

**THE CENTER FOR
STRATEGIC AND INTERNATIONAL STUDIES (CSIS)**

**REMARKS BY
HIS EXCELLENCY FESTUS G. MOGAE,
PRESIDENT OF THE REPUBLIC OF BOTSWANA**

**BOTSWANA'S FUTURE: REFLECTION ON HIV/AIDS,
DEMOCRATIZATION, AND U.S.-BOTSWANA RELATIONS**

**WELCOME AND INTRODUCTION:
JOHN HAMRE, PRESIDENT, CSIS**

**MODERATOR:
STEPHEN MORRISON,
AFRICA PROGRAM COORDINATOR,
CSIS**

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JOHN HAMRE: Good morning, ladies and gentlemen. Welcome. Delighted to have you here. This is the highlight of our week, and we've had a pretty big darn week. But to be able to greet the president and welcome him here again to CSIS, and to thank him for giving us this opportunity, it's a great privilege. Thank you, colleagues. I'm delighted all of you would come this morning. It's great to have you here and I think it's a testament to your appreciating how important the role of President Mogae and the government of Botswana is in Washington.

And if you'll just indulge me for a second, America is going through a pretty angry time. You know, our politics is hard and people are not happy with the government, and frankly at the core of it is a sense that government isn't working here very well. You know, Katrina undercut this perception that America's government could get things done, and frankly the difficulties we're having in Iraq adds to that.

And so I mention this because we have an opportunity to hear about a man and a government that is getting something done, and getting things very, very well. President Mogae, you have a global reputation for having tackled one of the hardest problems facing any society, and you found practical solutions that work. And that's statesmanship, frankly, that we need in America.

And I am delighted that you could be here as a bit of a role model for us on this very important topic. Not just because HIV/AIDS is an important issue; you've pioneered that; you've pioneered solutions for that. You've worked with the private sector. When you reached out and cooperated with the Gates Foundation and Merck (?) Corporation, to get a practical solution, you demonstrated government can be effective. And I think that's a role model we need more of in governments and around the world, and we especially need to welcome you here in Washington. So I want to thank you for coming.

Let me also greet – we have some dignitaries here that I would like to – first I'd like to welcome General Merafhe, who is also the foreign minister. And I love having a general who is able to be successful – (laughter) – in foreign policy. I mean we have not made that successful transition so well in this country, although Colin Powell was a great success. So you are in good company, general, thank you.

Modise Modise (ph) is the permanent secretary of the office of the president. We're delighted that you could be here.

Howard Mofat (ph), who – where's Howard, there. Thank you. Howard has, of course, been a pioneer for years in the HIV battle in Botswana, and part of the success, and great to have you here, Howard.

Ambassador Lekoa, you're doing great things in Washington, and if I say even better things maybe the foreign minister will give you more money. (Laughter.) Maybe that'll work out here, which I'll praise you if I can.

Joe Huggins, where's Joe, he was our ambassador; Joe, welcome. Delighted you could join us this morning. Thank you for being here.

So we're here today – this is a celebration of when government does things well. And we highlight that and we welcome the people that make government do good things. Now, I'll tell you, the president is getting ready to reach the end of his tenure, and it is my secret hope that he finds a bit of his future here in Washington. And he did some very pioneering and very important work with the Congress – you know, bringing HIV/AIDS awareness to a higher state in Washington. And I think that his leadership on helping us understand Africa would be most welcome. So president, I hope this is not the last time I can greet you to CSIS, but we're very delighted to welcome you today. Please, I invite you to come to the stage to speak with us.

(Applause.)

PRESIDENT FESTUS MOGAE: Director of Ceremonies, President of the Center for Strategic and International Studies, Mr. John Hamre; Dr. Morrison, friends.

I am not half as clever as those who like me would like you to believe – (laughter) – but I'm clever enough to avoid controversial issues – (laughter) – so I'm going to talk to you regarding on the performance of your government in relation only to Sub-Saharan Africa. (Laughter.) I only pass through the Middle East and elsewhere, and therefore, I have no authority to talk about those things. And so, I will confine my remarks to Africa and Sub-Saharan Africa, at that.

My delegation and I are very grateful to the Center for Strategic International Studies for this opportunity to interact with friends. In particular, I wish to recognize the tireless efforts of the CSIS Africa Program and its taskforce on HIV and AIDS in helping us to bring Botswana's problems or challenges to the attention of the U.S. government, the U.S. Congress, and the American people.

I also wish to extend my gratitude to all of you at the center for your continued interest in Africa. Most of you in this room would be aware that I am leaving office in March next year. I would not press you on your sources about that. However, as I move on, as you Americans would say, I wish to take this opportunity to share my thoughts with you on a number of issues, as Botswana's friends, as Africa's friends.

Botswana is still one of the countries worst affected by HIV/AIDS. The impact of the scourge on the economy and the people is both evident and severe. The scale of the epidemic has forced us to divert resources away from regular development projects and programs to the HIV/AIDS national response programs, thus making it imperative for us that we look to friends, such as America and others, for support to combat this scourge and keep the country on a sustainable development course.

We are grateful to the U.S. government, believe it or not, because I'm talking about Africa and Botswana. I'm not talking about the Middle East or Asia or Latin America. We are grateful to the United States government, the private sector such as the Gates and the Merck Company Foundations, the Harvard Aids Institute, Bristol-Myers Squibb, and others, and to the advocacy groups, such as the Center for Strategic and International Studies, and the American people for their support in this regard.

The assistance we have received and continue to receive from the United States has helped enhance our capacity to effectively respond to the epidemic. In 2002 – or 2002, my government launched and rolled out a universal program to provide anti-retroviral therapy freely to all our citizens who needed it.

A program for the Prevention of Mother-to-Child Transmission, PMTCT, is also in place. Thirty-two voluntary counseling and testing centers have been built around the country for free and voluntary testing, which testing is a critical foundation and entry point for other HIV/AIDS response programs. All these initiatives and others form part of the overall strategy for prevention, treatment, care and support, the cornerstones of Botswana's national response to HIV/AIDS.

These efforts have yielded good results, however modest. Today, over 90,000 patients are receiving treatment under the national ARV program, out of the national target of about 95,000 by the end of 2007. I am confident that we will have reached or even exceeded this target by far by the end of the year. The prevalence rate among pregnant women has declined from a horrendous 37.4 percent in 2003 to 32.4 percent in 2006, a modest decline, but a trend we expect will persist.

We also witness a significant progression of the probability of HIV transmission from mother to child, from 40 percent in 1999 to 6 percent in 2006. This means that at least 94 percent of newly born babies are likely to be born HIV-free, an opportunity to achieve an HIV-free Botswana by 2016. In the face of low mortality rates of about under 10 percent among those on ARV treatment, these decreases are suggestive of declining incidence rates in the population.

The modest successes we have recorded in my country, to which I have just referred, and indeed in many African countries, could not have been achieved without United States support under the President Bush's Emergency Fund for AIDS Relief, PEPFAR. Launched by President George W. Bush in 2003, PEPFAR provided the much-needed budget support to 15 nations, 12 of them in Africa, in order to improve their public health services, especially to address HIV/AIDS.

The fund has, in addition, provided impetus to other donors and major contributors to contribute to international efforts to fight the scourge of HIV/AIDS around the world. The quantum of resources under PEPFAR, a significant amount from a single source by any standard, has helped translate international consensus into tangible opportunity and hope for millions around the world, and particularly in Africa and the Caribbean. In short, America led by good example this time and made a difference and continues to do so.

When we heard the news about President Bush's proposal to double PEPFAR to U.S. dollars 30 billion in the year 2009, there was excitement around the globe and especially in the developing world, and especially in Sub-Saharan Africa, and especially in black Africa and black Caribbean. There was renewed hope for the many lives that have come to depend on the goodwill of the American people. We now know that there is still hope for our people. The commitment of the American people and their government to fight HIV/AIDS is beyond a doubt, in this instance.

These and other reasons make the reauthorization of PEPFAR imperative and urgent. PEPFAR is now a critical partner in the historic and heroic battle to save lives. PEPFAR has turned despair into hope. PEPFAR has galvanized donor countries and agencies alike to act in concert in the interest of humanity. If the fund is not renewed and replenished, the momentum generated by PEPFAR thus far will no doubt be lost, and the hope rekindled by the generosity of the American people extinguished. I say this to you; that's what I said to the congressional committee yesterday.

The values that inspired and gave birth to humanitarian actions such as PEPFAR have been evident in other U.S. foreign policy initiatives in and around Africa. Remember, I'm an African. Pro-African initiatives, such as AGOA, the Millennium Challenge Account and PEPFAR, are both innovative in nature and unprecedented in scope.

In Sub-Saharan Africa, the main beneficiary of this goodwill, U.S. administrations, especially the current one, have helped lift millions out of poverty, created employment, diversified economies, and built hope out of PEPFAR, the Millennium Challenge account, and AGOA. And I'll contend that in economic terms, AGOA is the single most important Africa-focused initiative by your government in the last 50 years that has had the greatest impact, economic impact.

I wish to take this opportunity, therefore, to express my government's gratitude to the Bush administration for including Botswana in AGOA, and for its leadership and courage in regard to PEPFAR and the Millennium Challenge Account. I mention this because although when AGOA was being discussed, we as Botswana were among the African countries summoned to come and give evidence. When it was finally approved, we were excluded from on per-capita income grounds. It was said that our per-capita income is higher than what was the – the target countries that were intended. We were disappointed and angry with my friend Bill and some of the other congressmen at the time, such as Charles Rangel. I felt betrayed, quite frankly.

But anyway, we continued to lobby not only the congresspeople, but we lobbied in the new administration. And some of the few remaining junior Clinton administration officials had agreed with us in our sense of grievance, and so they helped us lobby the new administration, and the new administration considered, and ran to Congress, and asked them to overlook this little per-capita thing. (Laughter.) So they did, and that is why I say I am grateful to your administrations, both the Clinton administration which – and the Congress for initiating AGOA, which has been one of our greatest benefits to Sub-Saharan Africa.

But as Botswana, and as the leader of Botswana at the time, I am particularly grateful to the Bush administration in particular for including us in AGOA. As for PEPFAR, we are perhaps the greatest beneficiary, not only as Sub-Saharan Africa, but as Botswana because we were ahead of the others. We appealed before everybody else, and we have drawn very substantial amounts and benefited from PEPFAR more than our sister republics who were initially hesitant. It's only that now they are beginning to say, ah, Botswana, you are cheating; you have drawn so much. I said, well, we're used to being denied. (Laughter.)

Now, of course, there is another one out of which we were excluded, again on per-capita grounds. That's the Millennium Challenge Account. So I was lobbying on the Hill yesterday and lobby administration officials wherever I meet them, and I lobby friends of Botswana wherever I have a chance to do so as I am doing this morning – (laughter) – because then again we meet all the criteria, every one of the criteria except this per-capita income one. So I told the congressional committee yesterday that they should again overlook this because we are friends of the United States, we in Botswana, we in Sub-Saharan Africa.

For instance, we in Botswana are the only country in Southern Africa that did sign the undertaking not to take Americans to the International Criminal Court. I don't think any African, black African government us trying to do that, but they did not sign, but we have signed and therefore we were blasted by the opposition in our country and the newspapers. They say well, we are lackeys of the United States. Anyway, I do not know whether we are or not – (laughter) – but only lackeys when it comes to development, development assistance. Well, we know which side of our bread is butter, and if you do wrong things we don't support you.

And so here, as I say, that I was expressing my government's gratitude to the U.S. government and the U.S. people for PEPFAR, for the Millennium Development Account, and for AGOA. Of course, these three are very important to Sub-Saharan Africa; they are having a real impact on the ground.

My government is working tirelessly to ensure that America's positive disposition towards Africa and the excellent relations that exist between the United States and Botswana serve as an anchor for enhanced commercial and investment links. Our shared vision of economic freedom and the free market should also help in forging closer economic ties.

Since political independence in 1966, Botswana has embarked on efforts to create an enabling environment to attract foreign investment, including foreign direct investment, to promote economic growth and diversify the economy. Deliberate government policies were put in place to create a stable political and macroeconomic environment based on predictable policies, to protect property and non-expropriation of investors' assets, to respect the rule of law, to guarantee the sanctity of contracts, to ensure free repatriation of profits, to promote open dialogue with the private sector.

Why does these things stick together and break the flow of my speech. (Laughter.)

Anyway, I wish to use this opportunity, therefore, to call on corporate America to continue to explore investment opportunities in Botswana, invest in the stability that the country offers, and share in the prosperity and promise of Botswana. The Australians and the Canadians have come in. One has opened a gold mine, the other has expanded and opened a couple of different mines, and they are also building a new patent and method of refining called Antivox (ph). Now of course it's in testing.

The company, LionOre, which is mainly Canadian and Australian, has now been bought by the Russians. So the other day before left I met the executive committee. We said, oh, the Russians are coming. So they said, we are Russians; we have come to pay Kalizuco (ph). But all these Russians were Americans Canadians and South Africans. (Laughter.) But anyway, they are Russian now. (Laughter.)

Well, as my tenure of office draws to an end, I look back with great satisfaction at my people's success in building and entrenching democratic governance. Over the last 41 years the people of Botswana, under the leadership of the Botswana Democratic Party, which is my party, and with the cooperation and contribution of the opposition parties, of which there are many, have built a society committed to democracy, the rule of law, respect for human rights, including women's rights, transparency and good governance. I leave behind, to quote a great American statesman, "a country of laws, not of men." And I feel honored to have been part of this tradition and political architecture.

I leave a party, a country in which institutions and issues are more important than individuals. I am also confident that these democratic traditions, institutions and laws and not men will not only transcend and survive any pitfalls of political evolution, but will thrive and deepen. The people of Botswana, the architects and visionaries of our political experiment have preserved – persevered, rather, and succeeded where many have faltered. They can only move forward. They own our democratic culture and deserve the credit. I was privileged to have been a small part of it.

I will now take questions from the floor.

(Applause.)

MR. MORRISON: Thank you very much, Mr. President, for that eloquent speech.

What I suggest we do is take a variety of comments and questions from the floor. We'll bundle together three or four initially, and then come back to the president for a response, and then we'll do a second round. So please, put your hand up and identify yourself, and try to keep your comments and question succinct. Floor's open.

Joe, would you care to kick things off?

Q: Thanks very much, Mr. President. Thank you. Thank you very much, Steve, and President Mogae, as always, good to see you. I believe that Botswana serves as a shining light

for not only Africa but the developing world in terms of how democracy and good governance works.

And Mr. President, I recall once Thabo Mbeki asked you to write a book about how Botswana did it. You declined at that time. I want to ask you again, do you plan on writing a book about Botswana – (scattered laughter) – and how Botswana succeeded?

MR. MORRISON: Thank you very much. I will like to put forward two issues. One is prevention on HIV/AIDS. As we look forward in the next phase, the next five-year phase, when you look at the countries, particularly in Southern Africa, where there's been a huge flow of resources for standing up treatment and care, as well as prevention, the biggest enduring challenge is to stop new incidents and continue to bring rates, HIV rates, down. And many people that work these issues struggle with this question of how to enhance the priority and the effectiveness of prevention efforts because we cannot – we cannot treat our way out of this epidemic. And I'd like to ask you for your thoughts on that.

The other issue is the regional challenge and the broader global challenge that Zimbabwe presents. And I know this is a very sensitive subject for your country. It's one that your country has been very generous in providing a home for over 300,000 Zimbabweans; it's one that you live with in your neighborhood on a day-to-day basis; and it's a complex issue for the SADC leadership. It's a complex issue on democratization grounds and human rights grounds; and it's one that has broader global implications, as we've seen this week with Gordon Brown, British prime minister, announcing very explicitly that he would not attend the EU-Africa summit if President Mugabe is, in fact, invited. We've also had some interesting news in terms of the constitutional developments in the Zimbabwean parliament.

If you could offer us some of your thoughts on the nature of the crisis in Zimbabwe and the prospects for finding a way forward in this period that could be both reinforced by the region itself but also by Washington and London and other governments that have a stake in a stable and democratic and prosperous Southern Africa.

Yes, we'll take one other question. Sam, and then we'll come back to the president. Please identify yourself.

Q: Sorry. Samuel Adeniyi-Jones from U.S. Department of Health and Human Services. I want to say as an Africa, we are proud of your achievements.

One of the perplexities of the AIDS epidemic is that in spite of the fact that Botswana was right there at the beginning, did all the right things, you know, so many years later we're still at around 32 percent, as you mentioned. We've seen just very modest declines. Do you have any insights as to what more needs to be done in order to actually make a greater impact?

MR. MORRISON: Thank you. Should we come back to you, Mr. President?

PRES. MUGAE: Okay. Well, thank you very much for the questions. I like that of the ambassador best – (laughter) – because it’s easier to answer. Yes, I will write a book. (Laughter.)

Steve, I agree that what we have done now, care and treatment, is only phase one. Prevention was always our ultimate objective. That’s why we say we wanted zero infections by 2016. So we are under no delusion that we are overcoming the epidemic. We agree with the last speaker that the decline from 37.4 to 32 is marginal, 5.2 percentage point. However, the complication – and here and now, human rights come in, which always have impact on what we do. Some of the people under anti-retroviral therapy, who are now feeling well, and so on, are having babies. When asked, we say that we don’t encourage it, but we dare say they have no right to reproduce. And so, the complication is that some of the 32 now are infecting people who already are on treatment.

The minister of health and I go around the country saying, well, we would prefer if they didn’t have babies because even in the born virus-free, the probability of their being infected is very great when both of you are living with the virus. So that’s another complication. Some people would say, no, why don’t we simply say if you’re on anti-retroviral therapy, you don’t reproduce, period. But we can’t say that; we are part of the international community.

There was a time when I wanted that all the students, especially for tertiary education and especially those wanting to go abroad, should undergo the tests, more or less compulsory. Not compulsory, but if they want to go abroad then they should undergo the test because at that time we had had a bit of bad problems. We had a few students who had come here who were HIV-positive then fell ill, and they booked themselves into expensive clinics, and would run away from one state to another, and we just a trail of bills coming and so on.

What we were told is U.S. law says we can withdraw them; we can’t do all sorts of things. Some of them ultimately died, and then we had to send them home expensively. Or those who were sent back home, we had to charter, and we didn’t like that. But because we had explicitly expressed anger at that phenomenon, when I said that maybe all students intended to take tertiary education should test, although we would still give them scholarships, but maybe they would not have sent abroad. then they said no, we think that is a punitive measure; that would be a punitive measure and therefore a violation of the human rights.

We now have routine testing, whereby if you visit any public health facility you will be offered a test for the HIV virus, unless you disagree. But of course, you have to be asked. And at the beginning, a lot of human rights groups – nowadays, also, people confuse civil rights with human rights, and people tend to use the word human right when they ought to be using civil right. I mean, if you are inconvenienced for keeping you alive, it seems to me that some of your civil rights could be interfered with a little, but not your human rights. So that’s the constraints we meet as we think of what else could be done.

For the present, what we are doing, all the international assistance we are now receiving, most of it now we are channeling into prevention messages. We are producing plays, we are producing videos, we are addressing meetings, we are holding seminars, and we’re inviting

people to come up with ideas of what else could be done, pursuant to prevention rather than treatment because we feel that so far as treatment is concerned, that was the first phase and that has been more or less achieved, I mean the treatment.

But as you say, as all of you say, both you, Steve, and the other gentlemen, what is required is to enhance prevention. Now, beyond that, I don't have any other magic wand to wave for now, but I am thinking. And I want you to help me think, and you too. (Laughter.)

Regarding Zimbabwe, I have said – I am among friends and I counted you, Stephen Morrison, about my friends. Why do you ask me about Zimbabwe? (Laughter.)

Zimbabwe's a difficult problem. I often explain they are – (inaudible) – Botswana. We have done our best, tried to talk to our neighbors. We, as a small nation, sandwiched as we are between Zimbabwe and South Africa, we can only lead by precept and example. We can only endeavor to persuade, but we have failed to persuade our colleagues in Zimbabwe to talk to each other, to accommodate one other. They believe that all their problems are directly caused by their seizure of white land, and therefore the imposition of restrictions on their travel by Western Europe and North America.

I spoke in Germany, I spoke in Austria, and I reported back to them. I said that the Austrians and the Germans say there are no sanctions on you, Zimbabwean government, President Mugabe. They say that they don't see how travel distinctions in Western Europe and North America on 150 leaders in Zimbabwe, a nation of 16 million, how that can cause 5,000-percent inflation. But the Zimbabweans agree, choose not to see anything else except – and they take the EU and the opposition. If you are not with them, you are against them, period. And therefore it's very difficult to persuade them.

Your government, and some of you, you say that we don't seem to be applying pressure on them. If we made hostile statements against them, they'd only become more hostile, and what purpose will it serve? What useful purpose would it serve? So we continue to say to them, we think that something must give, and that it takes two to tango. They cannot run; they are not the only Zimbabweans. Their oppositions are Zimbabweans, the newspapers are Zimbabweans, and all the other people who have fled the country, 4 million of them, are Zimbabweans, and ought to be accommodated. But we haven't succeeded.

The next thing is that there has been no consensus among SADC members as to what should be done. As a result of that, we found that if each group insisted on its approach, than SADC would be divided. We choose not to be divided. It's better that SADC continues as a united regional grouping with the Zimbabwe AZTs (ph) rather than be divided between, into two groups, one pro-Zimbabwe AZTs, one pro for change in Zimbabwe. That is our dilemma. Have I answered you?

DR. MORRISON: Thank you. (Laughter.) We're going to take another round of questions; again, identify yourself. There are microphones, and please be brief and to the point. Thank you.

Q: Thank you. My name is Harvey Friedman, and I'm from the University of Pennsylvania. And we've had the pleasure of having a medical care education program in Botswana for about six years now, and I can say from firsthand experience that the progress has been remarkable. And I suspect that the numbers will continue to come down, that there's just this light phase in initiating new programs, how long it may take until you start seeing the number are really coming down.

When President Mogae said are there any other ideas, I want to remind the audience and President Mogae that I think that his administration and he did one really, really important thing for the long term, and that is the decision to develop a new medical school in Botswana. And I think with the new medical school, and an emphasis on public health, that the future in Botswana looks even brighter than what we've heard today. So my comment is congratulations on that, and my question is, do you see the medical school as brightly, perhaps, as I do for the future of the country.

DR. MORRISON: Thank you. Let's take a couple of other comments and questions. Whitney Schneidman here, in the front row on the left side, and then followed by the gentleman in the back, next to Will. Whitney.

Q: Thank you, Steve. Whitney Schneidman. Mr. President, thank you for your comments this morning, and your great friendship between our countries over the last 10 years.

My question is directed to one of the agenda items still outstanding, and that is the U.S.-SACU free trade agreement. And I'm interested in your perspective on its genuine benefit to the region, and to Botswana, and your thoughts on what we need to do to bring it to a successful closure.

MR. MORRISON: This is the South African Customs Union?

Q: Correct.

MR. MORRISON: Yes, okay.

And we'll take one more, and then we'll come back to the president. Yes, please.

Q: Thank you. My name's Sean Garcia. I work with Refugees International here in Washington. Just a follow-up question on Zimbabwe, unfortunately: I wanted to know, with the growing outflows that are expected from Zimbabwe in the upcoming year, we've heard growing interest coming out of especially South Africa, in looking at a regional solution to this, that can manage outflows in a safe and legal manner, and that can also start to address some of the humanitarian needs of people leaving the country.

Would Botswana be willing to participate in regional discussion on managing this outflow and providing for humanitarian needs, or do we need to continue to look at this as a country-by-country approach? Thank you.

DR. MORRISON: Thank you. Mr. President?

PRES. MUGAE: Yes, we see the role of the university enhancing our public health policies because it will be – we have demonstrated, we have made calculations to show that it is cheaper to train health workers at home than abroad. And also, that with new arrangement which we have been discussing with you, Penn State, that when the university will be – the medical school will be fully operational, all our students studying medicine abroad will have to internship at home. By agreement with these governments, we are now busy negotiating that, that they will not allow them to do internship in their countries where they study; they'll have to do internship in Botswana by arrangement with those universities.

So, we think that university's going to have an important role in that respect, plus paramedics will be trained and everybody supervised at home. It's also cheaper even for the donor agencies and friends like you, like Penn State, when you can send two or three people, they have a multiplayer effect if they are in Botswana, much more than when we send three students to Penn State, and therefore that will be possible with university operations now, just as you have been doing. So we see an important role with the university.

Mr. Schneidman, the trade agreement. No, we think that there is globalization. We as a small nation have always believed we are now (?) open economy and open society. We believe in international trade, as free as possible, and therefore we think we stand to benefit by trading freely with the United States. But we are acutely conscious of the polarization of development effect, when you have partners who are – where there are huge imbalances in levels of development.

You – (inaudible) – here that what will tend to happen is that you just throw down everything; it's easier for everything to fall down to us and we will never be able to get anything to you there. So, therefore using our endeavors to try to make you acknowledge that and give some concessions in our relations. But actually that's not the most difficult thing.

You seem to be preoccupied by what you call labor standards. You say that if our workers are working in non-air-conditioned factories it means that we are using slave labor or toil and you want to be represented in our trade unions, you want to be represented in our negotiations between us and the trade unions, in spite of the fact that we have signed all the labor conventions which originated here and in Western Europe anyway. We think you are being unreasonable in this labor standard thing, which is your preoccupation and an irrational preoccupation in my view.

So, that is what has prevented agreement being reached; it's the labor issues especially your wanting to be represented. Why you want to be represented, I don't know. But I understand it's not the fault of the government; it's Congress. There is some congressional mandate that requires them to do that, I understand. So, I told the congressmen yesterday that sometimes there are good people; I like them; they are friends of Botswana in Africa, but sometimes they can be very unreasonable. So, that's what is preventing the reaching of agreement between the Southern African Customs Union; it's not South African anymore; it's Southern African Customs Union and the U.S. (Laughter.)

But on the whole, we still believe that we will continue to negotiate, we will continue to negotiate because we think it's a good thing. We think we stand to benefit by an arrangement, a trade arrangement with the United States.

Refugees, yeah, much all depend on the content of the arrangement of what you have in mind dealing with the refugees originally. I don't know how you do it but we are open-minded on these issues. We would be willing to discuss with you your proposal and we can only express our views as to whether we would want to deal unilaterally or collectively depending on what the content of that proposal is.

MR. MORRISON: Thank you, Mr. President, to follow up on the refugee international question, I mean, the humanitarian – the projections of demand for emergency feeding within Zimbabwe are fairly dire at the moment. The World Food Program estimates are that they're about under – they are over 300,000 people currently on emergency feeding inside Zimbabwe and those numbers are expected to grow by tenfold between now and February and March, so the humanitarian dimension of what is happening, it's expected – and we're going to be looking at this issue much more closely in the coming weeks – it's expected to gallop forward rather rapidly and you will be on the front lines and your government has been extremely generous and strategic in the approach that's been taken.

I would expect that the United States government, which is already very invested in its food relief within the region and including to Zimbabwe, that the United States government will be generous and forward-leaning in working with your government and others to try to deal with this human tragedy that is unfolding and the stresses that it's going to put upon neighboring states if you have an accelerated out migration. I'm not sure if we're going to see that or not, you already have 300,000 people a week crossing your border illicitly. Whether those numbers multiply or remain constant, it's still an emergency in a way.

Do you have any thoughts about, you know, are you preparing in your mind – within in your own government, are you preparing for the possibility that within the next six to eight months, that there is going to be a dramatic up-tick in the humanitarian demand and what that may mean as that dimension begins to drive things forward? That has the potential to sort of overwhelm some of the other broader discussions and I'd just like to ask you to offer us your thoughts on that.

PRES. MOGAE: Yes, we are worried about that possibility and we would need assistance. After all, we are in drought situation ourselves; we have a drought relief program for our own people. And our problems, our current problems, both the unemployment problem, the crime situation, is exacerbated by the inflow of illegal immigrants. And we're having a lot of rising resentment by locals blaming illegals for almost everything, even where illegals are not to blame.

We have a problem where these Zimbabweans are exploited by citizens, including Zimbabweans living and working in Botswana, they pretend to be giving them relief, giving them jobs, but they exploit them. They employ them and they don't pay them and the poor

illegals have nowhere to go because if you try to go to the labor department, they ask you for your work permit, your residence permit, and instead of helping you, they want to arrest you to deport you to Zimbabwe. So, it is a problem. Yes, we are thinking about it but we don't have answers.

MR. MORRISON: Thank you. Just one other comment and then I'd like to invite one last round of questions, which was triggered by Harvey Friedman's comment from the University of Pennsylvania from the medical school. We're at a point now where the partnerships that Howard and others have created with American biomedical institutions have really matured I think significantly and the University of Pennsylvania, Harvard, Baylor, they've – I think that – I hope and I sense from talking to your senior officials is that these are partnerships that you really do value and you see them as ones that have helped to create Botswana capacity and that these are things that you hope will continue into the future. And I'd like you to just comment on that.

Is that an accurate estimation? Because, you know, building these kind of linkages between forward-looking African partner states like Botswana with American institutions of that kind – Baylor, University of Pennsylvania, Harvard – that's terribly important over the long-term for the American people's understanding of what is possible and for building the constituency within our own society for a very forward-looking engagement. And could you comment at all on that?

PRES. MOGAE: Certainly. Certainly with all these, we see them as long-term arrangements – long-term relationships between us and these institutions, these medical schools. As you know, in the case of Harvard, we built the laboratories – we built the laboratories and they operate them because they have the technical know-how and the wherewithal that you can build and operate them, and research because they are doing research on the virus. And this is a long-term thing by definition. So it's a long-term relationship. The same thing with Penn State – they are helping us establish a medical school. We don't expect the medical school to be established overnight – in the next two or three years – I mean, to be a proper medical school. The study of medicine is a long-term, it's a long course and therefore, we expect a long relationship.

MR. MORRISON: May I just clarify, is it the University of Pennsylvania or is it Penn State?

PRES. MOGAE: Sorry, sorry.

MR. MORRISON: University of Pennsylvania, sorry. It makes a big difference on football as well. (Laughter.)

PRES. MOGAE: Well, we are beginning to play a number of your games. I didn't know if it was because of this –

MR. MORRISON: Don't ask the Penn medical school to help you pick a football team. (Laughter.)

PRES. MOGAE: But I don't think football we would – when it comes to football, you see, why do we say football? We mean soccer. And therefore, we will copy everything except football because we think it's misnamed anyway. (Laughter.) It's misnamed rugby (?), and we're not that strong.

But no, the short answer is that we see our relationship with these institutions. Some of them may have been born out of the AIDS tragedy, but AIDS itself a long haul. And therefore, we see all these relationships as long-term relationships between us and them, and that we will continue to need their endorsement, their assistance, and their expertise for a long time.

MR. MORRISON: Great, thank you –

PRES. MOGAE: And that's why, whenever I speak here as I'm speaking to you, I say I thank you very much and everything else that I hope, it continues.

MR. MORRISON: Well, I think, you know, from the American standpoint these relationships, these partnerships transform our institutions in very positive ways. I mean, when you talk to people from each of those three institutions, it's changed their perspective; it's changed their outlook; there's enormous excitement, and there are clear – clearly long-term benefits for our society and our institutions for these partnerships, and we're very grateful for that.

Let's get a final closing round. We have three hands over there, so let's start with those and then we have one, a gentleman on the rear wall. Let's start – yes, please identify yourself and then offer your comment.

Q: Hazel Denton, Johns Hopkins University. I was very interested in hearing about the new medical school and I'd like to ask a follow-up question. This is surely a very significant investment for Botswana. One of the problems faced by countries in Africa, though, is the emigration of its trained medical personnel. What will be the policies of Botswana to curb that with the newly trained people?

MR. MORRISON: Great, thank you. Excellent question. Yes, ma'am.

Q: I'm Mia Malan. I'm a South African journalist that specializes in reporting on the HIV pandemic. But I also work for a media organization called InterNews Network that helps journalists to report better on the HIV epidemic, and I was wondering how the president feels of if the media would be an important partner, the news media, journalists specifically, in the future efforts on HIV prevention in Botswana. And are you satisfied with the way that journalists report on the epidemic in your country?

MR. MORRISON: Great, thank you very much. There's a third hand.

Q: Lindsay Friedman, Women's Edge Coalition. Mr. President, thank you for your inspiring and motivating comments, specifically on AGOA. My question is, could you speak to

some of your ideas on the best ways to spark regional trade between Sub-Saharan African countries and then how the U.S. could be helpful in these efforts?

MR. MORRISON. Great, thank you. Yes, the question is what can be done to promote intra-regional trade within southern Africa and how can the U.S. be helpful in that regard.

Q: Yeah, hi. Darren Taylor from VOA, English-to-Africa service. Mr. President, I'd like to know what Botswana's position is on AFRICOM, the new plans by the U.S. to establish a military base in Africa, and I'm asking this question in the light of the apparent SADC position that it's not welcome and your government's good relations with the U.S. Thanks.

MR. MORRISON: Thank you very much. Just to clarify on that closing question, there was a statement made by the South African Defense Minister, Terror Lekota, after the SADC ministerial and heads of state summit, making the claim that at least the defense chiefs within SADC member states had come to a consensus that they opposed the placement of a headquarters element on the continent, and that was detailed in a press debrief that the South African minister provided afterward. There's been quite a bit of debate around what is the position of SADC actually on this matter of AFRICOM. Mr. President?

MR. MOGAE: Thank you very much.

Well, the loss of medical skills is something that worries us. We have lost a hundred doctors to the Republic of Ireland and we have lost doctors to Britain and a few to this country. So, in fact, the building of a medical school is part of the effort to retain our doctors because most of the doctors who we have lost are people who trained here and then not going back home. People training in Ireland and then they disappear into the country to do internship and then they refuse to come home.

So, we hope that if the students train in Botswana, we know it for certain that they will have difficult trying to locate here as medical doctors, although some of the best you will still be able to pinch them because we noticed that you are pinching a lot from the South African ones. (Laughter.) But normally, you pinch very well-established ones and they normally go to Texas and so on. I mean, it's white South Africans.

So, we are aware we can't stop it entirely and constitutionally, basically, we can't do anything. We try to contact the students that they have to – we pay for their education. They should come and work in Botswana for five years of – for the length, for a period equivalent to the length of their training, and that's what they're not doing. So we think that the establishment of the medical school and the students studying there in local conditions and being helped by universities like Penn State and even Johns Hopkins and others would – or whatever, well – (laughter) – would help induce the students to stay at home, including all of the nurses.

But it's also cheaper. We found that to train a student here, I think it costs about \$100,000 a year all in all, and it costs \$40,000 in the rest of Africa and \$10,000 – 10 to 20,000 in Botswana. So, amongst other things, it's cheaper when we train them at home. But also, we think that they would be more acclimatized to conditions in Botswana. We also send students

now to other African countries, especially Ghana, and we know they will come back home and they do. (Laughter.)

We have discontinued sending medical students to here, only those who are already here of course we will finish and then they will go back home, or we hope, but no, no new students, no new medical students will be sent here. We send them to the Caribbean, for instance, Trinidad and Tobago and Jamaica and so on. Those come home. Now, together with the new arrangement that they will finish their courses but go and do the internship at home, my arrangement with the medical schools from which they will have trained.

Yeah, I think the media is always an important partner in doing anything. And the media can help a lot. In Botswana they have not really been very enthusiastic about HIV/AIDS. They used to write silly stories and so on. Really, they have not come in strongly to help and to warn. We often have to pay for advertisements, expensive advertisements on AIDS with the media. In Botswana, the media disappointingly is not coming forth; it's not forthcoming, in helping us sell the messages against HIV/AIDS. But we will continue to try and persuade them.

What can be done to promote regional trade in Southern Africa, can the U.S. help? I don't know, wouldn't we be asking the United States too much if one of us sitting back there in Southern Africa, we say no, the United States must come make us talk to each other? That's asking too much for friends. I think to a really great extent, trade is already taking place. The problem is the imbalances in development between South Africa and the rest, so that most countries source their – many countries source imports from South Africa, so we – and also re-exports by South Africa.

If you take motor vehicles, we use a lot of Japanese and German and American vehicles, but they are assembled in South Africa. So, the trade figures between us and, for instance, the United States, it's distorted by the fact that we consume American products via South Africa. In the customs arrangement documentation, they will come in as South African goods because they're being re-exported from South Africa.

The South African companies that have invested have invested in South Africa – I mean, American companies that have invested in Southern Africa have invested in South Africa. And, therefore, as for Botswana, Lesotho, Swaziland, and Namibia, we have always traded with South Africa and now of course we are selling some of the things to South Africa. The rest of the region is beginning to trade and is selling things to South Africa, but mostly buying goods and services from South Africa. So, I think regional trade is already taking place

AFRICOM is a more controversial one. Defense chiefs have said, so led by South Africa. At the level of heads of state we have said that we should continue the American government on this thing as to exactly what it is and so on. Now, we have said that we will maintain an open mind until we know exactly the nature of the thing, but we will of course have to engage in the region to – because people say, they say, they want a military base and the American government said, not necessarily. And so, as far as we are concerned for now, we are still open-minded to discuss with both the Americans and the region.

We have no ideological objection to involvement with Americans. I mean, even as the minister of defense of South Africa was making this statement, they were having joint maneuvers with the American Navy in Capetown. Some of us have no navies of course, and we know that you have spy satellites in there. (Scattered laughter.)

So, we will ask both you and the South Africans why you want to cooperate there bilateral, by yourselves, and you don't want – they don't want this particular one. So, that's our position. Our position is that we have not taken a decision on that. And we are aware of the position of the defense chiefs in the region. We will engage them and we will engage the authorities here who have now not fully explained the exact nature of the arrangement, yes.

MR. MORRISON: You've got the special experience that you've hosted and been a partner in the creation of ILEA, of the police training facility down near Lobatse which has been in existence now for seven or eight years and has been, as I understand, it's been fairly successful and that's been a very good initiative that has had very broad continental benefits in terms of its mandate, is really to help train police across the African continent. Do you have any thoughts on that, how that experience has been?

PRES. MOGAE: Yes, well, we accept – we saw it was very useful from day one and we haven't changed our views. We're seeing what has happened is that the other people have seen how useful it is, those who had reservations if they did have them. Many, many countries are participating in the thing. I understand they are saying that the ILEA, the law enforcement agency, is building our capacity as African states to fight crime. They say that's different from a military base if this thing's going to be a military base. They say, the military base, then you can invade us, I suppose. (Scattered laughter.)

So, there is a difference between ILEA and the military arrangement. That's why I say we will have to know in some detail the nature of the arrangement, and therefore that will enable us to meaningfully engage in knowing what you are talking about because terms like military base and so on is to some extent demotive and may have unsavory connotations. But the position of Botswana is that they were open-minded on this issue.

MR. MORRISON: Okay, thank you so much for clarifying that. Mr. President, this has really been an extraordinary conversation with you here, your speech, and your openness to engage on this broad range of issues. And just on behalf of everyone here, I want to thank you for this and we look forward to continuing to engage and we wish you the best for the balance of your visit here and the balance of your tenure as president. Thank you so much.

(Applause.)

We are adjourned.

PRES. MOGAE: Thank you.

MR. MORRISON: Thank you.

(END)