consider what they think is implied by a statement rendered,

long ago, in another context which speaks to liberal lifestyles. It will only be a matter of time before we are affected within our own bodies by the consequences of our vile passions. I invite Honourable Members to chew on that and see what it implies and how it relates to this debate in which we are engaged today.

8.30 p.m.

Individual exposure to risks, Mr. Speaker, in my view, mandates individual lifestyle changes. We can stand here and pontificate all day and preach to the nation, but unless we recognise those risks which we realise to be individual risks, we will not get the message across.

Sir, as a nation we are to provide moral models. I say this whether we look at the society in terms of the commercial sector or whatever sphere of the society but we have to admit that we have not been able to sufficiently provide moral models. We point readily to sports models, and business models but we seldom point to models of morality. Perhaps, they are not to be found or, it is that we do not recognise any importance attaching itself to them.

Sir, part of this debate has been the use of condoms as opposed to the practice of abstinence. All sides have been put here today. I want to sound a note of praise to the many young people across Barbados who resolve the practice of abstinence and I say this most sincerely. Many of them resolve themselves to that practice and are able to maintain their resolve. There are more numbers than we imagine, who resolve to practice abstinence until the proper context is provided for them for sexual activity and they do so successfully.

Mr. Speaker, I am sure that you will be able to identify in your church some of those who are given to this type of mind-set. I think that I am able to recognise in my own church, in Hindsbury Road, some of those who are given to this type of resolve and this type of mind-set.

They are some young people in this country who believe that the best way to go about this thing is to abstain until there is a context of marriage provided for sexual relationship.

I am sure that many of them could be found in the Nazarene Church, Bank Hall; Emanuel Baptist Church, President Kennedy Drive; Pentecostal Tabernacle, Bridge Gap; New Testament Church, Holligan Road, Bank Hall, New Testament Church, Parris Gap; New Covenant Ministries, Country Road; St. Leonard's Church, Westbury Road; Seven Day Adventist Church, Advent Avenue; Evangelical Church, Eagle Hall and Berean Bible Church, Passage Road/Baxters Road, in the heart of the town.

All men are not able to give themselves to that type of mind-set and maintain such a resolve but they are many out there who do. I have had the experience and pleasure of hearing some of them speak to this and observing some of them live to that type of effort.

Mr. Speaker, we often point to the bad examples and forget the better models.

Asides.

Rev. J. J. S. ATHERLEY: We would want to ignore the asides here.

Sir, the business of testing of inmates at H.M. Glendairy Prisons and the Psychiatric Hospital, the legalisation of some of the behavioural lifestyle which was introduced by the Honourable Member for St. John, who is someone who waffles safely down the middle without committing himself one way or the other to legalisation of some of the now illegal lifestyles and habits.

I believe testing could be very helpful. I believe that any testing of persons going to H.M. Prisons for tuberculosis and sexually transmitted diseases should be very much part and parcel of a programme and that testing may be in their own interest. I do not see how it can work against any inmate to have testing done. I see testing as necessary.

I believe that if we get into the business of some of the lifestyles and habits which are not legal we will find ourselves, perhaps, as part of a Parliament that passes on to future generations values to which we have not associated ourselves traditionally. I do not want to walk down the road and look my son in the face and say that I am part of a Parliament that did that.

I believe that such would amount to the abandonment of state's responsibility. We have to recognise that as a state, even in a liberalised environment, we cannot abandon our responsibility to the unfortunate in the social structure of the nation. The state still has a role to play in the economy and we cannot abandon our responsibility and look for the seemingly easiest way of responding, if it proves to be the most beneficial way in the long term, when we are dealing with issues of imprisonment.

There are other measures which can be adopted, some of which we have already embarked upon, such as overcrowding at the prison, education, special accommodation for those who are ill, not just those who are afflicted or disabled. In addition, there are measures including alternate sentencing, the establishment of first time offenders institutions, the employment of more staff, installation of electronic and monitoring equipment which is

necessary as part of the security measures. I believe that these are alternative measures which need to be fully exhausted.

I am pleased with the departmental involvement that reflects itself in the programme of the Ministry of Home Affairs and the Ministry of the Attorney General, the Police Department and the National Council of Substance Abuse, which has already been engaged in matters of education and outreach programmes. On the side of the Ministry of Home Affairs we have the Immigration Department, Government Industrial School and the Probation Department beginning to get involved in the programme.

Clearly outlined objectives have been conceived to reduce the incidences of transmission, promote healthy relationships, and self-esteem, to ensure the necessary enabling legislation and to reduce stigmatisation and discrimination.

I think that this encapsulates the robust response of these departments and ministries. I am pleased to associate myself with the programme outlined by Government and the remarks made earlier by Honourable Members. I am very much in support of the principal mover of the Resolution before the Honourable House today.

Mr. Speaker, I thank you.
8.40 p.m.

Hon. Miss M. A. MOTTLEY: When the record of this debate is settled and read, we will notice that virtually all Honourable Members in this Assembly present today would have spoken on this Resolution. Not so much that this Government was seeking to borrow US\$15 million from the World Bank but I believe in full recognition of the extent to which this society and this country faces a common battle that can undermine the very nature of our society, the fundamental tenets of our economic growth and, indeed, compromise the humanity of us as a people. In those circumstances, Mr. Speaker, I would wish to thank all Honourable Members for having taken the time, the effort and the discipline to speak on this debate today in the way in which they have spoken.

Sir, I believe it is fair to say that those reflecting on the record of this debate will be able to say there was complete unanimity on the part of the Members of the Barbados House of Assembly as it related to the effort necessary to fight the dreaded disease of HIV/AIDS and the commitment which is being attendant on the part of this Assembly. I would like to think it is reflective of the view of other entities within the society, such that if all that was required was commitment and effort, then we would be able to predict a successful outcome but we all know that, as we have been told, the talk is only part of the battle and what now has to be reflected is

the walking of the walk and not just the talking of the talk. I say this in these terms because there can be no doubt that the messages, for the most part, coming from this Chamber to date, reflect that we are prepared to lead that effort as Members of this Assembly. Sir, the reality is, that as we have seen elsewhere in our society, we are judged not only by what we say but also by what we do and in very many respects, what we do can significantly undermine the sincerity of what we say, particularly by those persons who feel that sincerity and honesty must be the hallmark of a person's behaviour.

I want to thank the Members of the Government: the Front Bench, the Back Bench, the Opposition, for reflecting that unanimity. I am not so sure that many countries across the world can reflect unanimity as far down the line as we have and not only in the commitment to the fight but also in the programming aspect that, as a nation, we have outlined.

Sir, I have every confidence that the work which has been done today, the successes which we have seen in respect of the reduction of the transmission rate of pregnant women to their children by 35 per cent to less than 4 per cent last year, the virtual elimination of anyone contracting the virus as a result of a blood transfusion since 1985 when the screening of the blood banks began, the success to date in the negotiation for the reduction of the cost of the anti-retroviral treatment and the continued effort in that direction, particularly since we are aware that Trinidad and Tobago has been, perhaps, more successful than any other country in the region recently in being able to secure one of the lowest prices in respect to the access of the anti-retroviral treatment that we can continue to do so. As to whether or not they were selfish, I would not comment, Mr. Speaker.

As a country, we have tried to work in the context of a Caribbean cooperative effort and I believe that we have been wise in doing so because if we protect ourselves and leave our neighbour vulnerable, the level of inter-island movement is such that we would be foolhardy in doing so, particularly in the context of a national commitment, the steps being taken to establish a Single Market and Economy and to facilitate the free movement of people even further beyond the point which exists today.

Sir, I believe that the efforts of the National Aids Commission, as led by Dr. Carol Jacobs and its Director who I know to be a strong worker, Ms. Jordan, as well as the efforts coordinated by the Ministry of Health along with the sensitivity that the current Minister will bring having had to work in the Q.E.H. with persons on an ongoing basis, the programming that we have set out will be well implemented.

Mr. Speaker, the fundamental issue which faces us as a nation will ultimately be the change of attitudes resulting from the change of values and this will require serious commitment on the part of individuals. It will require perceived change for many people. Sir, many of the myths that Members spoke of will have to be continually debunked, but more importantly the public education programme, the community data programme and the other medium being used to spread awareness and to bring about behavioural change will have to rest on trust being built at the level of the community.

It is my fervent belief, Mr. Speaker, and when I was in the Ministry of Education and Culture, we agreed to work with the Ministry of Social Transformation, along with other non-governmental entities to develop a programme which would speak to seeking to facilitate an environment in which people would start to think about behavioural change and start to reflect on the need to change values to bring about that behavioural change. Sir, behavioural change very often is habit and to break a habit, as we all know, is not the easiest thing in the world. In those circumstances, Mr. Speaker, it must be continuous and I have every confidence that the activities, as well as the investment being put by Government, whether we see it from the National Cultural Foundation (NCF), the National Aids Commission, Cross Caribbean Production in their community theatre efforts, the volunteers, persons living with HIV/AIDS who continue to work in the effort; irrespective of where it comes from, the process of changing values so as to change attitudes and behaviour is absolutely fundamental to the sustainable fight and success of the fight against HIV/AIDS virus.

Mr. Speaker, I do not believe that it is beyond us as a people but I do believe that along the way there may be some decisions on which there may not be unanimous agreement, which will have to be made. Sir, as the Right Honourable Prime Minister has said many a time, ours is the challenge to lead this effort and we will do so with the best judgment we can bring to bear at this point in time, with the best use of the resources that we are capable of mustering and, indeed, with a decent and honest will to succeed.

The previous Speaker who is also my Parliamentary Secretary, has clearly identified his personal views in these matters and I trust that when we have the opportunity to sit down and discuss how we will finally settle the policy of the Ministry, that we will have an opportunity to more fully discuss these issues in the wider implication.

I have no doubt that, as a Christian society, our values must remain rooted in the faith of Christianity. I have no doubt that those things which the Bible speaks of being immoral should continue to be upheld as immoral, but as other societies have had to face throughout the course of

history including this one, there are those things which continue to be immoral but are not necessarily illegal in the context of the society and some may lament it.
8.50 p.m.

There was a point when adultery, Sir, was a criminal act in this country. It is still an immoral act according to the Bible and long may that last but the reality is that at some point, predecessors of ours in this Honourable Chamber, took a decision to treat to the issue differently. They felt that was necessary because of the disintegration of aspects of the family in the society, and it was their best judgment at that time that led to that decision.

I have no doubt, Sir, that as a society but also as a Chamber, we will have to come at some point to pass judgment on those things which it may be necessary to decriminalise, while at the same time reflecting our consternation and our lack of support for them on moral ground.

I believe, Sir, that as is the case in every democracy, there will not be a hundred percent agreement on these issues but at some point we will have to make them with the best judgment that we can bring and with the level of consultation and public education being appropriate to the task. Suffice it to say that I do not believe that any single individual who either supports or is against, should seek to foist their views on a society without the fullest and most comprehensive discussion taking place.

In those circumstances, Sir, there are times when we will have to reflect also on what is necessary to ensure that all things which can affect the public health are done so as not to ensure a spread that will totally undermine, as the Honourable Member for St. George North said, not just the individual capacity of people but indeed, the very economic survival of this nation by reason of the destination of those who may suffer from the virus.

This is not an easy challenge and it is by no means one which allows for easy decisions or easy solutions and the question of how we deal with this challenge may well ultimately, define us as a generation of leaders more than any other single act, as to what we do as the custodians of the Government of this country.

I therefore want to thank all Honourable Members who have spoken, Mr. Speaker, and I trust that we will all, as I say, not just talk the talk but in every respect, walk the walk. I am sure that all Barbadians on whom we have influence will also do so because this really speaks to the survival of our nation and not just the extent to which we can maintain a standard of living.

I thank you, Mr. Speaker, and beg to move that this Resolution do now pass.

The question was put and resolved in the affirmative without division.

ORDER NO. 11 – RESOLUTION TO APPROVE IN ACCORDANCE WITH SECTION 5 OF THE CROWN LANDS (VESTING AND DISPOSAL) ACT, CAP. 225
THE VESTING IN THE NATIONAL HOUSING CORPORATION OF THE PARCEL OF
LAND SITUATE AT FREE HILL,
BLACK ROCK, ST. MICHAEL

Hon. G. A. CLARKE: Mr. Speaker, this Resolution before the Honourable House pertains to the vesting of 657.6 square metres of crown land, lot 16 at Free Hill, Black Rock, St. Michael in the National Housing Corporation for disposal by way of sale to assist with its Capital Works Programme.

Sometime in 1997, the Cabinet in the 'Note 97852, Ministry of Public Works and Housing', at the time, agreed that the properties listed in the Appendix attached to the Cabinet Paper, should be vested in the National Housing Corporation and the property at Free Hill, Black Rock is one of those properties.

The list, Appendix A at the time, included a number of vacant lots, residual parcels of land along the Cummins Highway. There were also disused properties and former public baths which should be disposed of by way of sale, or some of them should be used by the National Housing Corporation in its Capital Works Programme.

The point I am making is that the Cabinet had agreed since 1997 that all the residual lands along the ABC Highway should be vested in the National Housing Corporation. Sir, when this land was acquired for the construction of the ABC Highway, there were parcels of land that were residual, and this land should be sold to the residents whose properties adjoin the Highway. Also, some public baths were to be disposed of by way of sale and some of these properties were to be vested in the National Housing Corporation to help in the Capital Works Programme.

Lot 16 is a triangular piece of land, which is situated near the TNT chicken outlet. It adjoins the lots that are owned by the National Housing Corporation and we would like to dispose of this lot by way of sale to the residents of the area. The National Housing Corporation also owns the site which the bank occupied at one time, along with other lots that were developed and sold.

It is believed that Lot 16 can be subdivided into three lots. The Attorney General has certified the Resolution to be

in order and it was surveyed by a Mr. Vincent Alleyne and is shown on Plan No. 626/94.

Mr. Speaker, with those remarks, I beg that this Resolution do now pass.

Hon. R. N. GREENIDGE: I beg to second that, Sir.

Mr. D. St. E. KELLMAN: Mr. Speaker, I rise to speak on this particular Resolution. It is quite obvious to me and I have been saying this in Parliament very often, that the way the Land Acquisition Act is framed, it is clear that the Government, if they want to be vindictive, could easily use the Land Acquisition Act to unfair people. I do not think that might be the right wording but I think it might be the appropriate wording at this time. Sir, the Act allows the Government to pick up more of the people's land, than they want to carry out the particular project that they plan to implement.

This is a very clear example here, Sir, how Government can come and take land from you, knowing full well that they do not need that land, but just using the Compulsory Acquisition Act to strengthen their particular point. I am saying that we need, in this Parliament, to tighten this particular Act for the simple reason, Sir, because it also allows the Government to come to Parliament and take up people's land and just offer them money.

You have heard me, Sir, on many occasions asking for a simple amendment to be done, in the interest of the masses of people in Barbados and this Parliament has not taken me on. I am saying that because of the scarcity of land in Barbados at this point in time, it is very, very important for us to make that particular amendment to the Land Acquisition Act.

The Minister referred to public baths and fortunately for me, Sir, he was able to remind me that this public bath issue has been with us since 1997.
9.00 p.m.

This Parliament agreed to sell the public baths that the Crown owned some four years ago. Mr. Speaker, you would not believe me but even though this Parliament agreed to sell the public baths, not one single soul can tell anybody that they own a public bath even though Parliament agreed to that over four years ago.

I am saying to the Minister of Housing and Lands that those public baths have deteriorated since 1997 and that those four persons who agreed to buy them at that price must still get them but at a reduced price because the intention of the purchasers has been frustrated by the Ministry of

Housings and Lands. For example, the public bath in Crab Hill, St. Lucy has now deteriorated to such a state that there is no way that the person purchasing that public bath can now talk about a building and land because it is only now land because the slightest high wind would knock down the walls that the bath was constructed with. So it is not fair to those people who over four years ago agreed with the Government on a particular sum of money for a particular property but Government did nothing to make sure that those people received the properties.

Sir, I am calling on the Minister of Housings and Lands to give an explanation to this Parliament today about this particular matter because after four years I believe that you, as Speaker of the House, deserve an explanation on this particular issue. I also hope that the Minister would agree with us today that the amount originally agreed to by the purchaser will be reduced because I think it is only fair and any caring Government should acknowledge that point and implement the point I am suggesting, Sir.

So I am asking for an amendment to the Land Acquisition Act to protect innocent citizens of Barbados from losing their lands to some Minister. I am not saying that the present Minister will do it but we have to protect innocent citizens of Barbados from people who might use the Land Acquisition Act to frustrate the interest of other people called the vendors.

I am saying that I am not happy when this Government comes to this Parliament to acquire land and then comes back and say they took up too much land. The Government has a land bank but there are a lot of poor people who do not even know what a land bank looks like because they do not even have a house spot. So I am saying that this must be corrected soon.

I am also saying that the Land Acquisition Act as it is written now allows the Government to first offer the land back to the original owners but I did not hear the Minister telling this House today that this land will be offered back to the original owners. I am saying that if we accept what was given to us today this will be a breach of the rules of the House. So I am asking the Minister to recognise the point being made and to make the corrective measures to resolve this particular problem.

I thank you very much, Sir.

Mr. M. Z. WILLIAMS: Mr. Speaker, I believe that this debate before the Chamber in relation to the vesting of the land at Free Hill, Black Rock gives me an opportunity to express my satisfaction to the Minister and also to give you or to take you on a little journey so you will get a better picture of where this land is situated and also to express my feelings concerning the vesting of this land at Free Hill, Black Rock in the National Housing Corporation (NHC).

This land is not on the Gordon Cummins Highway as was mentioned but is at the bottom of University Drive just off the Frank Worrell Roundabout proceeding to your right into an area called Rock Gap with the bank at your left and a stretch of land where a guy sells at night. If I am not mistaken, and I am subject to correction, there are three families who live on those spots but I will not name the three families in this Chamber. My memory tells me that at one time because of the division of the road that that spot of land on that side was owned by a family who still reside in that area and further in another area of land, if I am not mistaken, was owned by someone in the medical profession as far as my enquiries are concerned.

So I am in agreement with the vesting of this land into the capital works programme of the National Housing Corporation (NHC). My feeling about the whole situation is that when you look at Black Rock in general, especially under the University Hill, there is the TNT Restaurant and at the back of that the National Housing Corporation (NHC) has just developed about seven or eight house spots there which technically have now become one of the areas where residents will occupy. There is a tennis court in that area which is very heavily populated.

Black Rock has become very commercial within the last couple of years. There is a guy who sells newspapers on that spot and a gentleman by the name of Mr. Small who does trucks there at night. If you drive along that road at night, you get a situation where there is a backup of traffic between TNT Restaurant and Mr. Small's business. Further down the road you get what is considered to be an Automart, you get a barbecue place and you also get another outlet.

I would like to see under the National Housing Corporation (NHC) capital works programme that if those three people are going to be resited that there is enough land on the other side where those people can be placed. I would also like to see a business complex there where the small entrepreneur will benefit and I say that to say this.
9.10 p.m.

It is a prime location to give small entrepreneurs an opportunity to develop like many others in that area have. I personally believe that if National Housing Corporation's capital works programme could vest the area into a commercial project where you would be likely to see a doctor's office, where you would be able to accommodate Mr. Small's fast food business, where there is a possibility that you would be able to see a pharmacy vested in that area and where there is a possibility that if there is enough land...

Aside.

Mr. M. Z. WILLIAMS: ... The first twenty-four hour pharmacy that you are likely to have in Barbados, I do agree with that prompting from the Other Side.

It is prime location because of the body movement in that area. You have the students at the University who on a twenty-four hour basis are in that area. I had the privilege of attending a couple Mondays back the opening of Café Dos which is a small business enterprise in a property there on Black Rock Main Road. A lot of people have been questioning if it is going to succeed because several others went into this business there and failed. I have assured the two young gentlemen that there is an opportunity for that type of business to survive in that area.

One of the aspects of that business, and to give you a little detail as to why I see that area as a prime location for business, is that these young gentlemen have gone into something that is really needed in that area and they are providing a very early morning breakfast at a very cheap cost. They are also providing what is considered a satellite bar where anyone can go and communicate via e-mail or whatever at that business.

I personally believe that at the point where they are situated which butts and bounds the same land we are talking about, when you consider if you turn that area into a commercial entity going along the lines I have just mentioned, it will be ideal in the sense that you have a lot of body movement and a stretch where every fifteen minutes an average of six to seven cars on a twenty-four hour basis are up and down that road, nothing to do with prime time driving. You have the bank on the other side and this would mean that apart from the left side of the road which is densely populated by bush where there is a property on the inside. I am sure that under the Barbados beautification programme the owners of that particular property can fall in line and beautify that whole area which we are talking about.

Fortunately, Sir, it carries the name of one of the most distinguished sons of the soil, the Frank Worrell Roundabout. When you look at that area I am in agreement with National Housing Corporation at this time in vesting the land in the sense that there is a possibility that the residents of that land can be resited on the other side because I paid a visit to the area and just behind TNT at the back there is an area of land below the University which is owned by National Housing Corporation, it is Crown land and I would ask the Minister to have a look at a later date because I do believe that that area of land is conducive to further housing but it is overrun by a lot of bush and a lot of trees.

In closing, Sir, I support this Resolution before this Chamber hoping that the right things are done there. I do not see that area suitable for housing but I think that when you look at that area it is conducive to commercial use and I

think National Housing can benefit from this in the sense that since it is looking at the commercial aspect of its business as one into the business of rental and sales that this would be a good idea to look at and set up one of the first low income... as far as rent is concerned since you cannot ask for rent like some of the big fellows up town ask. You are looking at micro business and at a situation for a hairdresser salon, a barber shop, things within the community where people from within the community who are small entrepreneurs will benefit.

I am grateful for this and in closing I look forward that the next time I stand in relation to the acquisitions in St. Michael North West it will be dealing with land at Pile Bay where I will now be looking at the benefit of giving the residents of Pile Bay a better standard of living, moving them out of the conditions of life as they are at this moment.

I am standing here supporting this one hoping that the next time I stand with land in St. Michael North West that I would be pleased to note that it is the vesting of land in the Pile Bay area. Thank you.

Hon. G. A. CLARKE: I must say that I have listened to the words of wisdom and the advice of the Honourable Member for St. Lucy but I must say however that we have always tried very hard not to acquire more land than is necessary. As you will be aware, at the time the Government acquired the land for the ABC Highway, it was felt at the time that a four-lane highway was necessary and that in some areas more land was acquired than was necessary. This triangular piece of land is important because it adjoins National Housing land and we would want to sell them in lots for the people of the area.

It is true that whenever we are reselling land that we acquired we have to re-offer them to the former owner first. In this particular case, it is a vesting of land in National Housing Corporation, another Government entity and we are not selling it to the public. In the case of the baths, it is true that there were two baths in St. Lucy, one at Checker Hall and one at Crab Hill and these baths were earmarked to be sold since 1987. A lot have been sold but a few have not been sold because some owners felt they had offered too much and the land in the bath had deteriorated over time so that we would definitely have to look at a new valuation to sell to these owners.

Mr. D. St. E. KELLMAN: Mr. Speaker, on a point of order, Sir. The Honourable Member is misleading the House because the one in Crab Hill for sure the owner up to a month ago informed me that he is still awaiting word from National Housing Corporation and he has not received any communications from them since it was passed in this Parliament even though he has called them on many occasions.

Hon. G. A. CLARKE: Mr. Speaker, all I am saying is that Government offered these baths on public auction. A lot of persons have offered to buy them and since then many persons did not turn up to purchase. Even though they had agreed to buy at auction or public tender, they never turned up with the cash. Since that time, the valuation has deteriorated.

Mr. D. St. E. KELLMAN: Mr. Speaker, on a point of order. The Honourable Member is misleading the House because the impression being given is that you could have gone to an auction, made an offer...

Mr. SPEAKER: What is your point of order?

Mr. D. St. E. KELLMAN: The Honourable Member is misleading the House by giving the impression, Sir, that the buyers are now at fault. In truth and in fact, the buyers are still prepared to pay what they have offered originally but the truth is that National Housing Corporation has not put their house in order.

Mr. SPEAKER: That is no point of order. Honourable Member before you continue, I would suggest that you address your winding up to this Resolution and you are under no obligation to answer any question at this particular point that has been put to you other than relates to this vesting of the Resolution.

Hon. G. A. CLARKE: Mr. Speaker, I am grateful for your advice. I would want to say that this land which has been vested will be widely used.

With those remarks, I beg to move that this Resolution do now pass.

The question that the Resolution do now pass was put and resolved in the affirmative.

9.20 p.m.

ORDER NO. 16 – RESOLUTION TO APPROVE THE
COMPULSORY ACQUISITION OF LAND SITUATE
AT REED STREET, ST. MICHAEL FOR THE
PUBLIC PURPOSE FOR THE RELOCATION
OF THE SANITATION SERVICE
AUTHORITY CITY DEPOT

Hon. G. A. CLARKE: Mr. Speaker, this is a compulsory acquisition in which we are seeking to acquire two parcels of land at Reed Street in St. Michael. One parcel is 109.6 square metres and the other parcel is 141.2 square metres for the relocation of Sanitation Service Authority City Depot. Cabinet had agreed to this acquisition since 1998 and it has taken this long because the property had to be surveyed properly.

This acquisition came about because the Sanitation Service Depot at Temple Yard was in bad shape and could not accommodate the workers. I understand that the Authority was relocated but the depot remained at Temple Yard and every time the Government sought to improve the City Depot it was felt that it was not adequate for the 46 workers at the depot. Therefore, Government decided to purchase the two spots at Reed Street for the relocation of the new site.

The new site will not only hold the vehicles but a small structure may be constructed to improve the conditions for the workers.

With those remarks, Mr. Speaker, I beg that this Resolution do now pass.

Hon. R. N. GREENIDGE: I beg to second that, Sir.

Mr. D. St. E. KELLMAN: Mr. Speaker, even though I understand the need for a depot in the St. Michael area, I am concerned about the location of this particular depot because, as you know, the Reed Street area is highly populated. If we are storing the Sanitation's trucks in the Reed Street area, I would first recommend that the trucks be sent to the Wildey Depot to be washed and cleaned before they are parked at night with the smell which comes from them.

Sir, I am also saying that a traffic problem will be created in the area and I am calling on the Ministry of Health to look for a suitable location where an office can be built and store the trucks properly without creating a traffic problem. It is also clear to me that people still live in the surrounding area and this will affect those people.

I want the Minister to withdraw this particular land acquisition and carefully study what his Minister is being asked to do by the Ministry of Health because it is the Ministry of Health that is asking for this request and the health of the people in the Reed Street area must be taken into consideration.

Sir, this acquisition is in conflict with the Ministry of Health in locating a depot in the Reed Street area. I do not know what the gentlemen from the Clement Payne Organisation would say about this depot being in the heart of Reed Street but I am not too interested in what he says. I am concerned about the residents in that particular area.

Asides.

Mr. D. St. E. KELLMAN: No, I did not say I was not interested in Mr. Commissioning because he is capable of

speaking on behalf of himself. I am just informing him that it is another case that he might have to look at.

Sir, this is not only creating an environmental problem but it is creating traffic and housing problems. I do not know if there is a wider plan to remove the number of houses presently in Reed Street. If that is the intention of the Ministry of Housing he should tell Parliament that he is not worried about the depot going in the middle of Reed Street because there are long term plans of removing the people who live there and I will not have to worry about the houses around the depot. Mr. Speaker, anyone who knows about the workings of the Sanitation Service Authority will tell you that it is not feasible to have a depot in that particular location.

My advice to the Minister is to look for a large parcel of land that is not close to houses and relocate the depot there and not in an area where there are so many houses. Sir, we must also take into consideration the traffic pattern of the particular area. As you are aware, Baxters Road and Mason Hall Street traffic pattern is such, that you always have congestion in those areas. I was told that we are trying to move away from the congestion in the town area. If you have one of the feeder roads, now being blocked because you are putting the Sanitation Depot in that area, you are only creating confusion. I hope that the Minister will accept this advice and he would speak to his comrades in Cabinet on Thursday about the environmental and other health problems that might be created in the City where the depot is located.

9.30 p.m.

We have to understand that because the garbage trucks are not enclosed, rats are able to get into these trucks or the trucks can bring rats into the area. We have to protect the citizens from the rats.

Thank you, Sir.

Hon. Miss H. E. THOMPSON: Mr. Speaker, the Sanitation Service Depot for the City was located at Temple Yard since the 1980s. As a result of the lack of care of the facility, absence of adequate maintenance, the depot became very rundown. When we came to Government in 1994, there were a number of complaints about the state of the depot. We started looking for a site to relocate the City depot. A number of work stoppages took place at the depot between 1997 and 1998. A decision was taken to temporarily relocate the depot to the former St. Mary's Infants School compound, after the two schools were amalgamated. There were facilities at this location where vehicles could be parked and the school building was large enough for the administrative offices to be housed there.

We embarked on a search in the City for a site that would allow a central location to carry out the City depot's work and something that would adequately house the approximately 43 members of staff who are attached to the City depot. A site at Watkins Alley was identified in 1998, when I held the Ministry of Health portfolio. The Sanitation Service Authority, members of staff, personnel from the Ministry of Housing, the Environmental Engineering Division and all the other entities, who must come together when Government is purchasing property and making decisions about the purchase of property, met. In fact, we had more than one site visit, including the Honourable Member for the City, and identified this site as the appropriate location for the depot. The staff was given part of the mandate to identify an area that they considered suitable for the depot.

In June, 1998, the Cabinet agreed to this location. I am amazed that it has taken so long for the acquisition to get here. Money was put into the Estimates not only to do the preparatory work in terms of the drawings, but, I think, included money for the start of construction in the next financial year when we anticipated the actual construction would start. I am pleased that the employees of the Sanitation Service Authority are finally going to have a purpose-built facility at a suitable location.

Sir, to answer specifically the concerns raised by the Honourable Member for St. Lucy, the City facility of the Sanitation Service Authority does not house the kind of vehicles and equipment of which you are concerned and of which you are speaking. Sir, that is one of the reasons why we were able to choose a location that was still within close proximity to housing.

I cannot speak for what has happened in the interim. At the time, the intention was that we would have administrative offices, lunch facilities, recreational facilities and there would also be a turning bay and parking garage for the push carts, which you see in the City, and a few 'Ants', the small triangular shaped vehicles, which are used to clean the alleys in the City. At the time we were also doing the purchase of the SSA, a slew of new equipment and vehicles. You will recall in 1999, those vehicles were ordered and arrived.

Mr. Speaker, it was part of an integrated plan. We knew that we were going to go to that site. The size of the facility was dependent on the number of vehicles that we intended to garage there. It was not intended at the time that the large dumpster trucks would go to this facility. Had that been the thinking, the concerns which the Honourable Member for St. Lucy raised about traffic congestion would have been merited, as we would not have been able to get that size vehicles in there. Sir, that was not the intention at all.

Since many of the people who work for the SSA in the City go out on foot and we have the 'Ants', about two or three 'Ants' would be stored there along with push carts, brooms and other equipment. The dumpster trucks would not be relocated there. I would urge the Honourable Minister that now that we have reached the stage where the acquisitions were done, that the members of staff really deserve to have a very nicely constructed and outfitted office and we should move expeditiously with the plan that has been developed since 1998.

I remember architects were chosen and I am disappointed that it has taken so long for something which caused complaints from the staff and precipitated strikes over the condition of the facilities, to the extent that we had to go to an urgent location, should have taken the Ministry so long to develop.

I am happy that it has reached this stage and I look forward to the day, that we can see a newly built facility which has the kind of recreational facilities for staff that the Sanitation Service Authority workers have long been denied. One of the things that we were very careful to do at the time was to choose a site that allowed proper recreational facilities. There is no Sanitation Service Authority depot in Barbados that has for its workers the kind of facilities that other employees of Government corporations enjoy.

I trust that the plan that was on the books, at the time, will be carried out so that Sanitation Service Authority workers are given high quality facilities, because they work very hard. They perform tasks which help with the health and the overall environment and aesthetics of the country. They perform a task which many of us would not wish to do and which a lot of us scoff at. It is only fitting that they in turn are well treated.

I am glad to be able to support this Resolution. I wonder what has happened with the Sanitation Service depot in St. Peter. At the time this decision was taken, if my memory serves me correctly, it was also decided that the St. Peter facility would be relocated and that too would be upgraded into a proper facility. The decision at the time was that the St. Peter depot which occupied prime beach front land, that that land was not put to the best economic use. Therefore, the depot was to be relocated to the Mangrove compound to form part of the new complex that would be developed there for the support facilities for the landfill at Greenland. At the time the plan was that the transfer station at Greenland was to be located at Mangrove and that the Northern depot would be relocated to Mangrove.

9.40 p.m.

Further, Sir, at that time we also undertook a physical upgrading of the existing headquarters at Wildey because we had made a conscious decision that we were going to try to

improve the physical environment of the staff members. We did some substantial work which came to thousands of dollars. It was intended that further upgrading should take place. I must confess that with lack of contact at a policy level I do not know how much more money was spent and, in fact, what has been done, but the idea was that all of the employees of the Sanitation Service Authority at their various depots across the country would have high-quality working facilities. Sir, I am very glad that it appears that we are continuing with that plan. I look forward to its full implementation. I am much obliged to you, Sir.

Mr. SPEAKER: The Member for St. George North.

Hon. G. A. CLARKE: Mr. Speaker, I would like to thank the Honourable Member for St. James South who was responsible for the acquisition in terms of selecting the site. I just want to say that the Ministry has been advised by the Ministry of Health on this site and the other sites. With this remark, I beg that this Resolution do now pass.

The question that the Resolution do now pass was put and resolved in the affirmative.

ORDER NO – 18 TO MOVE THE PASSING OF A RESOLUTION TO GRANT THE SUM OF \$14 033 315 FROM THE CONSOLIDATED FUND AND TO PLACE IT AT THE DISPOSAL OF THE GOVERNMENT TO SUPPLEMENT THE ESTIMATES 2001-2002 AS SHOWN IN THE SUPPLEMENTARY ESTIMATES 2001-2002, NO. 8 WHICH FORM THE SCHEDULE TO THIS RESOLUTION

COMMITTEE OF SUPPLY

On the motion of Hon. Miss M. A. MOTTLEY, seconded by Hon. R. N. GREENIDGE, the House resolved itself into Committee of Supply, Mr. D. CARTER in the Chair.

Hon. Miss M. A. MOTTLEY: Mr. Chairman, Sir, the Supplementary which is being requested of this Committee is in respect of the National Drug Service and seeks to supplement the vote of the National Drug Service in three respects.

1. Other personal emoluments which are required in order to pay two temporary posts of data entry operators for the entry of data of the drug service.

2. Two substitutes for two pharmacists who have gone on training leave.
3. The salary of a trainee pharmacist who has gone on full pay rather than no pay, as well as gratuity to a contract officer.

The sum required for other personal emoluments is \$134 169. It is also, as a result, requiring the sum of \$9 755 for the provision of National Insurance contributions.

Mr. Chairman, by far the largest amount in this Supplementary is in the amount of \$13 889 391 which is being required to supplement the provision for the purchase of pharmaceuticals and for the settlement of arrears in respect of the National Drug Service. There was an original provision in this Head for \$25 million at the beginning of the year.

Sir, on reflecting on this vote, let me say up front, I think I can say that every year that I have been a Member of this Honourable Chamber there has been a request for Supplementary for the National Drug Service. While I reflected upon that in the presence of the Honourable Member for Christ Church South, the Honourable Member put me in my place very quickly and indicated that for the last 30 years there have been requests for Supplementary funds to pay for pharmaceuticals and for the Hospital. Sir, while the National Drug Service itself may only have existed since 1982, the phenomenon of running short for payment of pharmaceuticals clearly predates all of us who are currently in the Chamber at the moment in respect of the incidents of requests for Supplementary Estimates. Sir, while that does not provide any suitable excuse, it would simply be preferred that we should not have to come here, but the reality is that the management of the service is done at two levels. One is in relation to those pharmaceuticals which are provided by the Government itself through its agencies, as well as the settlement of debt which is provided to private pharmacies by reason of their provision of the pharmaceuticals to patients.

Over the year, Mr. Chairman, there has, in fact, been major expansion in the system in respect of the range of beneficiaries who are eligible to benefit from the system, as well as the deviation from the initial policy of co-payment which would have seen those who are able to pay now being required to pay.

Mr. Chairman, in 1981 when we started, persons who were under the age of five years and more than 65 were eligible to benefit from the Scheme. In 2001, it is now persons under 16 years old and persons more than 65. Therefore, as you would appreciate, Mr. Chairman, that has represented a substantial inclusion of persons and if my

memory serves me correctly from my days in the Ministry of Education, there is an average four thousand people in each year age group which means that you are talking of the addition of in excess of 50 000 Barbadians who would have been eligible over the period of time just by reason of the shifting of the age from six years to 16 years.

Equally, in 1981 when the Scheme first started, chronic diseases such as hypertension, diabetes and cancer were the diseases identified such that if persons were suffering from those diseases they could access the medication. That range of diseases has now been extended to include asthma and epilepsy which, as you know in the context of modern Barbados, there are far more persons affected by the predisposition of asthmatic condition than previously existed. Some persons argue that it may be either environmental, the diet or an allergy, but the reality is that there are far more Barbadians who are suffering than we have seen in the past.
9.50 p.m.

Equally, Sir, the incidence of the health profile and the number of persons who may not be living as healthy a lifestyle as before, and the increase in persons who are suffering from certain chronic diseases would, in and of itself also be placing an inordinate burden, in respect to the numbers claiming off the service.

Having said that, Mr. Chairman, this Government is in no way wishing to change or to reduce the beneficiaries of persons, or the category of persons now eligible to benefit from the system. It does mean however, Sir, that we do believe that after some 20 years or 21 years of existence, the time is upon us for a comprehensive review of the drug service, just as we have had in the last few years to come to a Christian understanding that generally, there must be a comprehensive review of the delivery of all health care services in Barbados.

We are satisfied, Sir, that the initial action taken by the Barbados Drug Service, in terms of the contracting of persons to develop a strategic plan, I am instructed that there would have contracted a firm to identify those changes in the short to medium term, that the Barbados Drug Service needs to implement to manage change more effectively through its people.

A draft Strategic Plan has so far been developed and documentation of key business processes and issues, as well as a report on the immediate operational improvements has been done. I can only say, Sir, that we have now clearly to move from the academic stage to the implementation stage because it is unacceptable that they continue not to manage their affairs in such a way as to ensure the appropriate and orderly payment of bills when due.

Having said that, Sir, I also appreciate the difficulty that they face in being able to adequately predict what they need, largely because one does not know what the incidence of occurrence in respect of need will be, given the eligible beneficiaries under the scheme. In circumstances where, for example, persons are forced to go to private pharmacies, I am told that there is a higher cost to the Government, than if those pharmaceuticals had been delivered by Government agencies themselves.

In a previous matter, Sir, the Honourable Member for St. Michael North made a very good and strong plea for the need for some kind of 24-hour access to pharmaceuticals in Barbados. A country that boasts of the kind of development indices that we do, really must have that kind of service available, if we are truly to represent ourselves ultimately, as one of the smallest developing countries in the world.

It should not simply be the fate of a person to have to go to the Accident and Emergency Unit in order to be able to access that medication, if a person falls ill suddenly outside of the normal working hours. Even if, Sir, that medicine, as I said, may be available from the Accident and Emergency Unit, I do believe that perhaps through a rotation system, between both the public and private pharmacies on an on-call basis, there may be an opportunity to ensure that there is some central location from which pharmaceuticals may be available on a 24-hour basis. There is clearly a need for these funds in order to settle payment with suppliers, as well as to settle payment with the private pharmacies.

I would wish on behalf of the Government, Sir, the Minister of Health has already done so but I would wish publicly, to apologise to those pharmacists who were unfortunately given cheques dated 2007, which was clearly a computer error. We believe that in those circumstances, it is not a reflection of the Government's intention as to how we should treat them but unfortunately sometimes, as is warned, there are computer glitches that in fact, result in these ways.

I can only urge, Sir, like all other members of this Government have done on previous occasions and in previous years, that we work more assiduously towards the development of systems that will allow for the orderly settlement of arrears, as well as the orderly payment of those pharmacists who are within the scheme. The pharmacists themselves have been making claims for increased payments. I am not briefed on these matters, Sir, and therefore would not venture a comment on them. But suffice it to say that I have every confidence that the Minister of Health is well seized of the issues and will treat this matter with the sensitivity and the seriousness which it merits. I also am aware that he is committed to the comprehensive review of the National Drug Service which was one of the leaders in the Commonwealth and in the developing world, at the point of its establishment.

Indeed, we were reminded of this, Mr. Chairman, when the Government of South Africa, some five or six years ago – and I believe the Honourable Member for St. James South may be able to attest to this – would have requested some level of technical assistance, in respect of how we would have established that service and how it has effectively transformed the lives of a number of ordinary Barbadians, relieving from them the burden of paying for pharmaceuticals for those things which most effect this population: diabetes, cancer, hypertension, persons over 65 years old whom are pensioners and not earning, persons under 16 years of age, whom very often a mother or father may have two, three or four children and when the flu starts to run through one and run through all, or more serious ailments occur, the bills are in fact, beyond the earning capacity of the household.

Indeed, Sir, our health profile and our quality of life can, in a very tangible way be related to the fact of the establishment and maintenance of this field. Even with the teething problems that it had, and even with the occasional problems of settlement of arrears, I think, Sir, that we can be justifiably proud of what the Barbados Drug Service has done to improve the quality of life and the level of development in this country.

In those circumstances, Sir, while I accept the need for a comprehensive review, the fundamental basis and the fundamental objective of the system are worthy of our support. It is for that reason that I have no hesitation in asking Parliament to support the Supplementary request. I recognise that it is large but, Sir, it is going in ways and for circumstances which at the end of the day, cannot be compromised by our failure to pay. We cannot leave persons without access to pharmaceuticals, whether on simply a 24-hour basis or for a protracted period of time.

I look forward therefore, to the speedy settlement of this matter. I am aware that the matter is fully in the hands of the Honourable Minister of Health and I commend him. I know that the first time he learnt of the matter on Friday, was after the news story broke but in spite of that, he met with the pharmacists on that day and he went and developed a framework for settlement of the matter. Hence, Sir, the Supplementary being here before us today.

Equally, I also know that he is in control of the situation and is having discussions with the suppliers, on whom we depend for the supply of pharmaceuticals for ongoing distribution.

I therefore, Sir, ask that Head 23 stand part and ask all Honourable Members to support it, in the context of the

urgency of the situation but also the merit of the cause which is before us.

10.00 p.m.

Mr. Chairman, I want to say from the outset that I support this Resolution but it is quite clear to me that this would not be the first or last supplementary on this particular Head. We are now six months into the year and we have spent \$25 million already and it is clear to me that we are some \$11 million to \$12 million short.

Asides.

Mr. D. St. E. KELLMAN: I am told that some is for the settlement of arrears. I am not sure how much is for arrears but I am telling this House that we will be back for a substantial amount of money for this particular head because as I said...

Hon. Miss M. A. MOTTLEY: On a point of elucidation. Perhaps I should indicate to the Honourable Member for St. Lucy that as of September 30, 2001 the sum of \$15 013 295 has been spent. That, in fact, represents a six month figure so the correlation which he would wish to do would suggest that no more than \$30 million on normal expenditure would be spent and, therefore, reflects and confirms what I have indicated to him that part of it is for the settlement of arrears due to suppliers which have to be taken care of.

Mr. D. St. E. KELLMAN: I appreciate the explanation given but the Honourable Member for St. Michael North East would appreciate that there would have been outstanding bills that had to be accounted for for the month of September and might have been for August as well based on the information that we are now gathering. So what I am saying to you is that we need now to prepare for the worst scenario and prepare ourselves to think.

I also want to make a very significant point. I agree that every year we come to this Parliament for more money for this Head but the truth is, the amount of money that we will have to come for through the process of supplementaries is going to be much higher than usual. This has to do with the amount of construction on our roadways which is definitely creating problems for the asthmatics and which is definitely creating stress and increasing the number of diabetes cases that we have in this country.

Asides.

Mr. D. St. E. KELLMAN: I said stress and I know the Honourable Member would not disagree with that particular point.

I am told that the road construction work would soon be finished. I am also predicting that if the Ministry of Public Works and Transport completes the road works, we can do a feasibility study on our transport system so that we could solve some of the headaches created by some of the workers of Barbados and it is quite possible that we might be able to significantly reduce this particular bill.

So I am saying that the stress and the environmental problems that I spoke about two years ago which Honourable Members of the House laughed at is now coming back to be proven to be correct in that we are allowing our road system which is supposed to be a positive thing for the workers of Barbados to become a negative aspect of the workers of Barbados by creating certain health problems for them. I am saying that we need to understand that, because as has been said elsewhere, the health of one's country is the wealth of one's country.

I am also saying that because of the particular problem we are having that productivity is being reduced at a time that we cannot afford to have a reduction in productivity because the number of sickness days that will have to be taken by employees will definitely reduce the productivity of the country and we need to take these things into consideration.

We also have to make sure that the suppliers to these various agencies be looked after because we have to understand we might be creating some pressures for them and some of them will have to be servicing their overdraft *et cetera* and they cannot then turn around and beg Government for that additional cost.

So I am saying that in this whole drug programme, considering that we have to out source a lot, and that most of our people happen to be what we regard as small suppliers, have to be taken into consideration and stop the unnecessary stress that might be created in this particular situation.

I thank you, Sir.

Mr. D. J. H. THOMPSON: I will not be very long Mr. Chairman. In addition to what the Honourable Member for St. Lucy said I believe that the Ministries working together with the Ministry of Finance need to find a more efficient and effective way of identifying the need for supplementaries. I am not saying that it is so in this case because I do not have the facts before me but I know this from past experience that very often Ministries will wait until the vote is almost exhausted because in some cases it is under provisioned from the outset. There must be a reason why. As the Honourable Member for St. Michael North East has said, consistently down through the years we have had to have supplementaries in respect of pharmaceutical products

as well as to the Drug Service but that can be extended across the entire gamut of health care services like the Queen Elizabeth Hospital. I hardly know a year in which we do not have a supplementary for the Sanitation Service Authority or for some category of workers in the Ministry of Health.

In my time, there was even a supplementary for a capital project which would have been undertaken by the Ministry of Health which obviously was not receiving a sympathetic ear from the Ministry of Finance and very often the debts were either allowed to accumulate which is really against the financial rules and the Ministry failed to take immediate action.

What are the consequences? The consequences as the Honourable Member for Christ Church West Central will tell you are that many businesses which are fledgling cannot sustain the financing cost of the failure of Government to pay them on a timely basis. Therefore, some of them will go under or others may face such severe cash flow problems that even though they need to be part of the arrangements they will find it almost impossible to keep up. Therefore, the Government itself will be having, by its failure to act quickly, an impact on small business enterprises because the vast majority of these entities are going to be small business entities.

10.10 p.m.

The second point is obviously the issue of shortages and apart from the question of the traffic and the contribution of stress, there are a lot of old people who have started to panic already that they will not be getting their medication. I met a lady this morning who wanted to know if the Drug Service would still be providing medication. They start to worry and invariably they are at the age where things like that do cause them a lot of anxiety and the length of time that it takes policy makers to respond.

I am always amazed when I hear Ministers say that they were not aware of the problem. I would excuse the current Minister because he is a new Minister. But no Minister who would have been in office for eight years and knows the system could come to this House – they could do that in the newspapers and they do it often – and say that they are now getting briefed on a problem. We had an issue at the Tourist Board this week and somebody said they are now getting briefed on the issue. That is absolute nonsense. It is callousness and incompetence for any Minister to say that relative to expenditure in his Ministry other than a major unforeseen circumstance he is being now briefed.

I accept a new Minister and I am not putting any pressure unduly so on the new Minister. I hope that he will now rush to be briefed on all areas of expenditure within his Ministry. I know that there is also a sector in which civil servants themselves do not like to bring these matters to the

attention of Ministers because they in turn view it as an indication of their failure, even though it may not be so, to manage effectively the Budget under their control. These things may be unforeseen but not so unforeseen that it requires these long briefings and an urgent Cabinet meeting and all of the other thousands of excuses that policy makers make.

We have had a lot relative to the Ministry of Health: breakdowns in equipment at the Hospital, and the Minister waits for a report. Sometimes all the equipment has broken down, not on one day but over a series of weeks until none is working. Four weeks ago, doctors could tell you that there were problems in relation to the operating theatres and then you wait until all of them are out of operation and somebody is waiting for a report to be handed in.

The Accident and Emergency Department, you wait until the situation gets critical and then somebody says they are waiting to be briefed to understand what is happening. Fortunately, the current Minister has had his own experiences so that he really now has a chance to brief others rather than to wait to be briefed. In that regard, we will not be sympathetic.

In relation to the Drug Service, maybe, but in relation to the problems at the Hospital the Minister needs to hit the ground running even faster than he has been running because as I have said already the problems within the health services in Barbados do cause a lot of anxiety to the people who cannot afford private care. And they wonder every day particularly if they have already been diagnosed with some illness that requires them to have regular patient care and drugs and physiotherapy or even operations what is happening within our health service is causing them great distress, particularly where situations get totally out of control, are blown up in the Press and cannot be resolved.

An issue like this should never have to be in our newspapers. As an Opposition Member, I do not laugh and feel good and jump up with glee when I read in the newspapers that the situation with the druggists as we call them has reached the stage that it has reached. The opposite happens to me. I am not the kind of politician who as soon as it happens believes that you must issue a statement condemning anybody. I want to hear within an hour that it has been solved because at the end of the day people are not going to make quick distinctions between you and me. They have health problems that need to be solved and they will transfer that anxiety to anybody who is willing to listen which includes me and they will transfer the blame because they believe that they have elected people to be able to solve these problems.

There should be no circumstance in which a problem in the health sector reaches this level where people have to

be in the newspaper demonstrating, taking action, threatening and creating havoc because the people who suffer the most are the children, the elderly and the disadvantaged and the poor and the persons who need to use these services. They feel the impact of it. As I said, let me make it clear that I am not one who jumps up in glee when these problems arise. We must find a way of being able to resolve them. If we have to stay here until one o'clock in the morning to resolve it we would be willing to do so. I said so to the Leader of the House, not in those words, but she said the supplementary was coming late and the Honourable Member for St. Lucy said that we support it but there is only so much that you can accept and I believe that we must find a way to have these matters resolved quickly in the interest of the people that we serve.

Hon. Miss H. E. THOMPSON: I do not often agree with the Honourable Member for St. John but on this occasion I must. The hour is late, Sir, and there are a number of very serious issues relative to the Drug Service to which I wanted to speak. I think, however, that the mood of the Chamber is that we should rise and go home and there is a will overall to support this Supplementary because we know that it affects the quality of life and the state of health of Barbadians like ourselves and that it is also affecting the viability of people's business so that we want to support it. Indeed, I do Sir.

I would just wish to make a few observations. The National Drug Service is ripe for a radical restructuring. I remember when I was there leading the policy direction of the Ministry of Health we had started work on this process. I do not know what has happened with it and I am disappointed that as far as I am aware nothing has come to Cabinet to do with the restructuring of the Drug Service or come to this Parliament for our consideration and debate.

We have reached the stage in Barbados where there are several private sector pharmacies participating in this drug service programme. Almost on every corner in Barbados pharmacies have sprung up. They are now as prevalent as rum shops and churches which are the two most common institutions found in Barbados. Every medical office has its own pharmacy attached. All kinds of people are involved in the ownership of pharmacies. I am not going to get into that matter tonight as people have a legitimate right to invest if they so wish but there is an internationally accepted ratio of pharmacists per capita. I do not remember the ratio per thousand people off the top of my head but it is interesting that a small developing country like Barbados that has only a population of 260 000 that the ratio of pharmacists and pharmacies to the population in Barbados is far higher than what is international standard. That is a very interesting observation that I think we need to explore further.
10.20 p.m.

How do we restructure the Drug Service so as to bring the management of the financing of the services within better control of the national budget? These are issues which have to be tackled. We must ask ourselves what is causing the bulge? I agree that part of the reason for the bulge is the high incidences of chronic diseases which are increasing constantly. The World Health Organisation indicates that more people across the globe have died as a result of chronic diseases than all the world wars put together. I looked at the figures of anticipated deaths over a five-year period worldwide from chronic diseases and it is an extremely high figure and we in Barbados are really suffering as a result of the incidences of chronic diseases.

In Barbados some 20 000 people or 10% of the population suffers from diabetes and some of those have other chronic diseases as well. There are persons who are suffering from high blood pressure who remain undiagnosed so we really have to look at what is happening in respect to chronic diseases.

Sir, I am disappointed because when I was Minister, I looked at the Drug Service and determined that if we could deal with the problem of chronic diseases, then we would only be able to deal with the expenditure in the drug service to ensure that people had a good quality of life and were productive because they were not having so much time off as a result of the disease and the sequela of coming down with the various manifestations of the chronic diseases.

In 1998 Cabinet approved the establishment of a Chronic Disease Council to look at the whole matter of chronic diseases in Barbados and develop a policy framework to target the reduction of the incidences of chronic diseases in the population. After I left the Ministry of Health that committee became diseased and died and nothing has happened in respect of that committee.

Mr. Chairman, we still complain about the extremely high incidences of the chronic diseases and the fact that 150 people per year are losing their lower limbs as a result of diabetes.

Mr. Chairman, we as a Government are not addressing the problem of reducing the incidences of chronic diseases except for funding for the work being done by the Chronic Disease Centre under Professor Fraser. I wish to appeal to the new Minister either to revitalise that council or develop his own initiative. I do not feel that the Minister needs to be tied to my policy initiative because the Minister is very bright and can develop his own initiative as he is trained in medical care. If we can deal with the chronic diseases then we should see a corresponding decrease in the expenditure under that Head for the Drug Service project. I really believe that a serious examination of these figures has to take

place to look very closely at the private sector pharmacies to see how the budget can be controlled and whether the Ministry is getting a fair deal because the Ministry is spending the taxpayers' money.

I believe that the polyclinics should be opened late at night to give health care and people who have prescriptions written in the private sector should be allowed to have them filled in the public sector because it is cheaper for the Government to have the medication dispensed through the public sector pharmacies. If it is cheaper for us to do that, there is absolutely no reason why people should not be directed to the public sector to have their prescriptions filled because that would present a lower cost to the taxpayer. Sir, that would mean that we would have to properly equip public sector pharmacies and people should not have to turn up to be told that there are no supplies. There should be adequate supplies, proper management and control of the inventory if we are going to give people medication in the public sector.

Similarly, we have to address the problem of how people who are given medication use that medication. When inspectors go out to the homes of elderly people, it has been found that they collect the medication, put it down and do not comply with the treatment regime and that represents a waste of money.

Sir, we need to re-examine the range of medication which we allow people to have free of cost. While I would not want to see the categories to whom medication is given shrunk, I would wish for us to examine the range of medication that are given.

Sir, I think the service is ripe for major restructuring and I hope that the Minister will get to it soon because this expenditure curve to which I have spoken is a worrisome matter and it has to be addressed both at the level reduction of the disease burden which is causing this curve and at the level of the management of the system itself. We need not only to look at expenditure but at how the whole drug service functions and operates especially as it pertains to the private sector.

Mr. Chairman, I am much obliged to you.

Mr. D. T. GILL: Mr. Chairman, I rise to make a brief contribution to this debate. There are a number of serious issues relative to the Drug Service on which I want to speak. Sir, you have renal units, firing at full strength. Then, Sir, you have cardiac units, intensive care units, pediatric units and all kinds of units. Sir, you cannot ask for a Mercedes and pay Suzuki rates. Barbadians, Sir, are leading a very exotic and upper-brow way of life.
10.30 p.m.

Sir, I once represented a European pharmaceutical company and an American pharmaceutical company, they were ethical companies, and the cost of their preparation were, when compared with generic were five hundred fold more expensive. Today, we cannot be singing the praises of the retroviral therapy for newborns and at the same time expect that the cost will be down five years after. The increased cost is not shocking. What we have to do is to look for other areas where we could cut back.

Barbadians' biggest grouse now is for insurance companies to come forward and take the brunt and carry the load which they are supposed to be carrying for their hospitalisation and medical plans. In my opinion, they are saying that they are not paying for A, B, C or D.

Sir, the cost to treat prostate cancer is not cheap. You also have to look at the cost of treating women with breast cancer and the therapy. We speak highly of our Cardiac Unit and the Angiographic Suite but we have to pay for those facilities. There is no way that we can expect that every five or ten years for your bills to be going by just 25 or 33 per cent. This is a problem which has plagued the society and more developed countries, and it is a problem that you must carry out a very delicate balancing act.

Mr. Chairman, I once had an investment as a Pharmacist and the private pharmacies have not been paid any increases for more than twenty years. It must be said that when the cost of a preparation goes beyond a certain figure, for example \$100, we do not hear that the private pharmacist procures something for \$125 and he makes a profit of only \$5. However, we always hear of the instances where they get \$5 for something which may cost ten cents. If you work it out, what you lose on the swing you certainly do not gain in the merry-go-round, you do not fall anyway near the midpoint.

There are preparations in the renal unit where a small ampule costs hundreds of dollars, particularly at this time of the year where you are having problems with leptospirosis and dengue fever. I think that we have to approach it in a level-headed way, be rational and above all very scientific. Sir, if you read the literature, you would see that modern medicine changes every month. Every man or woman would like the best for himself or herself or their children.

It is a very delicate act that one has to balance. It has posed problems in the developed and industrialised countries, Great Britain, North America or Sweden. Once you are dealing with upmarket products or the latest in techniques, this is the price a society has to pay.

I thank you, Sir.

His Honour J. M. EDGHILL: Mr. Chairman, in reference to The Barbados Drug Service. The Drug Service will continue to use more medication because people are living longer. People who are diabetics and hypertensive are living longer. Therefore, the Drug Service will use more medication.

Sir, if you look at the formulary over the last few years, there has been a reduction in the amount of generic drugs being used. The more reputable drugs are being used and these drugs cost more. Sir, four or five years ago we were using Stilbestrol for prostate cancer, which we are still using, but the cost is at least twenty-five times higher than before. We are using Hytrin for prostate cancer and the cost is higher than before.

Sir, for someone to say that the Drug Service is spending too much money and something has to be wrong is not fair. More people are living longer and using the facilities and, therefore, the drugs will become more expensive.

In addition, there are more asthmatics in Barbados than five years ago. With the amount of dust on the road, there must be an increase in asthmatics. Mr. Chairman, with the aging housing stock, especially in St. Michael, we will get more asthmatics. It has been found that most asthma cases are due to allergies created by the droppings from roaches.

I am very disturbed to hear that the Barbados Drug Service is spending too much. Things will improve as we are planning to give proper health care.

Thank you.

Hon. Miss M. A. MOTTLEY: Mr. Chairman, despite the late hour, the number of Honourable Members who have spoken on this Resolution reflects an acute interest in the subject matter, The Barbados Drug Service. I am very much aware that it will be undergoing comprehensive review by the Honourable Minister of Health.

In the circumstances I want to thank those persons who still proffer their views, from personal experiences, practitioners or policy prospective, and particularly agree with the comments of the Honourable Leader of the Opposition that systems have to be reflected, not as they relate to the drug service, but also to how we manage Supplementary requests and bring them before the Chamber.

We do not live in a perfect world but I do believe we accept that there can be improvements in the way in which we manage some of these matters and I look forward to being part of the process that can help bring about those changes for the better. I think the fact that something is going on for more than 30 years is indicative enough for us to resolve to bring about that change. With those few words, Sir, I beg to move that Head 23 stands part.
10.40 p.m.

The question was put and agreed to without division.

On the separate motions of Hon. Miss M. A. MOTTLEY, Mr. CHAIRMAN reported to His Honour the SPEAKER, the passing of one money Resolution in Committee and Mr. SPEAKER resumed the Chair and reported accordingly.

On the motion of Hon. Miss M. A. MOTTLEY, seconded by the Hon. R. N. GREENIDGE, the Resolution was read a first and second time and passed.

ADJOURNMENT

Hon. Miss M. A. MOTTLEY: Mr. Speaker, this brings us to the end of Government's Business for today. Sir, at this stage, I would wish to thank all persons, both Honourable Members of the House, the Clerks, Deputy

Clerks, the Reporters and, indeed, those responsible for the Parliamentary broadcast and those other persons servicing the precincts of Parliament; namely the police, security guards and the ancillary staff of Parliament.

We did not anticipate that we would have been so long today but given the nature of the business before the House, we have still done well in respect of our capacity to finish. I would simply say at this stage that it is hoped that next Tuesday will, in fact, be the last sitting before we take the Christmas break and hence our working as late as we did today to finish some of the business on the Order Paper.

I would wish also to extend my gratitude to you, Sir, for your very long day in the Chair and to say that our appreciation goes to all at this late hour of 10.48 p.m. With that, Sir, I beg to move that the House do now adjourn until Tuesday 18th December, 2001 at 11.00 a.m.

Hon. R. N. GREENIDGE: I beg to second that.

The question that the House do now adjourn until Tuesday, 18th December, 2001, was put and resolved in the affirmative without division and Mr. SPEAKER adjourned the House accordingly.
10.48 p.m.

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